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"9 11 Health Effects: Monitoring and Treatment of First Responders"
U.S. House of Representatives Subcommittee on Government
Management, Organization, and Procurement

Good Afternoon Chairman Towns, Ranking Member Bilbray, and members of the Subcommittee. My name is Thomas McHale and I am a Police Detective with the Port Authority of New York and New Jersey Police Department. I am also a member of the Port Authority Police Detectives Endowment Association and an Associate Member of the Port Authority Police Benevolent Association, which are member organizations of the National Association of Police Organizations (NAPO). NAPO is one of the largest police organizations in the nation, representing over 238,000 sworn rank-and-file law enforcement officers throughout the United States.

When lives are at stake, America's first responders do not hesitate to rush directly into harm's way. We do our jobs, searching for, rescuing, and aiding victims.... regardless of what unseen dangers and health hazards await. The substantial risks that we face when responding to disasters..... are no more clearly illustrated, than by the suffering as a result from the response to the September 11 terrorist attacks on the World Trade Center (WTC)....the headquarters of the Port

Authority of New York and New Jersey and worldwide symbol of New York and America.

Seven years after the attack on our nation, we continue to mourn the 84 Port Authority personnel (including 37 members of the Port Authority Police Department), 23 New York City Police Department officers, the 343 fire fighters, and over 2,200 civilians who lost their lives. While the nation remembers those we lost... those who responded to the WTC continue to suffer from the physical and mental traumas suffered that day and in the days following. According to the Mount Sinai Medical Center study on 9/11 health effects, seven out of every ten – 70 percent – of the first responders at Ground Zero suffer from chronic lung ailments.¹

Today, I would like to take the opportunity to address my personal 9/11 related health issues and the need to extend funding for the World Trade Center Medical Monitoring and Treatment Fund. For purposes of character and integrity, I would like to provide you with a brief biography.

I am forty-six years of age, married, with four daughters, and I am a non-smoker. As I said before, I am a Port Authority of New York and New Jersey Police Detective with twenty-two years of service. Since 1995, I have been assigned to the Federal Bureau of Investigation's Newark, New Jersey, Joint

Terrorism Task Force (JTTF). In addition to the JTTF, since 2001, I have been coassigned to the New York Police Department Major Case Squad, specializing in cold case homicides of police officers.

Unfortunately, I am no stranger to traumatic incidents. On February 26, 1993, I was critically injured in the bombing of the World Trade Center. On September 11, 2001, minutes after the first plane struck, I responded to the WTC from my Major Case office at 1 Police Plaza, New York, and joined in the rescue effort. I survived the collapse of the first tower from inside the WTC. After escaping the first collapse, I returned to the WTC and continued with search and rescue. Before the second tower collapsed, I escaped to the street through 5 WTC. Again, I was caught in the debris cloud. I remained at the site throughout the evening and into the early morning of September 12, taking part in the rescue of two Port Authority officers trapped in the collapse.

In addition to being a police detective, I am also a Union Ironworker (Ironworkers Local Union #45, Jersey City, NJ). For the first ten days following 9/11, I was on full time assignment at the WTC site as part of the Port Authority Rescue and Recovery Team. I utilized my ironworking skills (burning and rigging) in the recovery of the victims' bodies. During and after the second week of the rescue and recovery, the Port Authority Police Department (PAPD) ordered me to resume my position with the FBI Newark JTTF, which was investigating the

attack. I complied with the order but returned to the WTC site at the end of my shift each evening. I worked the WTC site as a volunteer Ironworker with Ironworkers Local Union #40 (New York City) and as a PA Police Detective. I worked a twelve hour shift with the FBI JTTF (7am – 7pm), then a twelve hour shift at the WTC (7pm – 7am), then returned for the next day shift at FBI Newark (7am – 7pm). I worked this thirty-six hours on and twelve hours off schedule through the end of January 2002.

