

October 21, 2026

Robert F. Kennedy, Jr.,
Secretary, Department of Health and Human Services.
[FR Doc. 2026-19252 Filed 9-17-26; 12:30 pm]
BILLING CODE 4164-01-P
HHS

Dear Secretary Robert F. Kennedy, Jr.,
I am submitting this comment in response to HHS's Request for Information on Electromagnetic Fields (EMFs), Radio-frequency (RF) Radiation, and Wireless Radiation Exposure.

With deepest thanks for all that you are doing on our behalf, and with thanks for the opportunity to submit my comments in response to this RFI.

Sincerely,
Kate Reese Hurd

Here are the numbered RFI QUESTIONS with answers provided after them:

Public Experiences and Reported Potential Adverse Health Effects

2. I am an individual, a consumer and shopper and a user of healthcare services. I used to attend all manner of cultural and educational events, go to art galleries and travel to see family who live distant from me and to participate in national or international conferences in my profession.

3. We invite individuals, families, caregivers, healthcare professionals, and organizations to share experiences regarding potential adverse health effects they believe may be associated with exposure to RF/EMFs.

FOUR DEVICES/CIRCUMSTANCES to report to you – 3.1 to 3.4:

3.1 a. The cordless phone and charging cradle at home.

b. This was my wake-up call in 2013. I had been using this wireless device in my bedroom for about three years.

c.d. During these three years (in retrospect, I can date it to my installation of the cordless phone), I was having increasing trouble with my heart-beat. It was skipping beats, making hard beats. This arrhythmia became so intense that I could not lie on my left side in bed because the weight of my body was too much on my heart. No position was comfortable or really relieved it. In my neck and upper body every night, I felt the uproar of erratic heavy beats in my chest and blood vessels. This was extremely disturbing to me psychologically, not just physiologically.

One day, a friend told me that people were reporting health problems after the installation of a 'smart' meter on their home. I did not have one of these on my home, but I decided to look into this. On the web, I very soon came across a double-blind study on heart-beat disruption from wireless cordless phone radiation.

e. I had been on the verge of seeking medical treatment, but had refrained from this because I knew that intervention for my heart-beat would probably mean that an electronic pacemaker device would be implanted in my chest. I absolutely did not want this. AND when one engages a medical practitioner to *diagnose* a problem, that practitioner typically assumes one's compliance with the intervention that *they* intend to apply. And they do not necessarily grant you the right of informed consent or denial of this intervention. The insurance companies also *expect* you to follow the 'standard of care' (drugs, surgery, etc.), whether or not this intervention is wholesome for you *as an individual*, and whether or not other options exist that would be better and less dangerous (and less expensive). Practitioners also tend to resist education on impacts from wireless radiation – something about which they often do not know and perhaps do not want to know or do not believe they need to know.

f. I took action. I unplugged and removed the cordless phone and charging cradle and re-installed a land-line-only phone (no electric plug-in to produce WiFi signals). *Almost instantly, that day or within just a couple days, my heart-beat settled back down to normal.* It was night and day. It was evident that the cordless phone signals had been directly interfering with the subtle signals of my natural heart's biological pace-maker cells. When I removed that interference, my heart settled down. It appears that the constant bombardment in my home everyday was especially problematic. My heart-beat does not instantly disrupt in the presence of a cordless phone, but this might be because I keep my distance and *it is temporary.*

g. I began to do more research. I purchased a \$200 radio-frequency detector (I now have a \$400 model from Safe Living Technologies). I began to learn which devices were emitting wireless radiation, how much and how often. I found out that the cordless phones (I checked all of them in the homes I was in at that time) and they are broadcasting huge amounts of wireless radiation constantly, 24/7, *whether or not a call is coming in or being had.* This is utterly needless! The biological impacts are real. The documented wide-range of these impacts were presented at the EMF Medical Conference 2021 (link is here).

