

From: Dlind49@aol.com
Sent: Tuesday, March 17, 2015 11:01 PM
To: Snyder, Amy; panghi@hawaii.rr.com; geomike5@att.net; ja@interpac.net; mh@interpac.net; anne.stewart@mail.house.gov; dlimay7@flex.com; everetto@oha.org; joanconrow@hawaiiantel.net; kaim@oha.org; keomaivg@gmail.com; keolal@oha.org; hawaii@afsc.org; lanny.sinkin@gmail.com; repevans@capitol.hawaii.gov; ronsan2224@aol.com; joshuaboothgreen@yahoo.com; srodrigues@olelo.org; tomasbelsky@gmail.com; wlau@co.hawaii.hi.us; dcs@medcom.com; Dorothy.bowers1@gmail.com; david@bigisland-bigisland.com; davidcorrigan@bigislandvideonews.com; Higuchi.Dean@epamail.epa.gov; kat.caphi@gmail.com; napua4u@yahoo.com; noweokala@yahoo.com; stephen.paulmier@verizon.net; markandster@msn.com; sgd8@hawaiiantel.net; jeffrey.eckerd@doh.hawaii.gov; jenniferjangles@gmail.com; paka@sandwichisles.net; k.young@capitol.hawaii.gov; shannontaylor5679@msn.com; aaron@hawaii.rr.com; Norato, Michael; Conley, Maureen
Cc: thomas.mills@va.gov; jen.white@mail.house.gov
Subject: VA VISN 11 medical care
Attachments: VeteransClinicianGuide.pdf

Ms. Snyder and all : the attached VA VISN 11 physician' guidance verifies the horrendus adverse health effects caused by du exposures. this document in of itself should be enough to deny the army any permit or license for use storage testing of du munitions. to all who may have been exposed already please use this document to obtain your own medical care as this is prima facia evidence. the other info is my summary of the du nightmare. and our attempts to fix the broken va and dod medical care.

dr doug rokke
217 643 6205

From: Jen.White@mail.house.gov
To: Dlind49@aol.com
Sent: 6/9/2014 3:45:54 P.M. Central Daylight Time
Subj: RE: Veterans' Job & Resource Fair

Thanks Doug, I received your email below. Also, attached is the Veterans Clinician Guide, scanned copy per your request.

Jennifer White

Constituent Services Director

Rep. Rodney Davis, IL-13

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*Sign-up for Rep Davis' e-newsletter [here](#)

From: Dlind49@aol.com [<mailto:Dlind49@aol.com>]

Sent: Friday, May 30, 2014 5:36 PM

To: White, Jen

Subject: Re: Veterans' Job & Resource Fair

i came by to say THANK YOU!

NOW OUR TASK IS TO ENSURE:

1. ALL THE PERTINENT DOCUMENTS ARE FULLY DISTRIBUTED
2. VA- DOD LEADERS PUBLICALLY ADMIT CORRELATION BETWEEN TOXIC EXPOSURES AND ADVERSE HEALTH EFFECTS
3. CONTINUING MEDICAL EDUCATION IS COMPLETED SUCH AS IN ATTACHED POWER POINT.

4. OPTIMIZE MEDICAL CARE

5. PROMPTNESS

6. STOP OVERT AND HIDDEN RETALIATION

7. THOROUGH MANDATED BUI IGNORED WITH IMMUNITY ENVIRONMENTAL
REMEDATION IS COMPLETED

8. ADEQUATE STAFFING

9. PROPER APPOINTMENT LISTS

10 TELL THE TRUTH ABOUT THESE DANG WARS.

11, REPORT ACTUAL CASUALTIES NOT REDUCED NUMBERS

THANKS,

Doug

643 6205

in review:

Address at Fall Congressional / Coalition Leadership Breakfast

325 Russell Senate Office Building

U.S. Senate

Washington D.C.

November 10, 2000

Dr. Doug Rokke

Distinguished Members of Congress, Coalition Leaders, Fellow Warriors, and Guests-- It is a distinct honor to address you today. During the Gulf War I was the U.S. Army health physicist assigned to 12th Preventive Medicine AM theater command staff and the 3rd U.S. Army Medical Command headquarters. I was recalled to active duty 20 years after serving in Vietnam, from my research job with the University of Illinois Physics Department and sent to the Gulf to ensure that all military and civilian personnel were prepared for the anticipated nuclear, biological, chemical, and environmental exposures. I also was assigned to two equally vital special operations teams: Bauer's Raiders and the Depleted Uranium Assessment team.

The preparations for war take many forms. Infantry soldiers learn and practice their combat skills, truck drivers practice maneuvering their rigs to make sure they can deliver supplies, and medical personnel prepare to treat the expected combat casualties. Ideally, preparations are driven by intelligence reports. However as the recent bombing of the U.S.S. Cole shows commanders may ignore intelligence information and not protect either their personnel or equipment. Prior to the start of Operation Desert Storm military intelligence reports and threats issued by President Saddam Hussein suggested that nuclear, biological, and chemical warfare and environmental hazards (NBC-E) would be employed to win battles.

As we prepared for the battle in the Deserts of Saudi Arabia, Kuwait, and Iraq, medical and combat unit commanders realized that medical personnel must be able to provide emergency medical care to conserve the fighting strength in an NBC-E environment. This required an assessment of medical capabilities. Four deficiencies were identified.

First, an assessment of existing emergency medical response capabilities in the staging areas located within Saudi Arabia revealed the need to respond to medical emergencies resulting from combat to disease and non-battle injuries (DNBI). Second, an assessment of medical personnel arriving in Southwest Asia verified that most of them did not have the knowledge, skills, and attitudes needed to provide medical care for the expected nuclear, biological, chemical, and environmental (NBC-E) casualties much less the conventional weapons casualties. Third, we verified that that most operations personnel needed a NBC-E defense refresher course that was specifically designed for verified threats. Fourth, we needed to design and construct decontamination facilities, prepare standard decontamination procedures, and train personnel to provide immediate personnel and equipment decontamination.

Consequently, Bauer's Raiders, the 3d U.S. Army Medical Command theater NBC-E special operations planning and teaching team was formed. Each team member had prior combat experience and was a qualified medical and NBC-E instructor. This team also designed and supervised the construction of the NBC decontamination facilities and provided operations assistance throughout the echelons above corps, corps, and coalition forces.

Since 1991 numerous Department of Defense reports have stated that medical and tactical commanders were unaware of the probable NBC-E exposures and never told about the medical and environmental consequences of these exposures. THAT IS A LIE! They were told! They were warned! Immediate and long-term medical care was recommended. The threats, health and environmental consequences, and medical care recommendations were provided in written messages and during courses such as the 3rd U.S. Army Medical Command & ARCENT Medical Management of Chemical and Biological Casualties, the NBC-E defense refresher course, the Combat lifesaver course, and the Decontamination procedures course which we taught to over 1200 military personnel in the theater between December 1990 and February 1991. I gave the classified threat briefing specifically identifying the anticipated NBC-E exposures, taught the NBC-E defense refresher course, the combat lifesaver course, and decontamination procedures course. Thus I can confirm that commanders knew what to expect and how to be prepared!!!

