

EXHIBIT 47



DEPARTMENT OF VETERANS AFFAIRS
Veterans Benefits Administration
Washington, DC 20420

September 12, 2006

Director (00/21)
All VA Regional Offices and Centers

In Reply Refer To: 212
Training Letter 06-04

SUBJ: Department of Defense (DoD) Identifies Additional Service Members Who Participated in the Testing of Chemical and Biological Warfare Agents During Service

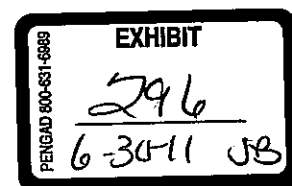
Over the past six years, VA has notified potential beneficiaries about the exposure of certain service members to chemical and biological warfare agents (i.e., Project 112/SHAD and mustard gas) during service. This training letter provides guidance for handling claims stemming from DoD's release of the Chemical, Biological, Radiological, Nuclear, and Explosives (CBRNE) database, which contains the names of several thousand service members who were exposed to one or more of at least 140 chemical or biological agents during tests conducted at Edgewood Arsenal in Maryland. The Compensation and Pension Service has already begun the process of notifying individuals who may be entitled to compensation for disabilities resulting from these tests.

If you have any questions about the content of this letter, please contact David Abbot by e-mail.

/s/
Renée L. Szybala
Director
Compensation and Pension Service

Enclosures:

- Attachment A: Information for Public Inquiries
- Attachment B: Authorization Procedures
- Attachment C: Rating Procedures
- VBA Notification Letter to Test Participants
- Fact Sheet – *Edgewood Arsenal Chemical Agent Exposure Studies: 1955-1975*



RFP 3

VVA-VA 009395

00182

VET001_015121

VVA-VA 009395

ATTACHMENT A

Information for Public Inquiries

What Is the CBRNE Database?

The Chemical, Biological, Radiological, Nuclear, and Explosives (CBRNE) database contains the names of over 4,400 servicemembers who participated, or who were scheduled to participate, in a number of tests involving more than 140 agents and simulants at Edgewood Arsenal in Maryland. According to the Department of Defense (DoD), these tests were conducted between 1955 and 1975.

During the remainder of 2006, DoD expects to expand the database by including the names of additional servicemembers who participated in tests at Ft. Detrick, Maryland, and Dugway Proving Ground, Utah. DoD may eventually extend its investigation to tests conducted at other locations.

How Will Participants Be Notified? -

In the immediate future, Compensation and Pension (C&P) Service will mail notification letters to approximately 1,800 servicemembers who participated in testing at Edgewood Arsenal. The notification letter does not include the name of the test agents because of the number and complex nature of these substances. VA will release more letters as it locates the current mailing addresses of additional test participants.

The attached DoD fact sheet, Edgewood Arsenal Chemical Agent Exposure Studies: 1955-1975, describes the tests in more detail and will be enclosed in all letters to potential beneficiaries.

Are There Any Presumptive Conditions or Common Disabilities?

No. DoD used more than 140 agents in these tests, with differing duration, dosage, and methods of exposure. DoD has noted that an Institute of Medicine study conducted between 1982-85 found no significant long-term health effects in Edgewood Arsenal test participants.

Can a Person Claiming Exposure As a Test Participant Receive Medical Treatment at a VA Medical Center?

Yes. Here is the statement that will be sent to all test participants:

“Although there is no specific medical test or evaluation for the types of exposures you might have experienced more than 30 years ago, VA is offering a clinical examination to veterans who receive this notification letter. If you have health concerns and wish to be medically evaluated, PLEASE BRING THIS LETTER WITH YOU TO THE NEAREST VA HEALTH CARE FACILITY. This letter will help you apply for the examination by providing needed documentation. Additional medical information about potential exposures is available through ‘environmental health coordinators’ located in every VA medical center.

Note: The examination itself does not constitute, or provide eligibility for, enrollment in the VA health care system. If you are not already enrolled, you are encouraged to apply for VA health care benefits at the time you apply for the examination.”

What If There Are Questions About the Tests and Agents?

Any individual with questions about chemical or biological tests conducted during military service, to include veterans with concerns about releasing classified information, should contact DoD at (800) 497-6261, Monday through Friday, 9 a.m. to 9 p.m., Eastern time.

ATTACHMENT B Authorization Procedures

Defining a Chemical, Biological, Radiological, Nuclear, and Explosive (CBRNE) Claim

A CBRNE claim is one in which the claimant alleges disease or injury as a result of participation in any chemical or biological test other than Project 112/SHAD or tests involving mustard gas, regardless of test location. While Edgewood Arsenal, Ft. Detrick, and Dugway Proving Ground are known test locations, others likely exist.

Claims that allege exposure to a chemical or biological agent, but do not attribute the development of a specific disability or disease to said exposure, are not substantially complete and should not be controlled. (See M21-1MR, Part I, Chapter 1, Section B, Topic 3, Block b, for information on handling incomplete claims.)

End Product (EP) Control

Upon receipt of a substantially complete CBRNE claim, establish EP 683 in addition to the standard EP (e.g., 010, 110, 020). If DoD is ultimately unable to verify a claimant's participation in a CBRNE test, PCAN the EP 683. (See paragraph below, titled "Claimant Not in CBRNE Database.") Otherwise, EP 683 should remain pending until all CBRNE issues are resolved by rating decision and the claimant is notified.

As long as ROs continue to e-mail requests to C&P Service for verification of participation in Project 112/SHAD or CBRNE testing, C&P Service will be able to continue tracking both issues with the same EP (683).

E-Mail C&P Service to Verify Participation in CBRNE Testing

E-mail requests for verification of participation in CBRNE testing to the CBRNE mailbox (VAVBAWAS/CO/CBRNE). Even if the claim seems implausible based on evidence in the claims folder (e.g., the veteran claims exposure before or after the period 1955 to 1975), DoD has sole authority to validate whether an individual participated in any chemical or biological test. Also, it is possible that DoD may declassify other tests later.

The subject heading of the e-mail should read "CBRNE Test"; the body of the e-mail must contain the following information:

- The veteran's full name, VA file number, branch of military service, social security number, and, if applicable, service number. (Older DoD records contain only the 8-digit service number of tests participants.)
- Available test information (e.g., test location, description of the test, or how exposure occurred).
- The nature of the disability(ies) claimed as due to exposure to chemical or biological test agents during service.

C&P Service uses the information provided by ROs to look for patterns in the disabilities test participants claim and to track decision outcomes.

Below is an example of the information C&P Service will provide in response to an RO request for participation in CBRNE testing:

Veteran's Name	-----
VA File #	-----
SSN	XXX-XX-XXXX
Date(s) of Exposure	July 24, 1967
Place of Exposure	Edgewood Arsenal
Type of Exposure	Injection
Agent/Simulant Name	Scopolamine
Agent/Simulant Amount	16.6 microgram/kg of body weight
Agent/Simulant Form	Liquid
Munition/Mechanism of Exposure	Syringe
Route of Exposure	Intramuscular
Antidote Used	VX was used as an antidote

ROs must provide the above information to the examiner when requesting an opinion as to a relationship between a disease or disability and participation in CBRNE testing during service. (See Attachment C, Rating Procedures.)

Claimant Not in CBRNE Database

If C&P Service responds that the claimant's name is not in the current CBRNE database, develop for a copy of the veteran's service personnel file, to include DD Form 214, if not otherwise available. When received, send a copy of the records to:

Department of Veterans Affairs
 Compensation and Pension Service (212)
 810 Vermont Ave, NW
 Washington, DC 20420

ATTN: Chem-Bio Manager

If there are fewer than 20 personnel records, ROs may fax them to the Chem-Bio Manager at 202-275-0562.

When C&P Service receives the records, it will forward a copy to DoD for further investigation. If DoD's final response remains negative, C&P Service will notify the requestor by e-mail of that fact; the RO should cancel the EP 683 and continue normal claims processing.

Claimant Is a Verified Test Participant

Upon verification of a veteran's participation in CBRNE testing, the Pre-Determination Team will determine the need for a physical examination. (See Attachment C, Rating Procedures.)

Electronic Submission of Rating Decisions

C&P Service must track the outcome of all CBRNE claims. At the time the claimant is notified of a rating decision involving a CBRNE claim, please e-mail a copy of the decision (under the subject heading "CBRNE Rating") to the CBRNE mailbox (VAVBAWAS/CO/CBRNE).

ATTACHMENT C Rating Procedures

Scheduling an Exam

If an RO determines an examination is needed in order to decide a CBRNE claim, the RO must submit the examination request to a VA medical facility (as opposed to a contract examiner). While the development procedures for these cases are slightly different from Project 112/SHAD claims, the fundamental rating principles remain the same.

Medical Opinions: If a medical opinion on the relationship between participation in CBRNE testing and the development of a disability or disease is needed, use the medical opinion template found in M21-1MR, Part III, Subpart iv, Chapter 3, Section A, Topic 14.

Note: Currently, the Veterans Health Administration is preparing an information letter for physicians that addresses questions about the potential health effects to veterans involved in the testing of warfare agents from the 1950s to 1975. Once approved, this letter will be posted at www.va.gov/EnvironAgents, under a section titled "Under Secretary for Health Information Letters." After its release, this medical resource should be brought to the examiner's attention, either in the examination request or, preferably, printed and back-filed in the claims folder for the examiner's review.

AMIE/CAPRI: In the Remarks section of the AMIE/CAPRI examination request, include a list of the agents, simulants, tracers, antidotes, etc., to which C&P Service verifies the veteran was exposed. Back-file a copy of the e-mail from C&P Service, along with any relevant documentation (such as the DoD fact sheet, the VHA information letter on these tests, etc.) in the claims folder. Ensure the examiner reviews the claims folder as part of the examination and is aware of these and other relevant enclosures.

Review of Medical Opinions

Medical opinions must be based on the veteran's documented history and the doctor's examination, in conjunction with a review of the claims folder. Therefore, if the examiner fails to indicate that he or she reviewed the claims folder, return the examination report as inadequate.

If the examiner cannot conclude whether a relationship exists between the claimed disability or disease and participation in CBRNE testing, he or she must state whether it is at least as likely as not that a relationship exists. "At least as likely as not" is the

lowest threshold of certainty the examiner can express that will support a grant of service connection. Insufficient justification for a grant of service connection includes statements such as the "effects of exposure are unknown," or an exposure "could be a contributor," or an exposure "may have a relationship" to a disease or disability.

Additionally, the medical opinion must include a supporting rationale. A medical opinion without a supporting rationale carries no probative value. Ensure that the explanation is logical. Further, if medical literature is used as support for the examiner's opinion, it is critical that the examination report include a discussion as to why, or how, medical literature supports the examiner's opinion. If no supporting rationale for the medical opinion is provided, return the file to the examiner to provide one, citing 38 CFR 4.2.

Rating Code Sheet

When completing the subject line on the Issue Management screen in RBA 2000, end the description of the disability with [CBRNE]. For example: *Scar, Residual of Chemical Tests* [CBRNE]. This will clearly identify on the code sheet those disabilities that the veteran claimed, or which the RVSR decided, are related to participation in CBRNE testing. Both grants and denials of service connection should be annotated.



DEPARTMENT OF VETERANS AFFAIRS
Veterans Benefits Administration
Washington, D.C. 20420

<<FNAME>> <<MI>> <<LNAME>>
<<ADDRESS>>
<<CITY>>, <<STATE>> <<ZIP>>

SSN # <<SSN>>

Dear Mr. <<LNAME>>:

According to records recently released by the Department of Defense (DoD), you participated in tests at Edgewood Arsenal in Maryland during your tour of service in the <<Branch>>. The purpose of this letter is to inform you about the tests and what to do if you have related health concerns.

Information About the Tests

The tests at Edgewood Arsenal exposed participants, with their consent, to a number of different chemicals. The tests' objectives were to determine specific health effects associated with exposure, to assess various pre-and post-exposure medical treatments, and to evaluate the effectiveness of personal protective equipment. Not all volunteers were exposed to chemical agents; some received placebos (harmless substances with no health risks). Others performed stress tests without exposure to chemicals. Please see the enclosed DoD fact sheet, *Edgewood Arsenal Chemical Agent Exposure Studies: 1955-1975*, for additional information.

What You Can Discuss About the Tests

You may be concerned about releasing classified test information to your health care provider when discussing your health concerns. To former service members who participated in these tests, DoD has stated:

"You may provide details that affect your health to your health care provider. For example, you may discuss what you believe your exposure was at the time, reactions, treatment you sought or received, and the general location and time of the tests. On the other hand, you should not discuss anything that relates to operational information that might reveal chemical or biological warfare vulnerabilities or capabilities."

Page 2.

<<LNAME>>, <<FNAME>> <<MI>>
SSN # <<SSN>>

If You Have Questions About the Tests

If you have questions about chemical or biological agent tests, or concerns about releasing classified information, contact DoD at (800) 497-6261, Monday through Friday, 9 a.m. to 9 p.m. Eastern time.

If You Have Health Concerns

Although there is no specific medical test or evaluation for the types of exposures you might have experienced more than 30 years ago, VA is offering a clinical examination to veterans who receive this notification letter. If you have health concerns and wish to be medically evaluated, PLEASE BRING THIS LETTER WITH YOU TO THE NEAREST VA HEALTH CARE FACILITY. This letter will help you apply for the examination by providing needed documentation. Additional medical information about potential exposures is available through the "Environmental Health Coordinators," who are located in every VA medical center.

Note: The examination itself does not constitute, or provide eligibility for, enrollment in the VA health care system. If you are not already enrolled, you are encouraged to apply for VA health care benefits at the time you apply for the examination.

In addition to this clinical examination, if you think that you suffer from chronic health problems as a result of these tests, contact VA toll free at (800) 827-1000 to speak to a VA representative about filing a disability claim. You may also contact your local veterans service organization for assistance.

Scientists know much about many of the agents used in these tests. In order to best serve veterans and their families, VA continues to study the possibility of long-term health effects associated with in-service exposure to chemical and biological agents. If the medical community identifies such health effects, I assure you that we will share this information with you and other veterans as it becomes available to us.

Sincerely yours,

Daniel L. Cooper
Acting Under Secretary for Benefits

Enclosure

RFP 3

VVA-VA 009404

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VVA-VA 009404



FACT SHEET

Deployment Health Support Directorate

For more information,
1-800 497-6261

Version 07-01-2006

Edgewood Arsenal Chemical Agent Exposure Studies: 1955 – 1975

The Department of Defense is committed to share with the Department of Veterans' Affairs the databases it compiles on military personnel who participated in prior military chemical and biological operational testing. During the 1990s, the Defense Department compiled the Mustard Participant Database and from 2000 to 2003, the Projects-112/SHAD Database. The Department is currently working to catalogue tests conducted since 1942 that were not included in the earlier databases. As part of this effort, the Defense Department is cataloguing the tests that were conducted at Edgewood Arsenal, Maryland from 1955 to 1975. The Institute of Medicine (IOM) published a three-volume study between 1982 and 1985 on the long-term health effects of exposure to the chemicals tested.¹ The study did not detect any significant long-term health effects in Edgewood Arsenal volunteers.

During the 1955-1975 Edgewood Arsenal testing, the Army Chemical Corps Medical Department conducted classified medical studies involving nerve agents, nerve agent treatments (antidotes), psychochemicals (hallucinogenic drugs), irritants, and blistering agents. The purpose of the studies was to ensure that the U.S. military could adequately protect its servicemembers from possible wartime exposures to chemical warfare agents. As part of this effort, the Army conducted testing on approximately 7,000 volunteers at Edgewood Arsenal. These studies exposed participants, with their consent, to a number of different chemicals. The study objectives were to determine specific health effects associated with exposure (particularly at low dosages), to assess various pre- and post-exposure medical treatments, and to evaluate the effectiveness of personal protective equipment in preventing exposure.

The program evaluated the effects of low-dose exposures to chemical agents and their treatments, how well personnel performed mentally and physically following exposure, how easily some chemicals were absorbed into the body through the skin, and the effectiveness of personal protective equipment. Not all volunteers were exposed to chemical agents. Some only received placebos (harmless substances with no health risks) or performed stress tests without any exposure to chemicals.

Initially investigators determined exposure levels based on known safe levels in laboratory animals. They increased exposure levels only when there was a low risk of

¹ Institute of Medicine, Possible Long-Term Health Effects of Short-Term Exposure To Chemical Agents, Volumes 1-3, 1982, 1984, 1985.

serious side effects. The study investigators assured that the exposure levels administered would not result in serious or life-threatening side effects. If required, the volunteers received treatment for any adverse health effects.

RFP 3

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VVA-VA 009406

Frequently Asked Questions

Edgewood Arsenal Chemical Agent Exposure Studies: 1955 – 1975

Q: Where did the Army get its test participants?

A: Army enlisted men assigned to installations near Edgewood Arsenal were the initial source of volunteers. Over time, the Army recruited volunteers from throughout the United States and from other Services. About 75 service members participated during each 30-60 day testing period. As a group, the volunteers selected to participate in the studies were above average in physical and mental qualifications when compared to other service members.

Q: Were study participants true volunteers?

A: The Army obtained the voluntary consent of volunteers and provided them with study information.

Q: Does the Department of Defense still conduct human experimentation with chemical agents?

A: No. Current medical chemical defense programs involving human subjects do not involve the exposure of these subjects to chemical agents.

There are medical chemical defense programs that involve the use of human subjects in controlled clinical trials to test and evaluate the safety and effectiveness, of medical products (drugs, therapies, *etc.*) to protect against chemical agents. The use of human subjects in these trials involves volunteers who have provided informed consent. All use of human subjects in these trials is in full compliance with the "Common Rule," Federal Policy for the Protection of Human Subjects, Food and Drug Administration (FDA) regulations, Federal Acquisition Regulations (FAR), DOD Directives and Instructions, and *all* other applicable laws, regulations, issuances, and requirements.

Q: What databases are the Department of Defense maintaining on veterans exposed to chemical and biological agents?

A: DoD maintains a Project 112/SHAD (Shipboard Hazard and Defense) database. This database contains the names of veterans who were participated in Project 112/SHAD testing in the 1960s and 1970s. It contains more than 6,000 names and is updated as needed when we discover additional veterans who were part of this testing. We also maintain a database containing the names of veterans who participated in mustard agent tests during World War II. We are currently in the process of populating our third exposure database, the Edgewood Arsenal Chemical Agent Exposure Studies database (1955-1975). The Edgewood Arsenal Chemical Agent Exposure Studies Database (1955-1975) is part of the database of all other chemical and biological testing since World War II.

Q: Besides names and service numbers, what other information does the DoD database contain on the Edgewood volunteers?