➤ **Heartbeat Disruption from Cordless DECT Phone - double-blind study conducted by Dr. Jeff Marrongelle, presented at the EMF Medical Conference, 2021, by Dr. Magda Havas, <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/HeartbeatDisruption-CordlessPhone-DECT.pdf>.**

➤ **The EMF Medical Conference 2021, <https://emfconference2021.com>.**

➤ **Index to the 61 Conference videos: <https://static1.squarespace.com/static/5ed0007ce169954eea17b10b/t/660d7af4d9ddfc37c2bcfe08/1712159476762/EMF+Medical+Conference+2021+Video+List+with+Links.pdf>.**

3.2 a. The millimeter wave scanner (AIRPORT) and the IN-HOME wireless internet router/cable box WiFi to the computer WiFi.

b.c.d.e. In 2013, after I resolved the problem of my heart-beat, I traveled by air. Without thinking, I went through the walk-through metal detector – the millimeter wave scanner. Plus I experienced a long delay inside the airport, during which I was bombarded by everyone's cell phone signals and the EMF radiation from monitors and other electronic installations there. Very soon after I returned home, I began experiencing insomnia. It quickly progressed such that I began to dread bedtime because I was desperate for sleep but I knew that I would struggle to get to sleep and stay asleep.

I sought relief through herbs and homeopathy without much success, but at least without risk to myself from these. I did not seek medical advice because I could not accept the egregious 'side effects' of the typical drugs that would be prescribed as 'standard of care.'

f. In my research, I came to understand that wireless radiation can cause insomnia. I purchased the necessary ethernet cable and adapters to install between my internet router/cable box and my computer. I sought help from my internet provider and learned how to shut off the WiFi from the router/cable box and at my computer. after I got the ethernet cable installed. *This changed everything.* However, unlike with the restoration of my heart-beat, this interference from the wireless internet router radiation was not direct. It was interfering with my body's production of neurotransmitters and regulation of hormones, thereby wrecking my circadian rhythm. Hence, it took a couple weeks for the hormones and this sleep-wake rhythm to restore.

g. Supporting documentation relative to internet router WiFi:

➤ **Cress Seedlings Die Next to Internet Router WiFi - beautifully-designed study by young scientists in their school who were suffering concentration problems and difficulty sleeping, <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/CressSeedsDie-RouterWiFi.pdf>.**

➤ **Seedlings Stunted Next to Internet Router WiFi - study conducted by Dr. Magda Havas, <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/SeedlingsStunted-RouterWifi.pdf>.**

3.3 a. The multiple wireless routers and countless cellphones encountered in venues such as the local community college auditorium

b.c.d. The nature, duration, frequency, and approximate timing of the reported exposure(s). An app on a friend's cell phone showed that there were at least twelve internet routers signaling into the Community College Auditorium. About 150 or more cell phones were on. My eyes began to ache and burn in my head. This has happened on other occasions of intense wireless exposures. Each time, it has taken about a day and a half for the eye pain to relieve. But I am concerned about the less obvious impacts that these exposures are

having on my eye tissues and on other body tissues. We need to know much more, and we need to stop the needless exposures.

e. I have mentioned these impacts to medical professionals. They have nothing to say, no help to give. They are uneducated. I have provided the link to the EMF Medical Conference 2021, so that they can begin to learn.

f. I have to avoid these public venues. Recently, I finally did my Driver Safety course online. In past decades, I took the class at my local Community College. I miss that. And it is also important to note that *the class is more effective in changing driver behavior when the class is in person*, not online. But now I cannot take it in-person. It is unsafe to be at the college.

g. Supporting documentation.

➤ **Red Blood Cell Trauma from ‘Smart’ Phone Radiation**, <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/RedBloodCellTrauma-SmartPhones.pdf>.

➤ **Blood Brain Barrier, BBB, Damaged by Cell Phone Radiation**, <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/BBB-Damage-CellPhones.pdf>.

3.4 a. The ‘smart’ meters rolled out in my village and at my town park.

b.c.d.e. The nature, duration, frequency, and approximate timing of the reported exposure(s). It is now the case that I cannot take walks freely in my village. I will not go to visit a friend at her charming row house because every single one of the close-knit doorsteps there has one or more ‘smart’ meter next to them. These are also very near the sidewalk, meaning that pedestrians are also jabbed with the spikes of radiation that shoot out at about 15 minute intervals. I have taken readings all along there, and my **Safe and Sound Pro II detector** (see link here) always shoots in to the red zone, danger. I keep my distance.