Another important fact is that although Department of Defense officials have stated over and over that the vital chemical and biological logs were misplaced or lost, U.S. Government Accounting Office representatives and the Pulitzer prize winning author Seymour Hersch have verified that these logs were ordered destroyed in Florida

during December 1996 while Congressional committees were conducting hearings on potential exposures.

As the DU assessment team health physicist and medic I was responsible for planning and implementing DU (uranium 238) contaminated equipment and terrain clean up and for providing medical care recommendations for exposed personnel. As we surveyed the battlefield it became obvious that we had serious equipment, terrain, and medical problems requiring immediate action. Although, effects of uranium exposure have been identified the effects from combat exposure during ODS were unknown. We had over 100 friendly fire U.S. casualties and several hundred others with verified exposures because of their U.S. Department of Defense assigned duties. We also observed what is known as "Tours Are Us". This event was numerous individuals visiting and climbing all over contaminated and destroyed equipment and terrain without wearing any protection. I immediately contacted unit and the theater medical command staff to recommend medical care for all exposed individuals. Consequently, the theater occupational health physician wrote and then distributed immediate medical screening and care guidelines on June 13, 1991. As verified by GAO officials, it was ignored then and still is today. Upon our return to the United States our team continued to recommend immediate medical care for DU exposures. I described DU hazards and exposures and once more recommended immediate medical care during an Occupational Medicine conference held during February 1992 at Wright Patterson Air Force Base, Ohio. The Government Accounting Office based on reports issued recommendations for medical care, environmental remediation, and training during January 1993. On June 8, 1993, the Deputy Secretary of Defense ordered then Secretary of the Army Togo West to quote "complete medical testing of personnel exposed to DU contamination during the Persian Gulf War". During August 1993, then Brigadier General Eric Shinseki signed the order on behalf of the Army. This order, in most cases, is still disobeyed without any accountability. A Headquarters, Department of the Army memorandum dated October 14, 1993 specified DU exposures that required medical screening and care. Although these directives and Army regulations require medical screening care for those exposed to uranium contamination, representatives of the Department of Defense and Veterans affairs continue to deny or delay medical screening and care. Today, affected individuals include military personnel from all nations that were involved, civilian non-combatants; and even residents of Vieques, Puerto Rico; Okinawa; Tennessee, Kentucky, Kosovo, Serbia, Kuwait, and Saudi Arabia. The wartime and now peacetime decision that you could just shoot solid rods of uranium 238 (DU) anywhere without providing medical care for all exposed persons and without cleaning it up is a *crime against God and the citizens of the world*. Recently, the U.S. Navy willfully used DU munitions during peacetime exercises on the Puerto Rican Island of Vieques in violation of laws and regulations. Still there is no accountability for these actions that spread radioactive waste that causes indiscriminate harm to all that are exposed for 4.5 billion years unless contamination is cleaned up. I ASK: WOULD ANY OF YOU WANT HUNDREDS IF NOT THOUSANDS OF RODS OF SOLID URANIUM WEIGHING

UP TO 10 POUNDS EACH LYING IN YOUR BACKYARD? Of course not, so why should it be anywhere?

Depleted uranium was only one of the verified exposures which also included chemical warfare agents, biological warfare agents, pesticides, industrial chemicals, endemic diseases, sand (El Eskan disease), food borne illnesses, water borne illness, organic and inorganic byproduct compounds from oil well fires, airborne particulates, asbestos, cleaning compounds, low level radioactive materials, and then the deliberate immunizations and drugs designed to protect individuals from verified threats.

Many exposures were caused by our deliberate actions. We knew where Iraqi chemical and biological chemicals were stored so as General Schwarzkopf wrote in his autobiography "It Doesn't Take a Hero", we decided to blow them up with artillery rounds and aerial bombardment. Consequently chemical, biological, and radiological warfare materials were released. We had specifically discussed this anticipated consequence and that medical care would be required for any exposures. Consequently, with these releases, thousands of chemical agent alarms were going off all the time all over the battlefield documenting exposures. A couple of weeks ago, DOD officials announced that they were modifying the exposure list again. It seems peculiar that 10 years after the fact and ten years after alarms went off that the exposure list is modified once more based on DOD analysis. Why can't the assumption be made if an individual was near an alarm that went off that they were exposed? Yet, today, DOD officials still claim the alarms were all false alarms. If the alarms are ineffective who is responsible and why are they still in use? Because the logbooks were lost according to DOD officials, so there is no record of who was exposed based on alarm activation reports. Thus official denials continue to conflict with reality. And yet we wonder why confidence in DOD leadership has eroded! During the battle as enemy industrial and agricultural facilities, schools, businesses, and hospitals were destroyed individuals were exposed to released hazardous materials. Then as we prepared for battle, conducted battle, and cleaned up after the battle we exposed our soldiers to more hazardous materials. For example, after the completion of the ground war, a senior logistics officer and I were sent into Iraq by LTG Franks to clean up the 7th Corps' hazardous waste dump. It was total mess with observable releases and spills resulting in additional adverse health and environmental effects.

We also decided based on the verified threats to immunize our troops against a whole host of diseases and biological warfare toxins such as anthrax and botulism. If immunizations been maintained rather than giving individuals 4 or 5 or even more simultaneous immunizations we could have reduced adverse effects on the immune system. But we did not; we gave individuals numerous shots at the same time and then did not keep track of what was given or what adverse reactions occurred. We messed up immune systems before deployment. Basically, after we declared war we had to

immunize everyone. As I administered hundreds of anthrax and botulinum shots in Saudi Arabia, I could only wonder why we were ordered not to record any information. Once more, our actions to protect individuals against a verified threat ignored common sense. Today we know that the anthrax manufacturing process was never inspected and approved by the FDA before 1993 and today the FDA still has not approved the facility. We also know that there are adverse short term and probably long-term effects. The anthrax vaccine that we administered was licensed for prevention of cutaneous and not respiratory anthrax. Then just within the last month, Department of Defense officials finally admitted after continued denials that an illegal adjuvant, squalene was used instead of alum in some vaccine batches. Consequently, we probably reduced the ability of the immune system to fight off the multitude of exposures that occurred.

Pesticides proved to be yet one more problem. Although, pesticides were ordered from official Department of Defense sources, they did not arrive in sufficient quantities so we were required to buy them on the open market to control a verified threat. Consequently, who knows what we actually used and what adverse effects could be related to their use?

The confirmed nerve agent threat resulted in the use of PB, which is actually a reversible bond nerve agent, in an attempt to reduce the effects of chemical warfare nerve agents such as Sarin, VX, Soman, Novachuks, and Multiple 7. PB can be compared to spraying gumdrops with Raid or Black Flag and then eating them. We expected adverse reactions from consumption of PB because it is a carbamate pesticide compound. Therefore, we made sure that NBC operations and medical personnel knew of potential adverse effects. Again, we knew there would be health effects and yet commanders decided to ignore our warnings and force individuals to eat PB tablets. As part of our discussions we also identified and warned about the anticipated interactions between pesticides, nerve agents, and drugs such as PB (pyridostigmine bromide / mestinon). Official Department of Army medical records confirm that over 50 % of the individuals who took the PB got sick with nerve agent effects. OH WELL, ANOTHER ANTICIPATED ADVERSE HEALTH EFFECT TO IGNORE.

