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**MILITARY COMMISSIONS TRIAL JUDICIARY  
GUANTANAMO BAY, CUBA**

<p><b>UNITED STATES OF AMERICA</b></p> <p><b>v.</b></p> <p><b>ABD AL HADI AL IRAQI</b></p>	<p><b>AE 131E</b></p> <p><b>Defense Notice of Exhibits</b> in Support of Mr. al-Tamir's Response to the Commission's Order in AE 131</p> <p><b>January 4, 2019</b></p>
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1. The attached exhibits are filed in support of of Mr. al-Tamir's Response to the Commission's Order in AE 131.
2. **Attachments.**
  - A. Certificate of Service dated January 4, 2019.
  - B. All documents provided to the Defense by the Government in Production 174.

Respectfully Submitted,

//s//

Susan Hensler  
Detailed Defense Counsel

# ATTACHMENT A

**CERTIFICATE OF SERVICE**

I certify that on **January 4, 2019**, I filed **AE 131E Defense Notice of Exhibits** in Support of Mr. al-Tamir's Response to the Commission's Order in AE 131 with the Office of Military Commissions Trial Judiciary and served a copy on Government counsel of record.

//s//

Susan Hensler  
Detailed Defense Counsel

# **ATTACHMENT B**

~~UNCLASSIFIED//Pending DoD Review~~



Through evidence,  
change is possible.

Physicians for  
Human Rights

256 West 38th Street  
9th Floor  
New York, NY  
10018

+1.646.564.3720  
phr.org

August 31, 2017

To Whom It May Concern:

Physicians for Human Rights has learned from the Military Commissions Defense Organization that a detainee at Guantánamo Bay Detention Center complains of progressive back pain, bladder incontinence, and loss of motor and sensory function in his legs which has recently resulted in an inability to walk. The following description was shared with us today:

*He's had back problems for years, but it has gotten dramatically worse over the past few months. He sometimes loses feeling in both of his legs; he has lost 90% of the feeling in left leg; his motor control is deteriorating; and he periodically loses control of his bladder. Last week, he was finally given a walker, but he is now unable to use it due to the loss of sensation in his legs. He has a great deal of difficulty getting out of his cell to interact with other detainees.*

These symptoms, if accurate, are consistent with serious neurologic impairment that may be permanent if not diagnosed and treated promptly. Based on the reported symptoms, there is a possibility of cauda equina syndrome, which could result in permanent neurologic damage and/or paralysis if not diagnosed and treated immediately.

Cauda equina syndrome requires emergency diagnosis and MRI, and evaluation by a neurosurgeon for therapeutic intervention, which typically consists of high-dose corticosteroids and surgery.

We urge the authorities to be in immediate contact with medical staff so they can act in a timely manner consistent with the standard of care.

Sincerely,

Homer Venters, MD, MS  
Director of Programs  
Physicians for Human Rights

Vincent Iacopino, MD, PhD  
Senior Medical Advisor  
Physicians for Human Rights

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002168

~~UNCLASSIFIED//Pending DoD Review~~



Through evidence,  
change is possible.

Physicians for  
Human Rights

256 West 38<sup>th</sup> Street  
9th Floor  
New York, NY  
10018

+1.646.564.3720  
phr.org

September 6, 2017

To Whom It May Concern:

The Military Commissions Defense Organization has updated Physicians for Human Rights on the revised medical plan for the detainee at Guantánamo Bay Detention Center, the subject of our August 31, 2017 letter.

We understand that the patient has received medical attention and that medical personnel have acknowledged that he likely has compression of the spinal cord or the nerves leading from the spinal cord. We also understand that they have started steroids and informed the patient that they intended within 24 to 48 hours of September 5, 2017, to get the necessary diagnostics and therapeutic interventions, including likely surgical decompression of the spinal cord.

If this plan has not yet been realized, the patient should be immediately medevaced to an appropriate facility. This is particularly crucial with the imminent approach of Hurricane Irma and related logistical complications.

We reiterate the urgency of immediate diagnostic and therapeutic action if it has not already taken place. Based on the reported symptoms, any further delay in diagnosis and treatment will likely result in permanent neurologic damage and/or paralysis.

We hope that this assessment is helpful and kindly request an update on actions that have been taken and that will be taken in the future to ensure that the patient receives treatment that is consistent with the standard of care.