However, although I was able (for now) to keep my trust non-radiating analog electric meter, my downstairs neighbor has a ‘smart’ meter. It is on the outside of my entry room. I have put blocking material on the wall to reduce the radiation into my rooms, and the detector shows reduction. However, there is a bank of 4 ‘smart’ meters and a yard meter nearby that aim in my direction. I am concerned about the cumulative effects of their combined 24/7 spikes of radiation. I have not discerned symptom, such as my tinnitus, as being tied directly to these exposures. It is oftentimes becoming impossible to determine which radiation exposure is the culprit. That is why wholesale reduction is necessary, from ALL devices and sources.

f. My walks in the village are now strange. To avoid the ‘smart’ meter radiation, I must leave the safety of the sidewalk, cross the street and walk along until I am past these meters that have been installed **in the public right-of-way right at head level**.

In one place, a single telephone pole has one ‘smart’ meter facing the walker in the uphill direction, and another facing the walker in the downhill direction. It spikes radiation at the public both coming *and* going.

I ask: what if a pedestrian unknowingly stops to chat right there with their head mere inches away from this radiation device? Radiation warnings must be posted.

g. Supporting documentation.

➤ **Red Blood Cell Trauma from ‘Smart’ Meter Radiation**

<https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/RedBloodCellTrauma-SmartMeters.pdf>

➤ **‘Smart’ Meter Harms: U.S., Australia and Maine Surveys of Symptoms. Some of the comments from the respondents are included,**

<https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/SmartMeterHarms-SurveyCharts.pdf>.

➤ **Safe and Sound Pro II RF meter - rechargeable**, <https://safelivingtechnologies.com/products/new-safe-and-sound-pro-ii-rf-meter-rechargeable.html>.

➤ **“Overview: Fire and Electrical Hazards from ‘Smart’, Wireless, PLC, and Digital Utility Meters”**

<https://smartmeterharm.org/wp-content/uploads/2019/07/fire-and-electrical-hazards-report.pdf>.

4. We invite healthcare professionals, researchers, and public health practitioners to describe observations from clinical practice, occupational settings, or research that may help identify patterns, if any, of reported potential adverse health effects associated with RF/EMF radiation and exposure. In describing these observations, please include where available:

h. The types of potential adverse health effects reported.

i. Onset of potential adverse health effects.

j. Characteristics of the individuals or populations involved, excluding any identifying information such as PII or PHI.

k. Any observed exposure patterns.

l. What standardized methods were used to assess exposure or potential adverse health effects, if any were used.

m. Recommendations for future research or surveillance.

Exposure Standards and Risk Assessment [5.-6.]

5. What existing national and international exposure standards, guidelines, or regulatory frameworks should federal health agencies consider when evaluating the potential adverse health effects of human exposure to RF/EMF?

Please pay attention to what the **ICBE-EMF group** is doing. the **International Commission on the Biological Effects of Electromagnetic Fields**, <https://icbe-emf.org/>. Also explore how other nations have perfectly good cell phone service with vastly lower tower radiation. Pay attention to the studies done in Brazil showing cancer in the vicinity of cell towers (see Cancer Death link here).

n. What scientific, technical, or regulatory **changes** by federal health agencies, if any, would improve the **assessment, disclosure, and regulation** of wireless radiation exposure?

o. Is additional research needed to develop, test, and evaluate the effectiveness of procedures and techniques for minimizing exposure to electronic product radiation? Where are the largest gaps, if any, in knowledge? What research is needed to appropriately evaluate current or future national and international exposure standards, guidelines, or regulatory frameworks.

p. How, if at all, should a classification system account for exposure-related characteristics, including operating frequency, power density, specific absorption rate (SAR), electric- and magnetic-field strength, modulation and pulse characteristics, duty cycle, beam-forming, simultaneous exposure to multiple frequencies, duration of exposure, distance from the source, proximity to the body, and cumulative exposure over time?

YES YES YES. All of the above is absolutely needed. We have proceeded without care because we have been led to believe that these radiations are by-and-large harmless. So we have not adopted sensible habits regarding exposures and have not designed devices rationally in light of the dangers.

➤ Wireless Radiation Exposure Limits, US and other Nations

<https://eurythmyfoundationmatters.website/wp-content/uploads/2025/07/RadiationLimitsNationsKRHEHT11x8.5pdf.pdf>

➤ Cancer Death Rate rises near Cell Towers

<https://eurythmyfoundationmatters.website/wp-content/uploads/2025/10/CellTowersCancerDeathsRise2pgpdf.pdf>.

➤ DNA is damaged by both ionizing gamma ray radiation and non-ionizing wireless radiation: the Comet Assay images – DNA damage leads to Cancer, <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/06/DNACometAssay11x8.5pdf.pdf>.

