

DATE: 11-14-2017

JFK Assassination System
Identification Form

Date: 5/27/201

Agency Information

AGENCY : FBI
RECORD NUMBER : 124-10193-10496

RECORD SERIES : HQ

AGENCY FILE NUMBER : 67-494012-13

Document Information

ORIGINATOR : FBI
FROM : HQ
TO :

TITLE :

DATE : 10/16/1951
PAGES : 5

SUBJECTS :
JAMES P. HOSTY JR.

DOCUMENT TYPE : PAPER, TEXTUAL DOCUMENT
CLASSIFICATION : Unclassified
RESTRICTIONS : 3
CURRENT STATUS : Redact
DATE OF LAST REVIEW : 08/18/1998

OPENING CRITERIA : INDEFINITE

COMMENTS : MED. RPT, INC 2 RS, CARDIOLIPIN TEST

DATE: 11-14-2017

193-10496

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 6' 1/2"		52. WEIGHT 220 lbs		53. COLOR HAIR BROWN		54. COLOR EYES BROWN		55. BUILD: SLENDER <input type="checkbox"/> MEDIUM <input checked="" type="checkbox"/> HEAVY <input checked="" type="checkbox"/> OBESE <input type="checkbox"/>		56. TEMP. 98.4	
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)					
SITTING SYS. 130 DIAS. 70		RECUMBENT SYS. 120 DIAS. 70		STANDING (3 min.) SYS. 140 DIAS. 70		SITTING 64		AFTER EXERCISE 100		2 MIN. AFTERY 66	
59. DISTANT VISION		60. REFRACTION				61. NEAR VISION					
RIGHT 20/20		CORR. TO 20/		BY S.		CX		✓		CORR. TO	
LEFT 20/20		CORR. TO 20/		BY S.		CX		✓		CORR. TO	
62. HETEROPHORIA: (Specify distance) ES° EX° PERSONNEL UNIT L.H. PRISM DIV. PRISM CONV. PC PD											
63. ACCOMMODATION RIGHT LEFT				64. COLOR VISION (Test used and result) JAN 11-17-56 eyes - normal				65. DEPTH PERCEPTION (Test used and score) UNCORRECTED CORRECTED			
66. FIELD OF VISION normal				67. NIGHT VISION (Test used and score) FBI U.S. DEPT OF JUSTICE				68. RED LENS JUN 7 12 09 PM '56		69. INTRAOCULAR TENSION	
70. HEARING				71. AUDIOMETER				72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)			
RIGHT WV 15 /15 SV 15 /15		LEFT WV 15 /15 SV 15 /15		250 250 500 518 1000 1084 2000 2018 3000 2896 4000 4096 8000 8192							

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

no illnesses since discharge from army

(Use additional sheets of plain paper if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

Atrophy of rt testicle.

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

none

77. EXAMINEE (Check)

IS QUALIFIED FOR strenuous physical activity

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN

WENDELL L. SPALDING

SIGNATURE

Wendell L. Spalding M.D.

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS