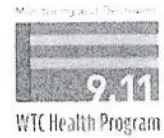


## Petition for the Addition of a New WTC-Related Health Condition for Coverage under the World Trade Center (WTC) Health Program



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention  
National Institute for Occupational Safety and Health

### General Instructions

Any interested party may petition the WTC Program Administrator to add a condition to the List of WTC-Related Health Conditions (List) in 42 C.F.R. Part 88 (see <http://www.cdc.gov/wtc/faq.html#hlthcond> for the complete list).

Please use this form to petition the Administrator to add a health condition (any recognized medical condition requiring treatment or medication) to the List. Please use a separate form for each health condition.

Use of this petition *form* is voluntary, but any petition must include all of the information identified below, as required by 42 C.F.R. Part 88. Petitions that do not provide the required information will not be considered by the WTC Program Administrator. Additional supporting materials may be submitted and are encouraged.

Please note, however, the petition and all supporting materials submitted to the WTC Health Program are part of the public record and may be subject to public disclosure. Personal information will be redacted prior to public disclosure.

Please TYPE or PRINT all information clearly on the form.

If you need more space to provide the required information, please attach additional pages to this form.

Mail or email this form to: World Trade Center Health Program  
395 E. Street, S.W., Suite 9200  
Washington, D.C. 20201  
WTC@cdc.gov

Public reporting burden of this collection of information is estimated to average 40 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0929).

**A. Interested Party Information**

**A1. Do you represent an organization (are you submitting this petition on behalf of an organization)?**

Yes (Go to A2)  No (Go to A3)

**A2. Organization Information:**

\_\_\_\_\_  
Name of organization

**A3. Name of Individual Petitioner or Organization Representative:**

\_\_\_\_\_  
First name

\_\_\_\_\_  
Last name

\_\_\_\_\_  
Position, if representative of organization

**A4. Mailing Address:**

\_\_\_\_\_  
Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip code

**A5. Telephone Number:** \_\_\_\_\_

**A6. Email Address:** \_\_\_\_\_

**B. Proposed WTC-Related Health Condition Information**

**B1. Health Condition Information:**

ATHEROSCLEROSIS (PLAQUE IN ARTERIES)

Name of health condition you wish to petition to add to the List of covered conditions

\_\_\_\_\_  
If the name of the condition is not known, please provide a description of the condition or the name of the diagnosis provided by a physician or other healthcare provider.

C. Basis for Proposing that the Condition Be Added to the List of WTC-Related Health Conditions

C1. Describe the reasons the WTC Program Administrator should consider the addition of this health condition. Explain how the health condition you are proposing relates to the exposures that may have occurred from the September 11, 2001, terrorist attacks. Your explanation must include a medical basis for the relationship/association between the 9/11 exposure and the proposed health condition. The medical basis may be demonstrated by reference to a peer-reviewed, published, epidemiologic study about the health condition among 9/11 exposed populations or to clinical case reports of health conditions in WTC responders or survivors. First-hand accounts or anecdotal evidence may not be sufficient to establish medical basis. If you need more space, please attach additional pages to this form.

I RECENTLY UNDERWENT ( ) A FEMORAL ARTERY BYPASS  
DUE TO ATHEROSCLEROSIS.

All the doctors state it's from smoking. I do not smoke!

In doing some online research I discovered an article regarding a study that Mount Sinai researchers have found that responders at the WTC site with earlier exposure to the dust cloud have a greater risk of developing arterial plaque.

I worked at ground zero, with the NYPD. I retired in \_\_\_\_\_

(PLEASE SEE ATTACHED ARTICLE)

**D. Signature of Petitioner**

Sign your name below to indicate that you are petitioning the WTC Program Administrator to consider adding a health condition to the list of WTC-related health conditions identified in 42 C.F.R. Part 88.

