

RE: REQUEST FOR DISABILITY ACCOMMODATIONS ON AMBULANCE SERVICES.

MS. NORI GONZALEZ-GARZA, Mayor of the City of Mission.

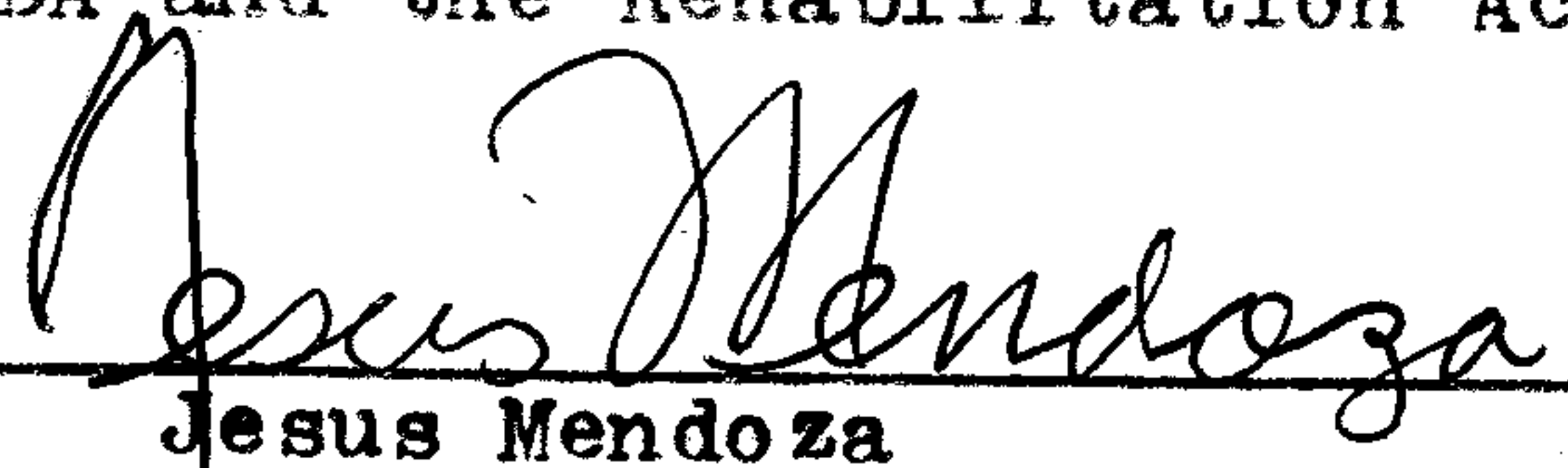
Dear Mayor, I respectfully request your office as accommodation to my life-threatening disabilities that in case of a medical emergency, the ambulance services provide the treatment at my place.

This disability accommodations can be life-saving, especially if I am unconscious and unable to refuse medical care in hospitals, or in other places where there is wireless/microwave radiation and chemicals and fumes, and which can aggravate the swelling of brain and heart and of other vital organs caused by my EHS and CHS, and which impair my ability to breathe, as detailed by my doctor's letter, page 18 to the Attached Statement of Physical Disabilities.

My Statement of Physical Disabilities details with medical, scientific and legal evidence on the record proving as a matter of law:

- 1- That for the most part, I have been homebound for more than 13 years with life-threatening Electrohypersensitivity EHS, and Chemical Hypersensitivity CHS, which are aggravated by exposure to even low levels of wireless/microwave radiation and of chemicals and fumes commonly found on the environment; Please See pages 1 - 7, herein.
- 2- That the best medical treatment to prevent aggravation of my EHS and CHS is avoidance of radiation and of chemicals and fumes; Please See pages 15A - 15G, and pages 18, 19, 23 - 25, herein. +
- 3- And proving that my EHS and CHS have been recognized by federal and State agencies and by Courts as physical medical conditions and as disabilities under the ADA and the Rehabilitation Act. Pages 22 - 43.

Respectfully submitted,


Jesus Mendoza

2202 E. 28th St. Mission, Texas 78574 Tel. (956) 583-7012.

+ (Please See Note 1 on next page).

NOTE 1.

Despite that (Without knowing it) millions of children and millions of other defenseless and unsuspecting patients are suffering from symptoms of EHS and CHS; Please See pages 8 - 14B, herein.

Despite that EHS and CHS are recognized by the medical community;

And despite that EHS and CHS are recognized by federal and State agencies and by Courts as physical disabilities; Pages 22 - 43, id.

Most doctors do not have training in Environmental Medicine - in EHS and CHS and in other injuries caused and aggravated by exposure to even low levels of radiation commonly found in hospitals and in other places and which can cause catastrophic, irreversible and deadly harm to patients suffering from EHS and CHS.

Please See pages 14C - 14G, herein.

Those are the reasons that support my refusal to get emergency health care inside a hospital or in other buildings and vehicles.

At several times, I requested the Mission Regional Hospital and other local hospitals to accommodate my EHS and CHS in case of emergency health care to no avail.

The KUINTE Health Group in Canada provides special accommodations to the EHS and CHS in their hospitals. To the best of my knowledge and belief, a hospital in Boston and another in San Francisco provides accommodation to the EHS and CHS.

The U.S. Access Board provides Recommendations for Accommodations for people with mild to moderate EHS and CHS. However, because of the severity of my EHS and CHS those accommodations may not be sufficient to prevent aggravation of my life-threatening EHS and CHS. Please See pages 46 - 48, herein.

PARENTS ALERT (March 2025).

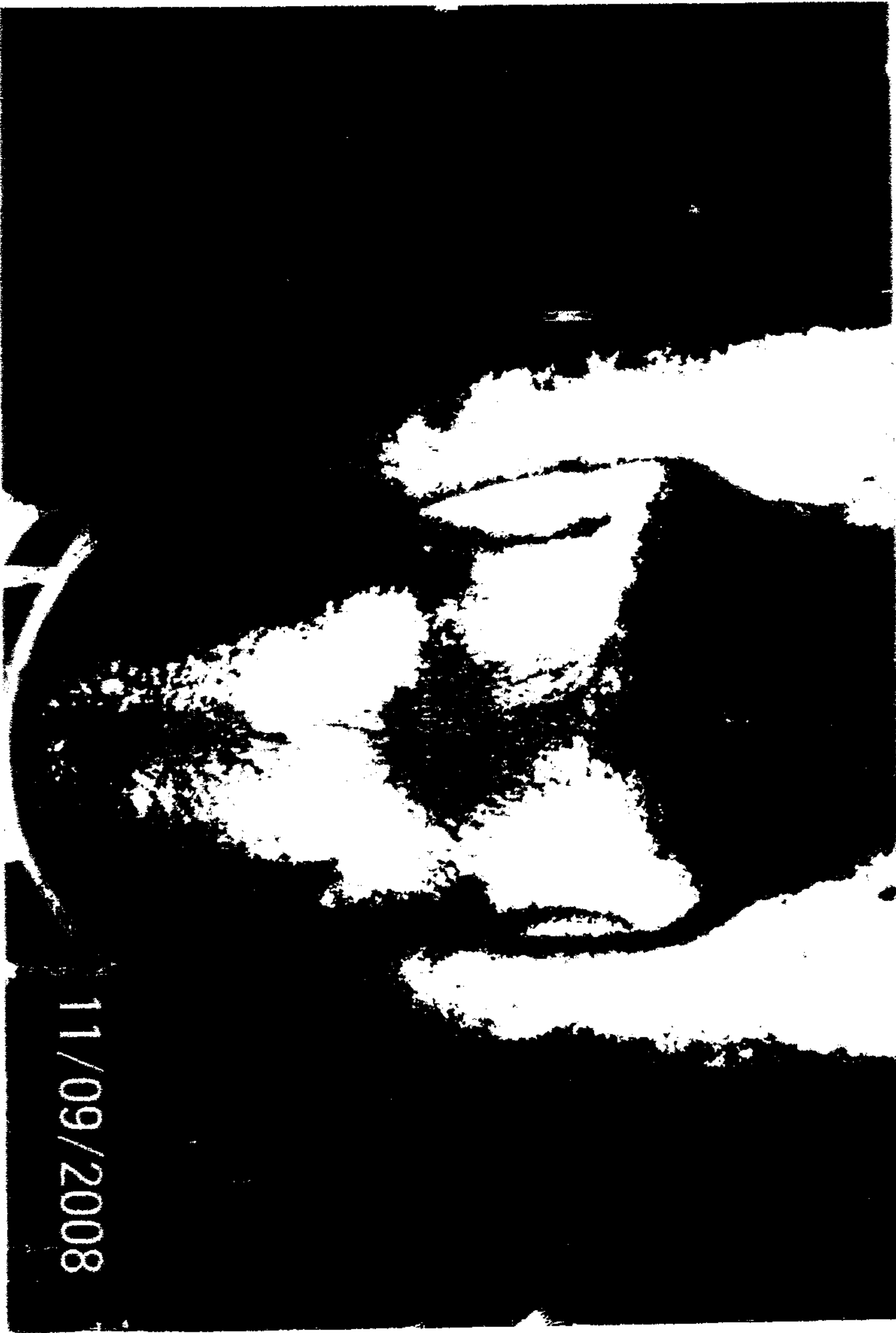
STATEMENT OF PHYSICAL DISABILITIES.
(March 2025).

The Statement of Physical Disabilities (March 2025), detail with medical, scientific and legal evidence corroborating:

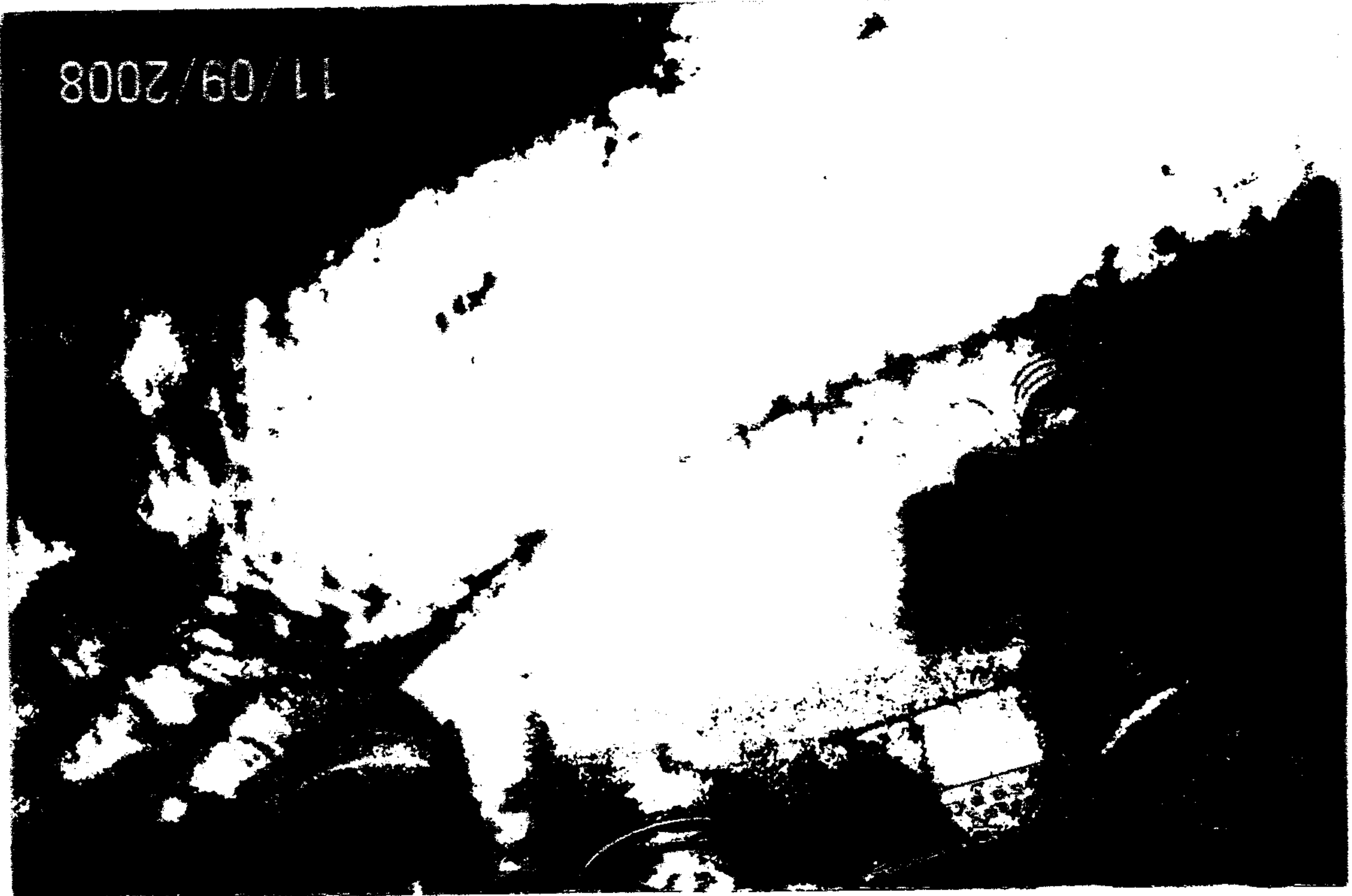
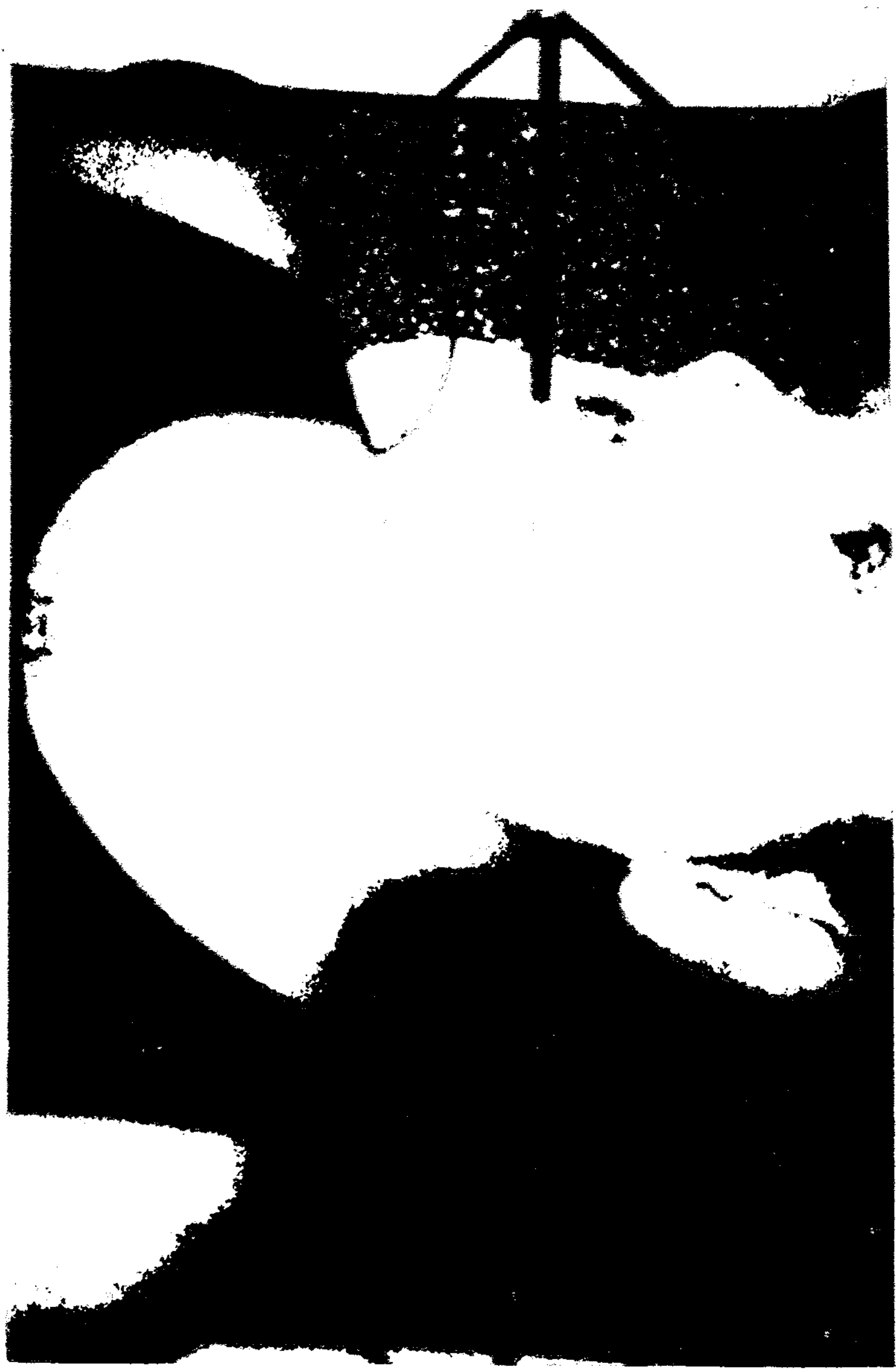
- 1- That the symptoms and signs of my life-threatening ElectroHyper-sensitivity EHS, and Chemical Hypersensitivity CHS, including the pain and the swelling of face, brain and heart are caused and aggravated by exposure to the wireless/microwave radiation and by chemicals and fumes commonly found on the environment;
- 2- That my EHS and CHS have been recognized by federal and State agencies and by Courts as physical medical conditions and as disabilities under the Americans with Disabilities Act and under the Rehabilitation Act;
- 3- And corroborating the fact that without knowing it, millions of children and millions of other defenseless and unsuspecting victims are suffering from symptoms of EHS and CHS,⁺ which mimic and are confounded with symptoms of most illnesses, including symptoms of cardiac arrest, heart attack and stroke and symptoms of other catastrophic, irreversible and deadly illnesses and disabilities as detailed herein. ⁺(Including pain and swelling of heart and brain).

EXPERTS IN ENVIRONMENTAL MEDICINE ARE ADVISING TO CLEAR OF ALL WIRELESS (Cellphones, Wi-Fi etc.), the homes with children, pregnant women and others with chronic or life-threatening illnesses to prevent aggravation of their health condition and to increase their ability to heal as detailed herein.

See PARENTS ALERT (April, 2025), at pages 14C - 14E, herein.



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ELECTROHYPERSENSITIVITY EHS, AND CHEMICAL HYPERSENSITIVITY, CHS.

"Being so severely Electro-hypersensitive is like being a hermit in an infernal hell."

San Fco. EarthLink Wi-Fi Network (2007) page 25.

For the most part, I have been homebound for more than 13 years with life-threatening EHS and CHS. The symptoms and signs of my EHS and CHS are caused and aggravated by exposure to even low levels of wireless/microwave radiation and of chemicals and fumes commonly found on the Environment.

Exposure to even low levels of wireless/microwave radiation and of chemicals and fumes commonly found on the environment causes me among other things, swelling of vital organs; swelling of face, head and eyes; symptoms of heart attack and of stroke; rashes and loss of skin; flu and allergy symptoms; joint and muscle pain; internal bleeding; and sleeping, vision, hearing, speech, memory, concentration and breathing problems.

See doctor's letter describing my life-threatening EHS and CHS, page 18, herein.

I have a medical history of life-threatening swelling of vital organs secondary to exposure to radiation and to chemicals, including life-threatening swelling of heart and brain. Pictures document life-threatening rashes and loss of skin and how the swelling inside my skull has been so severe as to push an eye out of its socket. See pages 2,16,17, herein.

I have been violently ill several times. At times, I struggle to breathe even with oxygen. I am sleep deprived and in pain all the time.

Everyday is a different torture. This is a horrible way to die.

THE BEST MEDICAL TREATMENT OF EHS AND CHS IS AVOIDANCE OF RADIATION AND OF CHEMICALS AND FUMES.

The best treatment for EHS is shielding to avoid avoid exposure to radiation, and the best treatment for CHS is filtering to avoid exposure to chemicals and fumes.

See doctor's letter prescribing a shielding room and other equipment to ameliorate the symptoms of my CHS, page 19, herein

To ameliorate the symptoms and signs of my EHS and CHS, I use shielding of thoracic box and shielding of eyes, face and head and a mask most of the time, and I use doctor prescribed battery operated detection equipment to measure the levels of radiation reaching my place.

See doctor's letter recommending shielding, a microwave suit and detection meters to avoid radiation, page 19, id.

More than 13 years ago, I lost the ability to drive, to do grocery shopping, and the ability to be inside buildings or walk on the street without aggravating my EHS and CHS. I cannot be inside my home, but a few minutes at a time, and I stay in a metal room and in other places in the backyard. However, even the low levels of radiation and of chemicals and fumes reaching my place aggravate my EHS and CHS.

I cannot have emergency health care inside a hospital due to the wireless/radiation and chemicals and fumes inside buildings.

More than 13 years ago I lost the ability to use computers and I use a mechanical typewriter to draft documents, and friends help me to type in electronic form, to make copies and to send Emails and with errands.

My doctor's letter details how because my life-threatening EHS and CHS staying inside a buliding or in other places where their is radiation or chemicals/fumes can cause me irreversible harm, including death, page 18, herein. See Declaration to a Court and Court Orders, pages 31 - 38 herein.

MY ELECTROHYPERSENSITIVITY EHS, AND CHEMICAL HYPERSENSITIVITY, CHS, HAVE BEEN RECOGNIZED BY FEDERAL AND STATE AGENCIES AND BY COURTS AS PHYSICAL DISABILITIES UNDER THE AMERICANS WITH DISABILITIES ACT AND UNDER THE REHABILITATION ACT.

My EHS and CHS have been evaluated and diagnosed by doctors with expertise in Environmental Medicine and selected and approved by the Texas Dept. of Assistive and Rehabilitative Services DARS, (Formerly the Texas Rehabilitation Commission, TRC), and by the Texas Dept. of Aging and Disability Services.

On the year 2003, an Administrative Law Judge of the Social Security Administration found my electromagnetic sensitivity a medically determinable severe physical impairment. See page 22.

On the year 2007, the Texas Dept. of Aging and Disability Services DADS, issued the Physician Statement of Disability signed by my doctor detailing how my EHS substantially limit major life activities including Receptive and Expressive Language, Learning, Mobility, Capacity for Independent Living, and ability to work, and recommending radiation meters to prevent exposures. See page 23, herein.

For about seven years, and until the program ended, DADS provided funding for the purchase of shielding and meters to ameliorate the symptoms and signs of my EHS.

On the year 2008, during adversarial litigation, and in response to medical and legal evidence of my life-threatening EHS, two State Judges granted my unopposed Motion to Appear by Phone to Judicial Proceedings recognizing my EHS as a physical disability under the Americans with Disabilities Act and under the Rehabilitation Act. See pages 27 - 30.

On the year 2018, during adversarial litigation, and in response to medical and legal evidence of my life-threatening EHS and CHS, including evidence proving that the State of Texas has recognized my EHS and CHS as life-threatening physical disabilities, another State Judge, three times, granted my unopposed Motion to Appear by Phone to Judicial Proceedings, recognizing my EHS and CHS as physical disabilities under the Americans with Disabilities Act. See pages 31 - 38.

On the year 2018, two Administrative Appeals Judges acknowledged that the best treatment for EHS is to avoid all radiation and that EHS is recognized by the medical community. See pages 24, 25.

On the year 2020, another Administrative Law Judge for the Social Security Administration found my EHS and CHS medically determinable severe immunological impairments that significantly limit my ability to perform basic work activities. See page 26.

On the year 2022, during adversarial litigation, and in response to medical evidence of the aggravation of my life-threatening EHS and CHS, a federal Magistrate Judge granted my unopposed Motion for an extension of time to comply with a Court Ordered submission of documents.

See page 39, herein.

On the year 2023, during adversarial litigation, and in response to medical evidence of the aggravation of my life-threatening EHS and CHS, a Chief U.S. District Judge granted my unopposed Motion for a 30-day extension of time to file documents. See Page 40, id.

On the same year, during the same adversarial litigation, and in response to medical evidence of the aggravation of my life-threatening EHS and CHS, the same Chief Judge granted my unopposed Motion for a 60-day extension to file documents. See page 41, id.

The Texas Dept. of Public Safety and the County Clerk have recognized my EHS and CHS as physical medical conditions and as disabilities.

Because the microwave radiation emitted by the wireless devices used by police officers impairs my speech and concentration, the Texas Dept. of Safety placed on the back of my Texas ID that I have a speech impediment.

See Page 42, id.

Because the radiation and chemicals/fumes found inside buildings aggravate my life-threatening EHS and CHS, the County Clerk exempted me permanently from serving jury duty. See Page 43.

"IT IS DIFFICULT TO GET A MAN TO UNDERSTAND SOMETHING WHEN
HIS SALARY DEPENDS UPON HIS NOT UNDERSTANDING IT."

Upton Sinclair
(Emphasis mine)

"(E)very cell in our body, in our brain or nervous system
is dependent on electrical signals."

"EHS is characterized by an awareness of/adverse response
to even extremely weak electromagnetic fields." Summary of EHS
by Dr. Erica Mallery-Blythe. See pages 43b, herein.

"Electricity is the foundation of life."

Ulrich Warnke, German Biologist.

Chemicals impact organs that use electrical current, including the
the heart, brain and lungs. Dr. K.P. Stoller.

"The human body is an electrochemical instrument of
exquisite sensitivity." G.J. Hyland.

"(L)iving beings are electrochemical systems that use
low frequency EMFs in everything from protein folding
through cellular communications to nervous system
function." Allan Frey.

In his book, *Dirty Electricity* (2010), Samuel Milham, MD., MPH., a
world-class expert in the harm caused by the radiation at school, details
his discovery that most of the twentieth century diseases of civilization,
including cancer, cardiovascular disease, diabetes, and suicide, are
caused by electromagnetic field exposure. Dr. Milham WARNED that because
of the massive and unrestricted proliferation of wireless/microwave
technologies we are bound to face a catastrophic increase in illnesses
and mortality.

ELECTROHYPERSENSITIVITY EHS, AND CHEMICAL HYPERSENSITIVITY CHS, ARE LIKE OPEN WOUNDS TO THE IMMUNOLOGICAL SYSTEM WHICH CAN BE AGGRAVATED TO IRREVERSIBILITY BY EXPOSURE TO EVEN LOW LEVELS OF RADIATION AND CHEMICALS.

"Electromagnetic hypersensitivity is characterized by an awareness and/or adverse symptomatology in response to even extremely weak (orders of magnitude below current safety levels) electromagnetic fields (in terms of frequency/intensity and waveform."

Summary of EHS by Dr. Erica Mallery-Blythe, page 15A, 15D, herein.

"

"After EHS has been induced, symptoms are retriggered by ever lower levels of RF/MW radiation (and/or ELF) fields."

"The phenomenon thus represents injury into an ongoing condition, and not merely a set of isolated symptoms."

Paragh. 24 of Declaration of Dr. Magda Havas to a federal Court on AHM v. Portland Public Schools, Case No. CV-739-MO (Portland Division).
(Emphasis mine).

"Characterized by increasing susceptibility and irreversibility:"

"If EHS is unmanaged and there is general deterioration, there will be a reaction to an increasingly broad range of frequencies at increasingly low intensities, i.e. the number of devices complained of triggering symptoms will increase and symptomatic distances will decrease."

"Tendency towards MCS will also increase and irreversibility will become more likely."

Summary of EHS by Dr. Mallery-Blythe, page 15D. (Emphasis mine).

+ (CHS is also known as Multiple Chemical Sensitivity or MCS).

THE SYMPTOMS OF EHS AND CHS INCLUDING THE PAIN AND SWELLING OF BRAIN AND HEART AND OF OTHER VITAL ORGANS MIMIC AND ARE CONFOUNDED WITH THE SYMPTOMS OF MOST ILLNESSES INCLUDING CATASTROPHIC IRREVERSIBLE AND DEADLY ILLNESSES.

Dr. William J. Rea, a world-class expert in Environmental Medicine detailed the massive medical errors of doctors without expertise in EHS and CHS when diagnosing and treating the harm caused by exposure to environmental radiation and chemicals and fumes.

Dr. Rea was the founder of the Environmental Health Center/Dallas, and co-author of one of the first studies corroborating the existence of EHS as a physical medical condition. Dr. Rea was the first doctor who examined, evaluated and diagnosed my EHS and CHS. Pages 20, 21, 21A, herein.

Dr. Rea was one of the first doctors to link the symptoms of EHS and CHS with the symptoms of most illnesses.

Dr. Mallery-Blythe and Dr. Havas and other experts in Environmental Medicine have detailed how the symptoms of EHS and the symptoms of CHS and the symptoms of the harm caused by exposure to low levels of microwave radiation (As reported by thousands of peer-reviewed scientific studies) are similar or the same. Summary of EHS, by Dr. Mallery-Blythe; ⁺San Fco. EarthLink Wi-Fi Network (2007). See also Belpomme et al., (2021), id.
⁺ See pages 15A-15G herein.

Thousands of peer-reviewed scientific studies report symptoms caused by exposure to microwave radiation that are similar or the same to the symptoms of EHS. See the Bioinitiative Reports 2007, 2012, 2014, 2020; the Dart Report et al., (2013); and the Naval Medical Research Report (2001)

Some of these studies are detailed herein at pages 44, 45.

See also self-reported symptoms of the harm caused by exposure to low levels of microwave radiation that mimic or are the same symptoms of EHS, WeAreTheEvidence.org

IT IS ESTIMATED THAT WITHOUT KNOWING IT,⁺ MORE THAN 50% OF THE U.S. POPULATION (More than 160 million Americans, including children) ARE SUFFERING FROM SYMPTOMS OF EHS AND CHS.

See Summary of EHS by Dr. Mallery-Blythe, pages 15D, 15E herein.

See also, Belppomme et al., The Critical Importance of Molecular Biomarkers and Imaging in the Study of Electrohypersensitivity, .. A Scientific Consensus International Report by 32 world-class doctors and scientists. Intl. J. of Molecular Sciencies (2021).

A study made on the year 2000 estimated that at that time, millions of Americans were already suffering from EHS and CHS.

No Place to Hide, (Nov. 2000), page 15H, herein.

On the year 2007, it was estimated that:

"San Francisco with a population of 744,000 people may have as many as 15,000 people (2% of the population) who are severely affected by radio frequency radiation and up to 260,000 individuals (35% of the population) who have moderate sensitivities."

Dr. Magda Havas, San Fco. EarthLink Wi-Wi Network (2007) page 8.

On the year 2011, on a Declaration under penalty of perjury, Dr. Havas detailed how without parents knowing it, millions of children are suffering symptoms of EHS. AHM v. Portland Public Schools, id.

+ (Most doctors have no training in Environmental Medicine, and the symptoms and signs of EHS and CHS, including the pain and swelling of vital organs mimic and are confounded with symptoms and signs of most illnesses, including catastrophic, irreversible and deadly illnesses as detailed herein).

ON THE YEAR 2010 SWEDEN HAD MORE THAN 250,000 DISABLED BY EHS.

"Swedish EHS sufferers -- about 3% of the population, or some 250,000 people, according to government statistics -- are entitled to similar rights and social services as those given to people who are blind or deaf."

James Geary, Disconnect, Popular Science March 2010. (Emphasis mine).

Sweden was on the forefront of cellphone technologies. Out of the 40 engineers working on the development of these technologies, about half became EHS. Geary, id.

Doctors with expertise in Environmental Medicine - in EHS and CHS and in other harm and disabilities caused and aggravated by even low levels of radiation and chemicals include:

Dr. Andrew Tresidder, Electrosensitivity - an Environmental Illness, an Authentic Diagnosis, not a Delusional Disorder (2017);

Dr. David O. Carpenter, Excessive Exposure to Radiofrequency Electromagnetic Fields May Cause the Development of Electrohypersensitivity (2014);

Dr. Olle Johansson, Electrohypersensitivity: A functional Impairment due to an-inaccessible environment. (2015); and,

Dr. Franz Adlkofer, Electrosensitivity: As experienced by an electrosensitive person and assessed by scientists. (2015).

After a French Court found Ms. Marine R. severely disabled by EHS, Dr. Adlkofer stated:

"Let's us hope that courageous judges will be found not only in France who understand the basis for electrosensitivity, who question the rationale for the safety limits and who provide justice to the electrosensitive people."

"In order to avoid any exposure to electromagnetic fields Ms Marine R. now lives in an old stone house in the pyrenees near the Spanish border without electricity and running water, and of course without mobile phones."

Dr. Adlkofer.

CHILDREN, TEACHERS, DOCTORS AND ATTORNEYS ARE SUFFERING FROM EHS.
See WeAreTheEvidence.org

Dr. Elizabeth Evans, who suffers from EHS details how EHS is not taught in medical school; how most doctors are unaware of EHS; and advises to clear of all wireless the homes of people with chronic illnesses. Pgs 52, 53.

Dr. Scott Eberle details his tribulation with EHS on his articles *What is the Diagnosis Doctor?* and *An Underworld Journey: The Psychology of Electromagnetic Hypersensitivity (EHS)*.

At the time she was General Director of the World Health Organization, Dr. Gro Harlem Brundtland detailed how her EHS was not imagination.