6. What scientific evidence exists about potential adverse health effects caused by current exposure limits?

There is already a HUGE amount of scientific evidence that our current U.S. exposure limits are allowing extensive harm to all living beings, ourselves included. See all of the images and texts I have provided as links to pdfs.

Stacks and stacks of documentation of peer-reviewed science were presented to the Court. This evidence of harm led to the Court ruling against the FCC in August 2021, and again to the ruling against the FCC by the U.S. Court of Appeals, D.C. District on August 26, 2026 in response to the **Writ of Mandamus** filed against the agency. **This documentation is already more than sufficient evidence of the harm.**

However, handling our mistakes with this radiation and correcting our direction will require more research. The harm is clear. The means to handle that harm, to protect against it, to curb it and as much as possible end it – this will require new methods. This is a high responsibility that we must all share now.

In addition, our federal government itself has been aware that this harm would come if we did not take action to address the continual rolling out of equipment that generates electromagnetic fields and overt pulsed wireless signals.

I presented information to my local village and town boards and provided them a concise timeline of the key events in our U.S. government and agencies regarding wireless radiation. It reveals how we **knew** we must act but failed to do so. The time to act is **OVERDUE**. It must happen now. This document provides links

to the **studies** that were done by the the U.S. Military (1940-1960) and by the U.S. Office of Naval Medical Research (1971), plus U.S. scientific documentation of biological and psychological harm to our embassy personnel from Russian low-level (i.e., non-thermal) microwave harassment/attacks, 1953-78. The Russians also carried out studies *spanning 30 years*, which our government and scientists knew revealed harm from EMF exposures.

The Radiation Control for Health and Safety Act of 1968, Public Law 90-602, gave broad authority to the Secretary of HHS to regulate, research, and enforce safety compliance on all radiation-emitting electronic products, which include both ionizing and non-ionizing radiation (wireless/EMF). As I understand it, these tasks are to be *executed* through the FDA.

We are at a critical juncture, where the Secretary of the HHS must carry out and enforce the full scope of this law.

► **Wireless Radiation History: Steps and Missteps - a timeline of our U.S. Government's knowledge of the EMF/RF danger (with links)**, <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/WirelessRadiationHistory-Steps-Missteps.pdf>.

► **Wireless Radiation Exposure Limits, US and other Nations**
<https://eurythmyfoundationmatters.website/wp-content/uploads/2025/07/RadiationLimitsNationsKRHEHT11x8.5pdf.pdf>

Measuring Human Exposure and Public Health Surveillance

7. What scientific methods are currently available for accurately characterizing individual and population-level RF radiation exposure?

Here are some materials concerning one of the exposures which needs to be accounted for, prevented and/or remediated:

► **Lecture 4: Dirty Electricity, at the EMF Medical Conference 2021**, <https://vimeo.com/showcase/10624511/video/862695714>.

► **Dirty Electricity Frequencies from 'Smart'Meters: Sick Buildings**
<https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/DirtyElectricity-SmartMeters-SickBuildings.pdf>

8. What, if any, improvements in exposure assessment methodologies are needed to better evaluate real-world exposure conditions?

9. What, if any, technical and exposure-related information should be disclosed to consumers, residents, workers, schools, healthcare providers, and local governments?

A great deal should be disclosed to all of us.

I agree whole-heartedly with the **New Hampshire Commission's 2019 recommendation** (link is here to a summary of them that I prepared) that **signage** is necessary to give warning to vulnerable people (e.g., pregnant persons, children, the elderly, the already-sensitized or ill) that an area is suffused with a concerning level of wireless/EMF radiation.

In fact, the posting of exposure level information should ALWAYS be expected. This is the only way we will begin to wise-up collectively. Many people just don't know that their devices and environments are harming them.

► **The New Hampshire Commission to Study the Environmental and Health Effects of Evolving 5G Technology - a summary of the 2019 recommendations**, <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/05/NewHampshire15Recommendations.pdf>.

► **Cancer Death Rate rises near Cell Towers**
<https://eurythmyfoundationmatters.website/wp-content/uploads/2025/10/CellTowersCancerDeathsRise2pgpdf.pdf>

10. What data sources or surveillance systems currently exist to monitor potential adverse health effects associated with RF radiation exposure? Should additional data sources or surveillance systems be developed? Please discuss the benefits and challenges of the following data sources and surveillance systems, as relevant:

- disease registries.
- occupational monitoring. OK

- c. environmental monitoring. OK
- d. longitudinal cohort studies.
- e. bio-monitoring.
- f. adverse event reporting.
- g. disease or illness clusters. OK
- h. Other.