\_\_\_\_\_  
Signature

4/8/16

\_\_\_\_\_  
Date

**Privacy Act Statement**

In accordance with the Privacy Act of 1974, as amended (5 U.S.C. § 552a), you are hereby notified of the following:

Title I of the James Zadroga 9/11 Health and Compensation Act of 2010 amended the Public Health Service Act (PHS Act) to establish the World Trade Center (WTC) Health Program. Sections 3311, 3312, and 3321 of Title XXXIII of the PHS Act require that the WTC Program Administrator develop regulations to implement portions of the WTC Health Program established within the Department of Health and Human Services (HHS). The WTC Health Program is administered by the Director of the National Institute for Occupational Safety and Health (NIOSH), within the Centers for Disease Control and Prevention (CDC). The information provided with this form and supporting documentation will be used by the WTC Program Administrator to consider the disposition of a petitioned-for health condition. Disclosure of this information is voluntary.

Records containing information in identifiable form become part of an existing NIOSH system of records under the Privacy Act, 09-20-0147, "Occupational Health Epidemiological Studies and EEOICPA Program Records and WTC Health Program Records, HHS/CDC/NIOSH." These records are treated in a confidential manner, unless otherwise compelled by law.

Information submitted to WTC Health Program which may be considered "protected health information" pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) (Pub. L. 104-191; 42 U.S.C. § 1320d) and the HIPAA Privacy, Security, Breach Notification, and Enforcement Rules (45 C.F.R. pts. 160, 162, and 164) will be maintained in accordance with all applicable laws.

NIOSH may disclose information in identifiable form only insofar as such disclosure is permitted pursuant to the HIPAA Privacy Rule; this may include disclosure to the WTC Health Program Scientific/Technical Advisory Committee (STAC), which may be asked to consider the petition and issue a recommendation to the WTC Program Administrator. Information in identifiable form will be redacted from submitted petition forms and supporting documentation that become a part of the public record (e.g. in conjunction with STAC consideration or a rulemaking).

## Newsroom

### World Trade Center Responders at Heightened Risk for Atherosclerosis

**Mount Sinai researchers have found that responders at the World Trade Center site with earlier exposure to the dust cloud have greater risk of developing arterial plaque.**

NEW YORK – November 15, 2011 /Press Release/ —

In the first study using magnetic resonance imaging (MRI) to evaluate cardiovascular risk in World Trade Center (WTC) first responders, researchers from Mount Sinai School of Medicine have found that the responders who experienced high levels of exposure to the initial dust cloud on September 11, 2001, demonstrate high-risk features of atherosclerosis (plaque in arteries). The data were presented at the American Heart Association's Scientific Sessions 2011 in Orlando, Florida.

Mary Ann McLaughlin, MD, MPH, Associate Professor of Medicine is the primary investigator for this study and has been evaluating the cardiovascular health of the WTC responders since 2007. In addition to the current study, her research has shown more impaired cardiac relaxation and coronary calcification in responders at Ground Zero, compared with the general population.

First author, Venkatesh Mani, PhD, and colleagues, used MRI to evaluate the blood vessels of 19 responders exposed to the high levels of particulate matter from the dust cloud, and 12 exposed to the lower levels. They found that WTC workers who were exposed to the initial dust cloud had higher blood vessel formation in their artery plaque compared to people with lower exposure. Co-investigator, Simonetta Sawit, MD also demonstrated impaired vascular reactivity, or dysfunction of the inner lining of blood vessels, in those with higher dust exposure. This dysfunction may accelerate the progression of atherosclerosis. The Mount Sinai team discovered this association in WTC workers independent of other clinical factors.

"Using noninvasive MRI imaging, we were able to see a significant impact of the events of 9/11 on the cardiovascular health of the brave men and women who responded that day," said Zahi Fayad, PhD, Professor of Radiology, and Medicine in the Division of Cardiology, and the Director of the Translational and Molecular Imaging Institute at Mount Sinai School of Medicine. "Now that we have visualized the risk and early development of vascular lesions, in a subset of subjects, we look forward to studying the use of imaging in the greater patient population."