See Summary of EHS by Dr. Mallery-Blythe, page 15F, and pages 49, 50.

Barbara Denberger, a German Judge, detailed the catastrophic seclusion caused by her EHS. Page 51, herein.

On her book, *Cell Phones and the Dark Deception* (2009), Careligh Cooper details how after 130 Traditional "Medical Experts" failed to find the cause of her husband's painful and debilitating symptoms, a doctor with expertise in Environmental Medicine discovered that his brain had been injured by microwave radiation. By that time, it was deadly late.

Peter Sullivan, a millionaire software designer thought that anybody that talked about the harm caused by microwave radiation "was a complete idiot." Until he became EHS. After his "Brilliant" Stanfords doctors failed to find what was wrong with him, Mr. Sullivan gave about a \$1 million to research that Traditional doctors just won't touch.

Overwhelming medical and scientific evidence has corroborated that the symptoms of EHS are not imagination. "Furthermore, evidence of EHS type symptomology in studies involving small children, fetuses and animals (where media-cultivated perceptions are impossible), also invalidates this theory." Dr. Mallery-Blythe, pages 15E, 15F, herein.

On August 13, 2021, in *Children's Health Defense et al., v. The FCC*, and in response to more than 11,000 pages of medical, scientific and legal evidence of the widespread sickness caused by exposure to low levels of wireless/microwave radiation, including EHS, the U.S. Court of Appeals for the D.C. Circuit found false the FCC and FDA claims that this radiation is harmless and ordered the FCC and the FDA to explain why they ignored this evidence of harm. Both, the FCC and the FDA are still in violation of that Court Order. Case No. 20-1025.

In describing the harm caused by Electrohypersensitivity on millions of children and on millions of other defenseless victims, the D.C. Court of Appeals cited a statement on the record:

"That the Telecommunications Act should not be interpreted to injure an identifiable segment of the population, exiled them from their homes and their city, leave them no place where they can survive allowed them no remedy under City, State or Federal law or constitutions." *Children's Health Defense et al.*, page 25 id.

"Ignoring the facts and reality do not change them and ignoring the problem is guaranteed to worsen its scale."

"Human beings are electric beings, ... and there is no mechanism in the human body that protects it from the radiation. Therefore, to claim that this radiation is not affecting us is ignorant and absurd."

"I want to believe that the day which the extent of this disaster will be exposed is not far." Attorney Dafna Tachover.

Arthur Firstenberg, *The Invisible Rainbow* (2017).

Ms. Tachover, an EHS sufferer was on the team of attorneys on *Children's Health Defense* case. Ms. Tachover website WeAreTheEvidence.org details how children and people from different walks of life are suffering from EHS.

The World Health Organization has recognized EHS as a physical medical medical condition and as a disability.

"The WHO states that 'symptoms are certainly real' and 'in some cases can be disabling'." Dr. Mallery-Blythe, page 15E herein.
(Emphasis in original)

In describing EHS, the World Health Organization states:

"+++ (a) phenomenon where individuals experience health effects while using or being in the vicinity of devices emanating electric, magnetic, or electromagnetic fields (EMFs). EHS is a real and sometimes a debilitating problem for the affected persons."

Paragh. 25 of Declaration of Dr. Havas, AHM v. Portland Public Schools, id.

Some of the persons that the Social Security Administration has found their EHS a total and permanent disability under the Social Security Act include:

Arthur Firstenberg (1997);

Anne Mills, All EMF+d Up (2012); and

Beth Sturdivant, Backyard Secret Exposed (2012). See page 15F herein.

The International Code of Diseases Diagnostic Codes for the harm caused and aggravated by exposure to radiation include:

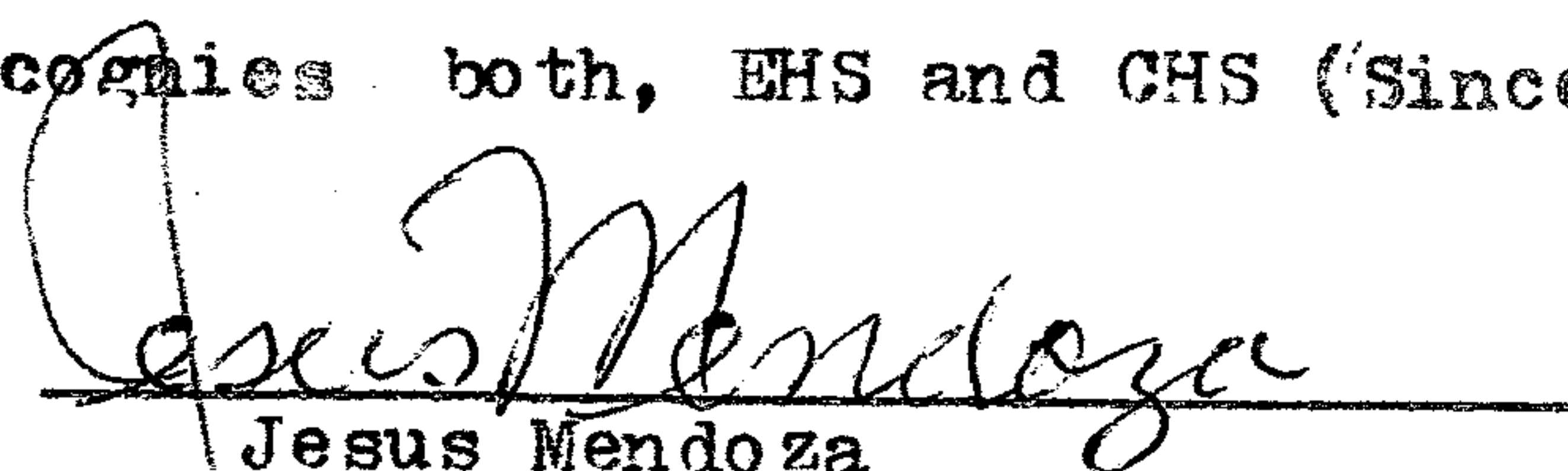
T66, W90, W90.1, W90.2, W90.8 and Z58.4

See Dr. Mallery-Blythe, page 15D, herein.

Federal agencies that recognize EHS as a physical medical condition and as a disability includes: The U.S. Dept. of Education; The National Institute of Health; The National Council of Disabilities; and the CDC.

The U.S. Access Board recognizes both, EHS and CHS (Since the year 2000), See pages 47, 48.

Respectfully submitted,


Jesus Mendoza

2202 E. 28th St. Mission, Texas 78574 Tel. (956) 583-7012.

PARENTS ALERT (April, 2025).

EXPERTS IN ENVIRONMENTAL MEDICINE ARE ADVISING TO CLEAR OF ALL WIRELESS (Of cellphones, Wi-Fi etc.), the homes with children, pregnant women and of others with chronic or life-threatening illnesses and disabilities to prevent aggravation of their health condition and to increase their ability to heal. These toxicants CAN FORECLOSE THE POSSIBILITY OF A CURE as detailed herein.

MORE THAN 20 YEARS OF LITIGATION generated specific, concrete and undisputed medical, scientific and legal evidence on the record proving and corroborating the fraud on the Courts to conceal among other atrocities:

- 1- That the massive exposures to Wireless/Microwave Radiation and Chemicals and Fumes at SCHOOL are causing millions of children EHS and CHS⁺ (Which includes PAIN AND SWELLING OF BRAIN AND HEART and of other vital organs), and brain, eye, blood, nerve, heart and DNA damage and other catastrophic, irreversible and deadly harm and disabilities THAT DEFEAT THE PURPOSE OF EDUCATION AND LIFE;
- 2- TO CONCEAL that the symptoms of EHS and CHS and of other harm and disabilities caused and aggravated by even low levels of radiation and of chemicals MIMIC AND ARE CONFOUNDED WITH MOST ILLNESSES, like heart attacks, cardiac arrest and strokes;
- 3- AND TO CONCEAL that MOST DOCTORS ARE IN THE DARK OR IN DENIAL OF ENVIRONMENTAL MEDICINE -- of EHS and CHS, and continue misdiagnosing mismeasuring and mistreating THE PAIN AND SWELLING OF BRAIN AND HEART caused and aggravated by RADIATION AND CHEMICALS WITH CHEMICALS AND RADIATION, including:
 - i- Powerful and harmful drugs; ii- DEADLY PAINKILLERS;
 - iii- And powerful, harmful and DEADLY CHEMO AND RADIATION THERAPIES.

(THIS IS LIKE TRYING TO EXTINGUISH A FIRE WITH GASOLINE!).

- + IT IS ESTIMATED THAT WITHOUT KNOWING IT, more than half of the U.S. population, more than 160 million people or one out of 2 children and one out of two adults are suffering symptoms of Electrohypersensitivity EHS, and of Chemical Hypersensitivity CHS, as detailed herein.

PARENTS ALERT (April, 2025).

- A- REQUESTING Doctors, Nurses and Medical Schools to get TRAINING IN ENVIRONMENTAL MEDICINE -- in EHS and CHS⁺ and on the PAIN AND SWELLING OF BRAIN AND HEART AND OF OTHER VITAL ORGANS caused and aggravated by exposure to EVEN LOW LEVELS of Wireless/Microwave Radiation and of Chemicals and fumes;
- B- REQUESTING your local, State and Federal Authorities and Legislators to intervene to protect our children from these MASSIVE MEDICAL ERRORS;
- C- AND SHARING THIS INFORMATION with your family and friends and with your contacts so they can do the same:
- i- Can save immense pain and suffering;
 - ii- Can save the lives of millions of children and of millions of other defenseless and unsuspecting victims;
 - iii- And can restore OUR MEDICAL CARE SYSTEM, The Judiciary and our Constitutional Republic to THEIR ORIGINAL INTENT.

LOCAL, STATE AND FEDERAL AUTHORITIES AND LEGISLATORS HAVE A DUTY TO VERIFY THIS EVIDENCE AND A DUTY TO PROTECT OUR CHILDREN AS THE EVIDENCE DEMANDS. (They have been properly briefed on these crimes). OUR CHILDREN CANNOT DEFEND THEMSELVES FROM THESE MEDICAL AGGRESSIONS.

"Don't wait until it's too late. Ignoring the facts doesn't change them."

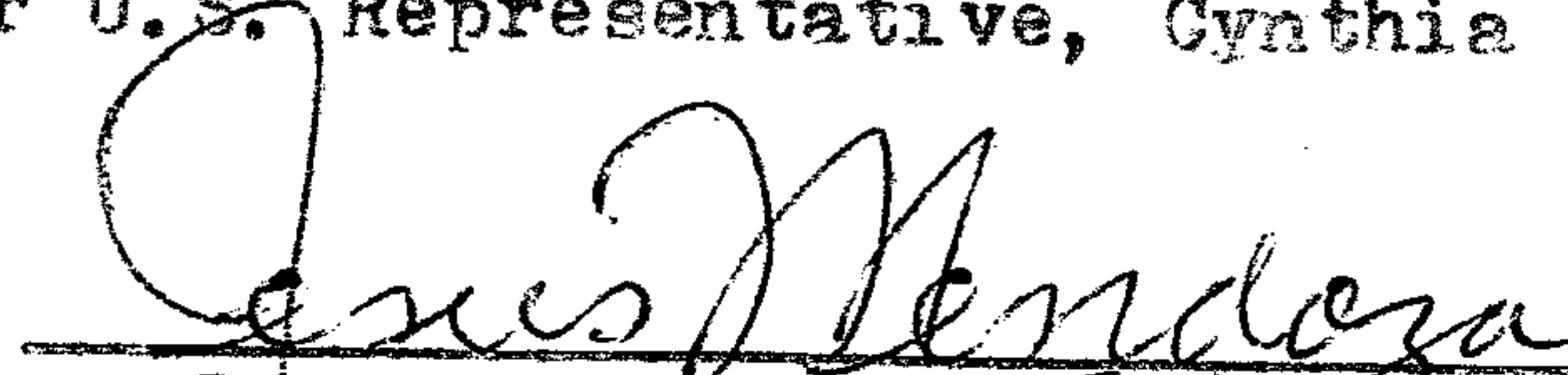
Careligh Cooper.

