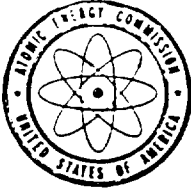


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UNITED STATES
ATOMIC ENERGY COMMISSION
WASHINGTON 25, D. C.

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Admiral Arleigh A. Burke, USN
Chief of Naval Operations
Department of the Navy
Washington 25, D. C.

Dear Admiral Burke:

You will recall that as a result of the March 1 detonation of the CASTLE test series conducted by JTF-7 in the Pacific in 1954, the natives of Rongelap and Utiirik Atolls in the Marshall Islands were exposed to radioactive fallout. The Atomic Energy Commission, on behalf of the U. S. Government, has accepted responsibility for periodic medical examinations of these Marshallese. Since that time there have been five follow-up medical examinations conducted by the AEC in collaboration with the Naval Medical Research Institute, the Naval Radiological Defense Laboratory and the Brookhaven National Laboratory. These examinations were greatly facilitated by the assistance afforded the medical teams by CINCPACFLT and the Commanding Officer NAVSTAIAJ.

The fifth follow-up examinations during February-April, 1958 for the first time employed the whole body counter, an electronic device for the measurement and identification of the total body burden of contaminating radioisotopes. It proved an unqualified success in that it provided direct data on the type and degree of internal contamination of a number of the islanders. It was also useful in establishing that there was residual radioactivity present in certain foods and other materials. Since it is likely that the current series of tests has added to the contamination level of these islands, it is more than ever imperative to continue these medical follow-up studies and to extend the survey to a detailed examination of the ecological aspects of these islands; special attention must be given to the locally obtained items of diet.

In order to accomplish this mission it is proposed that a team of medical and ecological specialists be sent to these islands with their required equipment, supplies and technical assistance. The experience of last year's expedition, for which you graciously provided the LST "Flamingo", prompts us to request that an LST again be assigned for transportation and basing beginning some time between the middle of February and the first of March, 1959, and requiring about one month overall for completion of mission. An LST proved to have many advantages over other craft, not the least of which was its ability to accept and secure the 21-ton shielded steelroom of the whole body counter on its tank deck.

RG 181 AGENCY/NRDL

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An LST also has sufficient power supplies of the correct type to operate the whole body counter and the x-ray equipment.

The shielded steelroom presently is stored at Eniwetok. It can be on-loaded and secured within three to four days. Thus present operational plans would require that an LST be on Station at Eniwetok about a week before the planned departure to Rongelap. It would return to Eniwetok approximately 21 days later and off-load the steelroom.

If operational considerations warrant, the examination team could board the LST at any other designated point in this island system and similarly could disembark. At least two technicians, however, should assist in the on-loading of the steelroom and its associated delicate electronics and accompany this equipment while it is on board.

Assistance from the U. S. Navy in the accomplishment of the above mission would be of immeasurable value. Accordingly, your approval of the use of an LST together with the following incidental items is respectfully requested.

1. Participation in the operation by certain naval personnel, both service and civilian. Approximately five such naval personnel should accompany the team, but as yet these men are undesignated. At least some of the five will come from those listed in Schedule A dependent on duties and commitments as of that time. Your general approval of such detached duties is respectfully requested.
SAN BRUNO FRC
2. Transportation via MATS for all other personnel (Schedule A) of the team and cargo from Hawaii to Kwajalein or other designated point of embarkation and return. In addition to the five members of the team listed in paragraph 1 above there are contemplated some five scientists and six technicians from the Brookhaven National Laboratory, and one scientist each from the National Institutes of Health, the Walter Reed Medical Center, and the Armed Forces Special Weapons Project. Five to seven civilian ecologist-scientists from the University of Washington complete the team. The total weight of all medical equipment and gear is estimated at four tons and the volume at 150 cubic feet.
3. Transportation and berthing of the above medical and ecological investigators on the trip to and from Rongelap and during the period of the examinations and collecting.
4. Assignment of a Class 2 priority for all MATS transportation required.

5. Air transportation between Kwajalein or other designated embarkation point and Majuro, and return, to transfer three Marshallese (one medical practitioner and two interpreters) and to transfer several members of the medical team to Majuro for the purpose of examining children which serve as controls for the Rongelap children.
6. Authorization to all Naval Commands enroute to provide assistance and support to this team of scientists as needed.
7. Authorization of the Commander of the LST to on-load the steelroom and other stored material at Eniwetok and subsequently return them if that island is not designated as the principal station of the vessel.

Your cooperation in bringing about this biomedical mission will be deeply appreciated. Moreover, in addition to satisfying the Government's responsibility for the health of the Marshallese, you will be assisting in studies which have proven to be of value to the Department of the Navy and to the AEC in advancing our understanding of the nature of radiation injury and the delayed effects of radiation.

Sincerely yours,

SAN BRUNO FRC

General Manager

Enclosure
Schedule A
Ltr to A.T. Lausi

SCHEDULE "A"

Tentative listing of personnel. Additional personnel are being contacted. Those listed below have received informal approval of their respective Commanding Officers or Directors

U. S. Navy

Naval Medical Research Institute, Bethesda, Maryland

Lt.Cdr. I.V. King (MSC) USN, Naval Liaison Officer (not to accompany team)

Lt. Earl J. Roth (MC) USNR, Surgeon

Mr. Maynard Eicher, Electrician Scientist

Naval Medical Research Unit, Cairo, Egypt

William G. Clutter, RMI, USN. Serv. No. Technician

Naval Air Station, Jacksonville, Florida

W. Jefferson Harby, RMI, USN. Serv. No. Technician

Naval Radiological Defense Laboratory, San Francisco, California

Mr. Hyman Hechter, Statistician

Mr. William Murray, Photographer.

14th Naval District, Preventive Medicine Unit, Pearl Harbor, T.H.

Lt. James P. Nolan (MC) USNR, Liaison Officer for COMNAWSEAFRON
(not to accompany team)

U. S. Army

Walter Reed Medical Center

Colonel Austin Lowrey, MC, USA, Ophthalmologist

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Civilians

Brookhaven National Laboratory, Upton, L.I., New York

Dr. Robert A. Conrad, Medical Department, Team Leader and Internist

Dr. James S. Robertson, Medical Department, Biophysicist

Dr. Williams Collins, Medical Department, Internist

Mr. James J. Greenough, Medical Department, Technician

Civilians

Dr. Leo Mayer, South Nassau Communities Hospital, Rockville Center, L.I., New York, Hematologist

Dr. J. Edward Fall or Dr. Baruch S. Blumberg, National Institutes of Health, Bethesda, Md., Internist

Unidentified Officer, Armed Forces Special Weapons Project

Dr. Clyde Lips, Canton, Missouri, Chief technician

Mr. Earl Jones, South Nassau Communities Hospital, Rockville Center, L.I., New York, Technician