From the end of January 2002 to the beginning of April 2002, I was on JTTF assignment in Pakistan and Afghanistan. On March 17, 2002, I took part in the rescue and recovery, after a suicide bombing attack on a church in Islamabad, Pakistan. Upon my return to the States, I resumed working both jobs but not on as rigorous a schedule as before. On May 28, 2002, Ironworkers Local #40 invited me to participate in the removal of the last column from the WTC.

To the present day, I have been diagnosed with Reactive Airway Disease,
Lung Scar Tissue, Asthma, Atrial Fibrillation, Sinus Tachycardia, Chronic
Rhinitis, Turbinate Hypertrophy and Barrett's Esophagus. I am currently under the
primary care of Dr. David Fischler, Pulmonologist, and Dr. Rakesh Passi,
Cardiologist. In addition to my primary care physicians, my current health issues
are being managed and monitored by The World Trade Center Medical Monitoring

and Treatment Program under **Dr. Iris G. Udasin**, MD, Environmental and Occupational Health Science Institute (EOHSI) Clinical Care, Piscataway, NJ.

On November 1, 2006, I underwent a pulmonary vein ablation (heart) at Robert Wood Johnson University Hospital (RWJ), New Brunswick, NJ. While in recovery, I suffered Aspiration Pneumonitis and was transferred to Critical Care Unit. On November 7, 2006, I was discharged from the hospital. I was unable to go back to work until March 2007. My doctors, two cardiologists and two pulmonologists, and the doctors from the WTC Medical Monitoring Program, attributed my medical conditions to my exposure at the WTC. The Port Authority Medical Division --- without a thorough examination or consulting my doctors --ruled that my medical conditions are not related to the events of 9/11. Fortunately, for me, the Port Authority Police Director, Samuel J. Plumeri... agreed with my physicians...and overruled PA Medical's decision. Director Plumeri ruled that my injuries were in fact 9/11 related, thus entitling me to line of duty status.

On July 20, 2007, I underwent nasal surgery to clear an obstruction of my nasal airway at RWJ. I returned to work eleven days later on July 31. The PA Medical Department.....again without examination or consulting any of my physicians.....determined that my nasal obstruction was not related to my exposure at Ground Zero. Once more, PA Police Director Plumeri overruled PA Medical's

decision. Director Plumeri agreed with my physicians' findings that my nasal injuries or disease may in fact have been caused by my exposure at Ground Zero.

On September 5, 2007, due to chronic acid reflux, I underwent an Upper Endoscopy at RWJ Hospital. The procedure revealed that I have Barrett's Esophagus, which is caused by chronic acid exposure (reflux) and is considered to be a **pre-malignant** condition. Barrett's is associated with an increased risk of esophageal cancer. I am currently awaiting the results of the biopsy.

Most of the costs associated with my lung and heart procedures have been processed through my medical insurance. The WTC Medical Screening and Treatment Program have incurred some of the costs for surgery and treatment associated with my nasal and gastro ailments. In fact, it was Dr. Udasin and EOHSI who referred me to the Ears Nose & Throat doctor and the Gastroenterologist who diagnosed the aforementioned ailments.

I would like to state that I did not file a claim for the federal monies that were available in 2001 and 2002. Although entitled, I could not bring myself to complete, and file, the same form as that of the survivors of those who were killed. I do, however, have a pending state workers compensation claim.

As the health risks associated with exposure to the World Trade Center site, following 9/11, become more manifest, it is imperative to ensure that workers in

the rescue and recovery effort are **properly** monitored and treated for exposure related diseases that do occur. I appreciate all you are doing to support those of us who have fallen ill due to our response and subsequent exposure at the WTC. I urge Congress to continue to support the funding for the World Trade Center Medical Monitoring and Treatment Program in order that first responders, like myself, can maintain, or regain, their good health.

Thank you for this opportunity to speak to you on behalf of the dedicated first responders who responded to the 9/11 attacks in New York City. I ask that my printed testimony, in addition to my spoken testimony, be made part of the record, and I would be happy to answer any questions you may have.

ⁱ Based on its findings from the World Trade Center Worker and Volunteer Medical Screening Program and on medical examinations performed on almost 9,500 World Trade Center Responders.