"This study defines physiologic change associated with greater exposure to the dust cloud at the WTC site," said Dr. McLaughlin. "We are currently evaluating other predictors of cardiovascular risk in this population to gain a better understanding of the impact of particulate matter exposure on cardiovascular health."

This research is funded by Clinical and Translational Science Award, the Translational and Molecular Imaging Institute, Mount Sinai School of Medicine.

The WTC Clinical Center of Excellence at Mount Sinai is a treatment and monitoring program for emergency responders, recovery workers, residents, and area workers who were affected by the terrorist attacks in New York City on September 11, 2001. The program identifies mental and physical health problems needing timely treatment, evaluates the health of first responders; monitors the development of symptoms; and researches the effects of 9/11 through data collection and analysis. Located at Mount Sinai and several other clinics in the tri-state area, the Clinical Centers of Excellence and Data Centers are the result of the James Zadroga 9/11 Health and Compensation Act, which provides \$4.3 billion in federal funding to serve the health needs of the brave men and women impacted by the WTC tragedy.

#### About The Mount Sinai Medical Center

The Mount Sinai Medical Center encompasses both The Mount Sinai Hospital and Mount Sinai School of Medicine. Established in 1968, Mount Sinai School of Medicine is one of the leading medical schools in the United States. The Medical School is noted for innovation in education, biomedical research, clinical care delivery, and local and global community service. It has more than 3,400 faculty in 32 departments and 14 research institutes, and ranks among the top 20 medical schools both in National Institutes of Health (NIH) funding and by U.S. News & World Report.

The Mount Sinai Hospital, founded in 1852, is a 1,171-bed tertiary- and quaternary-care teaching facility and one of the nation's oldest, largest and most-respected voluntary hospitals. In 2011, U.S. News & World Report ranked The Mount Sinai Hospital 16th on its elite Honor Roll of the nation's top hospitals based on reputation, safety, and other patient-care factors. Of the top 20 hospitals in the

United States, Mount Sinai is one of 12 integrated academic medical centers whose medical school ranks among the top 20 in NIH funding and US News & World Report and whose hospital is on the US News & World Report Honor Roll. Nearly 60,000 people were treated at Mount Sinai as inpatients last year, and approximately 560,000 outpatient visits took place.

For more information, visit <http://www.mountsinai.org>.

Find Mount Sinai on:

Facebook: <http://www.facebook.com/mountsinainyc>

Twitter: @mountsinainyc

YouTube: <http://www.youtube.com/mountsinainy>

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### 9-11 dust caused atherosclerosis in rescuers ...

[junkscience.com/.../9-11-dust-caused-atherosclerosis-in-resc...](#) Junk science  
Nov 16, 2011 - In the first study using magnetic resonance imaging (MRI) to evaluate cardiovascular risk in World Trade Center (WTC) first responders, ...

### 9/11 First Responders May Face Greater Heart Risks

[consumer.healthday.com/.../9-11-first-responders-may-face-greater-heart...](#)  
Nov 15, 2011 - 9/11 First Responders May Face Greater Heart Risks. Exposure ... which sets the stage for atherosclerosis (hardening of the arteries), she said.

### 9/11 First Responders Developed High-Risk Cardiovascular ...

[www.insurancejournal.com/news/east/2011/.../224611.ht...](#) Insurance Journal  
Nov 18, 2011 - 9/11 First Responders Developed High-Risk Cardiovascular Condition ... 11, 2001, now have high-risk features of atherosclerosis (plaque in ...

### 9/11 Responders May Face Increased Risk of Dangerous ...

[ehstoday.com](#) Emergency Management EHS Today  
Nov 17, 2011 - Researchers have uncovered a possible link to an increased risk of atherosclerosis - plaque in arteries - among the first responders in New ...

### MRI uncovers cardiovascular risks for 9/11 first responders

[www.auntminnie.com/Redirect/Redirect.aspx?ItemId=97670](#)  
Dec 7, 2011 - MRI uncovers cardiovascular risks for 9/11 first responders ... pollution at the site, are also more likely to show early signs of atherosclerosis.