I believe that many of these are problematical for the reason that they can be laid hold of for reasons which can violate individuals and compromise human freedom. The surveillance state model must not be facilitated and adopted.

11. Should exposure assessment or risk evaluation differ for sensitive populations such as those noted below?

I believe that what is best for 'sensitive populations' is in fact what is best for everyone. There is no known 'safe' exposure level from human-generated wireless radiations.

- a. children.
- b. pregnant women.
- c. older adults.
- d. individuals with implanted medical devices.
- e. workers with elevated occupational exposure.
- f. individuals with preexisting medical conditions.
- g. Other populations that may uniquely experience potential adverse health effects in response to RF radiation.

Nurses can and need to be helpful in assessing the environmental threat of wireless exposures being experienced by their patients. See the chapter about this:

➤ ***E-Textbook – Environmental Health in Nursing. Chapter: “A NEW FORM OF ENVIRONMENTAL POLLUTION: WIRELESS AND NON-IONIZING ELECTROMAGNETIC FIELDS,” Third Edition, July 2023, p. 136ff (PDF p. 143ff), <https://envirn.org/e-textbook/>***

Existing Evidence

12. What scientific evidence exists regarding potential adverse health effects associated with RF radiation exposure at levels below current federal exposure limits?

Please see my entry at question 6.

13. According to scientific evidence, how do the technologies below affect cumulative exposure patterns?

These exposures are from all directions, also from space, and are cumulative and involuntary. None of this is acceptable. This is TOXIC TRESPASS.

Longitudinal studies conducted by Russian scientists between 1960 and 1996 showed that the harm of the EMF radiation is not evident at first, but it is **cumulative** over time, and after a duration of a few years, it is irreversible. They listed the adverse effects, which are confirmed and well-known in the current peer-reviewed literature. (I am attaching a pdf document which includes excerpts from the Russian study findings.)

➤ ***Health Implications of Long-term Exposure to Electrosmog: Effects of Wireless Communication Technologies, A Brochure Series of the Competence Initiative for the Protection of Humanity, the Environment and Democracy e.V., Brochure 6, Karl Hecht, https://kompetenzinitiative.de/Publikationen/KI_Brochure-6_K_Hecht_web.pdf***

Above all, **individuals must have a choice** concerning the exposures they wish to accept from these. The danger of many of these is that we cannot personally shut them off. With the exception of **f.** wearable devices and **g.** 'smart' home appliances (*so long as we have access to the safe 'stupid' appliances*), we have no choice.

a. 5G. These antennas on poles and along roofs and added to towers, emit dangerous radiations. If a person's residence happens to be squarely in the direction of a beam, one gets an extreme amount of this pulsed wireless and cannot avoid it. This is Toxic Trespass.

b. 6G. Do we have any choice and control over our exposures in the new generation of wireless technology? We must have choice and control. This is Toxic Trespass.

c. Wi-Fi. I have no control over the wireless radiation that comes to my residence from the devices that nearby residents or tenants plug in, that broadcast 24/7. This is Toxic Trespass.

d. Satellite-based communications. Involuntary exposures of everyone on the planet. **The new 800 giga Hz spectrum that is being approved should be rescinded. No such radiations that are meant to penetrate buildings from space should be allowed.** Not only are their adverse effects on health of all living beings indoors and out unacceptable, but the total surveillance capability that is made possible by suffusing all environments with wireless radiation from all directions is alarming. This must not be allowed. This is Toxic Trespass.

e. Internet of Things (IoT). This is wholesale, data-collection and uncontrolled surveillance in the name of convenience. This is Toxic Trespass and Surveillance Trespass.

f. Wearable technologies. OK, if we have choice, and warning must accompany these.

g. Smart homes/appliances. OK, if we can always purchase ‘stupid’ models. These must come with warnings.

h. Smart cities. Not OK. Full of involuntary exposures, Toxic Trespass and Surveillance.

i. Autonomous vehicles. Who is responsible in crashes? And more radiation emanating from vehicles is not a good idea.

j. Wireless medical devices. These must be redesigned to eliminate all unnecessary radiation signals, so shut off when not actively transmitting data, and to have a red warning light come on when they activate to transmit data. **Hospitals** and the zones around them are some of the most toxic wireless radiation zones. **Convalescent/rehabilitation facilities** tend to be loaded with wireless devices also. This should not be, with the radiation coming from all directions, cumulatively. **Homes for the elderly/assisted living facilities** are also not safe. *I worry about this as I advance in years. I do not want to go to such a facility and end up losing my well-being even faster.* Everything must be re-engineered now that we know that these radiations are not harmless.

k. Communication enabled smart meters. This is Toxic Trespass of radiation and the data collection leads into a means of surveillance. Also see the entry at number 3.4, above.