A: For each individual, the database will contain the following:

- Type of test (i.e., performance, equipment etc.)
- Type of exposure (i.e., injection, intravenous (IV) etc.)
- Date of exposure
- Agent/simulant name
- Agent/simulant amount if recorded
- Treatments required as a result of the exposure
- Documents describing the test procedures, if available.

Q: Who maintains the database for veterans exposed to radiation?

A: The Defense Threat Reduction Agency maintains information on veterans exposed to radiation during the Nuclear Test Personnel Review (NTPR) Program.

Q: What types of tests were conducted at Edgewood?

A: Table 1 provides a rough breakout of volunteer hours against various experimental categories:

Incapacitating compounds (i.e. vomiting agent)	29.9%
Lethal compounds (i.e. sarin)	14.5 %
Riot control compounds (i.e. CS)	14.2%
Protective equipment and clothing (masks, rubber suits, etc.)	13.2%
Development evaluation and test procedures	12.5%
Effects of drugs and environmental stress on human physiological mechanisms (i.e. wakefulness)	6.4%
Human factors tests (ability to follow instructions)	2.1%
Other (visual studies, sleep deprivation, etc.)	7.2%

Q: Did the Army expose the volunteers to hallucinogenic compounds?

A: Yes, there were studies at Edgewood that exposed volunteers to hallucinogenic drugs like LSD. Although the current medical literature indicates that such exposure may have some long-lasting effects among some individuals, such as "flashbacks" (visual hallucinations without new drug exposure), the volunteer records from the times of the Edgewood studies did not record these kinds of after effects among the Edgewood study volunteers.

EXHIBIT 48



DEPARTMENT OF VETERANS AFFAIRS
Veterans Benefits Administration
Washington, DC 20420

March 28, 2005

Director (00/21)
All VA Regional Offices

In Reply Refer To: 212
Training Letter 05-01

SUBJ: Revised Mustard Agent and Lewisite Claims Processing Procedures

BACKGROUND INFORMATION

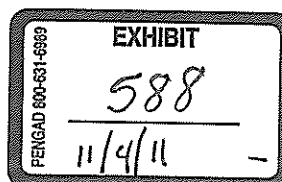
Since World War I, select servicemembers were exposed to mustard agents (sulphur mustard and nitrogen mustard) or Lewisite through activities involving secret testing, combat, and military occupational duties (such as handling or destruction of the agents). These substances are commonly known as mustard gas. Most of these servicemembers participated in World War II's mustard agents and Lewisite testing programs.

CURRENT EFFORTS

On December 14, 2004, VA obtained a copy of the Department of Defense's (DoD's) Defense Manpower Data Center (DMDC) mustard agents and Lewisite database and created a comprehensive notification action plan. Beginning in March 2005, the Department of Veterans Affairs (VA) will attempt to individually notify all DoD-identified veterans (or, if deceased, their survivors) who were exposed to mustard agents or Lewisite during service.

The following attachments detail the revised procedures for processing claims for service connection for disabilities related to exposure to mustard and/or Lewisite.

- Attachment A: Overview
- Attachment B: Brief History of 38 CFR 3.316
- Attachment C: Centralized Claim Processing
- Attachment D: Veteran Services Representative (VSR) Procedures
- Attachment E: Rating Veteran Services Representative (RVSR) Procedures
- Attachment F: Questions and Answers (Q&As)
- Attachment G: Telephone Communications for St. Louis Help Line



WHO TO CONTACT FOR HELP

If you have questions or need additional information, you should e-mail your inquiry to the Q&A mailbox VAVBAWAS/CO/MUSTARDGAS or MUSTARDGAS@VBA.VA.GOV.

/s/

Renée L. Szybala, Director
Compensation and Pension Service

Enclosures

RFP 3

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VVA-VA 009228

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VVA-VA 009228

ATTACHMENT A: OVERVIEW

WHAT ARE MUSTARD AGENTS, MUSTARD GAS, AND LEWISITE?

“Mustard gas” is a common term which may refer to either of two mustard agents, sulphur mustard (Yperite) or nitrogen mustard. Lewisite is another mustard agent, an organic compound which contains arsenic. Each of these chemicals is a vesicant (blister-producing), which some servicemembers may have been exposed to during World War I and World War II.

Most known post-World War II mustard agent and Lewisite exposure came as a result of military occupational duties rather than from combat or secret testing. Although these agents are commonly thought of as gases, they are thick, almost odorless liquids at room temperature. The German Army first used sulphur mustard in September 1917.

WHY ARE MUSTARD AGENTS AND LEWISITE A CURRENT ISSUE?

DMDC recently released the names of servicemembers who were exposed to mustard agents and Lewisite, most during World War II. VA is now making efforts to contact these veterans or, if deceased, their survivors, and inform them of potential benefits available.

World War II Servicemember Population

During World War II, an estimated 60,000 servicemembers participated in secret mustard agent and Lewisite tests. Of this number, an estimated 4,000 servicemen participated in tests that involved the use of significant concentrations of mustard agents or Lewisite either in chambers or field exercises. An estimated 56,000 servicemen were exposed to minimal amounts of mustard agents and/or Lewisite via patch and drop tests. All participants swore to keep secret their participation.

Contractors or Civilians

DoD has identified approximately 930 non-military personnel who were exposed to mustard agents and Lewisite. These individuals fall outside the scope of VA’s outreach responsibilities. VA only pays benefits to veterans and their dependents.

WHO CAN RECEIVE MEDICAL TREATMENT?

A veteran who applies for disability benefits based on exposure to mustard gas may receive a physical examination requested by the Veterans Benefits Administration (VBA) as a normal part of the claims process. If the claimed disability or disease is found to be the result of mustard gas exposure during service, the veteran is entitled to free treatment for it. Otherwise, the cost to the veteran is based upon criteria established by the Veterans Health Administration. Aside from an examination requested by VBA, a VA medical facility requires co-payments from a veteran for examinations performed at his/her own request.

ARE VOWS OF SECRECY STILL BINDING?

Veterans are released from vows of secrecy made in connection with tests conducted prior to 1968. On March 9, 1993, the Deputy Secretary of Defense, William J. Perry, issued a memorandum to the entire DoD that released anyone "who participated in testing, production, transportation or storage associated with chemical weapons research conducted prior to 1968 from non-disclosure restrictions or written or oral prohibitions (e.g. oaths of secrecy)."

Per DoD, post-1968 test participants may discuss the type of agent used, location, and circumstances of exposure, as this information is declassified.

WHERE WERE SERVICEMEMBERS EXPOSED TO MUSTARD AGENTS AND LEWISITE?

A variety of Army and Navy personnel were exposed at the following known locations:

ARMY	NAVY
Bari, Italy*	Bari, Italy*
Bushnell, Florida	Camp Lejeune, North Carolina
Camp Lejeune, North Carolina	Charleston, South Carolina
Camp Sibert, Alabama	Great Lakes Naval Training Center, Illinois
Dugway Proving Ground, Utah	Hart's Island, New York
Edgewood Arsenal, Maryland	Naval Training Center, Bainbridge, Maryland
Naval Research Lab in Washington, DC	Naval Research Laboratory, Virginia
Ondal, India	Naval Research Lab in Washington, DC
Rocky Mountain Arsenal, Colorado	<i>USS Eagle Boat No. 58</i>
San Jose Island, Panama Canal Zone	

Note: Some American servicemembers may have participated in Allied mustard agent testing in Finschhafen, New Guinea, and Porton Down, England.

*Additionally, select merchant seaman were also exposed or killed at Bari, Italy.

ARE THERE OTHER SITUATIONS WHERE A SERVICEMEMBER MIGHT HAVE BEEN EXPOSED? YES

- Battlefield conditions in World War I
- The Bari, Italy, incident during World War II
- Handling or transporting agents during military service

WHAT WAS THE BARI, ITALY, INCIDENT?

The Bari incident was the result of a German air raid against the harbor of Bari, Italy, on December 2, 1943. Among the twenty ships (seven American*) sunk or damaged was *John Harvey*, a merchant marine ship carrying sulfur mustard bombs.

Sulfur mustard bombs had been loaded on the merchant marine ship before it sailed from Baltimore to Bari. When the ship sank in the raid, some of its load was damaged, causing liquid mustard to spill out into water already heavily contaminated with an oil slick from other damaged ships. Men who abandoned ship became covered in this oily mixture.

Medical personnel who treated casualties were unaware of the sulfur mustard and were exposed to the agent. The destroyer *USS Bistera*, well outside the harbor and undamaged by the raid, pulled 30 men from the water in a rescue effort. By the next day, officers and crew of the *USS Bistera* were blinded from the effects of the sulphur mustard.

Those exposed to sulfur mustard, as a result of the ship's destruction, were the only known sulfur mustard combat casualties in World War II.

Note: During World War II, it was commonplace for merchant ships to be protected by Navy and Army Armed Guard.

*American merchant vessels sunk: *Joseph Wheeler*, *Samuel J. Tilden*, *John Harvey*, *John L. Motley*, and *John Buscom*. American merchant vessels damaged: *Lyman Abbott*, and *Louis Hennepin*.

ATTACHMENT B: BRIEF HISTORY OF 38 CFR 3.316

The regulation pertaining to long-term health effects of mustard gas and Lewisite is located in Title 38 Code of Federal Regulations (CFR) §3.316. The following narrative provides a high-level history of the presumptions of service connection for disabilities and diseases related to exposure to mustard agents and Lewisite veterans.

BEFORE JULY 31, 1992

Before July 31, 1992, when VA's presumptive rule took effect, veterans were required to prove that their medical problems resulted from participation in mustard agent or Lewisite tests. However, few veterans could prove this relationship because of the secret nature of these tests. Therefore, the Compensation and Pension (C&P) Service reviewed its policy toward claims related to mustard agents and Lewisite exposure. (All veterans exposed to mustard agents or Lewisite prior to 1968 were relieved of their oaths of secrecy by Admiral Perry in 1993.)

On March 20, 1991, VA issued Veterans Benefits Administration (VBA) Circular 21-91-7, which provided guidance on handling claims for compensation from veterans who participated in these tests.

1992 – INITIAL REGULATION

On July 31, 1992, VA published in the *Federal Register* a final regulation (38 CFR 3.316) that became effective the date of publication. It established a presumption of service connection based upon mustard agent or Lewisite exposure, provided that the veteran was subjected to full-body exposure during field or chamber experiments to test protective clothing or equipment during World War II. These veterans must have subsequently developed a chronic form of laryngitis, bronchitis, emphysema, asthma, and diseases of the eye including conjunctivitis, keratitis or corneal opacities.

On September 17, 1992, VA revised VBA Circular 21-91-7 to provide updated information on the long-term health effects of exposure to mustard agent and Lewisite, and instructions for adjudicating compensation claims under § 3.316.

1993 – RESULTS OF MEDICAL RESEARCH RELEASED

In June 1991, VA contracted with the Institute of Medicine (IOM) to conduct a study of medical and scientific literature worldwide to determine the long-term health affects of exposure to mustard agents and Lewisite. The study, entitled "*Veterans at Risk: The Health Effects of Mustard Gas and Lewisite*," was released January 6, 1993. Within the same week, VA proposed amendments to 38 CFR 3.316.

AUGUST 18, 1994 – AMENDED REGULATION

After reviewing IOM's findings, VA amended § 3.316 in three ways on August 18, 1994. The effective date for the amended regulation was January 6, 1993, the date of the IOM report release. First, the change removed the restriction that full-body exposure must have occurred during field or chamber tests in World War II. The presumption of service connection for specified conditions was extended to those exposed to mustard agents and Lewisite in the following duties:

- Battlefield conditions in World War I
- The Bari, Italy, incident during World War II
- Transportation of chemical warfare agents during military service

Second, the list of VA-recognized disabilities and diseases for grants of service connection under § 3.316 was expanded to include nasopharyngeal cancer, laryngeal cancer, lung cancer (except mesothelioma), and squamous cell carcinoma of the skin as a result of verified full-body exposure to mustard gas. Acute non-lymphocytic leukemia resulting from exposure to nitrogen exposure mustard was also added.

Third, the amendment permitted service connection for a chronic form of laryngitis, bronchitis, emphysema, asthma or chronic obstructive pulmonary disease that is the result of verified full-body exposure to Lewisite.

Note: Historic regulatory amendments by effective date for 38 CFR 3.316 are located at the following websites:

July 31, 1992: <http://vbaw.vba.va.gov/bl/21/publicat/regs/pg21/appa/3-92-4.htm>.

January 6, 1993: <http://vbaw.vba.va.gov/bl/21/publicat/regs/pg21/appa/3-94-13.htm>.

HOW CAN I ACCESS THE IOM STUDY?

A full copy of the IOM study may be obtained by clicking on the following hyperlink: <http://www.nap.edu/openbook/030904832X/html/>. A hardcopy of this report might also be available at local libraries and universities.

ATTACHMENT C: CENTRALIZED CLAIMS PROCESSING

CENTRALIZED SITE

All claims relating to mustard agent or Lewisite exposure are being centrally processed at the Muskogee VA Regional Office (VARO). This includes reopened claims and appeals, as well as claims from any wartime period. Any file transferred because of a mustard gas claim will be a permanent transfer. The VARO's address follows:

Department of Veterans Affairs
VARO Muskogee (21-Mustard Gas)
Federal Bldg
125 S. Main St
Muskogee, OK 74401

PENDING CLAIMS AT VA REGIONAL OFFICES (VAROS)

Claim Pending Prior to January 19, 2005: All VAROs will expeditiously complete existing pending mustard agent and Lewisite claims. These should not be transferred to Muskogee.

Upon completion, the final rating must be e-mailed to the following mailbox:
MUSTARDGAS@VBA.VA.GOV.

Claim Pending On or After January 19, 2005: Claims received on or after January 19, 2005, must be mailed to the Muskogee VARO for processing.

Claims folders must only accompany the new claim if the record is located in a VARO's file bank. The Muskogee VARO will recall all claims folders located in records repositories.

IMPORTANT:

1. Triage teams at service centers should be on the lookout for mustard gas claims to forward to Muskogee.
2. So that Muskogee can quickly identify mustard agent correspondence in their incoming mail, all envelopes must show the mail symbol as "21-Mustard Gas."

ATTACHMENT D: VSR PROCEDURES

This training letter amends select VSR claims processing actions identified in *Veterans Benefits Administration (VBA) Adjudication Manual M21-1, Part III, paragraph 5.18, Development for Exposure to Mustard Gas and Lewisite.*

END PRODUCT (EP) CONTROL

All mustard agent and Lewisite claims must be concurrently controlled with EP 688 and a standard compensation or pension end product.

All claims must be properly developed utilizing the contention screen and drop-down menus in MAP-D. A "mustard gas" selection appears in the drop-down box on the contentions screen.

VERIFICATION OF PARTICIPATION

Regardless of whether the veteran submits a VA-issued mustard gas notification letter, VAROs must send an e-mail to the mustard gas mailbox (MUSTARDGAS@VBA.VA.GOV) requesting verification of participation.

The e-mail should include the following information:

Full Name	E-mail Address
Phone Number	Date of Birth
Social Security Number	Date of Death
Service Number	Branch of Service
Location of Test (city, state, country)	Unit
Disabilities Allegedly Related to Exposure	Date Entered on Active Duty (EOD)
Type of Test (full-body, patch, etc.)	Date Released from Active Duty (RAD)

Upon receipt of your e-mail, VACO personnel will provide a confirming or negative response.

Note: This new procedure amends M21-1, Part III, paragraph 5.18 (c).

Negative Response

If VACO responds that the claimant's name is not on the current mustard agent and Lewisite list, concurrently develop as follows:

- a. Develop to the designated service department as indicated in M21-1, Part III, paragraphs 5.18 (d) and (e).

- b. Develop for a copy of the veteran's military 201 file and DD 214, if not available. When received, send a copy of the records to:

Department of Veterans Affairs
Compensation and Pension Service (212)
810 Vermont Ave, NW
Washington, DC 20420
ATTN: Mustard Gas Manager

If there are fewer than 20 pages, they may be sent via fax to the Mustard Gas Manager at (202) 275-1756. This will also expedite the case.

When VACO receives the 201 file and DD 214, a copy will be given to DoD for further inquiry and final verification. If DoD's response remains negative, C&P Service will notify the requestor via e-mail of that fact. The RO should cancel the EP 688 and continue normal claims processing.

Important Note: In some mustard agent and Lewisite exposure cases, DoD placed a 3" x 5" index card in servicemembers' service or service medical records containing the following fields: experiment, date, agent, suit, concentration and time/exposure, number of exposures, and maximum reading. Please include a copy of this index card in your documentation to VACO.

Confirmatory Response

When verification of exposure to mustard agent or Lewisite is received, the Pre-Determination Team will determine the need for a physical examination (see Attachment E: Rating Procedures).

ELECTRONIC SUBMISSION OF RATING DECISIONS

VACO needs to know the outcome of all mustard agent and Lewisite claims. At the time you notify the claimant about the rating decision, please e-mail the associated mustard agent and Lewisite rating decisions (under the subject name "Mustard Agent and Lewisite Rating") to the mustard gas mailbox.

VACO uses the information provided by ROs to look for patterns in the conditions being claimed, track decision outcomes, and respond to stakeholder inquiries.

Note: Please notify VACO's Mustard Gas Manager via the mailbox of any biological and chemical exposure claims, no matter how unusual.

REFERENCES

- 38 CFR §3.316
- VBA Adjudication Manual, M21-1, Part III, Chapter 5, paragraph 5.18

ATTACHMENT E: RVSR PROCEDURES

FULL-BODY EXPOSURE

Veterans with full-body exposure to mustard agents or Lewisite should have their disabilities reviewed under 38 CFR 3.316.

Full-body exposure means the entire body was exposed to mustard agents or Lewisite as opposed to a patch where a drop of mustard agent or Lewisite was placed on one or more locations on the skin. Individuals were more likely to have experienced full-body exposure during the following:

- Chamber testing
- Field exercises to simulate battlefield conditions
- Transportation or handling of mustard agents such as the Bari, Italy, incident
- Actual combat during World War I

PARTICIPATION IN TESTING AS A STRESSOR

Participation in mustard agent and Lewisite testing can be considered a stressor in determining service connection for post-traumatic stress disorder.

RATING CODE SHEET

When completing the code sheet, clearly identify those disabilities the veteran claims, or the RVSR determines, are related to mustard agent or Lewisite exposure. Type “[MG]” by claimed symptoms or the diagnosis in RBA 2000.

ATTACHMENT F: Q&As*

*These Q&As were written for those in VA facilities who might be answering phone calls from veterans or their surviving spouses asking about mustard agents and Lewisite.

What Are Mustard Agents, Mustard Gas, and Lewisite?

“Mustard gas” is a common term that refers to either of two mustard agents: sulphur mustard or nitrogen mustard. Lewisite is another mustard agent, an organic compound containing arsenic. The German Army first used sulphur mustard in September 1917. Each of these are blister-producing (vesicant) agents, which some servicemembers may have been exposed to during secret tests, combat, or military occupational duties, especially during World War II. Although these agents are commonly thought of as gases, they are thick, almost odorless, liquids at room temperature.

Why Are Mustard Agents and Lewisite a Current Issue?

DoD recently released the names of servicemembers who participated in chemical research involving mustard agents during World War II. VA is now making efforts to contact these servicemembers or their survivors and inform them of potential benefits available.

World War II Servicemember Population

By the end of World War II, nearly 60,000 servicemembers had participated in DoD-sponsored chemical research. Nearly 4,000 of these individuals participated in tests conducted with high concentrations of mustard agents or Lewisite in gas chambers or field exercises.

Contractors or Civilians

DoD has identified approximately 900 non-military personnel who were exposed to mustard agents. These individuals fall outside the scope of VA’s outreach responsibilities. VA only pays benefits to veterans and their dependents.

Can I Receive Health Care?

Most veterans are required to apply for enrollment to receive VA health care benefits. If you are not already enrolled with your local VA health care facility we encourage you to do so at your earliest convenience. VA offers a comprehensive medical benefits package that would meet your treatment needs. Please be aware that VA is currently not enrolling new applicants who fall into the lowest enrollment priority (generally veterans with higher income who are otherwise not eligible for a higher enrollment

priority assignment) and that some veterans are required to make co-payments for care and/or medications provided by VA.

Are Vows of Secrecy Still Binding?

Veterans are released from vows of secrecy made in connection with tests conducted prior to 1968. On March 9, 1993, the Deputy Secretary of Defense, William J. Perry, issued a memorandum to the entire DoD that released anyone “who participated in testing, production, transportation or storage associated with chemical weapons research conducted prior to 1968 from non-disclosure restrictions or written or oral prohibitions (e.g. oaths of secrecy).”

Per DoD, post-1968 test participants may discuss the type of agent used, location, and circumstances of exposure as this information is declassified.

How Do I Know if I Was Exposed?

Before April 1, 2005: Beginning in March 2005, VA will issue letters to all DoD-identified veterans (or their surviving spouses) verifying participation in research involving mustard agents.

After April 1, 2005: If you have not received a letter, you may submit an inquiry to MUSTARDGAS@VBA.VA.GOV and we will have a staff member call or e-mail you within a few days. The information we need from you is as follows:

Full Name	E-mail Address
Phone Number	Date of Birth
Social Security Number	Date of Death
Service Number	Branch of Service
Location of Test (city, state, country)	Unit
Disabilities Allegedly Related to Exposure	Date Entered on Active Duty
Type of Test (full-body, patch, etc.)	Date Released from Active Duty

What Do You Mean by Full-Body Exposure?

Full-body exposure means the entire body was exposed to mustard agents or Lewisite, as opposed to a patch where a drop of mustard agent or Lewisite was placed on one or more locations on the skin. Individuals were more likely to have experienced full-body exposure during the following:

- Chamber testing;
- Field exercises to simulate battlefield conditions;
- Accidents, such as the “Bari incident” in Italy, occurring during the transportation of mustard agents; or
- Actual combat during World War I.

What Was the “Bari Incident”?

The “Bari incident” was the result of a German air raid against the harbor of Bari, Italy, on December 2, 1943. Among the twenty ships destroyed was a merchant marine ship carrying sulfur mustard bombs. Those exposed to the sulfur mustard were the only known sulfur mustard combat casualties in World War II.

Where Were Chemical Tests Conducted?

The Army and Navy conducted laboratory and field tests at the following locations:

ARMY	NAVY
Bushnell, Florida	Camp Lejeune, North Carolina
Camp Lejeune, North Carolina	Charleston, South Carolina
Camp Sibert, Alabama	Great Lakes Naval Training Center, Illinois
Dugway Proving Ground, Utah	Hart’s Island, New York
Edgewood Arsenal, Maryland	Navy Training Center, Bainbridge, Maryland
Naval Research Lab in Washington, DC	Naval Research Laboratory, Virginia
Ondal, India	Naval Research Lab in Washington, DC
Rocky Mountain Arsenal, Colorado	<i>USS Eagle Boat No. 58</i>
San Jose Island, Panama Canal Zone	

Note: Some American servicemembers may have participated in Allied mustard agent testing in Finschhafen, New Guinea, and Porton Down, England.

What Medical Research Has Been Conducted on Mustard Agents and Lewisite

In 1991, VA contracted with the Institute of Medicine (IOM) to conduct a study of medical and scientific literature worldwide to determine the long-term health effects of exposure to mustard agents and Lewisite. The study, entitled “*Veterans at Risk: The Health Effects of Mustard Gas and Lewisite*,” was released January 6, 1993.

The study found a relationship between full-body exposure and subsequent development of the following disabilities and diseases:

- Chronic conjunctivitis, keratitis, corneal opacities, scar formation, or the following cancers: nasopharyngeal; laryngeal; lung (except mesothelioma); and squamous cell carcinoma of the skin (mustard agents only).
- Chronic laryngitis, bronchitis, emphysema, asthma, or chronic obstructive pulmonary disease (mustard agents or Lewisite).
- Acute non-lymphocytic leukemia (nitrogen mustard only).

For information about the Institute of Medicine (IOM) study, click on the following hyperlink: <http://www.nap.edu/openbook/030904832X/html/>. A hardcopy of this report might be available at your local library or university.

Mail	E-mail	Telephone	FAX
Institute of Medicine 500 Fifth Street, NW Washington, DC 20001	iomwww@nas.edu	(202) 334-2352	(202) 334-1412

What Happens if I File A Claim?

Your mustard agent and Lewisite claim will be processed by the Muskogee, OK, VARO.

If you, as a VARO or Hotline representative, have an inquiry regarding the status of a beneficiary's mustard agent and Lewisite claim, please e-mail the Muskogee VARO at MUSGAS@VBA.VA.GOV in accordance with the Warm-Transfer Procedures (see page 21). A VARO representative will respond to the claimant's inquiry.

How Can I Get More Specific Information?

You can learn more about mustard gas from the Agency for Toxic Substances and Disease Registry. It is a division of the Communicable Disease Center.

Agency for Toxic Substances and Disease Registry
Division of Toxicology
1600 Clifton Road NE, Mailstop F-32
Atlanta, GA 30333
Phone: 1-888-42-ATSDR (1-888-422-8737)
FAX: (770)-488-4178
Email: ATSDRIC@cdc.gov

How Can I Contact DoD and VA?

If you –	Contact
Have questions about mustard agents or have concerns about releasing classified information	DoD at (800) 497-6261, Monday through Friday, 9 a.m. to 9 p.m.
Have questions about disability compensation for diseases or injuries as a result of your military service	VA at 1-800-749-8387 (option 4), Monday through Friday, 8 a.m. to 4 p.m., Central time, to speak to a Department of Veterans Affairs representative or e-mail us at MUSTARDGAS@VBA.VA.GOV .

Note the difference in the use of these two e-mail addresses:
MUSGAS@VBA.VA.GOV ...for internal use only
MUSTARDGAS@VBA.VA.GOV ...for external use

ATTACHMENT G: TELEPHONE COMMUNICATIONS FOR ST. LOUIS HELP LINE

The following information provides high-level guidance regarding telephone communications with veterans and their surviving spouses, especially veterans exposed to mustard agents and Lewisite. The target audience for this appendix are VA's Special Issues Help Line staff based in St. Louis, MO.

POPULATION

Most of the veterans DoD identified were potentially exposed to sulfur mustard, nitrogen mustard, or Lewisite during secret chemical warfare tests during World War II. Other veterans were exposed through combat or military occupational duties. Either way, these chemical exposures were painful and traumatic.

Further, a majority of these veterans last served on active duty during the 1940s.

Note: During basic training, most servicemembers were, and still are, exposed to non-lethal CS (tear) gas in chemical warfare simulation exercises. These veterans, unless otherwise identified by DoD in future declassification releases, were not exposed to mustard agents or Lewisite.

HELP LINE

Beginning in March 2005, VA's Special Issues Help Line (1-800-749- 8387) based in St. Louis, MO, commenced telephone operations for all inquiries regarding mustard agents and Lewisite. The following list identifies all available program options:

Option 1	Gulf War
Option 2	Agent Orange
Option 3	Project 112/SHAD
Option 4	Mustard Agents and Lewisite

HANDLING PROCEDURES BASED UPON INQUIRY

The Help Line addresses all non-claim-specific mustard agents and Lewisite inquiries from veterans and their families. The following list identifies the responsible organization based on type of mustard agent or Lewisite inquiry:

- **Status of Claim or Appeal**

Effective February 2005, the Muskogee VARO centrally processes all types of mustard agent and Lewisite claims.

All Help Line inquiries requesting claim information should be warm-transferred to the Muskogee VARO at (918) 781-7699. Warm-transfers are not required for health care facilities and other organizations.

- **Name on Database**

Inform the veteran or family member that all database inquiries must be e-mailed to VACO at MUSTARDGAS@VBA.VA.GOV with the following information:

Full Name	E-mail Address
Phone Number	Date of Birth
Social Security Number	Date of Death
Service Number	Branch of Service
Location of Test (city, state, country)	Unit
Disabilities Allegedly Related to Exposure	Date Entered on Active Duty (EOD)
Type of Test (full-body, patch, etc.)	Date Released from Active Duty (RAD)

Upon receipt, VACO will provide a confirmatory or negative response to the Help Line staff member for release. It is envisioned that the Help Line will receive a copy of VACO's database at a later date.

- **Health Care**

Please refer the caller to the nearest VA health care facility located in the back of the "Federal Benefits for Veterans and Dependents" pamphlet. A VA health care facility locator by zip code is available at the following website:

<http://www1.va.gov/directory/guide/home.asp?isFlash=1>.

- **Mustard Agents and Lewisite, and Release of Classified Test Information**

DoD established a hotline to handle all mustard agent and Lewisite inquiries, including release of classified test information. Please refer the veteran or family member to (800) 497-6261, Monday through Friday, 9 a.m. to 9 p.m.

WARM-TRANSFER PROCEDURES

All claim-specific calls must be warm-transferred to the Muskogee VARO at (918) 781-7699. Help Line agents must stay on the line with the caller until someone has accepted the call in Muskogee and the transfer is confirmed.

In the event that the transfer is not confirmed due to a busy line, the agent should assist the caller using e-mail.

Submit an E-mail Inquiry

- Assist the caller by obtaining his/her full name, telephone number, and VA file number, if applicable
- Explain to the caller that the information will be provided to the Muskogee VARO for a call back within 24-hours.
- E-mail the information collected to the Muskogee point of contact (POC)*

Internal and external Muskogee VARO mustard agent and Lewisite e-mail addresses follow:

- Mustard Gas Mail Box: VAVBAMUS/RO/MUSGAS
- Internal VA e-mail address: MUSGAS@VBA.VA.GOV

*POC to be determined by the Muskogee VARO

EXHIBIT 49



DEPARTMENT OF VETERANS AFFAIRS
Veterans Health Administration
Washington DC 20420

IL 10-2006-010

In Reply Refer To: 13

August 14, 2006

UNDER SECRETARY FOR HEALTH INFORMATION LETTER

POTENTIAL HEALTH EFFECTS AMONG VETERANS INVOLVED IN
MILITARY CHEMICAL WARFARE AGENT EXPERIMENTS
CONDUCTED FROM 1955 TO 1975

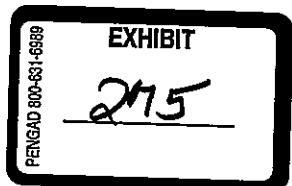
1. This Under Secretary for Health's Information Letter (IL) provides information to clinicians who examine and provide care to veterans who may have been exposed to various chemical warfare agents as part of human experiments conducted by the Department of Defense (DOD) from 1955 to 1975.

2. Background

a. On June 30, 2006, the Veterans Benefits Administration (VBA) released the first in a series of notification letters to DOD-identified veterans who were exposed to chemical warfare and related agents as test subjects in military experiments. These experiments took place primarily at military facilities in Edgewood, MD, from 1955 to 1975. The letter informs veterans of benefits to which they may be entitled and advises them to discuss any health concerns they may have with their VA health care providers.

b. The United States (U.S.) military has had an active chemical warfare program since World War I that included experiments using "soldier volunteers" to test protective clothing and masks, and the potential impact of chemical warfare agents on military personnel. In earlier experiments concluded by the end of World War II, about 60,000 U.S. service members had been experimentally exposed to mustard and Lewisite blister agents. *NOTE: Veterans Health Administration (VHA) policy, historical background and relevant clinical information on the military mustard and Lewisite experiments, is available at:*
http://www.va.gov/EnvironAgents/docs/USHInfoLetterIL10-2005-004_March_14_2005.pdf.

c. More recently, the focus has been on experiments conducted by DOD with a wide range of newer chemical warfare agents, conducted at the U.S. Army Laboratories, Aberdeen Proving Ground, Edgewood, MD (Edgewood-Aberdeen) and other military facilities, from about 1955 to 1975. Potential long-term health effects among the veterans affected by these experiments are the focus of the current VBA outreach letter writing campaign.



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d. The Edgewood-Aberdeen experiments involved at least 6,700 "soldier volunteers" exposed from about 1955 to 1975 to more than 250 different agents. The agents tested involved about half a dozen pharmacological classes, including common approved pharmaceuticals or similar compounds, anticholinesterase nerve agents (e.g., sarin and common organophosphorus (OP) and carbamate pesticides), glycolate anticholinergic agents (e.g., nerve agent antidotes atropine and scopolamine), nerve agent reactivators (e.g., the common OP antidote 2-PAM [2-pyridine aldoxime methyl chloride] and related compounds), psychoactive compounds (e.g., LSD [D-lysergic acid diethylamide] and PCP [phencyclidine]), cannabinoids (related to the active ingredient of marijuana), and irritants (e.g., tear gases). Although records are poor and often incomplete, some veterans were exposed only to placebos such as saline, or other common substances such as alcohol or caffeine.

e. Originally conducted in secret, there is a great deal of information today describing these experiments in open literature, including congressional hearings, media accounts, and reviews and epidemiological studies from scientific organizations, including the National Academy of Sciences and others. Importantly, DOD has declassified many of the details of these experiments that are relevant to benefits claims of the veterans who participated.

f. Although no longer secret, many health care providers are not aware of this history and how these experiments may have affected the health of veteran patients today. This Under Secretary for Health Information Letter is intended to inform health care providers who may see such veterans as patients.

3. Guidance

a. VA health care providers can be assisted when they are providing care to veterans who may have been exposed to chemical warfare agents as part of human experiments conducted by DOD, by referring to www.va.gov/EnvironAgents/docs/Fact_Sheet_Edgewood-aberdeen_Chemical_Agent_Experiments_Information_Paper.pdf. There are no tests available today that can confirm exposure to these agents decades in the past. Therefore, medical care providers need to focus upon the current health of the veteran, *i.e.*, taking a thorough military and medical history, including information on participation in chemical warfare agent experiments, along with a basic medical examination that includes appropriate laboratory tests relating to the veteran's complaints and medical findings. *NOTE: A VA pocket card on taking a military service history is available at www.va.gov/oa/pocketcard/.*

b. Review of the literature and VA policy (described more fully at www.va.gov/EnvironAgents/docs/Fact_Sheet_Edgewood-Aberdeen_Chemical_Agent_Experiments_Information_Paper.pdf.) does recognize a number of illnesses as presumptively service-connected among veterans with "full-body" exposure to mustard agents (used in some of the Edgewood-Aberdeen experiments) and Lewisite (used in early experiments through the end of World War II), which should be considered during a medical examination. These include:

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(1) Chronic conjunctivitis, keratitis, corneal opacities, scar formation, or the following cancers: nasopharyngeal, laryngeal, lung (except mesothelioma), or squamous cell carcinoma of the skin (from exposure to nitrogen and sulfur mustard agents only).

(2) Chronic laryngitis, bronchitis, emphysema, asthma or chronic obstructive pulmonary disease (from exposure to nitrogen and sulfur mustard agents and to Lewisite).

(3) Acute non-lymphocytic leukemia (from exposure to nitrogen mustard only).

c. Veterans need to be informed that seeking care for conditions possibly related to exposure to mustard agents and Lewisite does not constitute a claim for compensation, although the findings of clinical examinations can aid in the adjudication of compensation claims. *NOTE: Veterans wishing to file a compensation claim need to be referred to a Veterans Benefits Counselor, or be advised to contact the appropriate VA Regional Office at 1-800-827-1000.*

d. Treatment of the diseases VA presumes to be from the long-term consequences of mustard agents and Lewisite exposure, such as bronchitis, cataracts, etc. is the same as the treatment of those same diseases from other causes.

e. VA does not presumptively recognize any long-term health consequences from exposure to other classes of agents tested in the Edgewood-Aberdeen experiments including conventional pharmaceuticals, anticholinesterase nerve agents such as sarin and common organophosphorus pesticides, glycolate anticholinergic agents such as atropine and scopolamine, nerve agent reactivators such as 2-PAM, psychoactive compounds such as LSD and PCP, cannabinoids, or irritants such as tear gases. However, specific health problems may be linked to service-related chemical exposures on an individual basis when there is evidence of a causal link to military service.

f. Review of the literature (described in the document "Chemical Warfare Agent Experiments Among U.S. Service Members," available at www.va.gov/EnvironAgents/docs/Fact_Sheet_Edgewood-Aberdeen_Chemical_Agent_Experiments_Information_Paper.pdf) indicates that many veterans involved in the Edgewood-Aberdeen experiments exhibited signs and symptoms of acute toxicity when experimentally exposed to these agents. Available evidence and follow-up study in general does not support significant long-term, physical harm among subjects exposed to acutely toxic amounts of these agents other than mustard agents and Lewisite. Long-term psychological consequences, however, are possible from the trauma associated with being a human test subject. Consequently, veterans presenting with health concerns should be handled on a case-by-case basis, supported by the relevant history, relevant epidemiological evidence and clinical information for long-term health concerns related to these experiments and described in the on-line document.

g. For more information, veterans can be informed about DOD's hotline number at 1- 800-497-6261, which is also included in the letter that they are receiving from VBA.

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4. Contact. Questions regarding this information letter may be addressed to the Environmental Agents Service (131) at (202) 273-8579.

Michael J. Kussman, MD, MS, MACP
Acting Under Secretary for Health

DISTRIBUTION: CO: E-mailed 8/15/06
FLD: VISN, MA, DO, OC, OCRO, and 200 – E-mailed 8/15/06

EXHIBIT 50



DEPARTMENT OF VETERANS AFFAIRS
Veterans Health Administration
Washington DC 20420

IL 10-2005-004

In Reply Refer To: 13

March 14, 2005

UNDER SECRETARY FOR HEALTH'S INFORMATION LETTER

HEALTH EFFECTS AMONG VETERANS EXPOSED TO
MUSTARD AND LEWISITE CHEMICAL WARFARE AGENTS

1. This Under Secretary for Health's Information Letter provides information to clinicians who examine and provide care to veterans who may have been exposed to mustard and Lewisite chemical warfare agents ("mustard gas") as part of human experiments conducted by the Department of Defense (DoD) up to the end of World War II.

2. **Background**

a. In early March 2005, the Under Secretary for Benefits began mailing letters to veterans who were subjects in experiments conducted by DoD involving exposure to mustards and related chemical warfare agents, informing them of benefits they may be entitled to, and advising them to discuss any health concerns they may have with their Department of Veterans Affairs (VA) health care providers.

b. Mustard agents including sulfur and nitrogen mustard, and Lewisite, are chemical warfare agents that cause blistering and rashes to exposed individuals. DoD has had an active chemical warfare program since World War I, which included experiments using "soldier volunteers" designed to test protective clothing and masks, and the potential impact of chemical warfare agents on the operational readiness of military personnel. Service members were exposed in accidents, and in a single wartime incident from a German bombing attack in December 1943 on United States (U.S.) ships loaded with mustard agent in Bari, Italy. The resulting release of mustard agent resulted in thousands of injuries and hundreds of deaths among U.S. service members and others in the area.

c. Although all of these experiments were originally conducted by DoD in secret, today there is a great deal of information about them in open literature including congressional hearings, media accounts, and reviews from the National Academy of Sciences (NAS). The NAS reports, done at the request of VA and DoD, focused mainly upon the long-term health effect for service members experimentally-exposed to mustard, Lewisite, and other chemical warfare agents. Importantly, DoD has declassified essentially all the details of these experiments that could relate to health care and benefits claims of the veterans who participated.

d. Based upon the NAS reports, VA presumptively service connected certain illnesses for veterans who had been involved in "whole-body" exposures, e.g., in gas chambers or in field

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exercises involving mustard and Lewisite chemical warfare agents. **NOTE:** *This does not apply to service members receiving smaller exposures such as droplets applied to skin.*

e. Although the details of these experiments are no longer secret, many health care providers are not aware of this history, and how these experiments may have affected veteran patients today. This Under Secretary for Health Information Letter is intended to inform health care providers who may see such veterans as patients, and is based upon a Veterans Health Initiative (VHI) independent study guide, "Health Effects from Chemical, Biological, and Radiological Weapons," available at: www.va.gov/VHI.

3. Guidance

a. Attachment A is to assist VA health care providers when they are providing care to veterans who may have been exposed to chemical warfare agents including mustard agents and Lewisite as part of human experiments conducted by DoD. There are no tests available today that can confirm exposure to these agents decades in the past. Therefore, medical care needs to focus upon the current health of the veteran, e.g., taking a thorough military and medical history including information on participation in chemical warfare agent experiments, along with a basic medical examination that includes appropriate laboratory tests relating to the veteran's complaints and medical findings.

b. Review of the literature and VA policy (described more fully in Att. A) does recognize a number of illnesses as presumptively service connected among veterans with "full-body" exposure to mustard agents and Lewisite, which need to be considered during a medical examination. These include:

(1) Chronic conjunctivitis, keratitis, corneal opacities, scar formation, or the following cancers: nasopharyngeal, laryngeal, lung (except mesothelioma), or squamous cell carcinoma of the skin (from exposure to nitrogen and sulfur mustard agents only).

(2) Chronic laryngitis, bronchitis, emphysema, asthma or chronic obstructive pulmonary disease (from exposure to nitrogen and sulfur mustard agents and to Lewisite).

(3) Acute non-lymphocytic leukemia (from exposure to nitrogen mustard only).

c. Veterans need to be informed that seeking care for conditions possibly related to exposure to mustard agents and Lewisite does not constitute a claim for compensation. **NOTE:** *Veterans wishing to file a compensation claim need to be referred to a Veterans Benefits Counselor, or be advised to contact the appropriate VA Regional Office at 1-800-827-1000.*

d. Treatment of the diseases VA presumes to be from the long-term consequences of mustard agents and Lewisite exposure, such as bronchitis, cataracts, etc., is the same as the treatment of those same diseases from other causes.

e. For more information, veterans need to be informed about VA's Special Issues Help Line at 1-800-749-8387, or DoD's hotline number at 1-800-497-6261.

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4. Contact. Questions regarding this information letter may be addressed to the Environmental Agents Service (131) at (202) 273-8579.

SJonathan B. Perlin, MD, PhD, MSHA, FACP
Acting Under Secretary for Health

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ATTACHMENT A

VETERANS EXPOSED TO MUSTARD AND LEWISITE CHEMICAL WARFARE AGENTS

1. Mustard agents including sulfur and nitrogen mustard, and Lewisite, are chemical warfare agents that cause blistering and rashes in exposed individuals. Originally developed during World War I, they have been used in various conflicts around the world, perhaps most recently during the 1980s in the Iran-Iraq war, creating thousands of casualties. Although these agents are sometimes referred to as mustard gas, in fact they are not very volatile, and exposure risk is mostly through contact with liquid or small droplets in air.
2. The United States (U.S.) has maintained an active biological and chemical warfare program since World War I. Although today this program is essentially only defensive, in the past, part of this large-scale program involved the manufacture, stockpiling, and testing of chemical and biological warfare agents, munitions, and protective clothing. Mustard and related agents were the primary focus between the two World Wars. After World War II, the program shifted to newer agents including the nerve agents such as sarin and VX.
3. From its beginning, up to about 1975, part of this program involved human experimentation with “soldier volunteers.” Many of the experiments focused upon developing defensive chemical warfare capabilities, such as tests of protective clothing or respiratory masks. Other experiments were designed to evaluate the impact of various agents upon the operational readiness of military personnel who might be exposed to chemical warfare agents. Although all of these experiments were originally conducted in secret, today there is a great deal of information about them in open literature including congressional hearings, media accounts, and reviews from the National Research Council (NRC) and the National Academy of Sciences (NAS). The NAS reports, done at the request of both the Departments of Veterans Affairs (VA) and Defense (DoD) have focused mainly upon the long-term health effect for service members experimentally exposed to mustard and other chemical warfare agents. Based upon these reports, VA has presumptively service connected certain illnesses for veterans involved in “full-body” exposures, e.g., in gas chambers or in field exercises involving mustard agents.
4. Even though the details of these experiments are no longer secret, many health care providers are not aware of this history, and how these experiments may have affected their veteran patients today. This Attachment was written to inform health care providers who may see as patients some of the veterans who participated in these experiments, and is based upon a Veterans Health Initiative (VHI) independent study guide, “Health Effects from Chemical, Biological, and Radiological Weapons,” available at: www.va.gov/VHI.
- 5. World War II Human Experiments.** Military use of sulfur mustard agent caused nearly 400,000 casualties during World War I, more than from any other chemical agent used during the war (see subpar. 16h). In response, the U.S. developed its own chemical warfare program, including a secret research program intended to develop better military protective equipment. From relatively small beginnings, the U.S. military chemical warfare program expanded significantly during World War II, driven largely by the need to develop protection against the

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chemical warfare agents mustard and Lewisite known to be possessed by Axis forces. During World War II, Germany was known to possess these agents, and in fact used them against the Poles in 1939 (see subpar. 16h). Ultimately, the U.S. military concluded that animal studies were not an adequate substitute for human studies, and in 1942, U.S. military chemical weapons program managers initiated formal authority to recruit and use volunteer subjects.

6. What Experiments were Performed? By the end of World War II, over 60,000 U.S. service members had been used as human subjects in the U.S. chemical warfare defense research program (see subpar. 16h). This mostly secret research focused upon the development of better weapons and better methods for protecting against these weapons.

a. Human subjects were exposed to mustard agents and Lewisite using a wide variety of exposure protocols. Experimental treatments ranged from exposure to a small drop of agent on the arm or clothing, to quite severe exposures, such as from repeated gas chamber trials, occasionally without the benefit of protective clothing (see subpar. 16h).

b. At least 4,000 subjects were used in tests involving exposure to high-levels of mustard and related chemical warfare agents in “full body” exposures carried out in gas chambers, or as a part of field exercises over contaminated ground areas.

c. With gas chamber exposures, subjects were repeatedly placed in gas chambers filled with mustard agent or Lewisite vapor until their skin reddened as an indication of exposure or until their protective suit failed (see subpar. 16h). Commonly, subjects were given protective equipment including a gas mask, and then placed in chambers from 60 minutes to 4 hours. Twenty-four hours following such exposures, subjects were examined for reddening of the skin (erythema), i.e., evidence that the vapor had penetrated the protective clothing. Subjects were required to repeat the procedure and enter the chambers either every day, or every other day, until they developed moderate to intense erythema.

d. Most subjects apparently experienced intense erythema widespread over their bodies, especially in moist areas of skin folds, such as:

- (1) Behind the knees and under the arms;
- (2) In large areas of the chest and shoulders; and
- (3) On their arms and legs.

e. Some of these experiments involved subjects who were not provided with complete protective equipment. In those cases, exposures could be much higher, and some of these subjects experienced burns to the genital areas, including instances of crusted lesions to the scrotum that were characterized by researchers as severe (see subpar. 16h).

7. Exposures Other than from Experiments

a. **Workers.** Human experimental subjects were not the only individuals who were injured by chemical warfare agents during this period. Preparations for actual chemical warfare combat before and during World War II, involved many military and civilian personnel in the production, handling, shipping, and training to use this form of weapon (see subpar. 16h).

(1) By the end of World War II, the U.S. had produced more than 87,000 tons of sulfur mustard, 20,000 tons of Lewisite, and 100 tons of nitrogen mustard at Edgewood Arsenal, MD; Huntsville Arsenal, AL; Pine Bluff Arsenal, AR; and Rocky Mountain Arsenal, CO (see subpar. 16h). Not surprisingly, producing these large amounts of materials for the U.S. military required tens of thousands of workers, both military and civilian. Many military service members were trained to handle these weapons or were assigned to jobs that put them in contact with mustard agents or Lewisite (see subpar. 16h).

(2) The number of documented injuries among those involved with this program was initially “quite high” (see subpar. 16h). According to the NAS, one study of accidental injuries among this group reported over 1,000 cases over a 2-year period at Edgewood Arsenal of mustard poisoning resulting in eye, ear, nose, and throat symptoms.

b. **War-Time Exposure.** By the end of World War II, there was only a single military incident involving these weapons. A German bombing attack in December 1943 on U.S. ships loaded with mustard agent docked in the Italian harbor of Bari, Italy, released mustard agent into the air and water. This incident resulted in thousands of injuries and hundreds of deaths among U.S. service members and others in the area. In the immediate area of the harbor, over 600 victims of mustard poisoning were treated, 83 died (see subpar. 16h). Close to 1,000 civilians from the nearby town also died. Because the presence of the mustard agent in these ships was secret, many of the victims did not receive rapid appropriate decontamination, and thus, severe exposures continued over many hours. Long-term health effects in this population have not been evaluated (see subpar. 16h).

8. Secrecy and a Growing Awareness

a. Most of the soldier-volunteer subjects of these experiments conducted by the U.S. military were told at the time that they should never reveal the nature of the tests, and apparently, almost to a man, they kept this secret for the next 40 or more years (see subpar. 16h). Nevertheless, the experiments began to generate public attention as some World War II veterans began to seek compensation from VA for health problems that they believed were caused by their experimental exposures to mustard agents or Lewisite.

b. Because of the secrecy in which these experiments were conducted, veterans faced significant difficulties in obtaining the documentation they needed to support their disability claims for long-term health problems resulting from the experiments. Commonly, the periods of time spent as volunteers in the World War II mustard agents and Lewisite experiments were

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unaccounted for in official service records. Veterans filing compensation claims therefore had significant difficulty providing any documentation of their participation (see subpar. 16h).

c. Further, many of these veterans experienced the denial of government agencies that such tests and related activities had actually ever occurred (see subpar. 16h). Compounding veterans' difficulties, there was little scientific or medical information on long-term health effects from exposure to the chemical warfare agents used in these experiments; existing literature focused almost exclusively on short-term effects.

d. During their investigation into the history of World War II era experiments, the 1993 Institute of Medicine (IOM) Committee complained that "an atmosphere of secrecy still exists to some extent regarding the World War II testing program." Further, "[a]s a result, the committee often had great difficulty obtaining information." "The committee is certain that other relevant information exists that was never obtained." Finally, "[i]t is also clear that there may be many exposed veterans and workers who took an oath of secrecy . . . and remain true to that oath even today."

e. Nevertheless, mounting pressure from veterans, the press, and Congress on VA to resolve these issues led Secretary of Veterans Affairs, Edward J. Derwinski, on June 11, 1991, to announce new guidelines for compensation of veterans who had been subjects of the World War II mustard agents and Lewisite experiments. These new guidelines were helpful for these veterans because they loosened the normal requirements for documentation of participation in such activities, and clearly identified certain specific illnesses that VA acknowledged as being long-term effects from exposure to the chemical warfare agents involved.

f. As part of this overall response, in 1991 the Secretary of Veterans Affairs requested that the IOM conduct their 1993 review of the relevant medical literature on human health effects from exposure to mustard agents and Lewisite experiments conducted by the U.S. military during World War II on over 60,000 U.S. service members.

9. Long-Term Health Effects among Experimental Subjects

a. The 1993 NAS review "Veterans at Risk: Health Effects of Mustard Gas and Lewisite," concluded that there was no doubt that some involved in those World War II era mustard agents and Lewisite chemical warfare agent experiments had been coping with serious and debilitating diseases for decades (see subpar. 16h).

b. According to the earlier 1984 NRC report, records indicate that many human subjects exposed to mustard agents and Lewisite in these experiments sustained dermal injuries possibly severe enough to cause permanent scarring (see subpar. 16e).

c. The NAS Committee further complained that there were no epidemiological studies done of chemical weapons production workers, chemical warfare munitions handlers and trainers, or chemical weapon combat casualties from World War II (see subpar. 16h). Lack of relevant follow-up health assessments of the human subjects in these experiments limited the assessment and understanding of long-term health consequences.

10. Immediate Health Effects

a. Cases of actual military use of mustard agents, including during World War I and the Iran-Iraq war, provides some insights into the health effects from exposure to these materials. Probably the largest military application of mustard agent was during the 1980's Iran-Iraq war (see subpar. 16h).

b. Some of the Iranian mustard agent casualties from that conflict were treated in European hospitals, and their medical status and treatments were well documented.

(1) In that example, casualties suffered from pulmonary, eye, and skin lesions at similar incidence levels as observed among mustard agent casualties during World War I:

- (a) Eighty percent to ninety percent of sulfur mustard casualties suffered skin lesions,
- (b) Eighty-six percent suffered eye involvement, and
- (c) Seventy-five percent had pulmonary damage (see subpar. 16h).

(2) Among the Iranian casualties:

- (a) Eighty-three percent suffered skin lesions,
- (b) Ninety-two percent had eye problems, and
- (c) Ninety-five percent had pulmonary damage (see subpar. 16h).

11. Long-Term Health Effects. Despite having only limited medical literature on long-term health effects from exposure to mustard agents and Lewisite, in their 1993 review, the NAS Committee concluded that there was some information linking exposure to these agents and certain long-term health effects. They broke down their findings based on the strength of the supporting evidence as:

a. **Causal Relationships.** The NAS Committee found evidence indicating a causal relationship between exposure to mustard and Lewisite chemical warfare agents and the following health conditions:

- (1) Respiratory cancers including:
 - (a) Nasopharyngeal,
 - (b) Laryngeal, and
 - (c) Lung.

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(2) Skin effects including:

(a) Cancer,

(b) Pigmentation abnormalities of the skin,

(c) Chronic skin ulceration and scar formation, and

(d) Leukemia (typically acute non-lymphocytic type, from nitrogen mustard).

(3) Chronic respiratory diseases including:

(a) Asthma,

(b) Chronic bronchitis,

(c) Emphysema,

(d) Chronic obstructive pulmonary disease, and

(e) Chronic laryngitis.

(4) Ocular effects including:

(a) Recurrent corneal ulcerative disease (includes corneal opacities; acute severe injuries to eye from Lewisite will also persist);

(b) Delayed recurrent keratitis of the eye; and

(c) Chronic conjunctivitis.

(5) Bone marrow depression and (resulting) immunosuppression (an acute effect that may result in greater susceptibility to serious infections with secondary permanent damage to vital organ systems).

(6) Psychological disorders including:

(a) Mood disorders,

(b) Anxiety disorders (including post-traumatic stress disorder), and

(c) Other traumatic stress disorder responses. **NOTE:** *These may result from traumatic or stressful features of the exposure experience, not a toxic effect of the agents themselves.*

(7) Sexual dysfunction (scrotal and penile scarring that may prevent or inhibit normal sexual performance or activity).

b. **Suggested Causal Relationship.** The NAS Committee found evidence indicating suggested a causal relationship between exposure and the following health conditions:

- (1) Leukemia (acute non-lymphocytic type, sulfur mustard); and
- (2) Reproductive dysfunction (genotoxicity, mutagenicity, etc., from mustard agents).

c. **Insufficient Evidence of a Causal Relationship.** The NAS committee found insufficient evidence found to demonstrate a causal relationship between exposure and the following health conditions:

- (1) Gastrointestinal diseases;
- (2) Hematologic diseases;
- (3) Neurological diseases;
- (4) Reproductive dysfunction (from Lewisite); and
- (5) Cardiovascular diseases (except for those that may result from serious infections shortly following exposure; for example, heart disease resulting from rheumatic fever).

12. VA Presumptive Service Connections. Based upon these findings, VA announced that a variety of diseases would be presumptively connected to military service, among military members with “full body” exposures to mustard agents during military service (Title 38 Code of Federal Regulations (CFR) §3.316, “Claims based on chronic effects of exposure to mustard gas”). Exposure to nitrogen and sulfur mustard agents or to Lewisite during active military service with the subsequent development of certain illnesses are now presumed to be service connected (except if the condition is due to willful misconduct or there is clear evidence establishing a non-service related connection). Thus, service connection is presumed for veterans who experienced full-body exposure to certain chemical warfare blister agents during active military service and subsequently develop:

- a. Chronic conjunctivitis, keratitis, corneal opacities, scar formation, or the following cancers: nasopharyngeal, laryngeal, lung (except mesothelioma), or squamous cell carcinoma of the skin (from exposure to nitrogen and sulfur mustard agents only).
- b. Chronic laryngitis, bronchitis, emphysema, asthma or chronic obstructive pulmonary disease (from exposure to nitrogen and sulfur mustard agents and to Lewisite).
- c. Acute non-lymphocytic leukemia (from exposure to nitrogen mustard only).

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13. Recent Epidemiological Studies on Long-Term Health Effects

a. The 1993 NAS Committee's call for new high-quality epidemiological research on these veterans was answered when in 2000 VA's Environmental Epidemiology Service reported a retrospective mortality study of 1,545 World War II Navy veterans experimentally exposed to low-levels of mustard agent at U.S. military facilities in Edgewood, MD. Previously, there had not been studies to evaluate possible long-term health affects among this group. Mortality among these subjects was compared to 2,663 similar Navy veterans who were not part of these experiments (see subpar. 16a). These test participants were ideal for this study, because every one of them had been stationed at the same location in Bainbridge, MD, between 1943 and 1945, when these experiments had occurred. This feature made it relatively straightforward to locate participants years later.

b. The VA study reported no increased risk associated with mustard agent exposure, for any cause of death, and no increased risk in cause-specific mortality associated with level of mustard agent exposure among exposed veterans (see subpar. 16a). In contrast, earlier studies of World War I veterans exposed to mustard agents during that war reported increased risk of death from lung cancers and respiratory related diseases. The 1984 NRC Committee reported that studies of these mustard agent exposed World War I veterans determined that 10 years after their wartime exposure, veterans had residual disabilities including chronic bronchitis (usually associated with emphysema), bronchial asthma, chronic conjunctivitis, blepharitis, keratitis, and corneal opacities (see subpar. 16e).

c. VA researchers speculated that apparent differences between theirs and the earlier studies could reflect that the veterans in the Edgewood Arsenal experiments that they studied, in contrast to many World War I veterans, wore protective clothing and were exposed for relatively short periods of time to relatively lower levels of agents (see subpar. 16a). Because of the large sample size available for this VA study, it had substantial statistical power, with a 95 percent power to detect a two or greater increase of risk of deaths due to respiratory cancers (see subpar. 16a). Moreover, since exposures occurred over 40 years before this study, all possible long-term health effect would have had time to reveal themselves.

14. Psychological Impact of Test Participation

a. Not surprisingly, the mere act of participation in experiments such as these can lead to long-term psychological effects. For example, the evaluation of veteran subjects of DoD's mustard agent experiments found significant rates of Post-traumatic Stress Disorder (PTSD) when compared to controls that did not participate in those experiments.

b. For example, researchers at VA's National Center for PTSD used structured interviews to assess PTSD and other psychosocial outcomes among twenty-four subjects of World War II mustard agent experiments (see subpar. 16f).

(1) Ninety-two percent reported they had volunteered for the original mustard experiments.

(2) Ninety-six percent had participated in gas chamber exposure tests during the mustard agent tests.

(3) Twenty-two percent of the subjects reported that they understood the dangers involved.

(4) Sixty-seven percent were ordered to not discuss their participation with anyone.

c. Similar effects have also been reported among survivors of the 1995 terrorist attack with the chemical warfare agent sarin against civilians in the Tokyo subway system (see subpar. 16c, and subpar. 16d).

d. Most of these human subjects (83 percent) reported experiencing physical symptoms following the experimental mustard agent exposures. These same subjects were examined by researchers again nearly 5 decades later. In comparison with men of similar age, they were found to still be suffering effects including being less psychologically and physically healthy. Similarly, they were also found to suffer a remarkably high PTSD prevalence of 17 percent. The current-prevalence of sub-diagnostic mustard-gas-related PTSD was 25 percent. Lifetime estimates for full and sub-diagnostic PTSD were reported to be 17 and 33 percent, respectively. Strikingly, the only mustard gas experience that predicted lifetime full or sub-diagnostic PTSD was the number of exposures to the gas (see subpar. 16g).

e. A related study evaluated PTSD among 363 veterans randomly selected from a VA list of veterans who had been subjects in DoD's mustard agent experiments during World War II. Investigators reported:

(1) Thirty-two percent of these veterans suffered from full-PTSD, and

(2) Ten percent for partial-PTSD.

(3) PTSD prevalence among these subjects was found to be a function of risk and protective factors, including:

(a) Volunteering,

(b) Physical symptoms during the tests, and

(c) Participants were forbidden from disclosing what happened to them.

(4) Veterans with full PTSD reported:

(a) Poorer physical health,

(b) A higher likelihood of several chronic illnesses,

(c) Health-related disability,

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- (d) Greater functional impairment, and
- (e) Higher likelihood of health care use than those with no PTSD.

(5) Veterans with partial PTSD also had poorer outcomes than did veterans with no PTSD in some of these health areas (see subpar. 16f).

15. Is There a Test to Verify Exposure to Mustard And Lewisite? Mustard agents and Lewisite are rapidly absorbed, metabolized, and excreted from the body. Metabolites indicating exposure can be detected in urine within minutes to hours following exposure. However, metabolism and excretion of these compounds is generally complete within days of an exposure in cases where the individual survives the initial exposure. Consequently, there is no test available today that can confirm exposure to these chemical warfare agents that may have occurred months or years in the past.

16. References

- a. Bullman T, Kang H. "A Fifty-year Mortality Follow-up Study of Veterans Exposed to Low-level Chemical Warfare Agent, Mustard Gas," Annals of Epidemiology. 10:333-338:2000.
- b. Kadivar H, Adams, SC. "Treatment of Chemical and Biological Warfare Injuries: Insights Derived from the 1984 Iraqi Attack on Majoon Island," Military Medicine. 156:171-172:1991.
- c. Ohbu S, Yamashina A, Takasu N, Yamaguchi T, Murai T, Nakano K, Matsui Y, Mikami R, Sakurai K, Hinohara S. "Sarin Poisoning on Tokyo Subway," Southern Medical Journal. 90(6):587-93:1997.
- d. Okumura T, Takasu N, Ishimatsu S, Miyanoki S, Kumada K, Tanaka K, Hinohara S. "Report on 640 victims of the Tokyo Subway Sarin Attack," Annals of Emergency Medicine. 28:129-136:1996.
- e. Possible Long-Term Health Effects of Short-Term Exposure to Chemical Agents, Vol. 2, Cholinesterase Reactivators, Psychochemicals, and Irritants and Vesicants. Committee on Toxicology, Board on Toxicology and Environmental Health Hazards, National Research Council, National Academy Press, Washington, DC. 333 pp:1984.
- f. Schnurr PP, Ford JD, Friedman MJ, Green BL, Dain BJ, Sengupta A. "Predictors and Outcomes of Posttraumatic Stress Disorder in World War II Veterans Exposed to Mustard Gas," Journal of Consulting and Clinical Psychology. 68(2):258-68:2000.
- g. Schnurr PP, Friedman MJ, Green, BL. "Post-traumatic Stress Disorder Among World War II Mustard TGas Test Participants," Military Medicine. 161(3):131-6:1996.
- h. Veterans at Risk: Health Effects of Mustard Gas and Lewisite. Committee to Survey the Health Effects of Mustard Gas and Lewisite, National Academy of Sciences, Institute of Medicine, National Academy Press, Washington, DC., 427 pp:1993.

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EXHIBIT 51



JUN 30 2006

DEPARTMENT OF VETERANS AFFAIRS
Veterans Benefits Administration
Washington, D.C. 20420

<<FNAME>> <<MI>> <<LNAME>>
<<ADDRESS>>
<<CITY>>, <<STATE>> <<ZIP>>

SSN # <<SSN>>

Dear Mr. <<LNAME>>:

According to records recently released by the Department of Defense (DoD), you participated in tests at Edgewood Arsenal in Maryland during your tour of service in the <<Branch>>. The purpose of this letter is to inform you about the tests and what to do if you have related health concerns.

Information About the Tests

The tests at Edgewood Arsenal exposed participants, with their consent, to a number of different chemicals. The tests' objectives were to determine specific health effects associated with exposure, to assess various pre-and post-exposure medical treatments, and to evaluate the effectiveness of personal protective equipment. Not all volunteers were exposed to chemical agents; some received placebos (harmless substances with no health risks). Others performed stress tests without exposure to chemicals. Please see the enclosed DoD fact sheet, *Edgewood Arsenal Chemical Agent Exposure Studies: 1955-1975*, for additional information.

What You Can Discuss About the Tests

You may be concerned about releasing classified test information to your health care provider when discussing your health concerns. To former service members who participated in these tests, DoD has stated:

"You may provide details that affect your health to your health care provider. For example, you may discuss what you believe your exposure was at the time, reactions, treatment you sought or received, and the general location and time of the tests. On the other hand, you should not discuss anything that relates to operational information that might reveal chemical or biological warfare vulnerabilities or capabilities."



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<<LNAME>>, <<FNAME>> <<MI>>
SSN # <<SSN>>

If You Have Questions About the Tests

If you have questions about chemical or biological agent tests, or concerns about releasing classified information, contact DoD at (800) 497-6261, Monday through Friday, 9 a.m. to 9 p.m. Eastern time.

If You Have Health Concerns

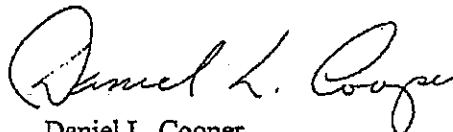
Although there is no specific medical test or evaluation for the types of exposures you might have experienced more than 30 years ago, VA is offering a clinical examination to veterans who receive this notification letter. If you have health concerns and wish to be medically evaluated, **PLEASE BRING THIS LETTER WITH YOU TO THE NEAREST VA HEALTH CARE FACILITY.** This letter will help you apply for the examination by providing needed documentation. Additional medical information about potential exposures is available through the "Environmental Health Coordinators," who are located in every VA medical center.

Note: The examination itself does not constitute, or provide eligibility for, enrollment in the VA health care system. If you are not already enrolled, you are encouraged to apply for VA health care benefits at the time you apply for the examination.

In addition to this clinical examination, if you think that you suffer from chronic health problems as a result of these tests, contact VA toll free at (800) 827-1000 to speak to a VA representative about filing a disability claim. You may also contact your local veterans service organization for assistance.

Scientists know much about many of the agents used in these tests. In order to best serve veterans and their families, VA continues to study the possibility of long-term health effects associated with in-service exposure to chemical and biological agents. If the medical community identifies such health effects, I assure you that we will share this information with you and other veterans as it becomes available to us.

Sincerely yours,



Daniel L. Cooper
Acting Under Secretary for Benefits

Enclosure

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FACT SHEET

Deployment Health Support Directorate

For more information,
1-800 497-6261

Version 07-01-2006

Edgewood Arsenal Chemical Agent Exposure Studies: 1955 – 1975

The Department of Defense is committed to share with the Department of Veterans' Affairs the databases it compiles on military personnel who participated in prior military chemical and biological operational testing. During the 1990s, the Defense Department compiled the Mustard Participant Database and from 2000 to 2003, the Projects 112/SHAD Database. The Department is currently working to catalogue tests conducted since 1942 that were not included in the earlier databases. As part of this effort, the Defense Department is cataloguing the tests that were conducted at Edgewood Arsenal, Maryland from 1955 to 1975. The Institute of Medicine (IOM) published a three-volume study between 1982 and 1985 on the long-term health effects of exposure to the chemicals tested.¹ The study did not detect any significant long-term health effects in Edgewood Arsenal volunteers.

During the 1955-1975 Edgewood Arsenal testing, the Army Chemical Corps Medical Department conducted classified medical studies involving nerve agents, nerve agent treatments (antidotes), psychochemicals (hallucinogenic drugs), irritants, and blistering agents. The purpose of the studies was to ensure that the U.S. military could adequately protect its servicemembers from possible wartime exposures to chemical warfare agents. As part of this effort, the Army conducted testing on approximately 7,000 volunteers at Edgewood Arsenal. These studies exposed participants, with their consent, to a number of different chemicals. The study objectives were to determine specific health effects associated with exposure (particularly at low dosages), to assess various pre- and post-exposure medical treatments, and to evaluate the effectiveness of personal protective equipment in preventing exposure.

The program evaluated the effects of low-dose exposures to chemical agents and their treatments, how well personnel performed mentally and physically following exposure, how easily some chemicals were absorbed into the body through the skin, and the effectiveness of personal protective equipment. Not all volunteers were exposed to chemical agents. Some only received placebos (harmless substances with no health risks) or performed stress tests without any exposure to chemicals.

Initially investigators determined exposure levels based on known safe levels in laboratory animals. They increased exposure levels only when there was a low risk of

¹ Institute of Medicine, Possible Long-Term Health Effects of Short-Term Exposure To Chemical Agents, Volumes 1-3, 1982, 1984, 1985.

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serious side effects. The study investigators assured that the exposure levels administered would not result in serious or life-threatening side effects. If required, the volunteers received treatment for any adverse health effects.

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Frequently Asked Questions
Edgewood Arsenal Chemical Agent Exposure Studies: 1955 – 1975

Q: Where did the Army get its test participants?

A: Army enlisted men assigned to installations near Edgewood Arsenal were the initial source of volunteers. Over time, the Army recruited volunteers from throughout the United States and from other Services. About 75 service members participated during each 30-60 day testing period. As a group, the volunteers selected to participate in the studies were above average in physical and mental qualifications when compared to other service members.

Q: Were study participants true volunteers?

A: The Army obtained the voluntary consent of volunteers and provided them with study information.

Q: Does the Department of Defense still conduct human experimentation with chemical agents?

A: No. Current medical chemical defense programs involving human subjects do not involve the exposure of these subjects to chemical agents.

There are medical chemical defense programs that involve the use of human subjects in controlled clinical trials to test and evaluate the safety and effectiveness, of medical products (drugs, therapies, *etc.*) to protect against chemical agents. The use of human subjects in these trials involves volunteers who have provided informed consent. All use of human subjects in these trials is in full compliance with the "Common Rule," Federal Policy for the Protection of Human Subjects, Food and Drug Administration (FDA) regulations, Federal Acquisition Regulations (FAR), DOD Directives and Instructions, and *all* other applicable laws, regulations, issuances, and requirements.

Q: What databases are the Department of Defense maintaining on veterans exposed to chemical and biological agents?

A: DoD maintains a Project 112/SHAD (Shipboard Hazard and Defense) database. This database contains the names of veterans who were participated in Project 112/SHAD testing in the 1960s and 1970s. It contains more than 6,000 names and is updated as needed when we discover additional veterans who were part of this testing. We also maintain a database containing the names of veterans who participated in mustard agent tests during World War II. We are currently in the process of populating our third exposure database, the Edgewood Arsenal Chemical Agent Exposure Studies database (1955-1975). The Edgewood Arsenal Chemical Agent Exposure Studies Database (1955-1975) is part of the database of all other chemical and biological testing since World War II.

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Q: Besides names and service numbers, what other information does the DoD database contain on the Edgewood volunteers?

A: For each individual, the database will contain the following:

- Type of test (i.e., performance, equipment etc.)
- Type of exposure (i.e., injection, intravenous (IV) etc.)
- Date of exposure
- Agent/simulant name
- Agent/simulant amount if recorded
- Treatments required as a result of the exposure
- Documents describing the test procedures, if available.

Q: Who maintains the database for veterans exposed to radiation?

A: The Defense Threat Reduction Agency maintains information on veterans exposed to radiation during the Nuclear Test Personnel Review (NTPR) Program.

Q: What types of tests were conducted at Edgewood?

A: Table 1 provides a rough breakout of volunteer hours against various experimental categories:

Incapacitating compounds (i.e. vomiting agent)	29.9%
Lethal compounds (i.e. sarin)	14.5 %
Riot control compounds (i.e. CS)	14.2%
Protective equipment and clothing (masks, rubber suits, etc.)	13.2%
Development evaluation and test procedures	12.5%
Effects of drugs and environmental stress on human physiological mechanisms (i.e. wakefulness)	6.4%
Human factors tests (ability to follow instructions)	2.1%
Other (visual studies, sleep deprivation, etc.)	7.2%

Q: Did the Army expose the volunteers to hallucinogenic compounds?

A: Yes, there were studies at Edgewood that exposed volunteers to hallucinogenic drugs like LSD. Although the current medical literature indicates that such exposure may have some long-lasting effects among some individuals, such as "flashbacks" (visual hallucinations without new drug exposure), the volunteer records from the times of the Edgewood studies did not record these kinds of after effects among the Edgewood study volunteers.

VVA-VA023652

02747

VET001_014271

VVA-VA023652

EXHIBIT 52

Salvatore, Joe

From: Brown, Mark A (VHACO)
Sent: Thursday, June 29, 2006 10:44 AM
To: Hyams, Kenneth Craig, Dr., MPH, MD; Salvatore, Joe; Van Diepen, Louise R; Moore, Michael A; Pringle, Karla; Wallick, Glen, VBAVACO; Abbot, David, VBAVACO
Cc: Allen, Martaineous L.; Jeter, Theriska; Pham, Katherine; Dembling, Doug; Deyton, Lawrence R., MSPH, MD
Subject: RE: EDMS 352753 - Edgewood Arsenal Notification Letter - Expedite

I think the DoD fact sheet has some significant inaccuracies -- the problem of course is that putting in a letter from VA appears to endorse its accuracy.

Unfortunately, this is the first time I've seen this fact sheet, and provide any comments about it.

Paragraph 1 DOD Fact Sheet last sentence: "The study did not detect any significant long-term health effects in Edgewood Arsenal volunteers."

This statement is not a correct representation of the relevant NRC reports. In fact, in their review of hospital admissions records for Army from 1958 to 1983, and VA from 1963 to 1981, the NRC investigators reported a "barely statistically significant increase in admissions to VA hospitals for malignant neoplasms among men exposed to anticholinesterases and a statistically significant increase in admissions to VA hospitals and Army hospitals for nervous system and sense organ disorders among men exposed to LSD" (NRC 1985).

In fairness, they did note that admission numbers were small, no dose relationships were observed, and, for subjects exposed to anticholinesterases, neoplasms occurred at various sites with no consistent pattern or correlation to a specific chemical (NRC 1985).

I think a more accurate wording for the fact sheet would be "The study detected few significant long-term health effects in Edgewood Arsenal volunteers." To say that there were no effects is clearly not correct and easily refutable.

Paragraph 2 DOD Fact Sheet last sentence: "The study objectives were to determine specific health effects associated with exposure (particularly with low dosages . . .)"

The phrase "particularly at low dosages" is not really accurate and is misleading.

The term "low dose" is a term of art that refers or implies exposure to sub clinical doses -- that is, doses causing no clinical poisoning signs and symptoms.

Review of the extensive literature on these tests clearly demonstrates that a great deal of the experiments, perhaps the majority, were actually designed to cause clinical poisoning signs and symptoms among experimental subjects, and therefore, not "low dose."

Many subjects had all sorts of immediate poisoning s&s including blistering, cholinergic poisoning, intense tearing, etc. and some subjects required medical attention.

I would suggest simply eliminated this phrase from the Fact Sheet, and also from the VBA letter, where apparently was copied.

From: Hyams, Kenneth Craig, Dr., MPH, MD
Sent: Thursday, June 29, 2006 10:32 AM
To: Salvatore, Joe; Brown, Mark A (VHACO); Van Diepen, Louise R; Moore, Michael A; Pringle, Karla; Wallick, Glen, VBAVACO; Abbot, David, VBAVACO

6/29/2006



01446

DVA052 000113

Cc: Allen, Martaineous L.; Jeter, Theriska; Pham, Katherine; Dembling, Doug; Deyton, Lawrence R., MSPH, MD
Subject: RE: EDMS 352753 - Edgewood Arsenal Notification Letter - Expedite

The letter looks good to us in VHA Public Health. We will approve the letter portion of this package today but would prefer (not require) two things:

1. The phrase "particularly at low dosages" be taken out of the second paragraph because some veterans were exposed to high doses of chemical agents
2. Add "DoD" to this phrase in the second paragraph "Please see the enclosed [DoD] fact sheet..." because it is not clear that this is DoD's fact sheet/interpretation and not VA's.

I would still like the VHA business office to look over this letter and relayed it to them.

thanks all -- great effort, Craig

From: Salvatore, Joe

Sent: Thursday, June 29, 2006 9:25 AM

To: Hyams, Kenneth Craig, Dr., MPH, MD; Brown, Mark A (VHACO); Van Diepen, Louise R; Moore, Michael A; Salvatore, Joe; Pringle, Karla; Wallick, Glen, VBAVACO; Abbot, David, VBAVACO

Cc: Allen, Martaineous L.; Jeter, Theriska; Pham, Katherine

Subject: EDMS 352753 - Edgewood Arsenal Notification Letter - Expedite

Importance: High

I need your assistance in ensuring that our partners in VBA receive all business line concurrences for EDMS 352753 as soon as possible, but no later than COB today.

Your expedited assistance will afford VBA exactly one business day to generate and issue some notification letters to Edgewood Arsenal veterans by July 4, 2006. In doing so, VBA can meet a verbally-mandated request from HVAC. Additionally, your actions will prevent this office from explaining to HVAC staffers why VA and DoD could not meet the deadline.

I apologize for the tight turnaround but another federal agency delayed VA's letter roll-out. Please contact me if you have any questions regarding my request. Thank you in advance.

Joe

*Joe Salvatore
Senior Policy Analyst
U.S. Department of Veterans Affairs
Office of Policy, Planning, and Preparedness
joe.salvatore@va.gov
202-273-9512*

6/29/2006

01447

DVA052 000114

EXHIBIT 53



THE UNDER SECRETARY OF VETERANS AFFAIRS FOR BENEFITS
WASHINGTON, D.C. 20420

SSN# <SSN>

<First Name> <MI> <Last Name>
<Address 1>
<City>, <State> <Zip Code>

Dear Mr./Ms. <Last Name>,

Certain documents recently declassified by the Department of Defense (DoD) show that you were exposed to mustard agents (mustard gas, sulfur mustard, nitrogen mustard) or Lewisite during your tour of service while in the <Branch of Service>. This letter provides information that you may want to consider in determining whether to file a claim for benefits from the Department of Veterans Affairs (VA) based on this exposure.

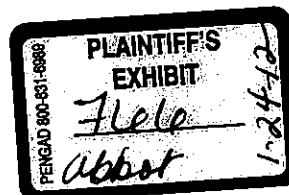
Exposure Periods and Locations

According to DoD, some chemical exposures occurred during combat or in the handling or destruction of chemical agents. However, most chemical exposures occurred in connection with World War II testing programs, via chamber, field, patch, drop, and syringe tests.

The following is a list of all known test, combat, and military occupational duty sites where exposures occurred:

- Bainbridge Naval Training Center, Maryland
- Bari, Italy
- Bushnell, Florida
- Camp Lejeune, North Carolina
- Camp Sibert, Alabama (1943-1944 only)
- Charleston, South Carolina
- Dugway Proving Ground, Utah
- Edgewood Arsenal, Maryland
- Hart's Island, New York
- Great Lakes Naval Training Center, Illinois
- Naval Research Laboratory, Virginia
- Ondal, India (1944 only)
- Rocky Mountain Arsenal, Colorado
- San Jose Island, Panama Canal Zone
- Naval Research Laboratory, Washington, D.C.
- *USS Eagle Boat No. 58*

Note: Some American servicemembers may have participated in Allied mustard agent testing in Finschhafen, New Guinea, and Porton Down, England.



Page 2

<Last Name>, <MI>, <First Name>

C# <Claim Number>

Compensation for Full-Body Exposure

VA may grant compensation to veterans who have certain diseases associated with **full-body exposure** to mustard agents or Lewisite during military service. This means that the entire body was exposed rather than just one or more locations on the skin, such as in a "patch test."

DoD has confirmed that you were subjected to full-body mustard agent or Lewisite exposure during one of the following events:

- Battlefield conditions in World War I
- Field or chamber experiments to test protective clothing or equipment during World War II
- The German air raid on the harbor of Bari, Italy in 1943

Disabilities Due to Chemical Exposure

VA has determined full-body exposure of mustard agents or Lewisite may cause certain disabilities. These include:

- (From mustard agents only) Chronic conjunctivitis, keratitis, corneal opacities, scar formation, or the following cancers: nasopharyngeal; laryngeal; lung (except mesothelioma); or squamous cell carcinoma of the skin
- (From either mustard agents or Lewisite) A chronic form of laryngitis, bronchitis, emphysema, asthma, or chronic obstructive pulmonary disease
- (From nitrogen mustard only) Acute non-lymphocytic leukemia

Health Care

Most veterans are required to apply for enrollment to receive VA health care benefits. If you are not already enrolled with your local VA health care facility we encourage you to do so at your earliest convenience. Please be aware that VA is currently not enrolling new applicants who fall into high income brackets unless they have a service-connected disability. Also, some veterans are required to make co-payments for care and/or medications provided by VA.

Page 3

<Last Name>, <MI>, <First Name>

C# <Claim Number>

What You Can Discuss About The Tests

You may be concerned about discussing your participation in mustard agent or Lewisite tests with VA or your health care provider.

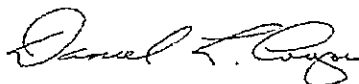
On March 9, 1993 the Deputy Secretary of Defense released veterans who participated in the testing, production, transportation or storage of chemical weapons prior to 1968 from any non-disclosure restrictions. Servicemembers who participated in such tests after 1968 are permitted to discuss the chemical agents, locations, and circumstances of exposure only, because this limited information has been declassified.

If You Have Questions or Want to File a Claim for Benefits

If you have been diagnosed with one of the disabilities discussed above, you should apply for VA disability compensation. If you believe you have any other medical condition that is related to your military service, you should also file a claim for disability compensation.

- To obtain further information or file a claim, call us at 1-800-749-8387 (then select option 4). You may speak to a VA representative from 9:00 a.m. to 5:00 p.m. Eastern time. You can also email us at MUSTARDGAS@VBA.VA.GOV. If you go to one of our regional offices, please take this letter with you.
- If you have questions about mustard agents or Lewisite, contact DoD at (800) 497-6261, Monday through Friday, 9:00 a.m. to 9:00 p.m. Eastern time.

Sincerely yours,



Daniel L. Cooper
Under Secretary for Benefits

EXHIBIT 54



SAMPLE PARTIAL-BODY MUSTARD GAS VETERAN NOTIFICATION LETTER
THE UNDER SECRETARY OF VETERANS AFFAIRS FOR BENEFITS
WASHINGTON, D.C. 20420

SSN <SSN>

<First Name> <MI> <Last Name>
<Address 1>
<City>, <State> <Zip Code>

Dear Mr./Ms. <Last Name>,

Certain documents recently declassified by the Department of Defense (DoD) show that you might have been exposed to mustard agents (mustard gas, sulfur mustard, nitrogen mustard) or Lewisite during your tour of service while in the <Branch of Service. This letter provides information that you may want to consider in determining whether to file a claim for compensation from the Department of Veterans Affairs (VA) based on this exposure.

Exposure Periods and Locations

According to DoD, some chemical exposures occurred during combat or in the handling or destruction of chemical agents. However, most chemical exposures occurred in connection with World War II testing programs, via chamber, field, and patch, drop, and syringe tests.

The following is a list of all known test, combat, and military occupational duty sites where exposures occurred:

- Bainbridge Naval Training Center, Maryland
- Bari, Italy
- Bushnell, Florida
- Camp Lejeune, North Carolina
- Camp Sibert, Alabama (1943-1944 only)
- Charleston, South Carolina
- Dugway Proving Ground, Utah
- Edgewood Arsenal, Maryland
- Great Lakes Naval Training Center, Illinois
- Hart's Island, New York
- Naval Research Laboratory, Virginia
- Ondal, India (1944 only)
- Rocky Mountain Arsenal, Colorado
- San Jose Island, Panama Canal Zone
- Naval Research Laboratory, Washington, DC
- USS Eagle Boat No. 58*



Also, some American servicemembers may have participated in Allied mustard agent testing in Finschhafen, New Guinea, and Porton Down, England.

RFP 3

VVA-VA J09387

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VET001_015113

VVA-VA 009387

Page 2

<Last Name>, <MI>, <First Name>

SSN <SSN>

Compensation for Full-Body Exposure

VA may grant compensation to veterans who have certain diseases associated with **full-body exposure** to mustard agents or Lewisite during military service. This means that the entire body was exposed rather than just one or more locations on the skin, such as in a "patch test."

Information from DoD shows that while you were exposed to mustard agents or Lewisite, this exposure was not full-body exposure. If you believe this information to be incorrect, you may contact DoD using the number provided on page 3 of this letter.

Disabilities Due to Chemical Exposure

VA has determined that full-body exposure of mustard agents or Lewisite may cause certain disabilities. These include:

- (From mustard agents only) Chronic conjunctivitis, keratitis, corneal opacities, scar formation, or the following cancers: nasopharyngeal; laryngeal; lung (except mesothelioma); or squamous cell carcinoma of the skin
- (From either mustard agents or Lewisite) A chronic form of laryngitis, bronchitis, emphysema, asthma, or chronic obstructive pulmonary disease
- (From nitrogen mustard only) Acute non-lymphocytic leukemia

Health Care

Most veterans are required to apply for enrollment to receive VA health care benefits. If you are not already enrolled with your local VA health care facility we encourage you to do so at your earliest convenience. Please be aware that VA is currently not enrolling new applicants who fall into high income brackets unless they have a service-connected disability. Also, some veterans are required to make co-payments for care and/or medications provided by VA.

What You Can Discuss About The Tests

You may be concerned about discussing your participation in mustard agent or Lewisite tests with VA or your health care provider.

On March 9, 1993 the Deputy Secretary of Defense released veterans who participated in the testing, production, transportation or storage of chemical weapons prior to 1968 from any non-disclosure restrictions. Servicemembers who participated in such tests after 1968 are permitted to discuss the chemical agents, locations, and circumstances of exposure only, because this limited information has been declassified.

Page 3

RFP 3

VVA-VAJ09388

00175

VET001_015114

VVA-VA 009388

<Last Name>, <MI>, <First Name>
SSN <SSN>

If You Have Questions or Want to File a Claim for Benefits

If you believe you have a medical condition that is related to your military service, you may file a claim for compensation benefits.

- To obtain further information or file a claim, call us at 1-800-749-8387 (then select option 4). You may speak to a VA representative from 9:00 a.m. to 5:00 p.m. Eastern time. You can also email us at MUSTARDGAS@VBA.VA.GOV. If you go to one of our regional offices, please take this letter with you.
- If you have questions about mustard agents or Lewisite, contact DoD at (800) 497-6261, Monday through Friday, 9:00 a.m. to 9:00 p.m. Eastern time.

Sincerely yours,

Daniel L. Cooper
Under Secretary for Benefits

RFP 3

VVA-VAJ09389

00176

VET001_015115

VVA-VA 009389

EXHIBIT 55



SAMPLE SURVIVING SPOUSE MUSTARD GAS NOTIFICATION LETTER

THE UNDER SECRETARY OF VETERANS AFFAIRS FOR BENEFITS
WASHINGTON, D.C. 20420

XC# <ClaimNumber>

<FirstName> <MI> <LastName>
<Address 1>
<Address 2>
<City>, <State> <ZipCode>

Dear Mr./Ms. <LastName>,

I am sending you this letter in connection with your late spouse's service while in the <Branch>. The Department of Veterans Affairs (VA) received declassified documents from the Department of Defense (DoD) listing servicemembers who were exposed to chemicals during their tours of duty. Most of these chemical exposures occurred in testing programs during World War II. According to these records, <FirstName> <MI> <LastName> was exposed to mustard agents (mustard gas, sulfur mustard, nitrogen mustard) or Lewisite during his/her tour of duty.

Disabilities Due to Chemical Exposure

VA has determined full-body exposure of mustard agents or Lewisite may cause certain disabilities. These include:

- (From mustard agents only) Chronic conjunctivitis, keratitis, corneal opacities, scar formation, or the following cancers: nasopharyngeal; laryngeal; lung (except mesothelioma); or squamous cell carcinoma of the skin
- (From either mustard agents or Lewisite) A chronic form of laryngitis, bronchitis, emphysema, asthma, or chronic obstructive pulmonary disease
- (From nitrogen mustard only) Acute non-lymphocytic leukemia

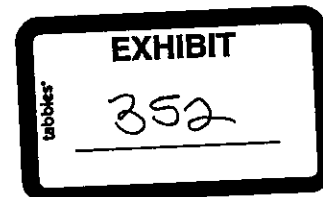
If You Have Questions or Want to File a Claim for Survivors' Benefits

VA will pay benefits to survivors of veterans who died as a result of a condition related to their military service. If you believe one of the above conditions, (or any other condition related to your spouse's military service) caused or significantly contributed to his/her death, you should apply for VA survivors' benefits.

- To obtain further information or file a claim, call us at 1-800-749-8387 (then select option 4). You may speak to a VA representative from 9:00 a.m. to 5:00 p.m. Eastern time. You can also email us at MUSTARDGAS@VBA.VA.GOV. If you go to one of our regional offices, please take this letter with you.
- If you have questions about mustard agents or Lewisite, contact DoD at (800) 497-6261, Monday through Friday, 9 a.m. to 9 p.m. Eastern time.

Sincerely yours,

Daniel L. Cooper
Under Secretary for Benefits
RFP 3



VVA-VA J09390

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VVA-VA 009390

EXHIBIT 56

Outreach Activities

Compensation and Pension Service

Military Personnel – Active Duty

Accession. Since November 2004, everyone inducted into the five military branches receives VA Pamphlet 21-00-1, *A Summary of VA Benefits*, through Military Entrance Processing Stations (MEPSs). This arrangement, made by VA with the Department of Defense (DoD), assures that inductees receive basic information about VA benefits and services to which they may become eligible. MEPSs process virtually all enlisted personnel on active duty. In June 2006, VA Pamphlet 21-00-1 was distributed to graduates of the military service academies.

Transition Assistance Program (TAP) and Other Military Services Briefings. To date, VBA representatives have conducted the following transition briefings and related personal interviews. These briefings include pre and post deployment briefings for Reserve and National Guard members, and those conducted overseas.

OVERALL BRIEFINGS

<i>Fiscal Year</i>	<i>Briefings</i>	<i>Attendees</i>	<i>Interviews</i>
2003	5,840	210,025	102,402
2004	7,834	276,574	122,120
2005	8,184	326,664	124,092
2006	8,541	393,345	93,431
2007	8,154	296,855	100,976
2008	8,708	299,093	90,694
2009	8,593	356,810	97,947
*2010	1,090	55,166	12,778

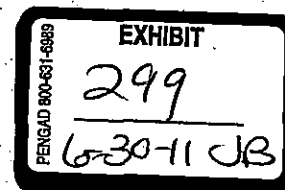
* FY 2010 figures are current through November 2009.

The following data (Overseas and Reserve/Guard Briefings) is included in the above data for overall military services briefings.

OVERSEAS BRIEFINGS

<i>Fiscal Year</i>	<i>Briefings</i>	<i>Attendees</i>	<i>Interviews</i>
2003	472	12,943	5,050
2004	624	15,183	6,544
2005	686	17,156	7,294
2006	498	11,585	3,005
2007	590	12,318	2,697
2008	829	15,170	2,405
2009	951	20,053	2,634
*2010	149	4,100	585

* FY 2010 figures are current through November 2009.



RESERVE/GUARD BRIEFINGS

<i>Fiscal Year</i>	<i>Briefings</i>	<i>Attendees</i>	<i>Interviews</i>
2003	821	46,675	N/A
2004	1,399	88,366	N/A
2005	1,984	118,658	N/A
2006	1,298	93,361	10,515
2007	1,868	96,355	11,488
2008	1,725	83,152	14,358
2009	1,738	133,239	17,495
*2010	225	13,099	1,441

* FY 2010 figures are current through November 2009.

Secretary's Letter. The Secretary sends a personal letter to each returning OEF/OIF Veteran based on lists routinely provided by the Department of Defense.

Recently Separated Veterans

Veterans Assistance at Discharge System (VADS). The VADS process generates the mailing of a "Welcome Home Package" that includes a letter from the Secretary, VA Pamphlet 21-00-1, *A Summary of VA Benefits*, and VA Form 21-0501, *Veterans Benefits Timetable*, to all Veterans recently separated or retired from active duty. VADS also sends a six-month follow up letter with the same enclosures to these Veterans.

Gulf War Veterans

C&P's main outreach to Gulf War Veterans is accomplished through the *Gulf War Review* newsletter, which is issued three to four times annually. The newsletter is mailed to about 220,000 Veterans who are on the Gulf War Registry and to other interested individuals.

The feature article of the March 2003 *Gulf War Review* focused on Public Law 107-103, Section 202 (Gulf War Veterans' Chronic Disabilities), which added fibromyalgia, chronic fatigue syndrome, and irritable bowel syndrome as qualifying chronic disabilities for which service connection, due to Gulf War service, may be granted. C&P mailed a copy of the March *Gulf War Review* to approximately 5,200 Veterans who had been previously denied service-connection for these conditions.

C&P added a special Gulf War Helpline to support Gulf War Veterans with information and assistance about benefits and services, particularly those unique to Gulf War Veterans. There were 29,197 interviews conducted on the Helpline in FY 2003; 11,842 in FY 2004; 12,766 in FY 2005; 6,749 in FY 2006; 5,781 in FY 2007; 3,115 in FY 2008; 4,062 FYTD 2009 and 305 FYTD 2010.