Food and water problems were all over. We could not ensure that Saudi government supplied food preparation and serving personnel met even basic U.S. public health requirements. We saw too many food borne health problems which once more caused adverse health problems. Severe diarrhea was observed in troops eating at the mess hall located in the tent camp just off of King Abdul Azziz Airfield in Riyadh during December of 1990. I was one of the casualties. We traced the problems to contaminated food. Similar problems occurred all over the theater of operations through at least May 1991. At one time during April we had so many at KKMC that were sick and because we did not have the medical supplies required to treat them, we just let them ride it out without medical care. THAT WAS WRONG!!!!!! We do not even know if some type of biological agent was introduced via sabotage into our food supply or if troops crossed contaminated areas. WE DO KNOW THAT FOOD WAS PURCHASED AND SERVED THAT HAD BEEN GROWN IN NIGHT SOIL WHICH IS UNTREATED SEWAGE. We established strict rinsing and cleaning requirements

during food preparation. However, without complete control of food preparation personnel, we do not know if these guidelines were followed. Water borne problems occurred during bathing, drinking, food preparation, and decontamination. Rashes were observed in troops taking baths at Eskan Village and so we had to order no baths or use of chlorine to sanitize the bath water. This created a problem for female hygiene efforts. Even with use of chlorine to sanitize the water before use, rashes abound! The Star Lighter showers which used water from a box which was open to the air also caused problems, especially when water mixed with oil well combustion byproducts or other contaminants was used for bathing and washing clothes. We reported skin irritation upon taking a shower at King Kahlid Military City (KKMC) and other areas. Uniforms and clothes must be kept clean, yet my own DU team had to use the Star Lighters to clean our clothes while we took showers. So more contamination was spread on the ground. We did not have alternative choices to wash our contaminated clothes. The Service and Supply (S & S) Bath unit would not let us near their equipment and rightfully so for safety. I wonder how we will keep uniforms and equipment clean in the future?

The burning of the oil wells as Iraqi forces retreated was an excellent tactical operation. Health and environmental problems started immediately. Members of our unit were dispatched to conduct an initial assessment of potential risks. It was obvious that incomplete combustion of inorganic and organic compounds was occurring and that these were being released into the air and onto terrain causing immediate respiratory and skin problems. The released mixture was so thick that we used sticks to scrap the junk out of our nose, ears, and mouth. We reported immediate splitting headaches, breathing problems and burning skin. Official on-site medical command reports said that exposures were causing immediate adverse health problems. Consequently, we, by unanimous agreement, prepared, issued, and distributed the medical command directive that no one should be exposed to any oil well fire byproducts without respiratory and skin protection. We tried, yet, history proves that this directive was disregarded and now we suspect that the observed illnesses are caused in part by oil well fire byproduct exposures. Today, the full list of byproducts has been published and any first year environmental chemistry or other student studying hazardous materials would agree that you should NEVER expose anyone to even one of these pollutants much less the entire combination. Once again, hazards were recognized, warnings were issued, and recommendations ignored.

As we provided emergency medical care we wrote reports identifying respiratory problems, rashes, diarrhea, neurological, bone muscle injury, immediate problems from PB use, and immediate problems from oil well byproduct exposures. These medical problems were annotated into individual medical records as they occurred. Although, medical records did exist before individuals and units were redeployed the records disappeared. OH WELL.. IF THERE IS NOT ANY DIAGNOSED EVIDENCE OF ADVERSE HEALTH EFFECTS..... THERE IS NOT ANY PROBLEM. Medical personnel who performed the redeployment physicals deliberately ignored reported problems and denied that any exposures occurred. I tried to get my verified exposures listed but they said none occurred and refused to list the exposures or treat my

respiratory and rash problems. Once we returned to the U.S. the observed health concerns forced the U.S. Department of Defense to initiate the Comprehensive Clinical Evaluation Program (CSEPP). I went through the program during which serious medical problems were found that my VA physicians now know were caused by wartime exposures. YET, DESPITE MY BEST EFFORTS THE CSEPP PROGRAM PHYSICIANS REFUSED TO PROVIDE THE MEDICAL TESTS REQUIRED TO VERIFY KNOWN EXPOSURES. HOWEVER, EVEN THE DIAGNOSED PROBLEMS THAT THEY DID VERIFY WERE NEVER PLACED IN MY OFFICIAL MILITARY MEDICAL FILE. My medical reports, along with hundreds of others, were separated, locked up in a special room at Noble Army Hospital, Fort McClellan, Alabama, until I was told they were there and I was finally able with intervention to obtain these secret files during the fall of 1997. They were sent to me in the mail. I then had my Army Reserve Command Chief Nurse review the medical evidence and insert them into my official military medical file. Yet, it is worse. As we completed the Depleted Uranium Burn Test at the Department of Energy Nevada Test Site in November 1994, DOE medics performed a radio-bioassay on me that found 5000 times the permissible level of uranium in my body. THEN THEY NEVER TOLD ME FOR 2.5 YEARS. AGAIN A DELIBERATE ACTION TO DENY MEDICAL CARE BY PREVENTING CORRELATION OF EXPOSURES TO ADVERSE HEALTH EFFECTS!!!

I am painting a picture that shows we knew about the threats, warned commanders about the threats, recommended medical care that was and is still ignored, and that our leadership has abandoned the troops for political purposes. Yet, it gets worse. While preparing to conduct our command level briefings and courses two senior Army medical officers came from Aberdeen Proving Grounds, Maryland to make sure we limited our information to commanders and medical personnel. IN OTHER WORDS: "DO NOT TELL THEM-----THEY WILL NOT KNOW--- AND WE WILL NOT BE RESPONSIBLE". These two senior officers went to my unit commander and told him to force me to stop making sure the commanders and troops knew about the hazards and were ready to respond to the anticipated exposures and consequence health and environmental problems. AFTER THAT FAILED THEY WENT TO THE 3RD U.S. ARMY MEDICAL COMMAND STAFF TO FORCE US TO STOP AND THAT FAILED! There were and still are dedicated professionals who care! Yet despite our best efforts- the exposures occurred and today individuals are sick and medical care was and still is denied!! Exposures will continue because despite our efforts environmental remediation has been delayed or not completed.

To paraphrase 1950's television program title; " I WAS THERE!" We knew, We warned. We were ignored. Today we are still ignored. TODAY, TOO MANY INDIVIDUALS AROUND THE WORLD ARE SUFFERING AND DYING BECAUSE OF OUR DELIBERATE ACTIONS. IN SIMPLE WORDS: THE BATTLEFIELD WAS A TOXIC SOUP TO WHICH ALL CIVILIANS AND MILITARY WERE EXPOSED.

Reported, observed, and verified medical problems include: Respiratory problems, rashes, cancer, dental problems, eye problems, muscle weakness, neurological problems, birth defects, sexual dysfunction, kidney problems, memory problems, pain, cardiac problems, blood problems, thyroid problems, liver problems, and immune system failures.

