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7 continued to show signs of infection, including the rejection of food and drink.

Shortly after receiving the injection series, all patients displayed a group of initial symptoms: nasal congestion, excessive blinking, and development of a rash on the upper-back/lower neck. Additionally, patients experience strong waves of pain in hand, focuses on region around thumb, and many had discoloration of thumbnail. Within two hours, nasal congestion turned to a green discharge.

Individual patient reports continue on next page.

*During specimen collection, nurse made physical contact with green discharge and was treated for burns by medical team. Necess. barrier protocols have been implemented in response.*

*F.C.*

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PATIENT REPORTS, 4 SEP '78

11:30

Patient A: Vomiting, coughing of blood and phlegm. Swelling in the ankles and calves, with 2 cm. bruises forming in 7 places on the legs, arms, and chest. Breathing exercises show signs of water in lungs, possible leakage within the heart. A rejected food and drink within 30 minutes of consumption.

HR: 128 beats/min

BP: 140/86

Temperature: 102.2

Weight: 122 lbs.

Patient B: Vomiting, diarrhea, bruising spreading to legs, arms, becoming long (up to 15 cm. in length. Analysis of blood sample showed new antibodies in bloodstream, as well as new proteins in large quantities. B able to drink water, but rejected food within 10 minutes of consumption. Eyes filled with milky white liquid; patient vision reduced from 20/30 to 120/130.

HR: 132 beats/min

BP: 132/96

Temperature: 101.2

Weight: 111 lbs.

Patient C: Vomiting, coughing of blood and phlegm. Swelling in the ankles and wrists, with 4.5 cm. bruises forming in 19 places on the legs, arms, chest and head. Breathing exercises show signs of water in lungs. C able to consume both liquids and liquid solids. Eyes changed to milky

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green, with patient vision increasing from 140/70 to 90/30. Patient able to identify basic colors and shapes.

HR: 109 beats/min

BP: 120/49

Temperature: 102.7

Weight: 138 lbs.

Patient D: Time of death 11:16 AM.

Attempted to revive. See page 31 of 58 for autopsy report.

Patient E: Vomiting only sporadically, with occasional hacking fits. Large quantities of phlegm, no blood. Patient breath wheezy, but not watery. Heart beat erratic. After a brief milkiness of the eyes and loss of vision, patients eyes became green. Any bruising formed but also healed quickly; largest bruises 1 cm. in diameter. Patient claimed to see thermal radiation from investigator.

HR: 122 beats/min

BP: 140/69

Temperature: 101.7

Weight: 156 lbs.

Patient F: Time of death 10:36 AM.

No attempt made to revive. See page 33 of 58 for autopsy report.

Patient G: Feverish, unconscious as of 10:57 AM. Prior, patient unable to recall basic information such as name, hometown, wife's name. Patient physical information taken

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while patient remained unconscious. Wheezy and liquid noise found in lungs. Eyes remained milky. Blood samples taken and found to contain large quantities of antibodies bound to new proteins. Cerebral fluid also removed.

HR: 145 beats/min

BP: 84/49

Temperature: 103.7

Weight: 117 lbs.

Patient H: Vomiting, coughing of blood and phlegm. Swelling in the head; hives covering most of body; bruising on wrists and ankles in small, dark dots. Patient unable to breath without oxygen mask; heart beating erratically, unable to stabilize long enough to measure pulse. Patient able to recall name, but acted dazed, as though concussed. Vision stable.

HR: 109-147 beats/min

BP: 147/100

*R. Gabriel called about remains  
Forwarded to Elyria pers. office.  
F.D.*

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SUMMARY OF SUBJECT TEST, 2nd GENERATION, ROUND THREE:

Patient A: Dead, Day 2; heart attack

Patient B: Dead, Day 7; rhino virus

Patient C: Dead, Day 3; heart attack

Patient D: Dead, Day 5; dehydration

Patient E: Dead, Day 4; dehydration

Patient G: Dead, Day 1; organ failure

Patient H: Dead, Day 21; pneumonia

Patient I: Dead, Day 6; dehydration

Patient J: Dead, Day 34; brain tumor

(uncorroborated; pending further examination)

Patient K: Dead, Day 4; heart attack

Patient L: Dead, Day 5; dehydration

All patient bodies were disposed of using

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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Patient F: See pages 37 through 40 for full report. After first two days, patient went into a coma. Heartbeats grew erratic and shallower, until finally stopping on 12/14 at 3:57 PM. Doctors began resuscitation attempts. After four attempts patient heartbeat resumed at steady rate. Patient regained consciousness 12 hours later and requested food and water. Patient unable to recall basic identification information or form memories lasting longer than 2 hours. Memory improved during during daytime. Overnight, patient F's fever rose dramatically, from 100.0 to 103.1, and patient suddenly became violent and loud. Patient had to be restrained in bed as fever rose. Antibiotics were administered. Patient died at 6:45 AM on 12/16. During the autopsy a number of changes were found within the patient. Analysis of feces and patient's large intestines revealed large numbers of barely destroyed cells within fecal matter. Masses of dead or dying cells were also found in large lumps just outside of the draining lymph nodes; these masses were composed both of dead defensive cells and partially destroyed cells from several dispersed locations of the body. Interesting, in most tissues previously under attack seemed whole and undamaged by previous defensive cell attacks. Cells appeared both young and healthy. Patients eyes were also noted to retain their green coloring. Green eyes appeared to be linked to the ability to see thermal patterns. Further tests of patient abilities were not conducted prior to loss of patient. Cause of death: rhino virus.

Patient M: See pages 40 through 46 for full report. Patient went into a coma five hours after initial injection. Fever rose from 98.7 to 104.5, before dropping

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to 94.7 five hours later. Patient showed no signs of infection, but an IV regiment of antibiotics was still begun when temperature rose. After two days, patient regained consciousness. Eyes had taken on fluorescent green color previously associated with successful transformation. Upon regaining consciousness, patient was able to answer questions such as name (Pat Gordon), age (22 years of age) and hometown (Eugene, OR). Patient appeared disoriented and displayed memory loss.

Patient became afraid during questioning, and began to grip table and shout at interviewer. Large indentations in the metal table were left by the patient. Patient's eyes also changed from their normal color (grey) to the fluorescent green seen in previous patients when afraid. Patient was given a light sedative, at which point the color faded back. Further questioning revealed that the patient was able to see colors consistent with thermal patterns. After an additional day of questioning and physical, emotional, and mental tests, the patient was released and sent to a hospital for a complete check up. Further tests revealed no new patterns or useful data about experiments. Patient was informed he had been in an accident while on tour in South America, and was released from duty.

Patient will continue to be monitored. Particular attention will be paid to any mating or offspring.

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**SUPPLEMENT / INSERTION 04-JAN-1993**

Patient did have one further episode, in 1992. A doctor from the nearest military base was sent to investigate and made a full report copied and placed at the end of this report, Appendix A2 (FC)