

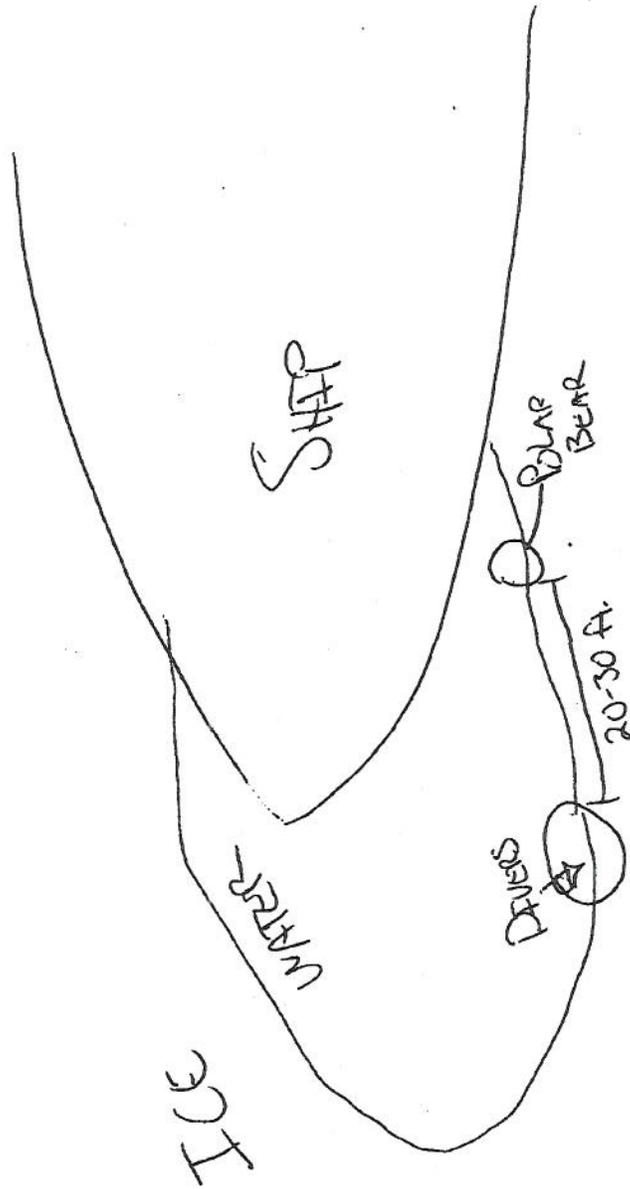
The statement below is true to the best of my recollection, [REDACTED] 19AUG06

On August 17, 2006 around 1800, I was standing around when I heard someone yell that they needed help pulling the divers out of the water. I walked over and started pulling the line; we pulled the line until someone could see one of the divers. Mr. [REDACTED] and I pulled LT Hill onto the ice, she was motionless, and so someone pulled off her mask. All I saw was foam coming out of her mouth and nose, and she was discolored. I immediately check her ABC's, nothing was present so I started CPR with CWO [REDACTED] providing breaths and clearing the foam from her mouth, I did chest compressions, as I continued compressions, foam kept coming out of her mouth and nose. We did 4 or 5 cycles of CPR and rechecked her ABC's, still nothing. At this time I yelled for a knife and we cut away her wet suit and rechecked for a pulse, nothing. We started CPR again I checked and made sure that the breaths were going in and they were, then someone showed up with an AED. I exposed LT Hill's chest and applied the AED pads correctly, the AED started to analyze her pulse, so I told everyone to stand clear, the AED checked and advised "no shock," so I rechecked ABC's and still had nothing. We were getting ready to resume CPR when the stretcher showed up, we placed LT Hill on the stretcher and started transporting her to Sickbay, the transfer went quickly and smoothly.

I followed the stretcher up the brow and into sickbay. Once we were inside sickbay, we put BM2 Duque on the examination table; I grabbed people to assist me. I had MK3 [REDACTED] in charge of keeping BM2's airway open, DC2 [REDACTED] and BM3 [REDACTED] would be providing breaths via Bag Valve Mask with supplemental oxygen. Myself and a science party member provided chest compressions. When I wasn't doing compressions, I was providing suction of BM2's mouth and nose; I was also helping LTJG [REDACTED]. As our team was providing CPR, I would stop them and check ABC's, as well as the effectiveness of our CPR. I checked the effectiveness of the provided CPR, and every time it was effective, BM2 chest was rising and falling with every breath and I felt the pulse on the carotid artery as compressions were being provided. After sometime Mr. [REDACTED] connected an EKG/Monitor life pack, and I inserted an Airway Adjunct into BM2's mouth, I had no resistance when trying to get it in. Once the EKG was hooked up, we set it to analyze, it advised "no shock." BM2's body was not wet, so I know we had good connections on the EKG, I also made sure know one touched his body. We continued CPR for a couple of cycles when Mr. [REDACTED] stopped us to insert 2 needles into BM2's chest. We continued CPR around this time I noticed that BM2's color was changing, hid chest was bruised and the veins in his arm were dark, also his tongue was very pale and lips and around his eyes were discolored. CPR was continued for another 10-15 minutes until Mr. [REDACTED] inserted a shot into BM2's heart region, there was no change in BM2's condition, so we rechecked ABC's and started CPR again. A little later Mr. [REDACTED] attempted to insert a tube into BM2's throat, but was unable to get it in, so I went to get him a stylus, once we found a stylus the tube when in. We resumed CPR again and continued until someone in medical told us to stop. We were in sickbay providing CPR and other medical assistance for approximately one hour.

[REDACTED]
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(ENCLOSURE ENGINEERING)