Although, OFFICIAL denials continue when you see the same health problems over and over again in individuals from around the world then we must acknowledge a cause and effect relationship and accept responsibility to provide medical care.

Today, many of us; including scientists, physicians, pastors, and others; who decided to speak up about what occurred, why it occurred, what should have been done years ago, and what should be done now have lost jobs, experienced retaliation, and been threatened by Department of Defense, Department of the Army, and Department of Veterans Affairs officials. The direct and indirect threats, warnings, and attacks also have been directed to our family members to bring pressure on us to stop demanding accountability. *This is all about liability!* Therefore the truth must be suppressed! If what happened is acknowledged, then specific individuals within our government and other governments will be required to accept responsibility for the consequences of deliberate actions. The health and environmental problems are not limited to Iraq or surrounding areas. Similar adverse health and environmental effects have been identified within and around U.S. military installations or Department of Energy facilities in Alabama, Washington, California, Alaska, Tennessee, Korea, Panama, Germany, Philippines, Maryland, Nevada, Florida, California, and especially surrounding the U.S. Navy range on the Vieques, Puerto Rico. I recently had the father of a warrior stationed in California come up to me while I was eating supper in a restaurant outside Chicago to ask for help in obtaining medical care for his family who was sick from exposures. Another dangerous location is Calhoun County (Fort McClellan) Alabama. Extensive PCB contamination mixed with contamination from DOD activities and the potential release of nerve and mustard agents during weapons incineration without any effective emergency response threatens the residents and the environment. DOD and Army representatives have told the residents of Calhoun County to just close their doors and windows and hold their breath in the event of releases. OH MY GOD!!!! Recently, Denver Colorado residents were faced with the discovery of a bomb containing the nerve agent Sarin in a garbage dump. Somehow, Army officials had lost it!!! Then in a new press report dated November 1, 200 the Army admitted that their may be more lost Sarin bombs lying around the Rocky Mountain facility. NO WONDER VERY FEW INDIVIDUALS TRUST DOD LEADERS.

No matter where I go, I encounter individuals or families members seeking help. I receive telephones call day and night. Individuals approach members of my family asking for help. Physicians and scientists attending an international conference this past weekend at Manchester, England described, discussed, and carefully verified the serious adverse health problems from chemical, biological, and radiological materials releases. The cancer rates, birth defects, neurological problems, respiratory problems, rashes, kidney problems, and many other medical problems seem to be increasing throughout

Iraq, Kuwait, Serbia, Korea, England, France, Australia, Canada, Japan, the U.S. and the Vieques, Puerto Rico. Basically the OFFICIAL denial of exposures and consequent adverse health and environmental effects has been ongoing for years. The dilemma is that we made decisions based on verified threats and the tactical situation which were correct at that time but then since 1991 DOD and VA officials have ignored the consequences of these decisions and refuse to accept responsibility for current adverse health and environmental effects. The evidence exists and is increasing so we must acknowledge the adverse health and environmental effects of our actions. So what are our national obligations?

Two hundred and 24 years ago, the Minutemen of Massachusetts responded to a call to arms and our Nation was born. Now, ten years after the Gulf War and the abandonment of our nation's military personnel and their families; recruiting and retention to fill our military forces with dedicated men and women is failing because Warriors have been denied earned medical care and too many are living on food stamps!!! Our nation is at risk!

I and others have sent numerous messages to the Honorable Dr. Bernard Rostker, Deputy Secretary of Defense, who was not there, whose staff was not there, and whose staff still ignores the warnings and recommendations those of us who were there for political and economic reasons. It is painfully obvious that DOD and VA officials have no intention of accepting responsibility for what has happened! The reason is very simple! If they acknowledge what happened to our nation's heroes and accept responsibility for medical care and environmental remediation then these same officials must acknowledge the consequences of our actions on non-combatants and enemy forces around the world. We suggested that Dr. Rostker, Secretary of Defense Cohen, or the President Clinton state that:

“During the Gulf War essential decisions to protect our warriors and win the war were made based on the tactical situation and verified threats. Today, we know that those decisions and our deliberate actions have resulted in serious adverse health and environmental consequences. We can no longer ignore the consequences of our deliberate actions. We apologize to our warriors, our warrior's families, and the citizens of the world. We resolve to provide medical care or medical care recommendations and complete environmental remediation.”

ALTHOUGH, WE HAVE OFFERED THIS SOLUTION MANY TIMES IT IS IGNORED!

We owe the combat veterans of our nation the medical care they earned! We must provide all WARRIORS with education and training to ensure combat readiness and prevent a repeat of what has occurred. We must provide military personnel with all of the operational equipment they need to complete their assigned missions. We must hold those officials who have willfully harmed our nation's heroes accountable for their deliberate actions. We must force a stop to the retaliation against those warriors who try

to tell the truth and who epitomize our nation's ideals expressed so eloquently by General Douglas MacArthur's three immortal words:

DUTY HONOR, COUNTRY

We have the ultimate obligation as leaders of the world to provide medical care or medical care recommendations to all that are sick. Finally we have an obligation to complete environmental remediation of contamination caused by our deliberate actions throughout the United States and the rest of the world!

I want to recite a poem that I wrote in memory of SFC John Sitton, a Vietnam and Gulf War Veteran, who answered his nation's call during two wars. He was my friend! He is a true American hero because he set up and ran the 3rd U.S. Army's medical evacuation radio communications system during the Gulf War. It is ironic that the warrior who saved so many lives died abandoned on the battlefield of political denials.

"FORGOTTEN WARRIORS"

ONE MOMENT AN INDIVIDUAL WAS WALKING THROUGH A MEADOW OF
FLOWERS .

IN THE NEXT MOMENT SONS, DAUGHTERS, HUSBANDS, AND WIVES
BECAME SOLDIERS .

THEY DEFENDED OUR NATION AND PAID WITH THEIR LIFE OR
HEALTH .

THE CITIZEN SOLDIER ----- THE MINUTEMAN.

OUR NATION IS BUILT ON THEIR WILLINGNESS TO RESPOND TO OUR
NATIONS CALL.

SOME FOUGHT IN THE JUNGLES OF VIETNAM, YET MANY RESPONDED
TO FIGHT IN A DISTANT DESERT WAR.

THEY FOUGHT WITH SKILL AND DETERMINATION AND FREED A LAND.

THEN OUR NATION'S WARRIORS RETURNED HOME TO PARADES AND
PARTIES AND JOY SPREAD FROM SHORE TO SHORE.

BUT WHEN THE GLOW SUBSIDED THE WARRIORS REMAINED ALONE AND
FORGOTTEN.

WE ASKED THEM TO FIGHT AND THEN FORGOT TO PROVIDE THEM
MEDICAL CARE.

WE RESEARCH AND STUDY AND SEARCH FOR A CAUSE DELAYING
RESPONSE THROUGH IGNORANCE AND FEAR.

YET THE FORGOTTEN WARRIORS SUFFER IN SILENCE WITH HONOR AND
HOPE.

FOR ALL THE FORGOTTEN WARRIORS WANT IS MEDICAL CARE.

