

Attachment 1. The Filer: Amanda & Ryan Rose

We, the filer, Amanda & Ryan Rose, are strongly in support of decreasing exposure limits through FCC regulation. Current FCC exposure limits are based on the cellular heating effects of wireless, not the many other biological cellular effects. As surely you must know, a very significant research effort has been underway for many years, beginning in the mid-90s and increasing dramatically in the last several. These results indicate serious effects from constant or frequent, repetitive exposure to wireless fields that negatively impact the cellular functioning of all lifeforms, the basis of all life. We reference here the Bioinitiative Report (over 600 pages, produced mostly by pro bono contributions of concerned international scientists, and not attached here out of courtesy due to page length); scientists at the Nobel prize-winning Karolinska Institute in Sweden; the conversion from pro to con of Dr. Devra Davis, an original proponent of, and contributor to, the 1996 Telecommunications Act, who has reversed positions and is now actively involved in the international research effort to prove, unequivocally, that there are dangerous biological effects from wireless radiation as currently allowed; and many others, including the recent decision of the Supreme Court of the nation of India (See **Attachment 2**, a .pdf portfolio, which is somewhat voluminous, but the decision of the Supreme Court of India is on two pages at the end) to limit and REGULATE wireless, to use that word that is anathema to ideologues who believe in deregulation of every sort, whether rational or not. **Attachment 3**, "Governments And Organizations That Ban Or Warn Against Wireless Technology," provides a March 2013 listing of international governments and organizations that favor decreasing or eliminating exposure limits. Also, as you may know, Electromagnetic Sensitivity is recognized by the Americans with Disabilities Act, the US Access Board, and numerous commissions.

We have discovered from personal experience that there is a threshold beyond which these effects become apparent through deleterious health symptoms. In our case (the filer), our entire family has experienced these symptoms, even though we have never installed wireless in our home nor owned a cell phone. A short summary of the three of us and our history/symptoms follows:

Son, formerly exposed only seldom before leaving home for college, and with NO history of seizure, experienced a *grand mal* seizure in his second year of college, where he was exposed 24/7 in classrooms, dormitory, and throughout the campus. The seizure was brought to a close by inducing a coma. Emergency room and follow-up hospital diagnosis failed to prove any cause, although later, a physician specializing in multiple chemical sensitivity and electromagnetic sensitivity, recognized the symptoms as electromagnetic sensitivity. His reaction diminished over a fairly short time because he left the 24/7 field by returning home to this very rural area, learned stress management techniques, and began taking anti-seizure medication. He is now at Cornell in a Ph.D. physics program. The only way he can complete his higher education and live in the conventional world is with anti-seizure medication and stress management. We all consider this a very expensive travesty, but are aware that his considerable attention to stress management techniques, which are beneficial practices, is essential in managing his condition as well as the side-effects of the drug, which we hope will not increase. (See **Attachment 4**.)

Mother (Amanda Rose, filer 1 of 2) crossed her threshold, or alternatively, developed symptoms, when a neighbor installed wireless that radiated into our home: When I first heard about wifi sensitivity, I must admit it seemed really off the wall. That is a very common response, quite likely because our country is not paying attention to the issue as deeply as Europe, Israel, and India are, and because one cannot see, touch, smell or taste wireless. It exists, but not to our usual senses. Although skeptical, once I crossed the threshold I could not continue to deny this as a very serious and real disability. The most common problem is the first one I noticed: inability to think well. I was trying to plan our son's high school graduation and could not figure out who was invited or what food would be served. I am of decent intelligence, an avid cook and delighted with our son; there was no reason this should have been so difficult. I would sometimes simply sit and cry because it was so utterly frustrating that I was having such difficulties with these simple tasks. It is quite common for those who have this sensitivity to take hours to accomplish something that normally would have taken very little time and would be easy to do. The source of the wireless signal was from the home behind ours and was in direct line through our large kitchen window. I often felt really bad when doing the dishes right at the window. I had had a mole on my back that my health care provider had repeatedly warned me to have removed, as it seemed likely to become cancerous. Within a few months of the neighbor's installation of wifi, it did. Fortunately, I have not had any recurrence after having it removed. With these issues we decided to talk to our neighbor about removing her wifi and going to DSL instead, which we offered to pay for. She basically refused although she eventually said she would turn it off when not in use. That meant that occasionally she turned it off for a brief stint. I found that I usually knew when it went off and when it went back on, as I would suddenly feel better and then suddenly feel worse again. I never knew when she would be choosing to turn it off or on, but my body could tell me. Eventually she took us up on our offer to remove wifi and install a landline phone and DSL. This phenomenon of knowing when I am in a wifi field has persisted over the years. Just recently I attended a dinner celebration at my husband's workplace where we had made sure that all the wireless was turned off for the evening. However, after the dinner as I relaxed and the intensity of riveted discussion fell away, I noticed that I felt as though I had been in heavy wifi, and could not understand how that could be. The next morning it dawned on me that most of the folks at the dinner had cell phones, and so I was being bathed in EMR after all. The lady referred to above moved out within about 6 - 9 months of us paying her DSL bill, and the new tenant agreed not to use wireless. However, after several months I began feeling symptoms at home again and did not know why. I picked up a wifi hotspot detector and, to my shock, found we had a wireless signal in the house again. I followed the signal, via the device's bar-intensity readout, to her house and asked her if she had started using wifi, to which she answered *no*. The next morning I suddenly felt much better and looked at the clock - 10am. Later that afternoon she saw me and told me that, sometime earlier, she had been given a router which she was not using, but had discovered that it was *on*, and that she had turned it off at 10am. The instances in which I think that I am not in wifi, but my symptoms tell me I am, are numerous. It is almost like I am a flower that wilts in wireless, and when I remove myself or have it turned off, it is like I have just been watered. I go to a nearby town once a week to do our shopping, and I take a day to recover from the almost ubiquitous wifi presence. **I cannot travel much, I cannot visit or help out with my father in Seattle who has Lewy Body disease and now Parkinsons, and do not go out to eat (almost all restaurants have wifi for their**