"Our lives no longer belong to us alone. They belong to all those who need us desperately." Elie Wisel.

"Silence is the deadliest weapon of mass destruction."

Former U.S. Representative, Cynthia McKenney.

Respectfully,


Jesus Mendoza. 17 April 2025.

Tel. (956) 583-7012.

+ EHS is Electrohypersensitivity, and CHS is Chemical Hypersensitivity or CHS, also known as Multiple Chemical Sensitivity or MCS. 14 D

2 of 3

PARENTS ALERT (April, 2025).

The evidence on the record proving the fraud on the Courts to conceal that MASSIVE MEDICAL ERRORS ARE MASKING the catastrophic, irreversible and deadly harm and disabilities being caused on MILLIONS OF OUR CHILDREN and on millions of other defenseless and unsuspecting victims by Environmental WIRELESS/MICROWAVE RADIATION AND CHEMICALS AND FUMES is detailed by:

The Petition to Impeach 3 Federal Judges (Aug. 2024) and Exhibits A, B, and C, submitted to Jim Jordan, Chair of the U.S. House of Representatives Judiciary Committee; +

By the Complaint of Criminal Violation of Constitutional and Statutory Rights submitted on March 17, 2025 to U.S. Attorney General, Pam Bondi; ++

And by the Complaint of Criminal Violation of Constitutional and Statutory Rights to U.S. Attorney for the Southern District Of Texas, Nicholas J. Ganjei.

These documents have been posted on the Case Law Materials of J. Mendoza at [wirelesswatchblog.org](http://www.wirelesswatchblog.org)

- + <http://www.wirelesswatchblog.org/wp-content/uploads/PetitiontoImpeach3FederalJudgesAug24.pdf>
- <http://www.wirelesswatchblog.org/wp-content/uploads/StatementofPhysicalDisabilitiesExhibitApartone.pdf>
- <http://www.wirelesswatchblog.org/wp-content/uploads/StatementofPhysicalDisabilitiesExhibitBparttwo.pdf>
- <http://www.wirelesswatchblog.org/wp-content/uploads/2024/11/exhibitbpartonepetitiontoimpeach.pdf>
- <http://www.wirelesswatchblog.org/wp-content/uploads/2024/11/exhibitbparttwopetitiontoimpeach.pdf>
- <http://www.wirelesswatchblog.org/wp-content/uploads/2024/11/ExhibitBpartthreePetition-to-Impeach.pdf>
- ++ <http://www.wirelesswatchblog.org/wp-content/uploads/2025/02/scanned-from-a-xerox-multifunction-printer.pdf>

Appendix 1. Electromagnetic hypersensitivity (EHS): excerpts from a summary by Dr Erica Mallery-Blythe⁸⁰

EHS is characterized by an awareness of/adverse response to even extremely weak electromagnetic fields (far below current safety levels) of varying frequencies, intensities and waveforms. It has been demonstrated to be an "environmentally inducible bona-fide neurological syndrome". It is a primary physical issue, not a psychological one. Conscious perception can vary with age, gender and physiology. Effects can occur even in those not experiencing symptoms at a cellular level, and it is possible that everybody could potentially develop EHS as every cell in our body is dependent on electrical signals.

Common symptoms: Headaches, dizziness, sleep disturbance, sensory up-regulation, dermatological issues, palpitations, visual/auditory disturbances, membrane sensitivity, muscle twitching, hyperactivity/fatigue, memory/concentration disturbance and anxiety (psychiatric symptoms such as anxiety and depression are likely to be secondary to the physiological effects rather than a primary cause).

Exposure-induced: EHS is a cumulative, exposure-triggered condition, and exposures are rising rapidly. If EHS is unmanaged and there is general deterioration, there will be reaction to an increasingly broad range of frequencies at increasingly low intensities. The number of devices triggering symptoms will increase, symptomatic distances will decrease and irreversibility will become more likely.

The number of people with EHS symptoms who have not yet linked them to exposure is likely to be far higher than the estimated 4–10% of the population reported by several countries. Given the ubiquity of exposure in all environments, it can be difficult for people to notice the association. Extrapolated figures suggest that 50% of the population may be affected by 2017. With enough exposure, it is possible that EHS could manifest in all members of the population. Many children are affected but undiagnosed. They are more likely to develop EHS since their exposure is higher and their systems are developing.

Socioeconomic impact of EHS and human rights: EHS is already affecting a very large number of people, many of whom are unable to work due to their condition, resulting in lost revenue. An extra burden is placed on healthcare agency resources due to inappropriate diagnosis and management of common symptoms. In more severe cases, individuals are forced to live in extreme isolation, poverty and poor health, with some living in cars and tents, which can also prove threatening to health and life, especially in extreme temperatures. They cannot access basic, life-sustaining public amenities, such as grocery stores and healthcare facilities, which constitutes a clear breach of their human rights.

"I have been contacted on a daily basis by individuals with EHS, medical practitioners, school and parent groups, legal representatives, the media and political bodies looking for medical advice on EHS or the health effects of EMF in general. This is an increasingly demanding task and therefore I have founded a medical doctors organisation entitled PHIRE (Physicians' Health Initiative for Radiation and Environment) in order to increase the available support for those requesting it" (<http://phiremedical.org/>).

⁸⁰ See: <http://www.iemfa.org/wp-content/pdf/Mallery-Blythe-v1-EESC.pdf>; includes 72 pages of scientific references.

Electromagnetic Hypersensitivity
A Summary by Dr Erica Mallery-Blythe

December 2014

WORKING DRAFT Version 1

For printing purposes:

The first 1-7 pages are body text, the rest are references. This document consists of 79 pages.

Author's note:

This summary is an expanded section of a larger document entitled "Electromagnetic Health for Children". The full document is designed in response to requests for information detailing current health concerns of electromagnetic fields (EMFs) with a focus on radiofrequency (RF) radiation. This is an expanded subsection covering EHS only.

Background:

We are currently witnessing the largest change to the Earth's electromagnetic environment that has ever taken place in human history. This change has taken place in the very short period of a handful of decades and continues to escalate at an exponential rate (Appendix 1). Given that household electricity, which was the first anthropogenic (man-made) electromagnetic field (EMF), only became prolific after the turn of the century, artificial EMF has barely seen one generation from cradle to grave. The use of higher frequency microwave devices such as mobile telephony, Wi-fi and smart meters, have suddenly become commonplace despite almost no safety testing and decades of evidence of potentially lethal effects. This has sparked a political and scientific debate that is gathering momentum on a daily basis, raising concern about the continued use of such devices. One may assume when witnessing the vast implementation of, for example Wi-fi in the home, school, workplace or public domain, that experts have provided sufficient evidence of safety to overwhelm scientific concern. This is not the case.

The World Health Organisation (WHO) / International Agency for Research on Cancer (IARC) Classified RF as a Group 2 B 'Possible Human Carcinogen' (2011). Despite this, there has been no attempt in the UK at disseminating this important information to the public. Conversely, it was not even mentioned in the AGNIR government commissioned report a year later in 2012. The only safety guidelines currently used in the UK are those constructed in 1998 regarding 'thermal (heating) effects' of non-ionising radiation. These are not protective of health given the vastly documented non-thermal effect taking place orders of magnitude below these levels. They are obsolete. Other countries have responded to this information and have safety limits more biologically sensible, thousands of times lower than here in the UK (see Appendix 2). Mechanistic data is available to explain these effects and every bodily system is affected (as one would expect from a radiation induced illness).

The very broad range of RF emitting devices on the market were never pre-market safety tested and many now contain fine print warnings from the manufacturers which warn that one must keep the devices a minimum distance from the body which in some cases is incompatible with use. The public are generally not aware of these warnings or the increased vulnerability of certain groups such as children, fetuses, elderly, pregnant women, infirm and those with EHS.

The full paper gives an overview of facts that should be considered during the policy change that is clearly necessary, and this subsection concerns Electromagnetic Hypersensitivity (EHS) only.

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Electromagnetic Hypersensitivity (EHS)

A Summary

1. Definition:

Electromagnetic hypersensitivity is characterised by an awareness and/or adverse symptomatology in response to even extremely weak (orders of magnitude below current safety levels^{1,2}) electromagnetic fields of multiple types (in terms of frequency/intensity and waveforms). Relevant diagnostic coding that may be used by UK medical doctors include "idiopathic/environmental intolerance (IEI)",^{3,4} code Z58.4 (Exposure to radiation) under the International Classification of Diseases (ICD-10),⁵ T66 (microwave syndrome)="other unspecified effects of external causes: radiation sickness."⁶

[Note: All life is electrosensitive to some degree and thresholds for conscious perception will vary depending on age, gender and individual physiology.^{7,8,9,10}]

2. Common symptoms include:

Headaches, dizziness, sleep disturbance, sensory up-regulation, palpitations, unusual pain in multiple sites, visual disturbance, auditory disturbance (esp tinnitus), membrane sensitivity, muscle twitching, dermatological complaints, hyperactivity /fatigue (depends on adrenal status/ state of EHS), restless leg syndrome, memory/concentration disturbance and anxiety^{11,12,13,14,15} (psychiatric symptoms such as anxiety and depression are likely to be secondary to the physiological effects rather than a primary cause¹⁶). Interestingly, with good avoidance, symptoms tend to disappear in the reverse order that they accumulated.

3. Characterised by multiple sensory up-regulation:

Up-regulation of all senses is commonly noted in persons with EHS, i.e. Photophobia and/or Scotopic sensitivity syndrome (visual sensitivity), Hyperacusis (hearing sensitivity), Hyperosmia (heightened sense of smell), Hypergeusia (heightened taste sensitivity), Hyperesthesia/Photosensitivity (heightened skin sensitivity) and Multiple Chemical Sensitivity (MCS) is associated.^{17,18,99,109}

4. Exposure induced:

EHS is a cumulative, exposure-triggered condition, and exposures are rising rapidly (see Appendix 1).

Devices which emit RF and known to cause symptoms in those with EHS include:

mobile phones, DECT cordless landlines, Wi-Fi/Bluetooth enabled laptop, desktop computers and laptops, Wi-Fi routers, Smart meters, fluorescent lighting, baby monitors, security systems, RFID systems and wireless gaming consoles. ELF (Extremely Low Frequency) fields (household electrical) will also cause symptoms in some individuals.