Sincerely,

Homer Venters, MD, MS  
Director of Programs  
Physicians for Human Rights

Vincent Iacopino, MD, PhD  
Senior Medical Advisor  
Physicians for Human Rights

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002169

~~UNCLASSIFIED//Pending DoD Review~~



Through evidence,  
change is possible.

Physicians for  
Human Rights

256 West 38 h Street  
9th Floor  
New York, NY  
10018

+1.646.564 3720  
phr.org

September 8, 2017

The Honorable James N. Mattis  
Secretary of Defense  
1100 Defense Pentagon  
Washington, D.C. 20301

Dear Secretary Mattis,

Physicians for Human Rights has learned from news reports that the detainee at Guantánamo Bay Detention Center, the subject of our August 31 and September 7 letters, received spine surgery on September 5, 2017, presumably for spinal cord/nerve decompression. We are pleased to hear this and hope that the patient regains full neurological function in his lower extremities and urinary bladder.

We also read with interest the assertion of Department of Defense (DOD) spokesperson Air Force Maj. Ben Sakrison that timely emergency medical action was taken in this patient's case, following a recommendation for "urgent medical care" within 24-48 hours, and that this is an example of the capacity to effectively diagnose and treat emergency medical conditions at Guantánamo Bay Detention Center. (Carol Rosenberg, "Doctors beat Irma to Guantánamo to operate on alleged war criminal's spine," *Miami Herald*, Sept. 7, 2017)

We are deeply concerned that the facts of this case do not support the DOD's public claim of appropriate, high-quality, and timely medical/surgical care. With all due respect to the medical personnel who traveled on short notice to Guantánamo and performed the therapeutic intervention, especially with Hurricane Irma approaching, this case exemplifies serious problems in the accurate and timely diagnosis of emergency medical/surgical conditions.

As you know, the patient had a history of back pain and a January 2017 CAT scan showed evidence of severe neural encroachment that could easily progress to spinal stenosis. (Dr. James Cobey, Letter to Defense Counsel, Sept. 5, 2017) This condition, if untreated, can result in spinal cord and/or nerve compression leading to permanent neurologic disabilities. We know from the patient's extensive communications with his attorneys that he reported to Guantánamo medical personnel having symptoms of progressive lower extremity weakness during the past several months. A CAT scan/myelogram was reportedly conducted in July 2017, but the results of that diagnostic imaging study have not been shared with the patient's legal team, nor have any medical records from January 23 2017 until the present. In addition, we understand that the patient reportedly experienced symptoms of urinary incontinence during the past several weeks. This is a medical/surgical emergency that should have prompted immediate diagnosis with an MRI or CAT scan/myelogram and treatment with surgical decompression within 24-48 hours.

It is common medical knowledge, at the most basic level, that spinal stenosis associated with increasing motor weakness requires urgent diagnosis and surgical treatment. When this patient experienced symptoms of urinary incontinence weeks ago, in addition to motor weakness, the medical staff should have acted immediately, but did not. Instead, we understand that the medical plan was to have an anesthesiologist travel to Guantánamo on September 12, 2017 for steroid injections and for a neurosurgeon to travel to Guantánamo on October 2, 2017. If true, this plan is a stunning example of inappropriate diagnosis and treatment for a true medical emergency.

PHR medical staff were contacted by the patient's legal counsel on August 31, 2017, verbally reviewed the patient's clinical status, and provided a medical opinion on a course of action based on the reported symptoms. Recognizing the urgency of the circumstances, PHR clinicians immediately wrote a letter dated August 31, 2017 to camp authorities expressing concerns that the patient receive immediate

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HADI-3-002170

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diagnostic and therapeutic intervention for presumed spinal cord/nerve compression within 24-48 hours, including transfer to an appropriate medical facility if necessary.

We understand that, after the patient's legal counsel relayed PHR's letter, Guantánamo administration and medical personnel attended to this matter and arranged for urgent care. Surgery was reportedly conducted on September 5<sup>th</sup>, four days after the PHR recommendation was transmitted to the administration. We have not yet heard what the surgery entailed or what the patient's condition is and would very much like to be updated.

