FCC 13-39

Before the
Federal Communications Commission
Washington, D.C. 20554

In the Matter of	)	
	)	
Reassessment of Federal Communications Commission Radiofrequency Exposure Limits and Policies	)	ET Docket No. 13-84
	)	
Proposed Changes in the Commission's Rules Regarding Human Exposure to Radiofrequency Electromagnetic Fields	)	ET Docket No. 03-137

To: Office of the Secretary
Federal Communications Commission
Washington, DC 20554

Comment Filed by: Arlene Ring
30245 Meadowview Dr.
Wickliffe, Ohio 44092
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(440)-944-9053

Sept. 1, 2013

AFFIDAVIT OF ARLENE RING

State of Ohio)

Lake County)

I, Arlene Ring, attest that my statements are true to the best of my knowledge.

Comment round for FCC ET Docket No. 013-84 and ET Docket No. 03-137

1. My name is Arlene Ring. My address is 30245 Meadowview Drive, Wickliffe, Ohio, 44092.

2. I am a homemaker.

3. My husband and I have lived at our current address for about 24 years. Our house faces a cell tower that is owned by T-Mobile and that has been operating for about 6½ years. The tower is visible from our house and our bedroom faces it.

4. The tower is located at the football field at Wickliffe High School, approximately 1100 feet from our house.

5. Near the time the tower became operational, I noticed an increase in the number of headaches I would experience upon waking in the morning.

6. Around the same time, I started having eye symptoms that were partially brought on and/or aggravated by radiofrequency radiation (RF), high electric, and high magnetic fields.

7. I was diagnosed as having partial vitreous detachment in my eyes.

8. I stopped using a cell phone, and due to increased difficulty tolerating the electromagnetics of a computer, I stopped using computers.

9. About 3 years ago we discovered that a wireless transmitter had been placed on our gas meter by the gas company. This turned our formerly analog gas meter into a digital smart meter. The meter is located near the side of our house.

10. In October of 2010 I went outside and looked at the

smart meter to find out what the serial number was. A few minutes after I looked at it, the floaters in my eyes got worse. Everything looked fuzzy. I noticed a pain in the left side of my forehead, pain on the bottom and inner sides of my eye sockets, and I felt weak.

11. Two days later my eyes felt gritty and I was having trouble seeing while driving.

12. Some time after the smart meter was installed near my house I realized I had another symptom: ringing in my ears. I have read that this symptom can be caused by RF radiation.

13. I am including medical documentation that I am sensitive to, and adversely affected by, RF radiation. Please see Exhibit A (1 page), Exhibit B (1 page), and Exhibit C (2 pages).

14. I have read parts of the BIOINITIATIVE REPORT 2012, including the conclusion, and it presents a strong consensus of 29 independent scientists and health experts from around the world, that "Public safety standards are 1,000 - 10,000 or more times higher than levels now commonly reported in mobile phone base station studies to cause bioeffects." (See SECTION I, page 2, Preface; and Conclusions, LOW EXPOSURE LEVELS ARE ASSOCIATED WITH BIOEFFECTS... www.bioinitiative.org.)

15. Their conclusion also states that "overall, these 1800 or so new studies report abnormal gene transcription...; genotoxicity and single and double-strand DNA damage...; stress proteins...; loss of DNA repair capacity in human stem cells...; reduction in free-radical scavengers...; neurotoxicity in humans...; carcinogenicity in humans...;" and so on and so on. (See Conclusions: BIOINITIATIVE 2012 - CONCLUSIONS Table 1-1)

16. The BioInitiative Report presents clear and abundant evidence that current RF safety limits are unsafe.

17. The BioInitiative Report 2012 defines new recommended standards: "a 0.3 nanowatts to 0.6 naowatts per square centimeter as a reasonable precautionary action level for chronic exposure to pulsed RFR" (radiofrequency radiation). (See Conclusions: DEFINING A NEW 'EFFECT LEVEL' FOR RFR)

18. This recommended level takes into account long-term exposure. It is essential to provide a buffer for long-term exposure because that is how RF exposure will be experinced as time goes by.

19. It is also essential to factor in what real exposure will be from all the sources one would be exposed to at one time: the cell tower across the street, the smart meter on the side of the house, possibly a few more smart meters on the house, the smart meters on the neighbors houses, the collector on the next street, and so on...all radiating at us at the same time.