Vietnam Veterans Exposed to Agent Orange

The major ongoing outreach initiative for Veterans who served in-country Vietnam remains the *Agent Orange Review* newsletter published two to three times annually by VHA in partnership with VBA. The purpose of the newsletter is to keep Vietnam Veterans updated on new medical studies, changes in benefits, and other related information. The newsletter is sent to Veterans on the Agent Orange Registry, Veterans in C&P records with an in-country Vietnam indicator, and to other interested parties. It is mailed to approximately 600,000 in-country Vietnam Veterans.

C&P Outreach staff implemented special outreach programs as necessary to meet and respond to legislative changes, court decisions, etc. For example, in FY 2003, letters were sent to Veterans affected by the December 2002 US Court of Appeals for the Federal Circuit decision regarding the effective date of the regulation adding type II diabetes to the herbicide presumptive list. Approximately 25,000 Veterans were individually notified about this decision.

The Agent Orange Helpline continues to operate with 9,698 interviews conducted in FY 2003, 6,912 in FY 2004, 7,379 in FY 2005, 9,438 in FY 2006, 13,038 in FY 2007, 7,480 FY 2008; 3,240 FYTD 2009 and 795 FYTD 2010.

Elderly and Low Income Veterans – “Pension Outreach”

The data noted below was obtained from the Vetsnet Operations Reports, which is comprised on the number of claims pending and completed during the month of November 2009 for Veterans age 70 and over.

Date	Number of claims pending	Average days pending	Number of claims completed	Average days to completed
11/30/09	65,532	110	14,297	145

During the month of November 2009, the Veterans Services Outreach staff contacted representatives from the Assisted Living Federation of America (ALFA); American Association of Retired Persons (AARP), and the United States Department of Agriculture (Farm Services Agency) (FSA), to obtain registration information for attending events and staffing VA benefits information booths during their scheduled 2010 events. We plan on attending these events to enhance outreach to Elderly and Low Income Veterans. During the latter part of November 2009, we received general information from ALFA regarding their Conference and Expo, scheduled for May 25-27, 2010, in Phoenix, Arizona, including AARP's 50+ National Event and Expo, scheduled for September 30 – October 2, 2010, in Orlando, Florida. We will be contacting them during the month of January 2010 to obtain a cost estimates for booths. We are still awaiting information from FSA.

VBA Elderly Outreach Veterans Coordinators participate in various scheduled events where elderly Veterans and surviving spouses gather such as senior citizen centers, nursing homes, senior day care centers, etc. Outreach coordinators have established relationships with local Area Agencies on the Aging, Social Security Administration (SSA) offices, health care providers, and other agencies and organizations that deal with older Americans.

During the month of November 2009, VBA distributed more than one hundred and thirty nine thousand copies of VA Pamphlet 20-00-1, *A Summary of VA Benefits*, to the more than 1,300 SSA offices nationwide. The pamphlet is distributed in both English and Spanish. Regional offices are asked to contact the local SSA offices in their jurisdiction to ensure that systems were in place to refer Veterans and their spouses between the two agencies. VBA continues to work on a new outreach initiative for this targeted population. VBA staff members have held meetings with VHA officials, representatives of the Administration on the Aging under the Department of Health and Human Services, the American Association of Retired Persons, the Assisted Living Federation of America, and the National Funeral Directors Association to develop new avenues for reaching low income, elderly Veterans and surviving spouses.

Women Veterans

United States Code (U.S.C.) Title 38 requires the Department of Veterans Affairs (VA) to promote the use of VA benefits, programs and services by Women Veterans and to assess the needs of Women Veterans. Public law 98-160 established VA's Advisory Committee on Women Veterans in November 1983. This led to VA developing Women Veterans outreach programs at each facility in February 1984, and the establishment of the Women Veterans Coordinator (WVC) in each VA Regional Office (VARO) throughout the country.

Women Veterans Coordinators establish and maintain contact with various federal, state and local government organizations, as well as Veterans Service Organizations, in order to utilize their resources in fulfillment of program objectives. They meet periodically with various organizations representing Women Veterans and/or with Women Veterans to verbally present information concerning benefits and to receive information regarding their concerns and answer questions.

They maintain vigilance in the community through town hall meetings, conversations with Veterans, visits to local Women Veterans' groups and organizations, civic and religious groups, and through health fairs and Veteran information booth/displays.

Women Veterans Coordinators are encouraged to work together to conduct joint outreach initiatives and solicit the support of other VAROs, Veterans Health Administration (VHA) and/or the National Cemetery Administration (NCA) when conducting or participating in town hall meetings, health fairs and Veterans information forums. Regardless of the involvement of other VA business lines or agencies in planned outreach sessions, issues presented by Veterans will be handled by the on-site participants and appropriately referred to the business lines for follow up action. Veterans Benefits Administration (VBA) representatives at the national and local levels work closely with

the Center for Women Veterans, the VHA Women Veterans Health Strategic Health Care Group, and the Secretary's Advisory Committee on Women Veterans to improve outreach to Women Veterans.

The Veterans Benefits Administration sponsored a Women Veterans Coordinators Training Conference, August 17-21, 2009, in St. Paul, Minnesota. The WVC Training Conference was designed to provide WVCs with the necessary skills to more effectively perform their duties for their respective VA Regional Offices. Presentation topics included Personal Trauma as it relates to compensation, health care, employment and counseling; challenges during and after deployment for guard and reserve members; Veterans Health Administration initiatives; and, education and family issues. Subject matter experts and guests from VHA, the Center for Women Veterans, the Center for Minority Veterans, National Cemetery Administration, and the Department of Defense (Sexual Assault Prevention and Response Office), as well as VBA Senior Leadership, were also present.

During the fourth quarter of FY2009, Compensation and Pension Service released "*VA Benefits and Services for Women Veterans*," the first pamphlet exclusively for Women Veterans. The pamphlet will feature information about VA benefits including personal trauma, gender specific disabilities, and Women Veterans health care. This pamphlet will be used in conducting outreach specifically to Women Veterans.

Homeless Veterans

In response to Public Law 107-95, VBA established full-time Homeless Veterans Outreach Coordinators (HVOCs) at 20 regional offices in early FY 2003. Part-time coordinators are assigned at all other regional offices.

C&P Service's program manager for homeless Veterans outreach conducts quarterly national teleconferences with HVOCs. During the teleconferences, information on homeless legislation, stand-downs, grants, reporting homeless Veterans claims data, and more is discussed.

In October 2003, the directors of 10 regional offices joined the executive committee of their area's Regional Council of the Interagency Council on Homelessness (ICH). They were selected based on their proximity to each of the ICH Regional Council's base city. The HVOC for each of those offices participates in the ICH regional working group. VA representatives have key roles in implementing the national plan to end chronic homelessness in 10 years.

VBA HVOCs actively participate in stand-downs for homeless Veterans. Stand downs are typically one to three day events providing services to homeless Veterans such as food, shelter, clothing, health screenings, VA and Social Security benefits counseling, and referrals to a variety of other necessary services, such as housing, employment and substance abuse treatment. They are collaborative events, coordinated between local VA facilities, other government agencies, and community agencies that serve the homeless.

Stand-downs have been used as an effective tool in reaching out to and assisting homeless Veterans.

There were 183 Stand Downs conducted during the 2009 calendar year. VBA participated in 25.7% (47) of the Stand Downs. VBA's participation in Stand Downs decreased by 33.3% (61) compared to last year's participation. A total of 33,418 Veterans was served.

VBA HVOCs work closely with their VHA counterparts and participate in various homeless programs available at local VA medical centers such as the Homeless Chronically Mentally Ill (HCM/I) Program, Veterans Industries, and Domiciliary Care for Homeless Veterans; Comprehensive Homeless Centers, etc. VBA representatives also work with the Social Security Administration and the Department of Labor in implementing Grant and Per Diem programs for the homeless.

The following outreach activities relating to assisting homeless Veterans were reported by regional offices:

Activity	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009	FYTD 2010
Shelters Contacted	2,988	4,347	4,247	4,245	4,434	3,277	2,982	318
Agencies Contacted	3,669	4,780	4,803	6,445	5,053	4,932	4,039	484
Referred to HCM/DOL*	7,793	8,606	7,416	5,605	4,006	3,417	3,809	496
Seeking Assistance from RO**	25,367	37,232	34,631	32,993	28,962	30,598	27,762	5,727

*VHA and DOL's Jobs for the Homeless program

**Personal & telephone interviews with homeless Veterans

VBA's Incarcerated Veterans Internet and Intranet web sites are completed, and went live in March 2009. The Internet web site can be found at <http://www.vba.va.gov/bln/21/Benefits/Incarcerated/index.htm>. The Intranet web site can be found at http://vbaw.vba.va.gov/bl/21/outreach/out_home.htm, click on "Incarcerated Veterans."

The C&P Service participates in the Advisory Committee on Homelessness meetings semiannually. C&P Service spoke at the Advisory Committee meeting held in Washington, DC, on November 2, 2009. An update on the status of the Advisory Committee's recommendations was provided. C&P is testing a new report that track and monitor homeless Veterans (HV) claims for all regional offices. The report runs off of VETSNET, and it is in the final testing phase. New reports are anticipated to be available by the end of December 2009; and a Fast Letter (two-fold) was drafted to combine the positions of the HVOCs and the Incarcerated Veteran Coordinator (IVC) positions, and it defines the role and duties of the HVOC/IVC at the Regional Offices.

The Veterans Health Administration Homeless Program and the Department of Veterans Affairs Office of Mental Health Services held a three day conference "Homeless Veteran Summit" at the Washington Marriott Wardman Park Hotel, Washington, DC, November 3-5, 2009. Among the 1300 VA clinicians and health care specialists, and representatives of federal agencies at the conference, twelve representatives from VBA (Central Office and Regional Offices) were in attendance. The summit was a historic event that signaled the beginning of Secretary's Shinseki's campaign to end Veteran homelessness in five years.

Eligible Dependents & Survivors

Casualty Assistance – In-Service Deaths

Regional office Casualty Assistance Officers (CAOs) visit family members and assist them in applying for benefits. These visits are coordinated with military CAOs under a Casualty Assistance Program arrangement of the Casualty Advisory Board (CAB). The CAB meets quarterly to discuss ideas to serve survivors in a timely manner. The CAB membership includes the Assistant Director for Veterans Services, Compensation & Pension Service, and representatives from DoD as well the various military service departments.

C&P streamlined the DIC application process through the use of a simplified one-page application form that is faxed to the VA Regional Office and Insurance Center in Philadelphia where those claims are centralized. VBA's goal is to process all in-service death claims within 48 hours of receipt of all required documents. At the time of the initial visit, family members are in an acute stage of grief and are not always able to absorb and understand the full range of benefits available to them. To ensure that surviving spouses and dependent children are aware of all benefits, C&P mails a six month follow up letter to surviving spouses reminding them of the benefits and services. VA offers bereavement counseling to parents, spouses, and children of Armed Forces personnel who died in the service of their country. Family members of Reserve and National Guard members are provided these same services. A special brochure, VA Pamphlet 21-02-1, *Benefits and Services for Survivors of Service members Who Die on Active Duty*, is given to survivors.

The following table depicts the summary insurance and DIC claims paid for OEF/OIF casualties divided into two categories, Insurance and DIC.

Insurance	OEF	OIF
Total casualties certified by Branch of Service	912	4,334
Total beneficiaries designated	1,232	6,018
Total beneficiaries paid	1,232	6,018
DIC	OEF	OIF
Total claims received	610	3,077
Total claims paid	607	3,077

8-09

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*Date cumulative through December 31, 2009

Other Eligible Dependents & Survivors

Regional offices mail VA Pamphlet 21-03-1, *VA Benefits for Survivors*, to dependents indicated on VA Form 21-2008, *Application for a United States Flag for Burial Purposes*. Approximately 600,000 applications are received annually.

First Time Applicants

Regional offices include VA Form 21-0760, *VA Benefits in Brief*, with all acknowledgment letters for Compensation, Pension, and Education claims. Regional offices also mail Veterans and surviving spouses using home loan guaranty benefits a copy of VA Pamphlet 20-00-01, *A Summary of VA Benefits*, at loan closure.

Project 112/SHAD (Project Shipboard Hazard & Defense)

Background: Project 112/SHAD was part of the joint service chemical and biological warfare test program conducted during the 1960s and early 1970s. Project SHAD encompassed tests designed to identify U.S. warships' vulnerabilities to attacks with chemical or biological warfare agents and to develop procedures to respond to such attacks while maintaining a war-fighting capability.

On June 30, 2003, the Department of Defense (DoD) completed its investigation of the Project 112/SHAD operational tests. DoD planned 134 tests but conducted only 50. As of July 2008, DoD has provided VA with the names of 6,442 Veterans who participated in Project 112/SHAD tests.

Most Recent Updates: In June 2008, it was noted that VBA had received 752 claims initially identified as Project 112/SHAD claims. We adjusted this number by 111 claims found not to be Project 112/SHAD claims. The number of actual Project 112/SHAD claims received from Veterans claiming disabilities related to exposure to chemical/biological agents/substances used in testing, since the adjustment is 641.

The table below shows the number of claims pending and the number VBA has decided as of December 31, 2009. The total number of Project 112/SHAD cases granted is 39 out of 753 cases that have been decided.

Monthly	Pending	Decided	Total
December 2009	4	753	757

There are three requirements to service connect a disability: (1) evidence of a disease, injury, or event that occurred during active duty service, (2) evidence of a current disability, and (3) medical evidence establishing a nexus or link between the in-service disease, injury, or event, and the current disability. VA affords the Veteran reasonable

doubt in any decision where the evidence weighs equally in favor of grant or denial of the claim. VA assists the Veteran in obtaining the required evidence.

Project 112/SHAD calls to the Helpline are below.

Number of Interviews	Period
969	FY 2003
475	FY 2004
180	FY 2005
324	FY 2006
407	FY 2007
145	FY 2008
411	FY 2009
24	FYTD 2010 (December 2009)

Mustard Agents and Lewisite (Mustard Gas)

Since January 2006, there have been no additions to the 4,495 Veterans who had been exposed to Mustard Gas or Lewisite. From matches against BIRLS, VHA, and NCA, we found that 2,120 test participants were deceased. Of the remaining presumed living Veterans, only 371 addresses were found. The following is a breakdown of identified master records by exposure and status:

Exposure	Unique Veterans	Living Veterans	Deceased Veterans
Full-Body	330	167	163
Partial-Body	41	25	16
Total	371	192	179

Of the 179 deceased Veteran records:

- o 68 surviving spouses are receiving DIC
- o 50 surviving spouses are receiving non-service connected death pension
- o 55 known spouses with Social Security numbers are not in receipt of DIC nor death pension
- o 6 records did not have a spouse identified on the award

The RMC in St. Louis reviewed a list of 168 retired folders in May 2006 and found only 15 social security numbers, which were forwarded to C&P Service in June 2006; however, addresses for these Veterans were not found.

To date, VBA has received 1,536 claims from Veterans alleging disabilities related to exposure to Mustard Gas. The table below shows the number of these claims currently pending and the number VBA has decided.

Mustard Gas Claims/ FYTD 2010

Month	Pending	Decided	Total
December 2009	58	1478	1536

Mustard Gas calls to the Helpline are below.

Number of Interviews	Period
311	FY 2005
118	FY 2006
270	FY 2007
61	FY 2008
94	FY 2009
02	FYTD 2010 (December 2009)

Chem – Bio Exposures

In December 2005, Veterans Benefits Administration (VBA) received a list of names of 1,012 participants used in tests conducted at Edgewood Arsenal. The tests consisted of 140 known agents at the time. This was the beginning of the Chemical, Biological, Radiological, Nuclear and Explosives (CBRNE) database. The Department of Defense (DoD) met with VBA staff in February 2006, to share a draft copy of a DoD fact sheet entitled "Edgewood Arsenal Chemical Agent Exposure Studies: 1955-1975." In April 2006, VBA's Compensation and Pension Service (C&P) staff received an updated CBRNE database with an additional 3,434 names for a total of 4,446 names.

In an effort to obtain addresses for the test participants, C&P Service contacted Office of Performance Analysis & Integrity (OPA&I) in May 2006, for them to conduct a data match between the CBRNE database with BIRLS and the C&P master record. This match provided social security numbers for a limited number of test participants, 1,818 were a match. For those participants where an address was not found, C&P Service contacted Choice Point, an agency used to obtain current mailing addresses.

In June 2006, C&P Service began mailing notification letters to Veterans from the CBRNE database. In early July 2006, C&P Service sent a list of names of CBRNE test participants to Veterans Health Administration's (VHA) Eligibility Center, in order to help them determine which Veterans were eligible for medical treatment. By the end of July 2006, C&P Service mailed out 1,818 notification letters to test participants.

In early September 2006, C&P Service received an additional 2,261 names from DoD to add to the CBRNE database. This updated information brought the amount of names in the CBRNE database to 6,707. Additional notification letters were mailed to 758 test participants in March 2007 and 338 were mailed in mid September 2007.

C&P Service has sent out another 15 individual notification letters since mid September 2007.

In June 2008, C&P Service received 3,821 new names to be added to the CBRNE database, bringing the total to 10,528 names. C&P Service was able to identify and obtain current addresses for 304 of the 3,821 newly referred test participants. In March 2009, C&P Service sent out 304 notification letters with DoD's updated fact sheet to those Veterans. DoD also sent a list of all chemical agents and non-agents that were used for CBRNE testing for a total of 427 agents.

During September 2006, VBA provided the field with Training Letter 06-04, Department of Defense (DoD) Identifies Additional Service Members Who Participated in the Testing of Chemical and Biological Warfare Agents During Service, with special procedures for processing and controlling claims related to these tests. This support is supplemented by Intranet web pages linking pertinent information and procedures related to CBRNE, Mustard Gas, Project 112/SHAD, and the Khamisiyah incident in Iraq. The web site is as follows:

<http://vbaw.vba.va.gov/bl/21/outreach/ChemBio/index.htm>

VBA has received 87 claims from Veterans alleging disabilities related to exposure to chemical/biological agents/substances. The table below shows the number of these claims pending and the number VBA has decided.

Chem-Bio Claims for FYTD 2010			
Month	Pending	Decided	Total
December 2009	1	86	87

To date, two of the 86 decisions listed above include a grant of service connection.

Notification Efforts (SHAD, MG, and CBRNE): As of March 31, 2009, VBA has mailed a total of 8,053 outreach letters to Veterans who were participants in Project 112/Shipboard Hazard and Defense (SHAD), Mustard Gas (MG), and Chemical Biological Radiological Nuclear Explosives (CBRNE) tests. VBA enclosed a DoD Fact Sheet with each notification letter depending on the tests in which the Veteran participated. VBA has completed outreach efforts to Project 112/SHAD and MG participants. Outreach efforts will continue to Chem-Bio test participants because of the additional listing of names anticipated from DoD.