As you may know, it is common for such patients to experience significant neurological function immediately after spinal cord/nerve decompression and in subsequent weeks, but we do not know this to be the case thus far. The patient's post-operative course will reveal the extent to which deviations from the standard of care may have permanently affected his neurological function. Suffice it to say, the significant delay in diagnosis and surgical intervention should not be considered acceptable by any medical personnel.

We understand that the patient's legal team has not been able to obtain the patient's medical records beyond January 2017, the relevant period of time for the patient's current clinical condition. All medical records should be shared with the patient's legal counsel to ensure adequate medical care. Health professionals cannot provide meaningful care or obtain legitimate consent when their patients are denied access to their own records.

We urge our Guantánamo medical colleagues to review this case in detail with camp administrators. In addition to the quality of care issues in this case, we urge them to address the need for timely and urgent access/transfer to tertiary medical care facilities. We know that there are many emergency medical conditions that require immediate medical and/or surgical intervention at a tertiary facility, for example: acute myocardial infarction, hemorrhagic stroke, ruptured aortic aneurysm, etc. Relying on limited medical and surgical capacities at Guantánamo in combination with a prohibition for transfer to the United States, including for emergency medical care, is a policy that will undoubtedly result in medical negligence. This is unfair to the medical personnel at Guantánamo and exposes them and the facility to serious legal and professional liability. Most importantly, it subjects detainees to the risk of substandard care and its health consequences.

We stand ready to support efforts by Guantánamo medical personnel to effect policy changes that are commensurate with medical and surgical imperatives and the standard of care. Thank you for your consideration.

Sincerely,

Homer Venters, MD, MS  
Director of Programs  
Physicians for Human Rights

Vincent Iacopino, MD, PhD  
Senior Medical Advisor  
Physicians for Human Rights

CC:

Admiral Kurt W. Tidd  
Commander, United States Southern Command

Rear Admiral Edward B. Cashman  
Commander, Joint Task Force Guantánamo, United States Southern Command

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HADI-3-002171



~~UNCLASSIFIED//FOUO/Pending DoD Review~~

From: [REDACTED] CAPT USN NAVHOSP GTMO CJ (US)  
 To: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
 Cc: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US); [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED] COL USARMY SOUTHCOM JTF GTMO JB (US); Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] Col USAF SOUTHCOM SC-CC (US); [REDACTED] USARMY MEDCOM EACH (US); [REDACTED] T USN NAVHOSP GTMO CJ (US); [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CDR USN NAVOPSPITCEN GRI IL (US)  
 Subject: Current DMC Patient Update [REDACTED] (US) [REDACTED] (US) [REDACTED] (US)  
 Date: Tuesday, October 10, 2017 8:56:18 PM

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RDML Cashman,

As I am in the RIP process, I thought I would update the group on the status of our current inpatient. CDR [REDACTED] is copied here as my replacement.

1. he is currently in an inpatient rehab status. This is doctor visits, nursing during the day with a corpsman and physical therapy. At night, just a single corpsman [REDACTED]
2. He is walking with a walker. He can't use a cane yet. We expect a more outpatient status next week.
3. Radiology visit today indicates an extensive blood clot in his left arm. (For the MDs: brachial and basilica veins open. IJV and SCV clotted with early recanalization - not surprising for 3 weeks out).
4. We intend to start blood thinning initially with an injection (lovenox) and then transition to an oral blood thinner (specific med TBD). This treatment will last 6 months because we know he also has a clot in his lung.
5. Before thinning blood, we will double check with the spine surgeon to validate that the patient is safe to undergo this phase of treatment.

v/r

[REDACTED]

[REDACTED] MD, MS, FACP, FCCP, FAASM  
 CAPT, MC, USNR  
 Deputy Commander, Joint Medical Group  
 Deputy Surgeon, JTF GTMO

DSN: [REDACTED]  
 COMM: [REDACTED]  
 On-Island Office: [REDACTED]  
 Mobile: [REDACTED]

NIPR: [REDACTED]  
 SIPR: [REDACTED]