LADIES AND GENTLEMEN: WE HAVE AN OBLIGATION TO DO WHAT IS RIGHT FOR GOD, OUR WARRIORS, AND THE CITIZENS OF THE WORLD! I will never quit until all individuals are cared for and environmental remediation is completed. I was ordered to complete that mission as a soldier and I will succeed even in the face of adversity! Today, I ask you to help. UNLIKE ANOTHER WARRIOR, I AM ONE SOLDIER WHO WILL NOT JUST FADE A WAY

and

Linda Cataldo Modica

266 Mayberry Road

Jonesborough, TN 37659

February 22, 2010

The Right Reverend Monsignor Anthony R. Frontiero, S.T.D.

Official - Pontifical Council for Justice and Peace

Palazzo San Calisto

00120 Vatican City

Dear Monsignor Frontiero,

We met last summer at Avery & Marc's wedding in New York as we waited for the bride and groom outside the Church. I was the round-faced, middle-aged woman who came over to talk to you about St. Mary's Justice, Peace & Integrity of Creation (JPIC) Ministry in Johnson City, Tennessee. You gave me your card, which I kept -- just in case I needed to contact you. As it turns out, a need has arisen and I am writing to you tonight to appeal to you on behalf of a fellow Catholic and passionate peacemaker, Doug Rokke. I hope that you don't consider my request too forward, because Doug's needs are great and his mission is of global importance.

As you may know, the US, British, Australian, Canadian and Israeli military use missiles, rockets, grenades and vehicle armor fabricated from depleted uranium metal. While the uranium is called "depleted", it is still mildly radioactive and will remain radioactive for hundreds of thousands of years. When depleted uranium munitions explode, they form a dust or fume of such fine particulate size that the depleted uranium can easily be inhaled or ingested by combatants and non-combatants on or near the battlefield where DU weapons were used. The unfortunate fact is that men, women, children and unborn children living near to or downwind from battlefields where uranium munitions are exploded are exposed to DU's poisonous dust. Because DU contamination does not discriminate between combatants and civilians, and because of the radiotoxic impacts to future generations, many peacemakers, including some at the United Nations, believe that the use of uranium weapons violates international law. I agree with those seeking a ban on uranium munitions and work with Doug Rokke, Christian Peacemaker Teams, St. Mary's JPIC and the Catholic Committee of Appalachia toward that end.

Military personnel are not immune to the impacts of DU exposure, nor are US Army health physics professionals who have struggled for years to clean up contamination and protect soldiers from exposure. One such professional is Doug Rokke, PhD, a retired Army scientist who literally wrote the book on the health impacts from exploded DU ordnance and armor. Doug is now disabled from exposure to DU which has caused neurological and other damage to his body.

To prevent other soldiers, as well as civilians, from suffering as he has, Dr. Rokke has appealed to the Apostolic Nuncio, Archbishop Silvano Tomasi, to ask for the intervention of the Holy See at the United Nations to end the use of uranium munitions. Doug's prayer, in the form of a report to Right Reverend Tomasi follows.

Unfortunately, Dr. Rokke's appeal to the Apostolic Nuncio, sent in December 2008, has gone unanswered. Therefore, I am writing to ask if you could follow up on the status of Dr. Rokke's request and on the position of the Vatican on DU weapons.

To provide you additional scientific information that supports Doug Rokke's report, I am attaching an article authored by Rosalie Bertell, PhD, a Catholic nun who, like Dr. Rokke, is an expert on uranium weapons and their health impacts.

Praying that you will help advance Dr. Rokke's appeal to stop the use of DU munition, I hope this finds you well and that you will send a reply at your soonest convenience.

Thank you so much,

Linda.

Attachment: "Occupational Hazards of War", Dr. Rosalie Bertell, 2006.

Enclosure: "The Health and Environmental Effects of Uranium Munitions - Report for Archbishop Silvano Tomasi, Apostolic Nuncio", Dr. Doug Rokke, 2008.

The Health and Environmental Effects of Uranium Munitions- Report for Archbishop Silvano Tomasi, Apostolic Nuncio, Permanent Observer of the Holy See to the United Nations Office and other International Observations.

Prepared by:

**Doug Rokke; Ph.D.; Major, retired/disabled; U.S. Army
former Director, U.S. Army Depleted Uranium project**

December 13 , 2008

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The continued use and prior use of uranium munitions is causing adverse health and environmental effects that are being ignored by the leaders those nations and their military commanders who are responsible for uranium weapons use.

During the summer of 1991, the United States military had collected artillery, tanks, Bradley fighting vehicles, conventional and unconventional munitions, trucks, etc. at

Camp Doha in Kuwait. As result of carelessness this weapons depot caught fire with consequent catastrophic explosions resulting in death, injury, illness and extensive environmental contamination from depleted uranium and conventional explosives. Recently the emirate of Kuwait required the United States Department of Defense to remove the contamination. Consequently, over 6,700 tons of contaminated soil sand and other residue was collected and has been shipped back to the United States for burial by American Ecology at Boise Idaho. When Bob Nichols, an investigative journalist, and I contacted American Ecology we found out that they had absolutely no knowledge of U.S. Army Regulation 700-48, U.S. Army PAM 700-48, U.S. Army Technical Bulletin 9-1300-278, and all of the medical orders dealing with depleted uranium contamination, environmental remediation procedures, safety, and medical care . They had never heard of U.S. Environmental Protection Agency guidelines for dealing with mixed – hazardous waste such as radioactive materials and conventional explosives byproducts. (reference "Approaches for the Remediation of Federal Facility Sites Contaminated with Explosives or Radioactive Wastes", EPA/625/R-93/013, September 1993). The shipment across the ocean, unloading at Longview, Washington State port, transport by rail, and burial in Idaho endangers not only the residents of these areas but poses a significant agricultural threat through introduction of pests, microbes, etc. foreign to our nation.

Sadly the known adverse health and environmental hazards from uranium weapons contamination also are prevalent throughout the United States. The Environmental Protection Agency has listed the former Nuclear Metals- Starmet uranium weapons manufacturing site in Concord Massachusetts on EPA's Superfund National Priority List because it poses a significant risk to public health and the environment. Consequently the community in which the United States was born on April 18, 1775 is now the location of America's own closed dirty bomb factory that will endanger the health and safety of the descendants of our original patriots- "the Minutemen". The closed "National Lead" uranium weapons manufacturing site in Albany New York also poses a significant health and environmental risk. There is also substantial uranium weapons contamination as a consequence of combat training, manufacturing, or research operations in Maryland, Nevada, Hawaii, Florida, Indiana, Tennessee, New Hampshire, Texas, and Puerto Rico. In all probability uranium weapons contamination is abundant throughout United States weapons firing ranges and those ranges located throughout Europe.

The previous delivery of at least 100 GBU 28 bunker busters bombs containing depleted uranium warheads by the United States and their use by Israel against Lebanese targets during 2006 has resulted in additional radioactive and chemical toxic contamination with consequent adverse health and environmental effects throughout the middle east. Israeli tank gunners are also using depleted uranium tank rounds as photographs verify.