20. The Board of the American Academy of Environmental Medicine (AAEM) concurs with the BioInitiative Report in concluding that the current FCC guidelines are "inadequate for use in establishing public health standards." (See exhibit D (2 pages) and www.aaemonline.org.)

21. The AAEM further states that "existing FCC guidelines for RF safety...only look at thermal tissue damage and are obsolete, since many modern studies show metabolic and genomic damage from RF and ELF (extremely low frequency) exposures below the level of intensity which heats tissues." (See exhibit D)

22. The AAEM also notes "that the US NIEHS National Toxicology Program in 1999 cited radiofrequency radiation as a potential carcinogen." (See EXHIBIT D or AAEM's January 23, 2012 statement)

23. Lastly, the AAEM statement pointed out: "Existing safety limits for pulsed RF were termed 'not protective of public health' by the Radiofrequency Interagency Working Group (a federal interagency working group including the FDA, FCC, OSHA, the EPA and others)." (See Exhibit D)

24. It confuses me that the FCC and other federal agencies were already involved in assessing the existing safety limits. It is noteworthy, however, that their conclusion agrees with others who have assessed sound scientific evidence and also found existing safety limits not protective.

25. The World Health Organization/International Agency for Research on Cancer, (IARC), has classified RF electromagnetic fields as possibly carcinogenic to humans (Group B). (See IARC CLASSIFIES RADIOFREQUENCY ELECTROMAGNETIC FIELDS AS POSSIBLY CARCINOGENIC TO HUMNANS, May 31, 2011, www.WHO.RFR.class2BCarcinogen.pr208_E)

26. People who are concerned about the hazards of RFR, and those who are hindered by symptoms caused by RFR, can choose to forgo the use of cell phones, computers, and WI FI in their own home. However, they have no choice in the vast bulk of exposure that they are subjected to. There is no place to escape to.

27. It is also possible that others are being injured by RFR and are not aware of it as yet.

28. Never before in the history of the world have people been exposed to the frequencies, the signal strength, and the duration of RFR, as they are today. It is as if we are the experiment.

29. I do not want to be part of a giant experiment of new and ever increasing technologies which are proven to be hazardous to health.

30. This is why it is vital for the FCC safety limits to be greatly lowered and become true safety limits.

31. The FCC would do well to implement a plan to establish the well-researched recommended new standards in the BioInitiative Report 2012.

32. A moratorium should also be placed on transmitting utility/smart meter installation, and installation of additional base stations for wireless service while biologically-based safety limits are being worked out.

33. In general, RF industry-funded studies on safety limits of RFR should not be given weight due to obvious conflict of interest concerns.

34. As per the Scenic Hudson court decision of 1965, the FCC has the responsibility to seriously consider my Comment, including the evidence I reference, in order to fulfill its obligation to represent the public.

35. Protecting the health of the nation by greatly lowering the exposure limits for cumulative RFR so that they are safe for everyone,will likely avert a national health crisis. There is nothing more useful, efficient, and practical that the FCC can do, than that.
(See FCC 13-39, paragraph 6)

Respectfully submitted by
Arlene Ring
30245 Meadowview Dr.
Wickliffe, Ohio 44092
September 1, 2013

Arlene Ring

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5-3-12

To Whom It. May Concern:

I am writing as the primary care physician for Arlene Ring. Arlene has reported worsening symptoms related to exposures to electromagnetic fields (EMF) and wireless transmissions. Her reactions to these fields have been getting more pronounced in the last several years, and include symptoms related to nervous system function and vision.

I recommend that no wireless transmissions be used on her property. Please contact my office if you should require any further information.

Cordially,

Karin Cseak, DO.

Exhibit
A

SHERRI J. TENPENNY, D.O.
DEA # _____
PAULA VETTER, N.P., -C.
CTP: RX 03873
7380 ENGLE ROAD
MIDDLEBURG HEIGHTS, OH 44130
(440) 239-3438 TEL., (440) 239-3440 FAX

NAME Arlene Ring AGE _____

ADDRESS _____ DATE 5/31/12

TAMPER-RESISTANT FEATURES INCLUDE: SAFETY-BLUE ERASE-RESISTANT BACKGROUND, "ILLEGAL" PANTOGRAPH, QUANTITY CHECK-OFF BOXES AND REFILL INDICATOR

℞ Arlene Ring is a patient in my practice. Testing indicates that she has sensitivities to electrical/wireless transmitters and would benefit from the avoidance of these devices whenever possible

- ☐ 1-24
- ☐ 25-49
- ☐ 50-74
- ☐ 75-100
- ☐ 101-150
- ☐ 151 and over

_____ Units

☐ Label

Refill NR 1 2 3 4 5

(Signature)

To ensure brand name dispensing, prescriber must write 'Dispense As Written' or 'D.A.W.' on the prescription.