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HADI-3-002172

~~UNCLASSIFIED//Pending DoD Review~~

From: [REDACTED] CAPT USN NAVHOSP GTMO CJ (US)  
 To: [REDACTED] LCDR USN NAVHOSP PORS VA (US)  
 Cc: [REDACTED] LT USN (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO J4 (US); [REDACTED] Card  
 USAF SOUTHCOM JTF GTMO J8 (US); [REDACTED] LCDR USN NAVHOSP PORS VA (US);  
 CDR USN SOUTHCOM JTF GTMO JMG (US); [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US);  
 MAJ USARMY MEDCOM EACH (US); [REDACTED] MAJ USARMY SOUTHCOM JTF GTMO J3  
 (US); [REDACTED] COL USARMY SOUTHCOM JTF GTMO J3 (US)  
 Subject: e-Intros ICO Funds to purchase surgical implants (unclassified)  
 Date: Thursday, September 14, 2017 12:38:14 PM  
 Importance: High

CLASSIFICATION: ~~UNCLASSIFIED~~

Dr. [REDACTED]

I just heard that you might be running into some funding trouble in terms of acquiring gear for the urgent surgery we have planned for Monday 18 SEP. My understanding is that the cervical spine implants are approx. \$14k and that the lumbar spine implants are approx. \$13k. I am going to list the CC's on this email to attempt to make sure that the right people are aware of the needs:

Capt [REDACTED] JTF J8 - the money guy (because he's USAF). He knows how to transfer money around the DoD.  
 CDR [REDACTED] JTF J4 - he is an expert in logistics and can get stuff from anywhere to anywhere we need it.  
 CDR [REDACTED] JMG S3 and almost S4 - ops. His shop is coordinating from our perspective.  
 LCDR [REDACTED] JMG Inpatient OIC - he's tracking all  
 MAJ [REDACTED] JTF deputy J3 - part of the all hands effort to make this happen  
 COL [REDACTED] JTF J3 - all things ops. She is copied for SA.  
 CAPT [REDACTED] JTF Chief of Staff. He is the one who has authority to approve transfers of money. He will be able to work with Capt [REDACTED] to help expedite.  
 LT [REDACTED] JMG Director for Administration, S1, S4, S8, S6. She is very talented and will help any way she can.

Cross-level communications accomplished.

As RDML Cashman said - funds will not step us from providing this care.

v/r

[REDACTED]

[REDACTED] MD, MS, FACP, FCCP, FAASM  
 CAPT, MC, USNR  
 Deputy Commander, Joint Medical Group  
 Deputy Surgeon, JTF GTMO

DSN: [REDACTED]  
 COMM: [REDACTED]  
 On-Island Office: [REDACTED]  
 Mobile: [REDACTED]

NIPR: [REDACTED]  
 SIPR: [REDACTED]

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~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002174

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~~UNCLASSIFIED//FOUO/Pending DoD Review~~

**From:** [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
**To:** McCubbin, Todd J Brig Gen USAF SOUTHCOM SC33 (US); [REDACTED] CTV SOUTHCOM SC33 (US)  
**Cc:** [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CPT USARMY SOUTHCOM (US);  
[REDACTED] CAPT USN NAVHOSP GTMO CU (US); Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO  
CC (US); [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] CDR USN (US);  
LCDR USN (US); Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US); [REDACTED] CAPT  
USCG SOUTHCOM SC-CC (US); [REDACTED] CTV SOUTHCOM SC-CC (US); [REDACTED] CPT USARMY  
SOUTHCOM JTF GTMO SJA (US); [REDACTED] PT USAR [REDACTED] E GTMO SJA (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US); [REDACTED] LCDR USN (US);  
[REDACTED] CDR USN SOUTHCOM JTF GTMO JMG (US)  
**Subject:** Fourth MFR Medical Information Update on ISN 10026 (~~UNCLASSIFIED//FOUO~~)  
**Date:** Tuesday, October 31, 2017 7:51:03 PM  
**Attachments:** 30 October 2017 Memo for Record Hadi Medical Update.pdf

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Gentlemen - knowing that you are both likely still in transit ...

This is the fourth in our series of MFRs designed to provide event-driven, as-needed updates on ISN 10026's medical status intended for further official distribution as deemed appropriate.