Today, United States, British, Canadian, Australian, and Israeli military personnel are using illegal uranium munitions- their own "dirty bombs" while U.S. Army, U.S. Department of Energy, U.S. Department of Defense, British Ministry of Defence, Canadian Ministry of Defence, Australian Defence Ministry, and Israeli officials deny that there are any adverse health and environmental effects as a consequence of the manufacture, testing, and/or use of uranium munitions to avoid liability for the willful and illegal dispersal of a radioactive toxic material - depleted uranium. This directly contradicted by internal United States Department of Defense documents such as the Pentagon briefing given by Colonel J. Edgar Wakayama, Director of the Operational Test and Evaluation Command (http://www.traprockpeace.org/du_dtic_wakayama_Aug2002.html) that confirms not only lung cancer but other serious medical problems such as respiratory, eye, skin, genetic abnormalities, and specific warnings about food, water, air, and soil contamination. It is critical to understand that Assistant Secretary of the U.S. Army Walker ordered the Director of the United States Army Environmental Policy Institute to determine how to reduce the toxicity of uranium munitions and the reported conclusion was that quote "***Ways to Reduce DU Toxicity No available technology can significantly change the inherent chemical and radiological toxicity of DU. These are intrinsic properties of uranium.***" end quote. The United States Department of Veterans Affairs VISN 11 recently distributed a booklet "Some things you need to know about veterans- A Clinicians Guide to Veteran's Specific Issues" in which they state quote:

"Some of the physical symptoms which may occur as a result of exposure to depleted uranium are: sleep problems, mood swings, symptoms in upper or lower respiratory system, neuropsychological symptoms (including memory loss), chronic fatigue and immune system dysfunction (CFDIS), skin rashes and unusual hair loss, aching joints, headaches, abdominal pain, sensitivity to light, blurred vision, menstrual disorders, gastrointestinal symptoms (recurrent diarrhea), nervous disorders (such as numbness in a limb), multiple chemical sensitivity, birth defects in children whose parents were exposed." End quote

The use of uranium weapons (radioactive chemically toxic dirty bombs) is absolutely unacceptable, and a crime against humanity because they do not discriminate between combatants and noncombatants; they permanently contaminate air, water, soil, and food; and they can not be cleaned up to restore contaminated areas to pre-war or pre-uranium use conditions that would allow unrestricted use of the area. The intended use of uranium weapons while ignoring all adverse health and environmental effects was specified in the March 1, 1991 Los Alamos memo even while the March 1991 memo from the Defense Nuclear Agency warned of serious hazards

(<http://www.traprockpeace.org/twomemos.html>). Consequently the citizens of the world and all governments must force cessation of uranium weapons use. I demand that Israel now provide medical care to all DU casualties in Lebanon and clean up all DU contamination.

Simply, U.S., British, Australian, Canadian, and Israeli officials arrogantly refuse to comply with regulations, orders, and directives that require officials to provide prompt and effective medical care to "all" exposed individuals. Reference: Medical Management of Unusual Depleted Uranium Casualties, DOD, Pentagon, 10/14/93, Medical Management of Army personnel Exposed to Depleted Uranium (DU) Headquarters, U.S. Army Medical Command 29 April 2004, and section 2-5 of U.S. Army Regulation 700-48.

They also refuse to clean up dispersed radioactive Contamination as required by Army Regulation- AR 700-48: "Management of Equipment Contaminated With Depleted Uranium or Radioactive Commodities" (Headquarters, Department Of The Army, Washington, D.C., September 2002) and U.S. Army Technical Bulletin- TB 9-1300-278: "Guidelines For Safe Response To Handling, Storage, And Transportation Accidents Involving Army Tank Munitions Or Armor Which Contain Depleted Uranium" (Headquarters, Department Of The Army, Washington, D.C., JULY 1996). Specifically section 2-4 of United States Army Regulation-AR 700-48 dated September 16, 2002 requires that:

- (1) "Military personnel "identify, segregate, isolate, secure, and label all RCE" (radiologically contaminated equipment).
- (2) "Procedures to minimize the spread of radioactivity will be implemented as soon as possible."
- (3) "Radioactive material and waste will not be locally disposed of through burial, submersion, incineration, destruction in place, or abandonment" and
- (4) "All equipment, to include captured or combat RCE, will be surveyed, packaged, retrograded, decontaminated and released IAW Technical Bulletin 9-1300-278, DA PAM 700-48" (Note: Maximum exposure limits are specified in Appendix F).

United States Department of Defense leaders are not showing the depleted uranium training tapes to military personnel. These three video tapes: (1) "Depleted Uranium Hazard Awareness", (2) "Contaminated and Damaged Equipment Management", and (3) "Operation of the AN/PDR 77 Radiac Set" are essential to understanding the hazards from the use of uranium weapons and management of uranium weapons contamination. These educational videos must shown to not only United States but all military personnel from every nation that is involved in use of uranium munitions and the consequent management of uranium contamination.

The previous and current use of uranium weapons, the release of radioactive components in destroyed U.S. and foreign military equipment, and releases of industrial, medical, research facility radioactive materials have resulted in unacceptable exposures. Therefore, decontamination must be completed as required by United States Army Regulation 700-48 that includes not only uranium weapons but releases of all radioactive materials resulting from military operations.

The extent of adverse health and environmental effects of uranium weapons contamination is not limited to combat zones in the Balkans, Iraq, and Afghanistan but includes facilities and sites where uranium weapons were manufactured or tested including Vieques; Puerto Rico; Colonie, New York; Concord, MA; Jefferson Proving Grounds, Indiana; and Schofield Barracks, Hawaii. Therefore medical care must be provided by the United States Department of Defense officials to all civilians and military personnel affected by the manufacturing, testing, research, and/or use of uranium munitions. Thorough environmental remediation also must be completed without further delay.

I am disgusted that seventeen years after I was tasked to clean up the depleted uranium mess from Gulf War 1 and over thirteen years since I completed the depleted uranium project that United States Department of Defense officials and others still attempt to justify uranium munitions use while refusing to provide mandatory medical care and complete mandatory environmental remediation. Sadly, Department of Defense, Department of Energy, and Department of Veterans Affairs officials, and their representatives continue personal attacks aimed to silence or discredit those of us who demand that medical care be provided to all DU casualties and that environmental remediation be completed in compliance with U.S. Army Regulation 700-48. But beyond the ignored mandatory actions the willful dispersal of tons of solid radioactive and chemically toxic munitions contamination in the form of uranium munitions is illegal (http://www.traprockpeace.org/karen_parker_du_illegality.pdf) and just does not even pass the common sense test. According to the U.S. Department of Homeland Security, DHS, uranium munitions are dirty bomb. DHS issued "dirty bomb" response guidelines, http://www.access.gpo.gov/su_docs/aces/fr-cont.html, on January 3, 2006 for incidents within the United States but ignore DOD use of uranium weapons and existing DOD regulations. These guidelines specifically state that: "Characteristics of RDD and IND Incidents: A radiological incident is defined as an event or series of events, deliberate or accidental, leading to the release, or potential release, into the environment of radioactive material in sufficient quantity to warrant consideration of protective actions. Use of an RDD or IND is an act of terror that produces a radiological incident." Thus the use of uranium munitions is "an act or terror" as defined by DHS. Finally continued compliance with the infamous March 1991 Los Alamos Memorandum that was issued to ensure continued use of uranium munitions can not be justified.