### 9/11 First Responders May Face Greater Heart Risks - Health

[health.usnews.com/.../911-first-responders-m...](#) U.S. News & World Report  
Nov 15, 2011 - 9/11 First Responders May Face Greater Heart Risks ... particulate matter in the air and urban living do increase risk of atherosclerosis, but less ...

### WTC workers exposed earlier to dust cloud have higher risk ...

[medicalxpress.com](#) Cardiology  
Nov 16, 2011 - In the first study using magnetic resonance imaging (MRI) to ... WTC workers exposed earlier to dust cloud have higher risk of atherosclerotic lesions ... New York City firefighters exposed to the 9/11 World Trade Center (WTC) ...

### Study finds 9/11 first responders may suffer from ... - AFBA

[www.afba.com/.../911-first-responders...](#) Armed Forces Benefit Association  
Nov 22, 2011 - Study finds 9/11 first responders may suffer from cardiovascular issues ... are at a higher risk for atherosclerosis, or plaque in the arteries.

### Ground Zero Responders Have High Rates Of Atherosclerosis

[www.24-7-news.com/archives/6183](#)  
Nov 21, 2011 - This impairment was seen specifically in responders exposed to toxic dust at Ground Zero in the first two days following the 9/11 terrorist attacks ...

### World Trade Center First Responders May Face Greater ...

[www.newsinferno.com/world-trade-center-first-responders-may-face-gre...](#)  
Nov 21, 2011 - World Trade Center First Responders May Face Greater Heart Risks ... likely to exhibit high-risk features of atherosclerosis than the general public. ... Zero in the first two days following the 9/11 terrorist attacks are more likely ...

### Searches related to atherosclerosis in 9/11 first responders

9 11 first responders health	9 11 first responders stories
9 11 first responders health problems	9 11 first responders bill
9 11 first responders death toll	9 11 first responders bill 2015

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## Petition for the Addition of a New WTC-Related Health Condition for Coverage under the World Trade Center (WTC) Health Program



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Mail or email this form to: World Trade Center Health Program  
395 E. Street, S.W., Suite 9200  
Washington, D.C. 20201  
WTC@cdc.gov

**A. Interested Party Information**

**A1. Do you represent an organization (are you submitting this petition on behalf of an organization)?**

Yes (Go to A2)  No (Go to A3)

**A2. Organization Information:**

\_\_\_\_\_  
Name of organization

**A3. Name of Individual Petitioner or Organization Representative:**

\_\_\_\_\_  
First name

\_\_\_\_\_  
Last name

\_\_\_\_\_  
Position, if representative of organization

**A4. Mailing Address:**

\_\_\_\_\_  
Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip code

**A5. Telephone Number:** \_\_\_\_\_

**A6. Email Address:** \_\_\_\_\_

**B. Proposed WTC-Related Health Condition Information**

**B1. Health Condition Information:**

*Atherosclerosis - ARTERIAL PLAQUE*

\_\_\_\_\_  
Name of health condition you wish to petition to add to the List of covered conditions

\_\_\_\_\_  
If the name of the condition is not known, please provide a description of the condition or the name of the diagnosis provided by a physician or other healthcare provider.

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Reading that Mount Sinai researchers have found that responders at the WTC site with earlier exposure to the dust cloud have greater risk of developing arterial plaque.

I've included the article from Mount Sinai Hosp. My husband was diagnosed with PAD. He does not smoke. His femoral artery had a blockage which required a femoral artery bypass.

**D. Signature of Petitioner**

Sign your name below to indicate that you are petitioning the WTC Program Administrator to consider adding a health condition to the list of WTC-related health conditions identified in 42 C.F.R. Part 88.

Signature \_\_\_\_\_

3/14/2016

Date

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For more information, visit <http://www.mountsinai.org>.

Find Mount Sinai on:

Facebook: <http://www.facebook.com/mountsinainyc>

Twitter @mountsinainyc

YouTube: <http://www.youtube.com/mountsinainyc>

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