5. Characterised by increasing trigger susceptibility and irreversibility:

If EHS is unmanaged and there is general deterioration, there will be reaction to an increasingly broad range of frequencies at increasingly low intensities, i.e. the number of devices complained of triggering symptoms will increase and symptomatic distances will decrease.¹⁹ Tendency towards MCS will also increase and irreversibility will become more likely.²⁰

-15 D

6. Highly prevalent:

Estimates for the number of people with EHS vary widely, but several countries report around 4-10%.^{21,22,23} In the UK this corresponds to approximately 2.5 to 6.3 million²⁴ (which is more than the number of UK wheelchair users). This is likely to be a gross underestimation (see point 7 below) given that figures are based on the number of people who have made the connection between their symptoms and EMF exposure. The number of people who have mild EHS symptoms, but have not linked them yet to exposure would be far higher. Given the ubiquity of exposure now in all environments, it can be very difficult for people to notice the association.

7. Rapidly rising:

Extrapolated figures suggest that 50% of the population may be affected by 2017 (Appendix 3).

8. May affect everyone:

Interestingly, the signs and symptoms associated with RF exposures from e.g. mobile phone base stations,^{25,26,27,28,29,30,31,32,33,34,35,36,37,38,39,40} (also see Appendix 4) Wi-Fi,^{41,42} mobile phones,^{43,44,45,46,47,48,49,50,51,52,53,54,55,56,57,58,59,60,61,62,63,64,65,66,67,68,69,140,143} radio/TV broadcasting transmitters,^{70,71,72,73,74} smart meters,⁷⁵ MRI scanners,^{76,77,78,79,80,81,82,83,84,85,86} and other RF sources^{87,88} reveal that the general population (not known to be EHS) experience the same constellation of symptoms as are noted in EHS. This is a dose-response relationship. Thus, it is possible that EHS could manifest in all members of the population with enough exposure. (Please note some of the above studies are demonstrating EHS symptoms in children.)

9. Proven physiological condition:

EHS has been demonstrated in a published, peer-reviewed, double blind research study,⁸⁹ as an 'environmentally inducible bona-fide neurological syndrome',⁹⁰ and other provocation tests corroborate this evidence.^{73,76,91,92,93,94,95,101} In addition, multiple papers have demonstrated physiological variations in those with EHS^{25,26,28,31,33,37,92,94,96,97,98,99,100,101,102,103,104,105,106,107,108,109,110,111,112,113} and genetic variations.⁹⁹ Furthermore, mechanisms are evolving that may explain the symptomatology of EHS.^{42,44,52,55,56,62,65,69,78,81,87,88,96,100,114,115,116,117,118,119,120,121,122,123,124,125,126} Therefore, increasingly, professional bodies are recognising this as a physiological condition.^{127,128,129,130,131,132,133,134,135}

10. Recognised by World Health Organisation (WHO):

The WHO states that 'symptoms are certainly real' and 'in some cases can be disabling'.¹³⁶ 'Some studies suggest that certain physiological responses of IEI individuals tend to be outside the normal range. In particular, the findings of hyper reactivity in the central nervous system and misbalance in the autonomic nervous system need to be followed up in clinical investigations and the results for the individuals taken as input for possible treatment.'¹¹³

11. Nocebo effect invalid:

Whilst the nocebo effect (physical-symptoms induced by fear) has been suggested,¹³⁷ thorough investigation of individual histories renders this concept invalid in the majority of cases. Additionally, psychological therapies are much less effective at reducing symptoms than avoidance of electromagnetic fields¹³⁸ (see also point 14 below) and risk perception alone has not been felt adequate to explain the characteristics witnessed.¹⁷ Furthermore, evidence of EHS type symptomatology in studies involving small children, fetuses^{139,140,141,142,143}

animals^{144,145,146,147,148,149,150,151,152,153,154,155,156,157,158,159,160,161,162,163} (where media-cultivated perceptions are impossible), also invalidates this theory.

12. Recognised as a functional impairment:

- Under the disability act in Sweden,^{164,165} USA¹⁶⁶ and Canada.¹⁶⁷
- Legal cases are now being won for long term disability pensions/compensation (Australia,¹⁶⁸ France,¹⁶⁹ Spain,¹⁷⁰ UK¹⁷¹ and United States^{172,173}).
- Hospital facilities with low EMF have been constructed.¹⁷⁴
- Academic bodies urge immediate protection for those with EHS.^{175,176}
- The UN^{177,178} and the European Parliament¹⁷⁹ have made clear the requirement for equal opportunities for those with EHS.

13. Notable persons with EHS:

Well known, credible individuals such as Dr Gro Harlem Brundtland, Former Director-General of WHO and the first female Prime Minister of Norway¹⁸⁰ and Matti Niemelä, former Nokia Chief Technical Officer¹⁸¹ have been public regarding their Electromagnetic Hypersensitivity.

14. Medical guidelines for management exist:

Medical guidelines have been drawn up for doctors to diagnose^{95,182} and manage^{183,184,185} the condition physiologically with advice to urgently reduce exposure, and this advice is echoed by many other organizations.^{164,167,183,186,187,188,189,190,191,192,193,194} Additionally, research has shown avoidance can be the only reliable form of management to improve symptoms.^{138,195} Currently the most reliable way to diagnose EHS is via history, i.e. it is a clinical diagnosis,¹⁸² but there are other tests currently being used in the private sector and in the research forum believed by their users to be diagnostic or aid diagnosis.

15. Children have EHS:

Many children are currently affected, but undiagnosed. Children are likely to be more vulnerable to developing EHS since their exposure is higher (as explained above), and outcomes may be worse given their developing systems and greater time for latent effects. Children with EHS must be supported at school under the conditions stated in the 'Supporting pupils at school with medical conditions' Department for Education document (April 2014).¹⁹⁶

16. Vulnerable groups and white zones:

In addition to those with EHS and children, other vulnerable groups include the elderly, pregnant women, foetuses and those with co-morbidity (concurrent) illnesses. In order to protect vulnerable groups there has been increased call for designated, legally protected white zones (no or low EMF areas).^{197,198,199}

17. Socioeconomic impact of EHS and human rights:

It has been demonstrated that EHS is already affecting a very large number of people in the UK (see point 6) and given that a proportion of these people will be unable to work due to their condition, revenue is being lost.²⁰⁰ Additionally an extra burden is created on NHS resources due to inappropriate diagnosis and management of common symptoms, including in those who may be unaware they have more severe cases, individuals are forced to live in extreme isolation, poverty and poor health. Individuals cannot access basic, life sustaining public amenities, such as grocery stores, petrol and health care facilities. There is therefore a clear breach of their human rights. We are aware

that some individuals are living in automobiles and tents, which can also prove threatening to health and life, especially in extremes of temperature,

All EHS persons require 'comprehensive health evaluation':

"Because of the huge socioeconomic impact anticipated for EHS worldwide, the World Health Organization has devoted considerable attention to EHS, acknowledging this condition and recommending that people self-reporting sensitivities receive a comprehensive health evaluation".²⁰¹

Author's notes:

I am contacted on a daily basis by a variety of different individuals including, persons with EHS, medical practitioners, school and parent groups, legal representatives, media and political bodies in the UK looking for medical advice on EHS or health effects of EMF in general. This is an increasingly demanding task and therefore I have founded a medical doctors organisation entitled PHIRE (Physicians' Health Initiative for Radiation and Environment) in order to increase the available support for those requesting it. PHIRE aims to:

1. Create an academic programme for the education of medical practitioners to improve understanding of EMF related health effects. ✓
2. Construct British medical guidelines for diagnosis and management of EHS. ✓
3. Advise educational groups regarding protection of children from EMF exposure. ✓
4. Increase awareness and support for adults and children with EHS and other vulnerable groups. ✓
5. Expand current British research teams, and use global connections to maintain state-of-the-art education.
6. Open constructive dialogue with DOH (Department of Health)/PHE (Public Health England).
7. Advise on best practice public guidance.

Newly Published Studies on Electrical Sensitivity

Details of the California EMF Program's Survey

In the September 2000 issue of *No Place To Hide* we gave a preliminary report on the California EMF Program's survey on electrical sensitivity. The full text, which was released July 13, 2001 as an appendix to the program's Risk Evaluation, contains more epidemiological data about ES than has ever been gathered before.

These data were the results of telephone interviews with

a random sampling of 2,072 Californians. 68 respondents (3.3%) said they were electrically sensitive, while 503 respondents (24.3%) said they were chemically sensitive. In addition, 3.6% of the respondents had medically diagnosed chemical sensitivity.

Of the respondents reporting electrical sensitivity, 60% also reported chemical sensitivity. Of the respondents reporting chemical sensitivity, only 8.4% also reported electrical sensitivity.

15.6% of the electrically sensitive respondents had changed jobs because of their electrical environment.

Extrapolation to the entire population of California means that an estimated 120,000 adult Californians have changed jobs as a result of their electrical sensitivity, said the authors of the study. The accompanying table compares the characteristics of persons with electrical sensitivity (ES), persons with chemical sensitivities (MCS), and the average participant in this survey.

The California EMF Program has operated since 1993 as a part of the California Department of Health Services.

Health Effects Near Cell Towers

The numbers of the affected are far greater than previously recognized.

Dr. Roger Santini analyzed the responses to a questionnaire of 530 residents of France who live at varying distances from cell towers. 104 of these respondents live less than 10 meters from a cell tower. Another 109 live more than 300 meters from the nearest tower, and the rest live at varying distances in between. Universally, the closer to a cell tower they live, the more likely are these people to complain of: fatigue, irritability, headache, nausea, loss of appetite, sleep

	persons with ES %	persons with MCS %	general population %
Age, Years			
18-24	11.8	9.9	10.6
25-34	23.5	21.3	23.5
35-44	25.0	23.3	25.1
45-54	16.2	17.5	16.7
55-64	5.9	15.0	10.3
>65	17.6	13.0	13.9
Gender			
Male	41.2	29.1	49.6
Female	58.8	70.8	50.4
Race/Ethnicity			
White	28.4	52.2	60.4
Black	3.0	7.2	5.4
Hispanic	46.3	31.8	25.3
Other (Asian, etc.)	22.4	8.7	8.9
Education			
<12 years	33.8	19.7	13.9
high school graduate or some college	44.2	52.5	50.1
university graduate	22.1	27.3	36.0
Employment Status			
Employed	45.4	54.9	65.6
Not working	40.7	41.1	31.5
Unable to work	13.6	3.6	3.0
Income (\$/year)			
<15,000	41.3	26.7	17.5
15,000-24,000	22.2	16.9	13.9
>25,000	36.6	56.4	68.5
Health Plan			
Yes	61.8	76.7	81.7
No	28.2	23.3	18.3
Disease History			
Asthma	13.2	28.3	13.8
Hay Fever/Allergies	61.8	72.6	49.8
Medically Diagnosed Chemical Sensitivity	19.1	8.3	3.6

