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Page | 1

The Zumwalt Report that was done in 1989, at the request of the Secretary of DVA, Derwinski, indicates two points on this matter. First, is the fact that the studies that were used for this report no point made a distinction between "in country", "off shore", or near vicinity" Veterans, it only refers to Vietnam War Veterans. The only reference to the separation of these Vietnam War Veterans was made on pages 50, 51, and 52, entitled: "COMPENSATION FOR SERVICE RELATED ILLNESSES." Admiral Z described two methods of compensation:

"Alternative 1: Any Vietnam Veteran, or Vietnam Veteran's child who has a birth defect, should be presumed to have a service—connected health effect if that person suffers from the type of health effects consistent with dioxin exposure and the Veteran' s health or service record establishes:\

1) Abnormally high TCDD in blood tests; or

2) The veteran's presence within 20 kilometers and 30 days of a known sprayed area (as shown by HERBs tapes and corresponding company records); or

3) The Veteran's presence at fire base perimeters or brown water operations where there is reason believe Agent Orange have occurred.

Under this alternative compensation would not be provided for those veterans whose exposure came from TCDD by way of the food chain; silt runoff from sprayed areas into unsprayed waterways; some unrecorded U.S. or allied Agent Orange sprayings; inaccurately recorded sprayings; or sprayings whose wind drift was greater than 20 kilometers. Predictably, problems generated by the foregoing oversights, the mass of data to be analyzed as claims were filed, and the known loss of many service records would invalidate many veterans' legitimate claims.

Alternative 2: Any Vietnam Veteran or child of a Vietnam Veteran who experiences a TCDD—like health effect shall be presumed to have a service—connected disability.

This alternative is admittedly broader than the first, and would provide benefits for some veterans who were not exposed to Agent Orange and whose disabilities are not presumably truly service— connected.

Nevertheless, it is the only alternative that will not unfairly preclude receipt of benefits by a TCDD exposed Vietnam Veteran.

Furthermore, this alternative is consistent with the Secretary's decision regarding the Service connection of non— Hodgkin's lymphoma, as well as legal precedent with respect to other diseases presumed by the Department of Veterans Affairs to be connected to one or more factors related to military service (i.e. veterans exposed to atomic radiation and POW's with spastic colon)."

Page | 2

As clearly indicated by these recommendations as to the procedure that should be used in determining who is or isn't covered, Admiral Z suggests that Alternative 2 would ensure that no one who was possibly exposed will be left out. Note that it also mentions the NHL, This is in relation to NHL in off shore sailors being diagnosed at a higher rate that in-country veterans. BTW, Alternative 2 is the method that was used by the DVA until the slight change was made in 2001. The current method of compensation does not follow either of these recommendations.