The memo covers the salient points but 10026, despite some significant concerns regarding the stability of the hardware in the cervical part of his spine, is medically stable enough to be able to move to meet with counsel in approved locations as of Thursday this week. He must agree to wear his rigid cervical collar during transit to/from and during the meetings. Separate from the memo, JTF has access to a handicap capable transport asset sufficient to get him to/from the meeting location and JTF has installed ramps, handrails, and other handicap accessibility features to minimize risk of harm during the visits if he chooses to meet with counsel. His attorneys have requested meeting for next week and we are able to accommodate those with the current resources we have.

Standing by to answer any questions.

VR  
[REDACTED]

CDR [REDACTED] JAGC, US Navy Staff Judge Advocate Joint Task Force - Guantanamo  
 SIPR: [REDACTED]  
 (Office) [REDACTED]  
 (DSN) [REDACTED]  
 (Cell) [REDACTED]

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HADI-3-002175



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From: [REDACTED] LTC USARMY (US)  
 To: [REDACTED] MA1 USARMY MEDCOM EACB (US); [REDACTED] SGM USARMY (US); [REDACTED] CPT USARMY (US); [REDACTED] CIV SOUTHCOM JTF GTMO J2 (US); [REDACTED] SOUTHCOM JTF GTMO JDG (US)  
 Subject: FW: [Non-DoD Source] Letter to Secretary of Defense Mattis from Physicians for Human Rights (UNCLASSIFIED)  
 Date: Saturday, September 9, 2017 12:54:59 PM  
 Attachments: 170908 PHR Letter GTMO.PDF  
 170906 PHR Letter GTMO.PDF  
 170901 PHR Letter GTMO.PDF  
 170905 Dr James Cobey GTMO Letter.pdf

ALCON,

So now the defense counsel, aided by the PHR, is likely to drag the events behind 10026's surgery into the court system. The CJTF has directed us to assemble all pertinent information concerning this case so as to be able to provide it to OMC/SOUTHCOM ahead of any schedule they may set. There are several lines of effort we need to collect documentation for:

Medical records and the time table of getting the specialists here on island: lead is SMO

Moving him to the DACU& the operations of MED Extensions (Manning, additional security measures, ETC): lead SFC [REDACTED] We will need to gather all relevant JDG DMC SOPs as well.

Camp SOP modifications prior to the DACU: Lead SFC [REDACTED]

Facility Modifications: Lead SGM [REDACTED] Need pictures of all the engineer constructed modifications plus the paperwork for the orders we are placing, plus the paper work on the new DMVs and the rental DMV.

[REDACTED] You can probably talk about security out at eh DACU

Is there anything I'm forgetting?

We don't have a true suspense on this but I imagine sooner is better than later. How about we meet next Friday to go over what we have collected? Say 1245 in the [REDACTED] Conference Room?

V/R

LTC [REDACTED]  
 Camp OIC  
 Guantanamo Bay, Cuba  
 DSN: [REDACTED]  
 [REDACTED]

-----Original Message-----

From: [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US)  
 Sent: Saturday, September 09, 2017 11:22 AM  
 To: [REDACTED] LTC USARMY (US); [REDACTED]  
 Cc: Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)  
 Subject: FW: [Non-DoD Source] Letter to Secretary of Defense Mattis from Physicians for Human Rights (UNCLASSIFIED)

[REDACTED]  
 Check this out below - My understanding additional security measures @ DMC (per current SOPs), request for modifications, and supporting personnel (to include internal security measures with [REDACTED] are primary source

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HADI-3-002176

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documents we need to provide.

Let me know if I am missing anything...

Standing By,

█

-----Original Message-----

From: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)

Sent: Saturday, September 09, 2017 8:37 AM

To: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)

█ CDR USN SOUTHCOM JTF GTMO SJA

(US) █ CAPT USN NAVHOSP GTMO CU (US)

█ CAPT USN NAVHOSP GTMO CU (US)

█ Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO

JDG (US) █ LTC USARMY SOUTHCOM JTF GTMO JDG

(US) █ CDR USN SOUTHCOM JTF GTMO PAO (US)

Cc: █ CAPT USN SOUTHCOM JTF GTMO CC (US) █

Subject: FW: [Non-DoD Source] Letter to Secretary of Defense Mattis from Physicians for Human Rights

~~(UNCLASSIFIED)~~

All,

For your situational awareness,

As Admiral Tidd notes - everything will do through, or as directed by - OSD and SOUTHCOM.

I know they have the short summary we provided. I also know we have a process for periodic scanning, saving, and forwarding comprehensive medical records as part of the discovery process.