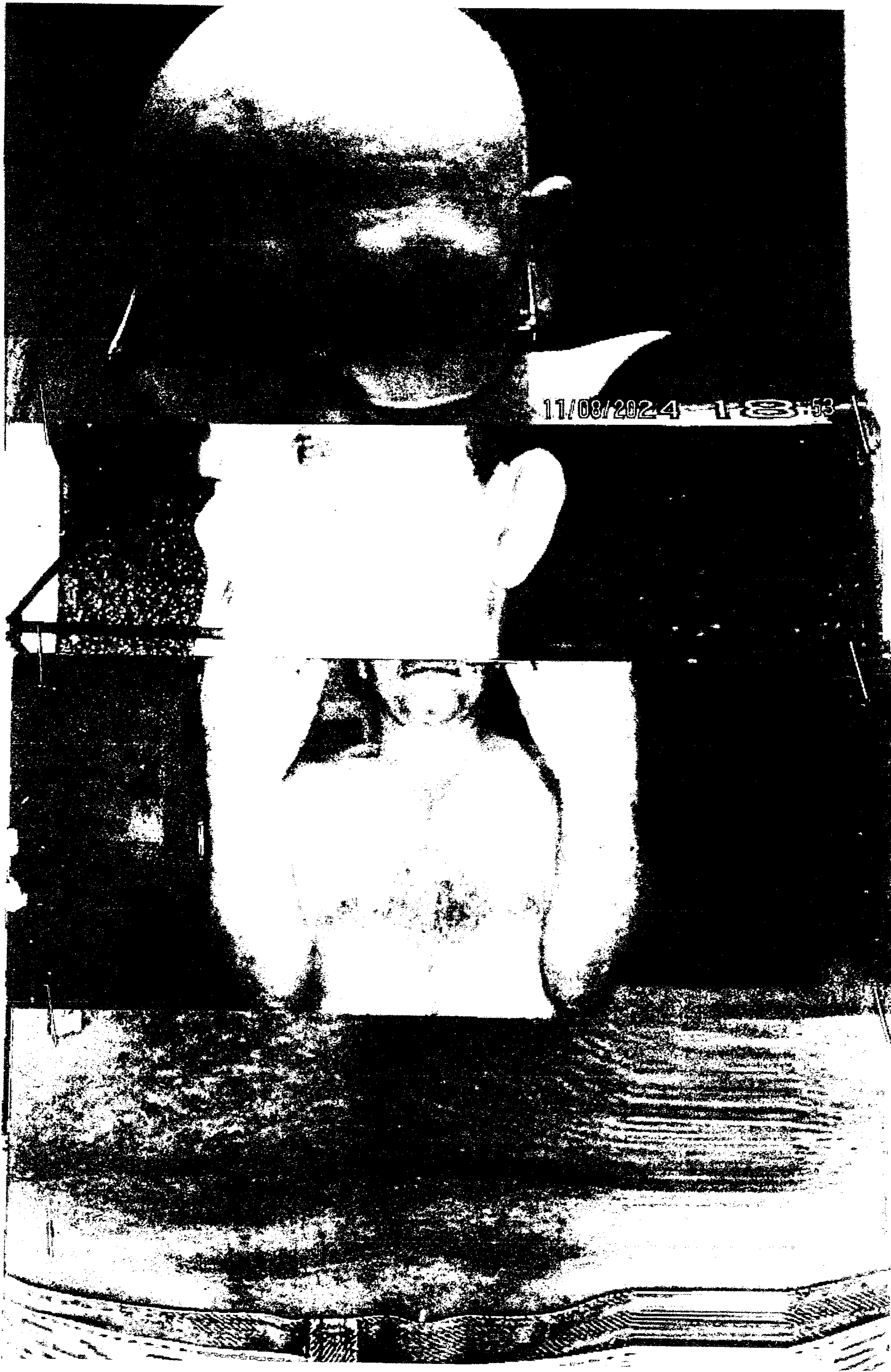
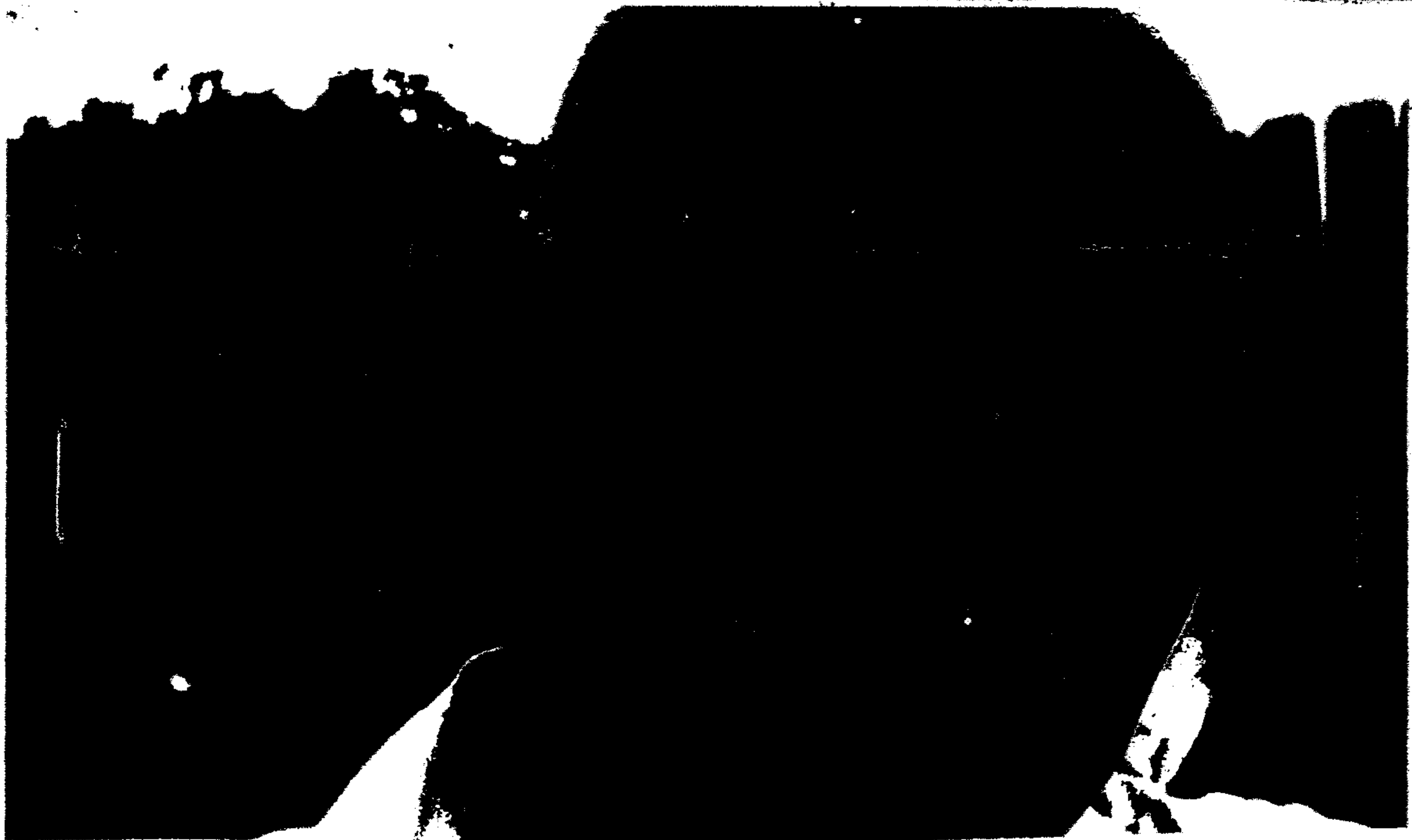
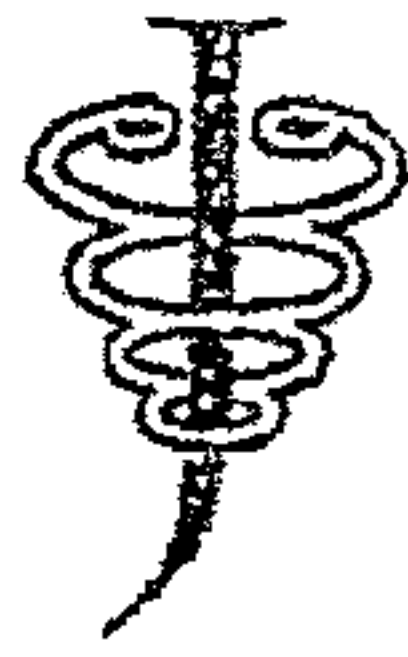


Exhibit A - Docket 34,
Mendoza et al., v. Sharyland ISD,
Case No. 7:11-cv-29 (S.D. TX. 2011).



The pictures show the facial swelling caused by exposure to the radiation emitted by the hand set speaker of a land-line phone after a 2-hour hearing in federal Court on my Motion to compel school officials to follow the doctors' orders not to seat children on the schools' harmful "hot spots" of radiation. During the hearing, Dr. Samuel Milham, a world-class expert in the harm caused by the radiation at school testified in favor of my claims. Exhibit A to Docket 34, Mendoza v. Sharyland ISD et al., Case No. 7:11-cv-29 (S.D. TX. 2011). Now I use a speaker land line phone and other special air tube phones.



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October 28, 2016

RE: Jesus Mendoza

To Whom It May Concern:

The above patient has been under my care for many years. He is currently suffering from severe hypersensitivities to chemical fumes, odors, and a life-threatening electro-hypersensitivity. .

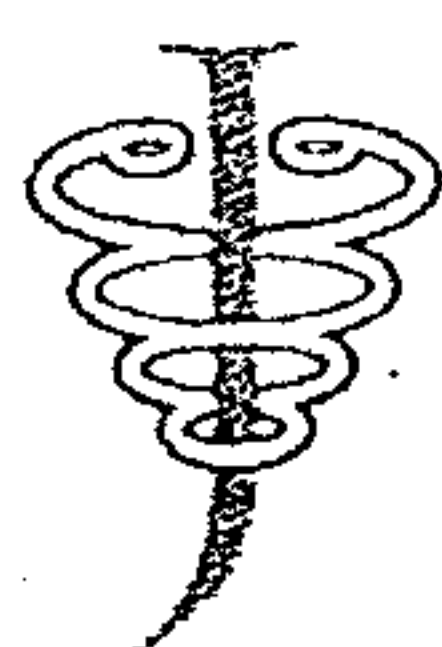
It is medically necessary that he be allowed to appear by phone for court. Please allow him to have phone conferencing as he is unable to tolerate the building. If this patient appears in person in court, his speech, concentration, memory, and hearing will be severely impaired. If he is confined inside a building or in other places where there is radiation, he could suffer irreversible harm including death.

Exposure to sources of radiation emitted by power lines, electric transformers and motors, computers, fluorescent lights, and wireless devices, causes Mr. Mendoza severe pain, swelling of vital organs, breathing difficulties; as well as speech, concentration, memory, and hearing deficits. Also, exposure to some chemicals, fumes, and odors can cause the same health effects as listed.

If you have any questions regarding this please, please feel free to contact my office.

Sincerely Yours,

Alfred R. Johnson, D.O.
ARJ/cnl



JOHNSON MEDICAL ASSOCIATES
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November 25, 2019

RE: Jesus Mendoza

To Whom It May Concern:

Mr. Mendoza has been a patient of mine since 01/14/2003 for chronic hypersensitivity to chemical fumes and electromagnetic frequencies (EMFs), which he reports he has had since the late 90s. His symptoms when exposed vary but include headaches, chest pain, generalized weakness, flu-like symptoms, difficulty breathing, brain fog, as well as issues with sleep and speech. Mr. Mendoza reports that at times he is bed ridden due to these exposures to chemicals and EMFs.

