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DEPARTMENT OF HEALTH

STATE OF HAWAII

ENVIRONMENTAL HEALTH DIVISION,)	Case No. 21-UST-EA-02
DEPARTMENT OF HEALTH, STATE OF)	
HAWAII,)	DECLARATION OF
)	CAPTAIN MICHAEL B. McGINNIS
Complainant,)	
)	
v.)	
)	
UNITED STATES DEPARTMENT OF THE)	
NAVY,)	
)	
Respondent.)	
_____)	

DECLARATION OF CAPTAIN MICHAEL B. McGINNIS

I, Captain Michael B. McGinnis, declare as follows:

1. I am a Captain in the United States Navy, the United States Pacific Fleet (“Pacific Fleet”) Surgeon, and Senior Medical Advisor to the Pacific Fleet. I began serving as Pacific Fleet Surgeon in January 2020 after completing multiple leadership tours for Fleet and shore based Navy medical facilities and forces. I graduated from the Johns Hopkins University with a Bachelor of Science in Electrical and Computer Engineering in 1989 and received a medical degree from the University of Virginia in 1993. Subsequently, I completed an internal medicine

residency at Naval Medical Center San Diego followed by a second residency in Aerospace medicine and a Master of Public Health degree in Health Policy and Administration from the University of North Carolina. In my twenty eight years of service to the Navy medical community, I have served in multiple leadership roles to include: Department Head of Internal Medicine, U.S. Naval Hospital Yokosuka, Department Head of Internal Medicine and chair of the Pharmacy and Therapeutics, Cardiac Arrest and Preferred Provider Network Committees U.S. Naval Hospital Naples (2000-2004); Senior Medical Officer aboard U.S.S. NIMITZ (CVN 68) (2007-2009); Department Head of Internal Medicine (2009-2010) and Director for Branch Health Clinics, Naval Hospital Jacksonville (2010-2013); Navy Internal Medicine Specialty Leader (2011-2013); Executive Officer, U.S. Naval Hospital Guam (2013-2015); Commanding Officer, Naval Health Clinic Annapolis, Maryland (2015-2017); and Force Surgeon to Commander Naval Forces Europe/Commander Naval Forces Africa/Commander U.S. Sixth Fleet (2017-2020).

2. In my capacities as the Pacific Fleet Surgeon and Senior Medical Advisor, I am supporting the Joint Crisis Action Team stood up by Commander, U.S. Pacific Fleet by leading a joint health services work group that is comprised of senior leadership from our military medical communities from Army, Navy, Air Force and Marine Corps, Department of Health, Centers for Disease Control and Prevention as well as military treatment facilities and the leaders of state and other federal medical agencies on island.

3. I make this declaration in support of the Respondent, United States Department of the Navy's ("Navy") opposition to the Emergency Order of December 6, 2021, the Complainant, Environmental Health Division, Department of Health, State of Hawaii ("DOH"), issued concerning impacts that contamination of the Red Hill shaft had on the Navy's drinking water

system, and residents in communities residing in military privatized housing. I make this declaration based upon personal knowledge, and I am competent to testify as to all matters stated herein.

4. The priority of the joint health services work group is the safety and care of affected families.

5. We are fully committed to providing medical outreach and support. From day one of this situation, we have focused on ensuring people with symptoms or concern from water related exposure have dedicated and rapid access to medical care, are screened and evaluated for the symptoms they may have, and receive clear guidance on health protection measures.

6. We have a robust joint service and interagency team that includes senior medical leaders with Tripler Army Medical Center, the Navy's Makalapa Branch Medical Clinic and outside entities such as the Hawai'i Department of Health to include Dr. Diane Felton as well as operational medical forces across each of the military services.

7. High-level leaders within our military medical organizations are engaged, synchronized, communicating openly together, and collaborating to solve this problem.

8. The Army, Navy, Marine Corps, and Air Force teams on island are bringing to full bear additional teams we have within our medical forces to facilitate access to care for those who are concerned about how our water may be impacting our families.

9. Please find below highlights of the medical team's efforts.

10. Medical information has been provided at ten town hall meetings as of December 16, 2021, through Facebook posts on social media, and on the Pacific Fleet's Joint Base Pearl Harbor Hickam Water Updates website page. In addition to the TRICARE medical Nurse Health Advice line that is available to take calls twenty four hours, seven days a week, a specific hotline

has been set up by the Tripler Army Medical Center specifically for personnel experiences/symptoms/concerns of exposure to contaminated water from this incident. The screening phone line (808) 433-8102 (option 2) has medical providers assigned to take calls daily from 7:30 a.m. to 8:00 p.m. Hawaii Standard Time. This screening telephone hotline also has an obstetric provider available to consult on concerns of those who may questions concerning exposure of infants or to those who may be pregnant.

11. The Marine Corps' 3rd Medical Battalion has been brought from Marine Corps Base Kaneohe Bay to support the Tripler Army Medical Center and the Navy's Branch Health Clinic Makalapa with providing access to care. The unit is manning established community outreach medical sites.

12. The Army's 25th Infantry Division is overseeing medical care within the community for Red Hill and Aliamanu Military Reservation ("AMR") housing areas.