Lets have records associated with this case prepared - so that we can provide them ahead of the regular timetable - if requested by SOUTHCOM / OSD.

Obviously - take the time for a thorough QA check on the records - complete and accurate.

Thanks and VR

-----Original Message-----

From: Tidd, Kurt W ADM USN SOUTHCOM SC-CC (US)

Sent: Friday, September 08, 2017 8:03 PM

To: DiSalvo, Joseph Patrick LTG USARMY SOUTHCOM SC-CC (US) █

Norman, Jon A Maj Gen USAF SOUTHCOM SC-CC (US) █

Cc: █ COL USARMY SOUTHCOM USAG (US)

█ CIV SOUTHCOM SC-CC (US)

SOUTHCOM SC-CC (US) █ CAPT USCG

CC (US) █ Abel, Daniel B RADM USCG (US)

Droz, Michael SES SOUTHCOM SCJ3 (US) █; Meeubbin, Todd J Brig Gen USAF

SOUTHCOM SCJ3 (US) █ COL USARMY SOUTHCOM SC-CC

(US) █ CIV SOUTHCOM SC-CC (US)

Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)

Subject: FW: [Non-DoD Source] Letter to Secretary of Defense Mattis from Physicians for Human Rights

~~(UNCLASSIFIED)~~

CLASSIFICATION: ~~(UNCLASSIFIED)~~

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HADI-3-002177

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As expected, now the litigation and second guessing begin. Don't know that there is any action or reply required from me or from RDML Cashman. Let's be sure we refer all questions to OSD, whether legal or journalists.

Best, kwt

\*\*\*\*\*

ADM Kurt Tidd, USN

Commander

U S Southern Command

Office: [REDACTED]

Cell: [REDACTED]

NIPR: [REDACTED]

SIPR: [REDACTED]

\*\*\*\*\*

-----Original Message-----

From: Vince Iacopino [<mailto:VIacopino@phrusa.org>]

Sent: Friday, September 8, 2017 7:47 PM

To: [REDACTED] SD - Cables Executive Support Officer [REDACTED]; Tidd, Kurt W

ADM USN SOUTHCOM SC-CC (US) [REDACTED] Cashman, Edward B RDML USN

SOUTHCOM JTF GTMO CC (US) [REDACTED]

Cc: [REDACTED] Homer Venters <[hventers@phrusa.org](mailto:hventers@phrusa.org)>; Sarah Dougherty

<[sdougherty@phrusa.org](mailto:sdougherty@phrusa.org)>

Subject: [Non-DoD Source] Letter to Secretary of Defense Mattis from Physicians for Human Rights

All active links contained in this email were disabled. Please verify the identity of the sender, and confirm the authenticity of all links contained within the message prior to copying and pasting the address to a Web browser.

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Good afternoon,

Please find the attached letter from Physicians for Human Rights regarding the medical treatment and status of a detainee at Guantánamo Bay Detention Center.

Thank you for your continued attention to this matter and we look forward to your response.

Respectfully,

Vincent Iacopino, MD, PhD

Physicians for Human Rights

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HADI-3-002178

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

Senior Medical Advisor  
University of Minnesota Medical School  
Adjunct Professor of Medicine  
Human Rights Center,  
University of California, Berkeley  
Senior Research Fellow

Tel: 702 547 1683

Cell: 702 767 8237

Fax: 702 547 1684

E-mail: [viacopino@phrusa.org](mailto:viacopino@phrusa.org) < Caution-<mailto:viacopino@phrusa.org> >

Skype: vincent iacopino

\*\*\*

September 8, 2017

The Honorable James N. Mattis  
Secretary of Defense  
1100 Defense Pentagon  
Washington, D C 20301

Dear Secretary Mattis,

Physicians for Human Rights has learned from news reports that the detainee at Guantánamo Bay Detention Center, the subject of our August 31 and September 7 letters, received spine surgery on September 5, 2017, presumably for spinal cord/nerve decompression. We are pleased to hear this and hope that the patient regains full neurological function in his lower extremities and urinary bladder.