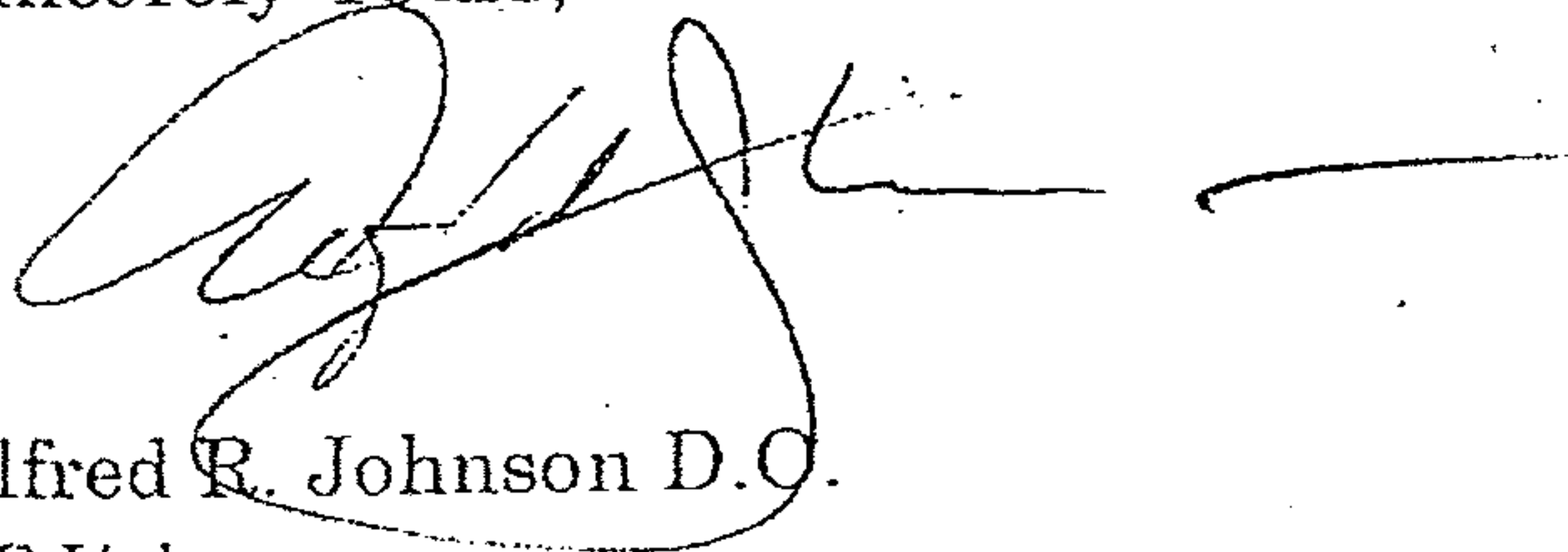
His condition had subsequently hindered his health and life as he is now unable work due to the constant chemicals and EMFs that surround him in everyday life.

It is medically necessary that Mr. Mendoza have the below stated items as his persistent re-exposures to these environmental triggers are deteriorating his overall health.

- A large high-performance silver mesh canopy along with a large floor shield.
- A microwave suit
- A gas mask
- A acustimeter which detects microwave radiation
- A safe and sound meter that detects 5G radiation
- An AC/DC meter which detects ULF and ELF radiation

If you have any questions or concerns, please contact me.

Sincerely Yours,

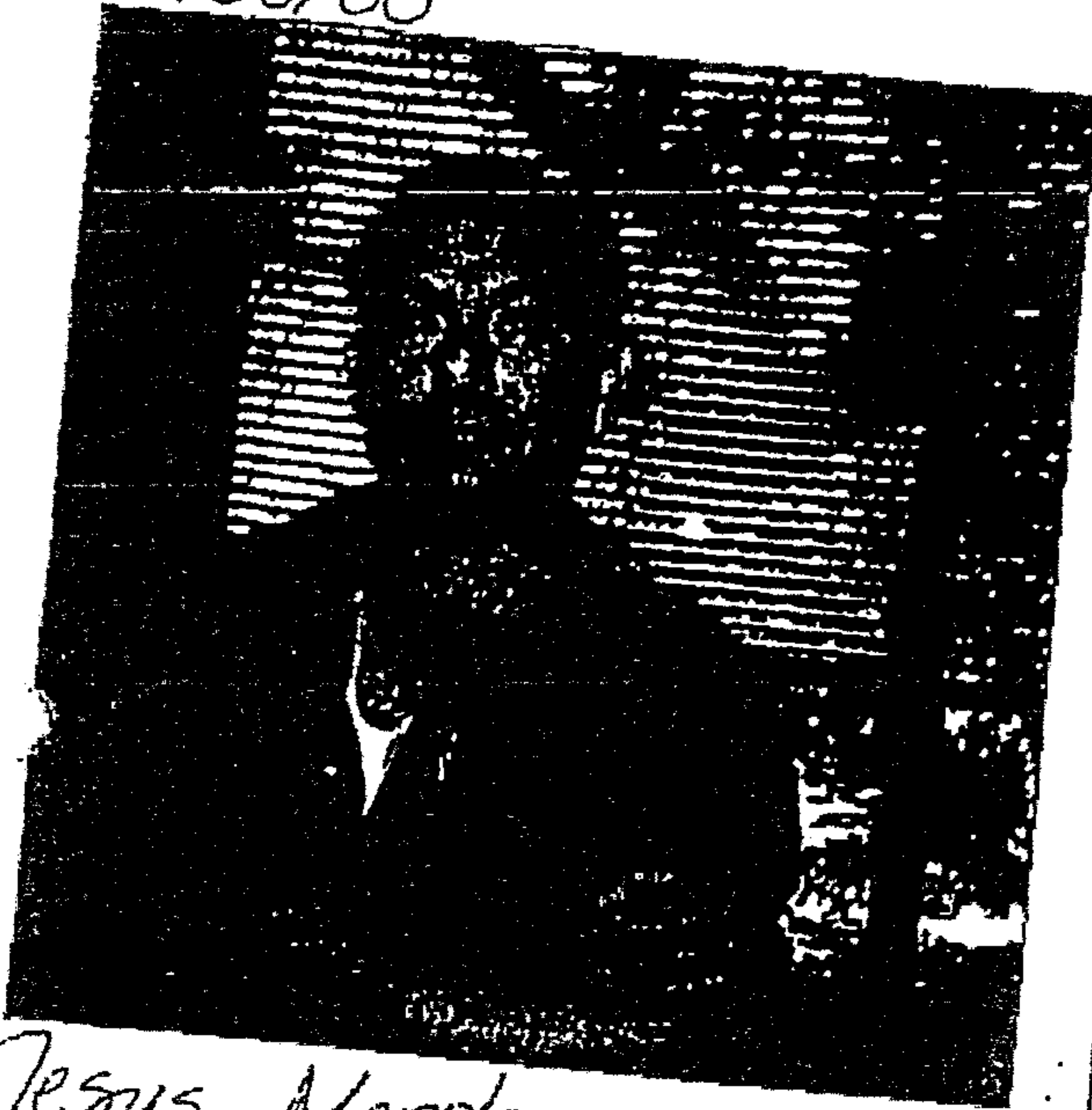


Alfred R. Johnson D.O.
ARJ/nb

Patient Tracking Checklist

Date DoneServices

_____	Housing (Condo - Seagoville - Other)
_____	Initial Patient orientation
_____	Follow-up orientation
_____	Initial Nutrition visit
_____	Follow-up Nutrition
_____	Pupillography
_____	Posturography
_____	Food shots ordered
_____	Inhalant shots ordered
_____	Immune therapy education
_____	Cell cycle orientation
_____	Detoxification (sauna)
_____	Other



Jesus Mendoza

DIAGNOSIS:

- 1 EMF
- 2 Toxic enceph.
- 3
- 4
- 5
- 6



Environmental Health Center — Dallas

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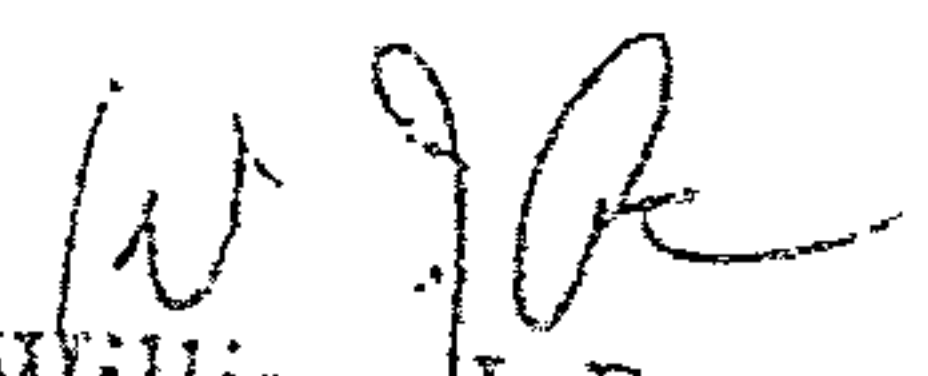
Re: Jesus Mendoza

To Whom It May Concern:

I have evaluated this patient's medical condition and it is important that the patient have a proper testing environment in order to attain maximum potential from this patient. The testing area should be devoid of any chemicals and any appliance that may emit electromagnetic fields that could significantly affect the outcome of this patient's tests.

If you have any questions, please do not hesitate to call my office at (214) 368-4132.

Sincerely,


William J. Rea, M.D., F.A.C.S., F.A.A.E.M.

WJR/tp/cdcp

Court Transc
3881

Mendoza v. Kiyakasi
Case No 7:22-cv-85
(S.D. TX. 2022)



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Title

ELECTROMAGNETIC FIELD SENSITIVITY.

Source

Journal of Bioelectricity 10 (1-2). 1991. 241-256.

Abstract

A multiphase study was performed to find an effective method to evaluate electromagnetic field (EMF) sensitivity of patients. The first phase developed criteria for controlled testing using an environment low in chemical, particulate, and EMF pollution. Monitoring devices were used in an effort to ensure that extraneous EMF would not interfere with the tests. A second phase involved a single-blind challenge of 100 patients who complained of EMF sensitivity to a series of fields ranging from 0 to 5 MHz in frequency, plus 5 blank challenges. Twenty-five patients were found who were **sensitive** to the fields, but did not react to the blanks. These were compared in the third phase to 25 healthy naive volunteer controls. None of the volunteers reacted to any challenge, active or blanks, but 16 of the **EMF-sensitive** patients (64%) had positive signs and symptoms scores, plus autonomic nervous system changes. In the fourth phase, the 16 **EMF-sensitive** patients were rechallenged twice to the frequencies to which they were most **sensitive** during the previous challenge. The active frequency was found to be positive in 100% of the challenges, while all of the placebo tests were negative. We concluded that this study gives strong evidence that electromagnetic field sensitivity exists, and can be elicited under environmentally controlled conditions.