CARS come equipped with all manner of wireless features and surveillance. We MUST have a choice about this equipment, to be able to shut it off permanently, and to not have to buy such a vehicle at all. I have a perfectly-good **no-wireless car**. But I worry that while driving, someone will run into it and wreck it. Could I even find a good no-wireless car to replace it? – very unlikely or very difficult now. **That isn't right.**

14. What scientific evidence exists regarding potential adverse environmental effects associated with RF radiation?

There are reports of adverse effects on **trees** and **foliage**. I myself notice that the leaves on trees nowadays often wither to brown before they ever change color like normal here in the northeast. They are under such stress from the drying and other effects of the constant wireless radiation (and from pollution and the spraying of the skies with nano-poisons as well).

➤ **“Electromagnetic Fields Act Similarly in Plants as in Animals: Probable Activation of Calcium Channels via Their Voltage Sensor,” Dr. Martin Pall, *Current Chemical Biology*, March 3, 2016,** <https://www.researchgate.net/profile/Martin-Pall/publication/305691437>.

➤ **Tree Damages in Vicinity of Cell Towers,** <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/TreeDamages-CellTowers.pdf>.

➤ **Foliage Die-Back Near ‘Smart’ Meters.** <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/FoliageDying-SmartMeters-Fires.pdf>.

➤ **Cress Seedlings Die Next to Internet Router WiFi - beautifully-designed study by young scientists in their school who were suffering concentration problems and difficulty sleeping,** <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/CressSeedsDie-RouterWiFi.pdf>.

➤ **Seedlings Stunted Next to Internet Router WiFi - study conducted by Dr. Magda Havas,** <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/SeedlingsStunted-RouterWifi.pdf>.

There are many reports of adverse effects on **bees** and on **birds**, for instance:

➤ **Bees, Birds and Mankind: Destroying Nature by 'Electrosmog,'** by Ulrich Warnke - an intensive report with diagrams of the interaction of the EMF fields with the flight and navigation mechanisms of bees and birds, https://kompetenzinitiative.com/wp-content/uploads/2019/08/ki_beesbirdsandmankind_screen.pdf.

➤ **Bees Cannot Rest: No Midnight Quiet Anymore,** <https://eurythmyfoundationmatters.website/wp-content/uploads/2025/04/Bees-NoMidnightQuiet.pdf>

There are reports of harm to **livestock**, cataracts in cattle, die-off in husbandry, reduced milk yield among dairy farmers from cell tower radiation:

➤ **"6 Pre Conference Lecture #5 Ground Current Pollution with Magda Havas PhD" - improper installation of electric grids and service sets up currents in the ground, affecting us and livestock,** <https://www.youtube.com/watch?v=udWwso4H0RU&list=PL4rYraNQvqCEibq4niZui4HuBHMwBuZG&index=7>

➤ **"[Increased occurrence of nuclear cataract in the calf after erection of a mobile phone base station]," Schweiz Arch Tierheilkd. 2012 Feb,** <https://pubmed.ncbi.nlm.nih.gov/22287140/>.

Information is also coming out that indicates that wireless radiation has effects on both **mold and bacteria: they proliferate or respond defensively or do both. This is not good for us.** Their defensive response can involve the production of toxins that are adverse our health (and no doubt to animals and plants as well). This makes them even more harmful to us. Mold becoming a significant health issue. Our chronic levels of radiation are likely causal. **This is an area of research that must be pursued with urgency.**

15. What types of scientific evidence should be considered when evaluating RF exposure associated with wireless infrastructure?

