

BEST COPY AVAILABLE

73994
A11/CASTLE
A905
700
920A
220
150
403484

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

IN REPLY REFER TO:

R

August 29, 1957

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

SAN BRUNO FRC

Dear Admiral Burks:

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 Utirik 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 four 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 NAVSTAKAJ.

The purpose of this letter is to ask your assistance in carrying out a fifth follow-up medical examination to begin on or about March 1, 1958, with completion on or about March 30, 1958. The examination and studies will be conducted on Rongelap this year since the natives of Rongelap and Utirik, who had been relocated on Ejet shortly after the incident, have been returned to their native Islands during the past year and have satisfactorily taken up their former mode of existence. There are, however, traces of residual activity and this circumstance adds to the importance of continuing our follow-up studies.

In order to make the survey, it is proposed to send a medical team to the Islands together with the required medical equipment and supplies. The experience from last year's expedition suggests that we again request that an LST be assigned for transportation and base. An LST has many advantages over other possible craft and especially now that one of the instruments to be used this year is a whole body counter weighing approximately twenty tons which will require secure installation aboard the vessel in a protected position. The use of a whole body

CONFIRMED TO BE UNCLASSIFIED *
BY AUTHORITY OF DOE/OC
4891
LTA DWA SWISHER TO
DOE WA-225, 1-31-90

RG 181 AGENCY/NRDL

Location SAN BRUNO FRC
Access No. 181 60A 637 Box 2 of 5
Date A11/CASTLE
1957

CNO REC
5794 P
5 MAR 57

BEST COPY AVAILABLE

73994

Admiral Arleigh A. Burke

- 2 -

counter is indicated as a result of the information gained from such a study on the seven Marshallese who were transported to Chicago during March 1957. Since installation and operational testing of the whole body counter will require about a month, it is requested that an LST be available at a West Coast port beginning about February 1, 1958, or as soon thereafter as possible. The installation and testing will be carried out by members of the AEC medical team before departure. One or two technicians will remain with the equipment during the voyage to the Islands. Also, the remaining medical material can be loaded before departure for the Islands, so that there need be no request to MATS for air freight transportation.

SAN BRUNO FRC

Present operational plans would request that the LST be on station at Kwajalein on March 1 and for three weeks at Rongelap thereafter, returning the medical team to Kwajalein on or about March 21.

Assistance from the U. S. Navy in the accomplishment of the above would be of immeasurable value to the medical team. Accordingly, your approval of the following, in addition to the use of an LST, is respectfully requested:

1. Participation in the operation by all naval personnel both service and civilian, included in Schedule "A" (attached).
2. Transportation via MATS for all personnel named in Schedule "A" from the West Coast to Kwajalein and return.
3. Transportation of the laboratory and medical supplies and equipment and whole body counter from a West Coast port to the Marshall Islands and return on board the LST.
4. Assignment of Class 2 priority for all MATS transportation required.
5. Air transportation between Kwajalein and Majuro and return to transfer three Marshallese (one medical practitioner and two interpreters) and several members of the medical team to Majuro for examination of children which will act as controls for the Rongelap children.
6. Authorization to all naval commands en route to provide assistance and support to the medical team as required.

Admiral Arleigh A. Burke

- 3 -

Your cooperation in bringing about this medical 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

Attachment:
Schedule "A"

cc: CINCPACFLT
Commander, JTF-7
Chief, Bureau of Medicine and Surgery
Chief, Bureau of Ships
Surgeon General of the Army
CO, NMFI
—CO, H&BL
Department of Interior

73994

SCHEDULE "A"

Composition of Medical Team

SAN BRUNO FBQ

NAVAL PERSONNEL - SERVICE AND CIVILIAN

Lt. Earl J. Roth (MC) USNR, Surgeon, NMRI
Mr. Maynard Eicher, Electrician Scientist, NMRI
William G. Clutter, NMI, USN, Service No. Technician,
Naval Medical Research Unit, Cairo, Egypt
W. Jefferson Hamby, NMI, USN, Service No. Technician,
Naval Air Station, Jacksonville, Florida
Mr. Hyman Hechter, Statistician, NMRL
Mr. William Murray, Photographer, NMRL

OTHER PERSONNEL

Dr. Robert A. Conard, Brookhaven National Laboratory, Team Leader
Dr. James S. Robertson, Biophysicist, ENL
Dr. William Wolins, Internist, ENL
Mr. James J. Greenough, Technician, ENL
Col. Austin Lowery (MC) USA, Ophthalmologist, Walter Reed Army Hospital
Dr. Leo Meyer, Hematologist, South Nassau Communities Hospital, Rock-
ville Center, L.I., New York
Dr. J. Edward Rall, Internist, National Institutes of Health
Undesignated Officer, Armed Forces Special Weapons Project
Undesignated Officer, U.S. Public Health Service
Mr. Clyde Cipe, Chief Technician, Camdenon, Missouri
Mr. Irving Jones, Technician, South Nassau Communities Hospital,
Rockville Center, L.I., New York