13. There are multiple locations for access on a walk-in basis to include: Makalapa Ohana Clinic at Joint Base Pearl Harbor-Hickam, Camp Halsey at the Halsey Terrace Community Center, the Emergency Family Action Center, the AMR Community Center as well as the U.S. Air Forces 15th Medical Group Triage Tent on Joint Base Pearl Harbor-Hickam.

14. The Navy and Marine Corps Public Health Center sent subject matter experts in environmental health, water quality, public health, and toxicology. Some of those experts comprise the seventy-nine (79) additional medical and technical subject matter experts who have augmented the Pacific Fleet's response efforts.

15. The Army Public Health Center, located in Maryland, is fully engaged with our team and providing remote and on-island expertise, looking at how we evaluate health concerns,

providing guidance that meets our community needs, and monitoring the safety and health outcomes for our patient populations over time.

16. The Army's Regional Health Command Pacific has subject matter experts that are leveraged within United States Indo-Pacific Command (INDOPACOM), and INDOPACOM is also embedded with us here at U.S. Pacific Fleet to ensure we have synchrony and unity in effort.

17. Navy Medicine is bringing the full breadth and depth of its capability to us.

18. Navy Medicine deployed medical teams to the island within 12 hours of notification of our request on December 6, 2021, and we are receiving full support from the medical forces that we have within the Navy.

19. The Navy and joint medical force is assessing the medical symptoms associated with well over 5,000 screening and medical evaluations of personnel seeking medical help for exposure to petroleum and other potential contaminants of concern as of December 16, 2021. The symptoms that have been presented are consistent with exposure to a petroleum based product, including nausea, vomiting, headaches, skin irritation, and rash. While some people are presenting with persistent symptoms, most have resolved or improving symptoms and are presenting to medical for documentation of potential exposure for their medical records. We are documenting in the medical record all that present for medical care/evaluation.

20. A registry has been established as of December 10, 2021 to capture information of those with potential exposure from water contamination to track the population over time and to facilitate understanding of potential long term medical effects. That database for military personnel is utilizing housing rosters to ensure all personnel potentially affected are captured in the registry. The registry will assist the Department of Defense in assisting beneficiaries (even

after they have transferred away from the island) and in continuing longer term study of the incident.

21. Over 7,400 names have been submitted to the Defense Occupational and Environmental Health Readiness System from seventeen sites on Joint Base Pearl Harbor-Hickam as part of the registry. Additional names are being inputted to the system as we refine understanding of those affected.

22. While local Hawaii non-military citizens cannot be captured in the military registry, there is ongoing coordination with Centers for Disease Control and Prevention and the Department of Health to determine how best to address documentation for long term review of exposure of those citizens.

23. Our patient population is presenting with exposure symptoms consistent with a discrete event. The majority of symptom onset is from a defined time period with gradual improvement and resolution of symptoms within this group of screened patients. From our medical surveillance sites, we are not seeing onset of new symptoms from those being screened as of December 13, 2021. People who were exposed to contaminated water through drinking, bathing, cooking, or other exposure are not expected to experience long term health effects, however we will track all with the registry to better understand potential long term health effects. There has not been an increased number of patients seeking mental health evaluations or treatment due to potential exposure to contaminated water. Two patients had exacerbated pre-existing mental health conditions.

24. Medical teams are being tasked to visit schools, child development centers (CDCs), and other key/facilities to explain current health public guidance and work to assure personnel that, in accordance with Hawaii Department of Health, EPA and Navy, the Navy's water system

is safe for laundry and hand washing. This outreach is also intended to provide them tools and resources to address the concerns of parents with children at schools or CDCs.

25. Health protection measures have been developed jointly by public health experts from Army, Navy, Air Force, Marine Corps and Department of Health. This guidance provides explanation of long term and short term health effects, health concerns for pregnant women, home recommendations regarding daily use of water for a variety of uses, and resources for additional information.

26. For individuals experiencing symptoms of recent petroleum based exposure, the guidance recommends the following actions to be safe: eliminate all exposures to the water source (including ice and small appliances); increase fresh air and rest until symptoms subside; wash exposed skin with clean water and soap; use over the counter medications to treat headache, stomach upset, and skin irritation if desired; and seek immediate medical attention for difficulty breathing, confusion, disorientation, behavior changes, severe nausea and vomiting, or other serious conditions.

27. For affected homes, the guidance recommends the following: if fuel odors are present or water is visibly contaminated, DO NOT USE tap water for any purpose due to the potential risks from ingestion, skin, and inhalational exposures; refrain from drinking water or using ice from the refrigerator, cooking, or conducting oral hygiene activities (tooth brushing) throughout the affected military housing areas; if no fuel odor is detected, doing laundry, dishwashing, hand washing and bathing (short showers preferred) are OK; toilets may be flushed; if a fuel odor is detected, open windows and use fans to move air throughout the home for 10-15 minutes, or until the smell dissipates; and there is no concern about using air conditioning, which is a closed system.

28. I declare under penalty of perjury that the foregoing facts are true and correct to the best of my knowledge and belief.

Dated: Honolulu, Hawaii December 17, 2021.

/S/ Michael B. McGinnis
Michael B. McGINNIS