0HGP0267201

Exhibit B

ARLENE M. RING

MAY 8, 2012

Born and raised in Cleveland, OH…has Bachelor of Science in Education…taught for few years/married at the age of 23/still to the same gentleman/his hobby is photography/his occupation is quality control engineer/he works with metals making jet engine blades.
Her kids are grown and on their own.
There is manufacturing is in her area/at times she can smell it when driving past the plant, but can't smell it at her own home.

X-rays taken last winter, benign growth noted on liver/she looked it up but can't remember what it said.

✓ EMF
✓ allergy
✓ Hydrotherapy

80 min. interview 5-8-2012 By Nora Kerry, RN

ROS CANDIDA SCORE

1ST OV Pulse 80 Temp (oral)

BP (sitting) 128/72 BP (standing) 134/70

TIME IN _____ TIME OUT _____ SIGNED_____

Arlene Ring – 501004 – 5/9/12 – PV – She has a history of sensitivity to electromagnetic type transmission. She is concerned mostly with the gas meter transmitter. It appears the transmitter on the gas meter, which makes it easy for the reading to be done electronically. This is giving her symptoms since installation. The symptoms get worse as described when she is close to the unit outdoors. There is a metal shield put in by her husband to protect it from the interior of their house and she doesn't have as much symptoms when she is near it on the inside of the home. She has aluminum siding on the home, which probably protects her from electromagnetic transmission. She does live near a cell transmission tower that has given her additional difficulty since it was installed. She has a lot of sensitivities. Note she has been under the care of Dr. Frackleton and Dr. Sherry Tenpenny for various allergic mechanisms. We find the electromagnetic sensitivity heightens in people with other allergies. Therefore discussed the possibility of the low dose antigen therapy, which would be a way to reduce her allergic load from foods and inhalants. This can be done without further testing of the various foods since it has over 300 items in the injection to help control the allergies to dust, molds, pollens and foods. It doesn't physically protect from the electromagnetic field.

Did check her briefly with the reflex technique on foods and she shows reactive to a number of common foods again with baker's and brewer's yeast, sugar and milk allergic even though she did have treatment 6-8 years ago from Dr. Tenpenny. A technique loses its effectiveness over time. The low dose antigen therapy seems to be enhanced and works better over time. This would simply lower her allergic over load and perhaps give her some protection from the EMF.

Cont'd on next page

Exhibit C

Arlene Ring cont'd

In the meantime it would be best if the transmission unit from the gas meter would be removed for her medical benefit and not have any further installation. She owns another home where her son will be living. Would recommend that it not be applied to that home. Also not permit the installation of the transmission unit to the electric meters on these homes.

There are just a few things that can be done to protect the home from the cell tower affects. Her aluminum siding is one factor that is already there. Perhaps she could use an aluminum vapor barrier in the attic that would be helpful also. But these procedures are expensive and not completely beneficial so much so as the simply elimination of the transmission in its own home. This can easily be avoided by simply reading the meter digitally by an employee of the gas and electric company.

Dx: Electromagnetic Sensitivity
Multiple Food Allergies

Physical Exam:
Ears: Canals are clear. TM's look normal.
Nose: has slightly pale membranes, commonly seen with allergic patients
Dentition; Is in excellent repair with composite fillings. No residual amalgams. They were removed over 5 years ago. I don't find indication for further detoxification since she did have some DMSA therapy. I don't find indication to need the DMSA or Glutathione, which aids in detoxifying.

Would like to do a test on her reverse T3 and total T3 to see if there is any affect of the heavy metals on her thyroid function.

Reviewing her previous lab work from Dr. Frackleton shows relatively normal TSH and T4 and free T3. They are all within reasonable limits.