Please, all of the already known evidence of harm and types of harm from wireless radiation must be brought to all of these situations. And preventions and interventions must be set in place.

a. proximity to homes, schools, childcare facilities, healthcare facilities, and/or workplaces. Schools and all of these listed here need to be advised that inasmuch as their property is private, they can and should refuse cell towers on their premises.

b. cumulative neighborhood exposure. My village went through a change for the worse when the 'smart' meters were rolled out on nearly all of the structures and along our sidewalks. This is a terrible development for humans, animals and plant-life.

c. antenna density. This must be considered. We cannot continue to add antenna after antenna onto the existing structures and install new structures or antennas onto dwellings and businesses.

d. small-cell deployment. Absolutely not. It has not been proven that this technology even benefits the public as advertised. It mostly ensures (I think) that there will be sufficient saturation of all indoor and outdoor areas to make location of people possible and easy. It supports human surveillance and must not be allowed.

e. livestock. We must not disregard the impacts on livestock. They are not mere objects, but also suffer injury from wireless radiation.

Federal Research Priorities

16. What are the highest priority research gaps regarding EMF and RF radiation and public health that the federal health agencies should address?

☆ **Please support the development of safe technologies and devices. Our engineers must help us with these problems by developing the products we need: to replace these hazardous devices, to establish easy WIRED connections and to reduce needless radiation and needless EMF fields.**

It is critically-important that the engineers who develop communications devices of any kind are brought up to speed on the dangers of these wireless radiations and EMF field. Devices can and must be designed to eliminate these dangers.

For example, touch-screens can be designed to cancel out the fields that they currently generate. They simply need to be wired in such a way that they naturally cancel out the fields! – but of course this is not being done because it is thought that these fields are safe. They are not safe.

In the electrical wiring of buildings, electricians need to be savvy of installing and renovating wiring to cancel out needless EMF fields, also. No doubt, all of our electrical infrastructures – electrical transmission, too – need to be evaluated and arranged to cancel out needless fields.

To eliminate the significant touch-screen EMF field on my gas stove, I keep the stove unplugged unless I use the oven! I light the burners with a camp lighter. Microwave ovens have a terrible field right where you stand with your head, even when they are off. Many are hard-wired in such a way that you cannot unplug them. They must be redesigned to shut completely off. (Better to stop marketing them entirely!)

Some of the cordless phones marketed in Europe shut off when not in use. Bravo to them for their wisdom. This is a step that we must take here until we get back to totally-wired landline phones in our homes.

17. How can federal health agencies improve coordination of EMF and RF radiation research? Please comment on potential roles for federal health agencies including, but not limited to:

- a. HHS Food and Drug Administration (FDA).
- b. HHS National Institutes of Health (NIH).
- c. HHS Centers for Disease Control and Prevention (CDC).

There is a great deal that all of the agencies can do to help us, including the EPA. All Offices for Consumer Protection should also come into play. The means need to be developed to hold those persons accountable who cause harm through these radiations or their misuse.

☆ As already mentioned for Question 6., **Public Law 90-602, The Radiation Control for Health and Safety Act of 1968**, gives the Secretary of HHS the broad authority to **regulate, research, and enforce** safety compliance on all radiation-emitting electronic products, including non-ionizing radiation emitting devices. **I wholly endorse whatever steps that Secretary Kennedy can take to fulfill this law completely. It is nearly 40 years late! All of these agencies under the HHS must now carry out the necessary actions laid out in Public Law 90-602.**

Additional Information

18. Please identify any additional scientific evidence, technical information, data, or recommendations that federal health agencies should consider when evaluating potential adverse health effects associated with RF/EMF radiation exposure.

Here is the link to my webpage, The Word Under Siege. Posted there are my display images and text for a range of studies that reveal the harm that wireless radiation is doing. I have presented these displays to my village and town board as enlargements. At the end of the webpage is **a list of pdf links** for each of the panels.

➤ **The Word Under Siege, Kate Reese Hurd, webpage - links to the pdf images and text are at the page end,** <https://eurythmyfoundationmatters.website/siege/>

Here is the link to the EMF Medical Conference 2021 and to the index of presentations of the research into the documented harm from wireless radiation:

➤ **The EMF Medical Conference 2021,** <https://emfconference2021.com>.

➤ **Index to the 61 Conference videos:** <https://static1.squarespace.com/static/5ed0007ce169954eea17b10b/t/660d7af4d9ddfc37c2bcfe08/1712159476762/EMF+Medical+Conference+2021+Video+List+with+Links.pdf>.

Gratefully submitted, October 21, 2026.

Sincerely,

Kate Reese Hurd