Data Base	Returned Mail	New SSNs	Names and SSN sent to IRS	IRS Matches with an Address	Previously Mailed	Total Letters Mailed
SHAD	459	0	459	2	4,439	4,441
Mustard Gas	22	164	186	3	318	321

CBRNE	248	775	998	338	2,649	3,291
Totals	729	939	1,643	343	7,406	8,053

EXHIBIT 57

Outreach Activities Compensation and Pension Service

Military Personnel – Active Duty

Accession. Since November 2004, everyone inducted into the five military branches receives VA Pamphlet 21-00-1, *A Summary of VA Benefits*, through Military Entrance Processing Stations (MEPSs). This arrangement, made by VA with the Department of Defense (DoD), assures that inductees receive basic information about VA benefits and services to which they may become eligible. MEPSs process virtually all enlisted personnel on active duty. In June 2006, VA Pamphlet 21-00-1 was distributed to graduates of the military service academies.

Transition Assistance Program (TAP) and Other Military Services Briefings. To date, VBA representatives have conducted the following transition briefings and related personal interviews. These briefings include pre and post deployment briefings for Reserve and National Guard members, and those conducted overseas.

OVERALL BRIEFINGS

<i>Fiscal Year</i>	<i>Briefings</i>	<i>Attendees</i>	<i>Interviews</i>
2003	5,840	210,025	102,402
2004	7,834	276,574	122,120
2005	8,184	326,664	124,092
2006	8,541	393,345	93,431
2007	8,154	296,855	100,976
2008	8,708	299,093	90,694
*2009	8,593 7.871	356,810	97,947

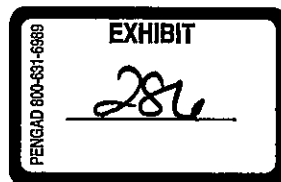
* FY 2009 figures are current through September 2009.

The following data (Overseas and Reserve/Guard Briefings) is included in the above data for overall military services briefings.

OVERSEAS BRIEFINGS

<i>Fiscal Year</i>	<i>Briefings</i>	<i>Attendees</i>	<i>Interviews</i>
2003	472	12,943	5,050
2004	624	15,183	6,544
2005	686	17,156	7,294
2006	498	11,585	3,005
2007	590	12,318	2,697
2008	829	15,170	2,405
*2009	951	20,053	2,634

* FY 2009 figures are current through September 2009.



RESERVE/GUARD BRIEFINGS

<i>Fiscal Year</i>	<i>Briefings</i>	<i>Attendees</i>	<i>Interviews</i>
2003	821	46,675	N/A
2004	1,399	88,366	N/A
2005	1,984	118,658	N/A
2006	1,298	93,361	10,515
2007	1,868	96,355	11,488
2008	1,725	83,152	14,358
*2009	1,738	133,239	17,495

* FY 2009 figures are current through September 2009.

Secretary's Letter. The Secretary sends a personal letter to each returning OEF/OIF Veteran based on lists routinely provided by the Department of Defense.

Recently Separated Veterans

Veterans Assistance at Discharge System (VADS). The VADS process generates the mailing of a "Welcome Home Package" that includes a letter from the Secretary, VA Pamphlet 21-00-1, *A Summary of VA Benefits*, and VA Form 21-0501, *Veterans Benefits Timetable*, to all Veterans recently separated or retired from active duty. VADS also sends a six-month follow up letter with the same enclosures to these Veterans.

Gulf War Veterans

C&P's main outreach to Gulf War Veterans is accomplished through the *Gulf War Review* newsletter, which is issued three to four times annually. The newsletter is mailed to about 220,000 Veterans who are on the Gulf War Registry and to other interested individuals.

The feature article of the March 2003 *Gulf War Review* focused on Public Law 107-103, Section 202 (Gulf War Veterans' Chronic Disabilities), which added fibromyalgia, chronic fatigue syndrome, and irritable bowel syndrome as qualifying chronic disabilities for which service connection, due to Gulf War service, may be granted. C&P mailed a copy of the March *Gulf War Review* to approximately 5,200 Veterans who had been previously denied service-connection for these conditions.

C&P added a special Gulf War Helpline to support Gulf War Veterans with information and assistance about benefits and services, particularly those unique to Gulf War Veterans. There were 29,197 interviews conducted on the Helpline in FY 2003; 11,842 in FY 2004; 12,766 in FY 2005, 6,749 in FY 2006, 5,781 in FY 2007, 3,115 in FY 2008, and 4,062 FYTD 2009.

Vietnam Veterans Exposed to Agent Orange

The major ongoing outreach initiative for Veterans who served in-country Vietnam remains the *Agent Orange Review* newsletter published two to three times annually by VHA in partnership with VBA. The purpose of the newsletter is to keep Vietnam Veterans updated on new medical studies, changes in benefits, and other related information. The newsletter is sent to Veterans on the Agent Orange Registry, Veterans in C&P records with an in-country Vietnam indicator, and to other interested parties. It is mailed to approximately 600,000 in-country Vietnam Veterans.

C&P Outreach staff implement special outreach programs as necessary to meet and respond to legislative changes, court decisions, etc. For example, in FY 2003, letters were sent to Veterans affected by the December 2002 US Court of Appeals for the Federal Circuit decision regarding the effective date of the regulation adding type II diabetes to the herbicide presumptive list. Approximately 25,000 Veterans were individually notified about this decision.

The Agent Orange Helpline continues to operate with 9,698 interviews conducted in FY 2003, 6,912 in FY 2004, 7,379 in FY 2005, 9,438 in FY 2006, 13,038 in FY 2007, 7,480 FY 2008, and 13,240 FYTD 2009.

Elderly and Low Income Veterans – “Pension Outreach”

VBA outreach coordinators participate in various scheduled events where elderly Veterans and surviving spouses gather such as senior citizen centers, nursing homes, senior day care centers, etc. Outreach coordinators have established relationships with local Area Agencies on the Aging, Social Security Administration (SSA) offices, and other agencies and organizations that deal with older Americans.

VBA distributed 2 million copies of VA Pamphlet 20-00-1, *A Summary of VA Benefits*, to the more than 1,300 SSA offices nationwide. The pamphlet is distributed in both English and Spanish. Regional offices are asked to contact the local SSA offices in their jurisdiction to ensure that systems were in place to refer Veterans and their spouses between the two agencies. VBA continues to work on a new outreach initiative for this targeted population. VBA staff members have held meetings with VHA officials, representatives of the Administration on the Aging under the Department of Health and Human Services, the American Association of Retired Persons, the Assisted Living Federation of America, and the National Funeral Directors Association to develop new avenues for reaching low income, elderly Veterans and surviving spouses.

Starting on May 1, 2006, VHA began including a paragraph on possible pension eligibility in the “Welcome Letter” sent to Veterans enrolled in Category 5 (non-service connected, low income). With the release of the January 2006 edition of VA Pamphlet 20-00-1, *A Summary of VA Benefits*, VHA facilities are placing copies of the pamphlets in locations where Veterans and family members visit often such as the pharmacy and clinic waiting areas.

VBA staffed a booth at the October 2006 National Funeral Directors Association Conference in Philadelphia. About 3,000 funeral directors and exhibitors attended the conference. Over 200 conference attendees visited the VBA Information Booth where copies of VA Pamphlet 20-03-1, *VA Benefits for Survivors*, and VA Pamphlet 21-00-1, *A Summary of VA Benefits*, were available along with benefit applications.

VBA staffed a booth at the March 2007 American Society on Aging (ASA) and the National Council on Aging (NCOA) Joint Conference/Exhibition in Chicago. Over 4,000 ASA and NCOA members and other professionals attended the conference. Over 200 conference attendees visited the VBA Information Booth where copies of VA Pamphlet 80-06-01, *Federal Benefits for Veterans and Dependents*, VA Pamphlet 21-03-1, *VA Benefits for Survivors*, and VA Pamphlet 21-00-1, *A Summary of VA Benefits*, were available along with benefit applications.

VBA is also working closely with the Assisted Living Federation of America (ALFA) to ensure assisted living providers are knowledgeable of VA benefits and that they work closely with local regional offices to ensure that residents who may be entitled to benefits are given information and assistance to apply for those benefits. VBA staffed a benefits booth and gave a presentation at the ALFA Conference and Expo in Dallas in May 2007. The presentation at the conference was on the different disability benefit programs with emphasis on aid and attendance. VBA staff attended and staffed a benefits booth at the ALFA Conference in Philadelphia, PA from May 4 through May 7, 2009.

VBA participated at the National Association of Area Agencies on Aging (n4a) Conference in San Francisco in July 2007. VBA representatives staffed a booth and assisted and provided benefits information to attendees. VBA staff provided a presentation in September 2007 to the National Center for Assisted Living (NCAL) on VA benefits with emphasis on aid and attendance. VBA staffed a benefits information booth at the Southeastern Aging Network & Georgia Gerontology Society Conference in September 2007 in Savannah, Georgia. In September 2008, VBA staff provided VA benefits information to attendees at the AARP national convention in Washington, DC.

Women Veterans

United States Code (U.S.C.) Title 38 requires the Department of Veterans Affairs (VA) to promote the use of VA benefits, programs and services by Women Veterans and to assess the needs of Women Veterans. VA's Advisory Committee on Women Veterans was established in November 1983 by Public law 98-160. This led to VA developing Women Veterans outreach programs at each facility in February 1984, and the establishment of the Women Veterans Coordinator (WVC) in each VA Regional Office (VARO) throughout the country.

Women Veterans Coordinators establish and maintain contact with various federal, state and local government organizations, as well as Veterans Service Organizations, in order to utilize their resources in fulfillment of program objectives. They meet periodically with various organizations representing Women Veterans and/or with Women Veterans

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to verbally present information concerning benefits and to receive information regarding their concerns and answer questions.

They maintain vigilance in the community through town hall meetings, conversations with Veterans, visits to local Women Veterans' groups and organizations, civic and religious groups, and through health fairs and Veteran information booth/displays.

Women Veterans Coordinators are encouraged to work together to conduct joint outreach initiatives and solicit the support of other VAROs, Veterans Health Administration (VHA) and/or the National Cemetery Administration (NCA) when conducting or participating in town hall meetings, health fairs and Veterans information forums. Regardless of the involvement of other VA business lines or agencies in planned outreach sessions, issues presented by Veterans will be handled by the on-site participants and appropriately referred to the business lines for follow up action. Veterans Benefits Administration (VBA) representatives at the national and local levels work closely with the Center for Women Veterans, the VHA Women Veterans Health Strategic Health Care Group, and the Secretary's Advisory Committee on Women Veterans to improve outreach to Women Veterans.

The Veterans Benefits Administration sponsored a Women Veterans Coordinators Training Conference, August 17-21, 2009, in St. Paul, Minnesota. The WVC Training Conference was designed to provide WVCs with the necessary skills to more effectively perform their duties for their respective VA Regional Offices. Presentation topics included Personal Trauma as it relates to compensation, health care, employment and counseling; challenges during and after deployment for guard and reserve members; Veterans Health Administration initiatives; and, education and family issues. Subject matter experts and guests from VHA, the Center for Women Veterans, the Center for Minority Veterans, the National Cemetery Administration and the Department of Defense (Sexual Assault Prevention and Response Office), as well as VBA Senior Leadership were also present.

During the fourth quarter of FY2009, Compensation and Pension Service released "*VA Benefits and Services for Women Veterans*," the first pamphlet exclusively for Women Veterans. The pamphlet will feature information about VA benefits including personal trauma, gender specific disabilities, and Women Veterans health care. This pamphlet will be used in conducting outreach specifically to Women Veterans.

Homeless Veterans

In response to Public Law 107-95, VBA established full-time Homeless Veterans Outreach Coordinators (HVOCs) at 20 regional offices in early FY 2003. Part-time coordinators are assigned at all other regional offices.

In October 2003, the directors of 10 regional offices joined the executive committee of their area's Regional Council of the Interagency Council on Homelessness (ICH). They were selected based on their proximity to each of the ICH Regional Council's base city. The HVOC for each of those offices participates in the ICH regional working group. VA

representatives have key roles in implementing the national plan to end chronic homelessness in 10 years.

VBA HVOCs actively participate in stand-downs for homeless Veterans. Stand downs are typically one to three day events providing services to homeless Veterans such as food, shelter, clothing, health screenings, VA and Social Security benefits counseling, and referrals to a variety of other necessary services, such as housing, employment and substance abuse treatment. They are collaborative events, coordinated between local VA facilities, other government agencies, and community agencies that serve the homeless. Stand-downs have been used as an effective tool in reaching out to and assisting homeless Veterans.

VBA HVOCs work closely with their VHA counterparts and participate in various homeless programs available at local VA medical centers such as the Homeless Chronically Mentally Ill (HCMI) Program, Veterans Industries, and Domiciliary Care for Homeless Veterans, Comprehensive Homeless Centers, etc. VBA representatives also work with the Social Security Administration and the Department of Labor in implementing Grant and Per Diem programs for the homeless.

The following outreach activities relating to assisting homeless Veterans were reported by regional offices:

Activity	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FYTD 2009
Shelters Contacted	2,988	4,347	4,247	4,245	4,434	3,277	2,982
Agencies Contacted	3,669	4,780	4,803	6,445	5,053	4,932	4,039
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Eligible Dependents & Survivors

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VVA-VA 023307

CAB membership includes the Assistant Director for Veterans Services, Compensation & Pension Service, and representatives from DoD as well the various military service departments.

C&P streamlined the DIC application process through the use of a simplified one-page application form that is faxed to the VA Regional Office and Insurance Center in Philadelphia where those claims are centralized. VBA's goal is to process all in-service death claims within 48 hours of receipt of all required documents. At the time of the initial visit, family members are in an acute stage of grief and are not always able to absorb and understand the full range of benefits available to them. To ensure that surviving spouses and dependent children are aware of all benefits, C&P mails a six month follow up letter to surviving spouses reminding them of the benefits and services. VA offers bereavement counseling to parents, spouses, and children of Armed Forces personnel who died in the service of their country. Family members of Reserve and National Guard members are provided these same services. A special brochure, VA Pamphlet 21-02-1, *Benefits and Services for Survivors of Servicemembers Who Die on Active Duty*, is given to survivors.

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The table below shows the number of claims pending and the number VBA has decided as of September 30, 2009. The total number of Project 112/SHAD cases granted is 39 out of 720 cases that have been decided.

Monthly	Pending	Decided	Total
September 2009	43	720	763

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Month	Pending	Decided	Total
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118	FY 2006
270	FY 2007
61	FY 2008
94	FYTD 2009 (September)

Chem – Bio Exposures

In December 2005, Veterans Benefits Administration (VBA) received a list of names of 1,012 participants used in tests conducted at Edgewood Arsenal. The tests consisted of 140 known agents at the time. This was the beginning of the Chemical, Biological, Radiological, Nuclear and Explosives (CBRNE) database. The Department of Defense (DoD) met with VBA staff in February 2006, to share a draft copy of a DoD fact sheet entitled "Edgewood Arsenal Chemical Agent Exposure Studies: 1955-1975." In April 2006, VBA's Compensation and Pension Service (C&P) staff received an updated CBRNE database with an additional 3,434 names for a total of 4,446 names.

In an effort to obtain addresses for the test participants, C&P Service contacted Office of Performance Analysis & Integrity (OPA&I) in May 2006, for them to conduct a data match between the CBRNE database with BIRLS and the C&P master record.

This match provided social security numbers for a limited number of test participants,

1,818 were a match. For those participants where an address was not found, C&P Service contacted Choice Point, an agency used to obtain current mailing addresses.

In June 2006, C&P Service began mailing notification letters to Veterans from the CBRNE database. In early July 2006, C&P Service sent a list of names of CBRNE test participants to Veterans Health Administration's (VHA) Eligibility Center, in order to help them determine which Veterans were eligible for medical treatment. By the end of July 2006, C&P Service mailed out 1,818 notification letters to test participants.

In early September 2006, C&P Service received an additional 2,261 names from DoD to add to the CBRNE database. This updated information brought the amount of names in the CBRNE database to 6,707. Additional notification letters were mailed to 758 test participants in March 2007 and 338 were mailed in mid September 2007. C&P Service has sent out another 15 individual notification letters since mid September 2007.

In June 2008, C&P Service received 3,821 new names to be added to the CBRNE database, bringing the total to 10,528 names. C&P Service was able to identify and obtain current addresses for 304 of the 3,821 newly referred test participants. In March 2009, C&P Service sent out 304 notification letters with DoD's updated fact sheet to those Veterans. DoD also sent a list of all chemical agents and non-agents that were used for CBRNE testing for a total of 427 agents.

During September 2006, VBA provided the field with Training Letter 06-04, Department of Defense (DoD) Identifies Additional Service Members Who Participated in the Testing of Chemical and Biological Warfare Agents During Service, with special procedures for processing and controlling claims related to these tests. This support is supplemented by Intranet web pages linking pertinent information and procedures related to CBRNE, Mustard Gas, Project 112/SHAD, and the Khamisiyah incident in Iraq. The web site is as follows:
<http://vbaw.vba.va.gov/bl/21/outreach/ChemBio/index.htm>

VBA has received 87 claims from Veterans alleging disabilities related to exposure to chemical/biological agents/substances. The table below shows the number of these claims pending and the number VBA has decided.

Chem-Bio Claims for FYTD 2009			
Month	Pending	Decided	Total
September 2009	8	79	87

To date, two of the 79 decisions listed above include a grant of service connection.

Notification Efforts (SHAD, MG, and CBRNE): As of March 31, 2009, VBA has mailed a total of 8,053 outreach letters to Veterans who were participants in Project 112/Shipboard Hazard and Defense (SHAD), Mustard Gas (MG), and Chemical

Sep. 2009

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POC - Brad Underwood, C&P Service

VVA-VA 023311

Biological Radiological Nuclear Explosives (CBRNE) tests. VBA enclosed a DoD Fact Sheet with each notification letter depending on the tests in which the Veteran participated. VBA has completed outreach efforts to Project 112/SHAD and MG participants. Outreach efforts will continue to Chem-Bio test participants because of the additional listing of names anticipated from DoD.

Data Base	Returned Mail	New SSNs	Names and SSN sent to IRS	IRS Matches with an Address	Previously Mailed	Total Letters Mailed
SHAD	459	0	459	2	4,439	4,441
Mustard Gas	22	164	186	3	318	321
CBRNE	248	775	998	338	2,649	3,291
Totals	729	939	1,643	343	7,406	8,053

Revised on 10-12-09 by C&P Service