She has done significant things in her home. Protection of electromagnetic factors with removing the electric clock from her bedroom and now even turning off the circuit breaker to her bedroom electric. This does give her a better sleep pattern. She reacts to wireless internet and fluorescent mercury lights with mental confusion and headaches. Her personal use of a computer has limited due to the exposure from even the mouse affecting her finger control. This is further documentation of her difficulty.

Dx: Allergic patient with Food Allergies
Significant Electromagnetic Sensitivity to a degree that is beginning to cause physical harm and handicapping functions

Roy E. Kerry, M.D./slw

Cc: To Patient

Exhibit C

The EMR Policy Institute
A Non-Profit Corporation www.EMRPolicy.org

For Distribution:

January 26, 2012

The American Academy of Environmental Medicine has adopted a resolution calling for a halt to wireless smart meters.

The full text of the resolution is below. A hard copy on letterhead is available on the AAEM website at www.aaemonline.org.

From the AAEM website:

Who We Are

The American Academy of Environmental Medicine was founded in 1965, and is an international association of physicians and other professionals interested in the clinical aspects of humans and their environment. The Academy is interested in expanding the knowledge of interactions between human individuals and their environment, as these may be demonstrated to be reflected in their total health. The AAEM provides research and education in the recognition, treatment and prevention of illnesses induced by exposures to biological and chemical agents encountered in air, food and water.

AAEM's January 23, 2012 statement represents the first national physician's group to look in-depth at wireless health risks; and to advise the public and decision-makers about preventative public health actions that are necessary.

Exhibit D

American Academy of Environmental Medicine
6505 E Central • Ste 296 • Wichita, KS 67206 Tel: (316) 684-5500 • Fax: (316) 684-5709
www.aaemonline.org

Proposed Decision of Commissioner Peevey (Mailed 1/22/2012) BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF CALIFORNIA
On the proposed decision 11-03-014

Dear Commissioners:

The Board of the American Academy of Environmental Medicine opposes the installation of wireless "smart meters" in homes and schools based on a scientific assessment of the current medical literature (references available on request). Chronic exposure to wireless radiofrequency radiation is a preventable environmental hazard that is sufficiently well documented to warrant immediate preventative public health action.

As representatives of physician specialists in the field of environmental medicine, we have an obligation to urge precaution when sufficient scientific and medical evidence suggests health risks which can potentially affect large populations. The literature raises serious concern regarding the levels of radio frequency (RF - 3 KHz - 300 GHz) or extremely low frequency (ELF - o- 300 Hz) exposures produced by "smart meters" to warrant an immediate and complete moratorium on their use and deployment until further study can be performed.

The board of the American Board of Environmental Medicine wishes to point out that existing FCC guidelines for RF safety that have been used to justify installation of "smart meters" only look at thermal tissue damage and are obsolete, since many modern studies show metabolic and genomic damage from RF and ELF exposures below the level of intensity which heats tissues. The FCC guidelines are therefore inadequate for use in establishing public health standards. More modern literature shows medically and biologically significant effects of RF and ELF at lower energy densities. These effects accumulate over time, which is an important consideration given the chronic nature of exposure from "smart meters". The current medical literature raises credible questions about genetic and cellular effects, hormonal effects, male fertility, blood/brain barrier damage and increased risk of certain types of cancers from RF or ELF levels similar to those emitted from "smart meters". Children are placed at particular risk for altered brain development, and impaired learning and behavior. Further EMF/RF adds synergistic effects to the damage observed from a range of toxic chemicals. Given the widespread, chronic and essentially inescapable ELF/RF exposure of everyone living near a "smart meter", the Board of the American Academy of Environmental Medicine finds it unacceptable from a public health standpoint to implement this technology until these serious medical concerns are resolved. We consider a moratorium on installation of wireless "smart meters" to be an issue of the highest importance.

The Board of the American Academy of Environmental Medicine also wises to note that the US NIEHS National Toxicology Program in 1999 cited radiofrequency radiation as a potential carcinogen. Existing safety limits for pulsed RF were termed "not protective of public health" by the Radiofrequency Interagency Working Group (a federal interagency working group including the FDA, FCC, OSHA, the EPA and others). Emissions given off by "smart meters" have been classified by the World Health Organization International Agency for Research on Cancer (IARC) as a Possible Human Carcinogen.

Hence, we call for:

- An immediate moratorium on "smart meter" installation until these serious public health issues are resolved. Continuing with their installation would be extremely irresponsible.

Exhibit D