Specific actions to mitigate the adverse health and environmental effects caused by the previous and current use of uranium munitions must be implemented. The leaders of the nations who have used and are using uranium munitions must acknowledge and accept responsibility for willful use of illegal uranium munitions- their own "dirty bombs"- resulting in adverse health and environmental effects.

They must order:

1. medical care for all civilian, combatant, and noncombatant casualties,
2. thorough environmental remediation,
3. immediate cessation of retaliation against all individuals who demand compliance with medical care and environmental remediation requirements,
4. and stopping the already illegal the use (UN finding) of depleted uranium munitions.

I pray that you and our Holy Father Pope Benedict XVI will be able to provide some influence to stimulate leaders of nations responsible for the uranium weapons catastrophe to finally provide medical care to all casualties and to complete environmental remediation. I pray that we can finally encourage the leaders of all nations to never use uranium munitions again. I pray that you will join me in my hope for Divine intervention. I pray that together we can motivate God's children, the citizens of all nations, to live together in peace. In conclusion I wish to quote Archbishop Tutu's comments to the United Nations Human Rights Council on September 18, 2008; "God is hoping that somehow you will help to make God's world a more gentle place, more compassionate place, a more caring place. And God has no one except such as you. I pray that you will be able to fulfill this high calling. It is a high calling. It is a divinely given vocation." I have accepted this calling but I pray for your help and assistance. I pray for God's assistance.

THANK YOU.

References- The following web sites provide copies of the actual regulations and orders and other pertinent official documents related to the use of uranium weapons and mandatory but ignored response to the adverse health and environmental effects. I will also send copies of these documents as attachments. The web site reference to http://www.traprockpeace.org/du_dtic_wakayama_Aug2002.html is a copy of a hidden internal United States Department of Defense briefing given by Colonel J. Edgar Wakayama that confirms adverse health and environmental effects.

<http://www.traprockpeace.org/twomemos.html>

http://www.traprockpeace.org/rokke_du_3_ques.html

http://www.traprockpeace.org/du_dtic_wakayama_Aug2002.html

http://www.traprockpeace.org/karen_parker_du_illegality.pdf

http://www.access.gpo.gov/su_docs/aces/fr-cont.html

<http://cryptome.org/dhs010306.txt>

http://www.boston.com/news/local/articles/2008/05/15/razing_urged_for_waste_site/

http://www.tdn.com/articles/2008/04/29/area_news/doc4816651072f72767559743.txt>

Photo by David Silverman (Getty Images) Image 71440735

<http://editorial.gettyimages.com>

Dear Dr. Rokke,

we corresponded well over a year ago and then I lost your coordinates. Now another piece of correspondence came across my desk relating to your work with a copy of your important note to me on the health and environmental effects of uranium munitions. Late, but here I am to thank you and resume some contact on this important topic on which I am very ignorant.

From some quick reading there seems to be enough evidence of the indiscriminate damages caused by depleted uranium munitions to raise serious questions of responsibility on the part of States using these munitions and ethical questions as well indicating that banning these munitions and the use of depleted uranium may be the correct approach for the international community.

At this point, what comes to my mind is to study the option of a binding protocol following the process we have carried out for cluster munitions and the Oslo convention. But I may be too ambitious and preliminary steps may be needed, like a strong support from the civil society.

I am sure you must have looked into the various objections States can raise and the degree of information and evidence that is accessible to civil society organizations. Also, is there an international group of experts who can present evidence based arguments for banning these munitions?

It would also be useful to know if there is any State who is interested in this humanitarian issue so as to start a coalition of like-minded governments.

I trust I have the correct e-mail. My best wishes and have a nice Easter.

+ Silvano M. Tomasi

“Casualties of War”
Major Doug Rokke, Ph.D.
U.S. Army retired
March 15, 2013

God’s dream of **PEACE ON EARTH** has been shattered by the United States’ military operations in Libya, Iraq, Afghanistan, Pakistan, Somalia, Egypt, Yemen, and the Balkans. This dream will fade even more with the probable invasions of Iran, Nigeria, and North Korea and intervention in Syria and Mali. Although our leaders tell us these countries pose a threat to our nation and a threat to our ability to sustain our precious freedoms; in reality they never have, do not now, and never will pose any actual threat to us. These nations have never attacked us except after we invaded their nations and even then the attacks on our troops and mercenaries occur within the occupied nations. Although the foundation for our nation’s military operations continues to be that our purpose and actions adhere to the “just war” rationale and that we are acting with God’s blessing, we must ask ourselves if in reality if this is national delusion. Our combat operations using radioactive “DU” munitions, chemical and biological weapons, thermobaric explosives, microwaves, torture, and conventional explosives thus destroying each nation’s infrastructure have resulted in environmental and food contamination affecting millions of God’s children. U.S. casualties for OIF-OEF-ODS include at least 47,000 wounded in action, 6000 killed in action, and over 1,000,000 who are ill due to toxic exposures, diseases, or injuries from accidents. Over 200,000 U.S. military veterans have died, with more dying each day, from disease and injuries after returning home. Suicides are skyrocketing. Families are in turmoil with abuse rampant. These casualties are due to our nation’s actions or failure to act. The casualties are “our” sons and daughters – who we all know and love and who we must care for. But there are millions of ignored and unknown casualties that include the citizens of the nations we have attacked and who we classify as less than human to allow us to justify dismissing their suffering. While we ignore these casualties the simple fact that our military uses our courts to claim and acquire immunity for extensive environmental contamination and extensive adverse health effects on Vieques, Puerto Rico; Hawaii; Indiana; Nevada; New York; Florida, Illinois; Massachusetts; Tennessee; etc. resulting from DOD preparations for our attacks on other nations is a crime against God and humanity.

Those of us who are “combat” casualties must fight for earned prompt and optimal medical care because it is deliberately denied, delayed, rationed, or ineffective. Too many of us have been required to pay for our own medical care for combat injuries because the Department of Veterans Affairs (VA) leaders have refused to help us even while these same VA leaders have been given over \$24 million in bonuses and spent over \$400,000 to sponsor a race car. Sadly, neither Department of Defense nor Veterans Affairs officials will acknowledge the number of casualties and causes of so much unwarranted suffering. President Obama said on August 4, 2009 that it would take years to fix the VA. While the VA does provide some good care, problems continue to escalate. Each day reveals more serious problems within the VA and DOD that are simply ignored to avoid resolution. While both the VA and DOD deny any correlation between burn pit exposures and consequent adverse health effects an internal Army