customers); I live a very small life. I sometimes wonder what would happen should I find myself needing to go a hospital, which are all full of many wireless signals, so that going to the hospital could be more harmful than the problem that might have arisen. It is a disconcerting thought. **Although we do all we can to keep our exposure as minimal as possible, I now have issues with my heart as well, and, I continue to find that wireless signals usually leave me feeling depleted and foggy-brained - at times I look like the life force has been sucked out of me.**

Father (Ryan Rose, filer 2 of 2). I was exposed, unknowingly, at work for several years, but upon returning home after work entered a no-wireless, or low-wireless, field. The home's outer walls are of thick adobe, constructed in the early 1900s, and are partially effective in reducing the penetrating nature of wireless. Furthermore, the bedroom is protected by two adobe walls, so sleep—the best time for physical rejuvenation—was fairly well insulated from invasive electromagnetic radiation. However, as mentioned in my wife's description above, the neighbor's installation of wireless (wi-fi) was enough 24/7 exposure to bring my body across the threshold. By the time I felt symptoms, my wife and two neighbors already had, and I was still skeptical. Nevertheless, one evening while washing a lot of dishes in the kitchen, which is closest to our neighbor and exposed through a large window and a frame add-on porch (non-adobe), I experienced what I can only describe as the oddest feeling: my stomach felt as if it turned over. I immediately realized it was my body's reaction to our neighbor's wireless. After that I was no longer skeptical, so as with so many people today throughout the world, I began, reluctantly, starting to learn about wireless, even though I was extremely busy with my consulting work. With a technical background (BS in Aerospace Engineering) and prior work with NASA on the Apollo Program (Cape Kennedy & Manned Spacecraft Center - Houston), I was in possession of the basic physics to begin that unwanted learning experience. That has led to this response to the FCC's request for Comments on Notice of Inquiry, ET Docket No. 13-84. My symptoms mainly manifest in digestive disturbance—nausea and achlorhydria. Occasionally, a mild headache will occur, of which I used to be blessed with none.

The two of us now refrain from exposure whenever possible. **So that you will know that we are serious about this,** we remind you that we paid for our neighbor to remove her wireless and install a landline. More recently, we found it necessary to request assistance from the USPS Inspector General in removing a wireless signal from our local Post Office, which is very nearby, as it had a signal that was invading our home and creating symptoms. It was removed quite quickly once our complaint was received (wireless is not permitted in postal facilities, probably because it interferes with their equipment). We understand that in the wake of Hurricane Sandy, no telephone/DSL land lines are being reinstalled in that area. This could be a very serious problem were that to happen to us, as it must be for any who have the same disability. Unfortunately, since this problem is not being discussed widely and is still not recognized by the majority in the medical profession, many are going undiagnosed.

As you know, there is a highly profitable and powerful cell phone/wifi lobby that would try to convince you that there are no health liabilities arising from their technologies. We request that the FCC delve into this issue more deeply than it has previously. Just think: if

wireless systems are found to need re-structuring, industry as a whole would have a rejuvenated source of revenue—new cell phones, new routers, modified towers, etc.

Erica M. Elliott, M. D.

board certified in family practice and environmental medicine

June 21, 2010

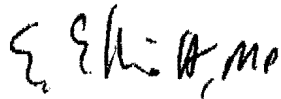
TO WHOM IT MAY CONCERN:

Re: Peter Rose

I am writing on behalf of my patient, Peter Rose, who suffers from hypersensitivity to electromagnetic fields. Under the Americans With Disabilities Act, I am requesting that he be given reasonable accommodations. Specifically, Peter Rose needs a room that is free of microwave radiation from wireless devices. When he is exposed to intense wireless frequencies, he is at risk of having seizures.

If you have any questions regarding my recommendations, please do not hesitate to contact me.

Sincerely,



Erica M. Elliott, MD

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