memo dated April 15, 2011 confirms the health problems and directs all personnel to seek VA medical care. BUT THAT CARE IS DENIED, DELAYED, AND INEFFECTIVE! During a US House of Representatives Veterans Affairs committee meeting on March 13, 2013 “ Dr. Steven Coughlin, an epidemiologist formerly with the VA’s Office of Public Health, told the House Veterans Oversight Committee that when results of research he conducted didn’t gel with unwritten department policies on the health consequences of oil-well fires, burn pits, pesticides, nerve agents and other pollutants, the information disappeared.” **(VA doctor: Health data suppressed, manipulated; Patricia Kime** – Army Times, Staff writer; Mar 13, 2013; www.armytimes.com). The delayed and denied medical care is resulting in deaths and ineffective medical care as confirmed during congressional hearings on March 14, 2013. “Internal Veterans Affairs Department documents show that at least two veterans died last year waiting to see a doctor while others couldn’t get primary care appointments for up to eight months, members of a House oversight and investigations panel said Thursday”. The VA also is cancelling appointments and consultations because of inadequate staffing. “Evidence shows that many VA facilities, when faced with a backlog of thousands of outstanding or unresolved consultations, decided to administratively close out these requests. Some reasons given included that the request was years old, too much time had elapsed, or the veteran had died,” said Rep. Mike Coffman, R-Colo., chairman of the House Veterans Oversight and Investigations panel.” ” **(VA wait times mean some die before getting care; Patricia Kime;** www.armytimes.com; Mar 15, 2013). While VA VBA also has a claims backlog approaching one million caused by toxic exposures not battlefield wounds- injuries that they seem unable and unwilling to resolve. AFTER THE JUNE 2012 VA RESEARCH ADVISOR COMMITTEE MEETING THE COMMITTEE ISSUED A REPORT CONDEMNING THE VA IN THAT THE VA HAD FAILED IT’S MISSION SPECIFICALLY **(report http://www.va.gov/RAC-GWVI/docs/Committee_Documents/CommitteeDocJune2012.pdf. Please also read Anthony Hardie’s article on this issue at <http://www.91outcomes.org/>.):**

1. VA Misdirected Gulf War Illness Research, focusing on efforts against Gulf War veterans rather than working to improve our health;
2. VA Misrepresented Scientific Conclusions About GWI and the effort being made to address it, including whitewashing GWI out of a major, groundbreaking, consensus-developed strategic plan that had previously been aimed squarely at GWI treatments
3. VA Ignored Public Panels (such as the RAC), including in a major national study that ignored GWI and instead focused largely on long discredited "stress" and psychological issues
4. VA Slashed GWI Research Budget by two-thirds, from \$15 million per year to less than \$5 million per year

5. VA Failed to Follow Law (1), by not contracting with the IOM to research multiple sclerosis among Gulf War veterans, as mandated by Congress.

6. VA Failed to Follow Law (2), by not researching treatments for physical ailments as mandated by Congress, instead focusing on scientifically discredited "stress" and psychiatric theories, in a new IOM "treatment" panel created this year.

PTSD and suicides are ravaging our veterans, active duty personnel and their families while an effective response seems elusive as confirmed recently by the National Academy of Sciences. Recent VA reports indicate that one veteran is committing suicide every 65 minutes. THAT IS A TRAVESTY!

According to the Speaker of the U.S. House of Representatives John Boehner the claims backlog that is approaching one million indicates despite continued congressional requests that the VBA seems to be broken (**Boehner: Veterans' claims system is broken**; Lisa Cornwell - The Associated Press; Friday Feb 22, 2013). It is painfully obvious to those us left in limbo that VA officials do not want to admit the extent and causes of over one million casualties resulting from complex toxic exposures and consequently provide veterans prompt and optimal medical care. I must ask how many times must congress direct and veterans ask VA leaders to solve the lingering problems before decisive corrective action is taken?

Finally the Institute of Medicine released their report the [Gulf War and Health, Volume 9: Treatment for Chronic Multisymptom Illness](#) on Wednesday, January 23, 2013, [IOM website](#) that confirms what many of us have said for years that over 1 million Operation Desert Storm, Operation Iraqi Freedom, and Operation Enduring Freedom veterans have similar medical problems requiring specialized and coordinated medical care as a result of the complex toxic battlefield exposures we all incurred. Now the VA and DoD must assume responsibility and take care of us without anymore delay. However all we hear is excuse upon excuse instead of action.

This is all nonsense! President Obama simply orders General Shinseki to fix the problems or hires someone who will. But the fix will require a significant philosophical change that requires all VA employees to become advocates for injured, ill, and wounded veterans. As an Army WMD, counter-terrorism, and environmental expert I was ordered to ensure that all civilian and military casualties receive medical care and that environmental contamination is cleaned up. Therefore, I authored the adopted but ignored Department of Defense regulations and procedures to optimize environmental remediation to minimize health threats of depleted uranium weapons and thus reduce medical care requirements. After these requirements were ignored I chose to speak up publically to educate the citizens of our nation and citizens of all affected nations and thus ensure compliance with medical care and environmental remediation requirements. In order to sustain the use of uranium weapons, our own toxic radioactive dirty bombs, during current and planned military operations Canada released a report on Feb. 6, 2013 "Depleted Uranium and Canadian Veterans: A Review of Potential Exposure and Health Effects" that once more denies any correlation between depleted uranium contamination exposures and adverse health and environmental effects while ignoring verified medical problems and environmental clean up requirements. (http://www.traprokpeace.org/rokke_du_3_ques.html)

http://www.traprockpeace.org/du_dtic_wakayama_Aug2002.html). We can never justify contaminating air, water, soil, and food with radioactive weapons but our military leaders have decided to do so (<http://www.traprockpeace.org/twomemos.html>) .

Consequently, my colleagues and I have been subjected to overt retaliation in an effort to silence us to prevent veterans and families from learning about: (1) DOD and VA reports confirming adverse health and environmental effects; and (2) ignored directives, orders, and regulations mandating medical care and environmental remediation. Despite our continuous efforts to help all of God's children and protect his creations mandatory medical care and environmental remediation are still being denied, delayed, rationed, or ineffective while unjustified and preemptive war designed to control terrain, resources, and people continues. We can no longer treat the earth and God's children with such contempt and claim the divine right to intervene in so many nations with God's blessing. While we wait impatiently for divine intervention, we must ensure that these injustices are stopped with medical and environmental consequences alleviated but above all we must remember that if there is to be peace on earth it must begin with each of us and thus we cannot just ignore our responsibilities as peace makers.

In a message dated 5/30/2014 4:15:28 P.M. Central Daylight Time, Jen.White@mail.house.gov writes:

Doug,

I understand I missed you when you stopped by. Could you give me a call on Monday about the scanned document you did not get-that was blank. I want to make sure I get you the right one.

Jennifer White

Constituent Services Director

Rep. Rodney Davis, IL-13

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From: Dlind49@aol.com [mailto:Dlind49@aol.com]
Sent: Thursday, May 29, 2014 1:39 PM
To: douglas.shouse@va.gov
Cc: White, Jen
Subject: Fwd: Veterans' Job & Resource Fair

Doug: I just called and talked to Linda in Mr Rivera's office. Linda asked me to send this flyer to you for posting all around Illiana VA. If possible could you please put in on the web site?

If you have any question please call Jen.

thank you,

Major/ Dr Doug Rokke

217 643 6205

From: Jen.White@mail.house.gov
To: dlind49@aol.com
Sent: 5/27/2014 11:31:14 A.M. Central Daylight Time
Subj: Veterans' Job & Resource Fair

Doug,

Here is our Veterans Job & Resource Fair Flyer. Thank you for helping to spread the word. We appreciate it!

Jennifer White

Constituent Services Director

Rep. Rodney Davis, IL-13

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