---

HADI-3-002179



~~UNCLASSIFIED//FOUO/Pending DoD Review~~

We also read with interest the assertion of Department of Defense (DOD) spokesperson Air Force Maj Ben Sakrisson that timely emergency medical action was taken in this patient's case, following a recommendation for "urgent medical care" within 24-48 hours, and that this is an example of the capacity to effectively diagnose and treat emergency medical conditions at Guantánamo Bay Detention Center (Carol Rosenberg, "Doctors beat Irma to Guantánamo to operate on alleged war criminal's spine," Miami Herald, Sept 7, 2017)

We are deeply concerned that the facts of this case do not support the DOD's public claim of appropriate, high-quality, and timely medical/surgical care. With all due respect to the medical personnel who traveled on short notice to Guantánamo and performed the therapeutic intervention, especially with Hurricane Irma approaching, this case exemplifies serious problems in the accurate and timely diagnosis of emergency medical/surgical conditions.

As you know, the patient had a history of back pain and a January 2017 CAT scan showed evidence of severe neural encroachment that could easily progress to spinal stenosis (Dr. James Cobey, Letter to Defense Counsel, Sept 5, 2017). This condition, if untreated, can result in spinal cord and/or nerve compression leading to permanent neurologic disabilities. We know from the patient's extensive communications with his attorneys that he reported to Guantánamo medical personnel having symptoms of progressive lower extremity weakness during the past several months. A CAT scan/myelogram was reportedly conducted in July 2017, but the results of that diagnostic imaging study have not been shared with the patient's legal team, nor have any medical records from January 23, 2017 until the present. In addition, we understand that the patient reportedly experienced symptoms of urinary incontinence during the past several weeks. This is a medical/surgical emergency that should have prompted immediate diagnosis with an MRI or CAT scan/myelogram and treatment with surgical decompression within 24-48 hours.

It is common medical knowledge, at the most basic level, that spinal stenosis associated with increasing motor weakness requires urgent diagnosis and surgical treatment. When this patient experienced symptoms of urinary incontinence weeks ago, in addition to motor weakness, the medical staff should have acted immediately, but did not. Instead, we understand that the medical plan was to have an anesthesiologist travel to Guantánamo on September 12, 2017 for steroid injections and for a neurosurgeon to travel to Guantánamo on October 2, 2017. If true, this plan is a stunning example of inappropriate diagnosis and treatment for a true medical emergency.

PHR medical staff were contacted by the patient's legal counsel on August 31, 2017, verbally reviewed the patient's clinical status, and provided a medical opinion on a course of action based on the reported symptoms. Recognizing the urgency of the circumstances, PHR clinicians immediately wrote a letter dated August 31, 2017 to camp authorities expressing concerns that the patient receive immediate diagnostic and therapeutic intervention for presumed spinal cord/nerve compression within 24-48 hours, including transfer to an appropriate medical facility if necessary.

We understand that, after the patient's legal counsel relayed PHR's letter, Guantánamo administration and medical personnel attended to this matter and arranged for urgent care. Surgery was reportedly conducted on September 5th, four days after the PHR recommendation was transmitted to the administration. We have not yet heard what the surgery entailed or what the patient's condition is and would very much like to be updated.

As you may know, it is common for such patients to experience significant neurological function immediately after spinal cord/nerve decompression and in subsequent weeks, but we do not know this to be the case thus far. The patient's post-operative course will reveal the extent to which deviations from the standard of care may have permanently affected his neurological function. Suffice it to say, the significant delay in diagnosis and surgical

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HADI-3-002180

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intervention should not be considered acceptable by any medical personnel

We understand that the patient's legal team has not been able to obtain the patient's medical records beyond January 2017, the relevant period of time for the patient's current clinical condition. All medical records should be shared with the patient's legal counsel to ensure adequate medical care. Health professionals cannot provide meaningful care or obtain legitimate consent when their patients are denied access to their own records.

We urge our Guantánamo medical colleagues to review this case in detail with camp administrators. In addition to the quality of care issues in this case, we urge them to address the need for timely and urgent access/transfer to tertiary medical care facilities. We know that there are many emergency medical conditions that require immediate medical and/or surgical intervention at a tertiary facility, for example: acute myocardial infarction, hemorrhagic stroke, ruptured aortic aneurysm, etc. Relying on limited medical and surgical capacities at Guantánamo in combination with a prohibition for transfer to the United States, including for emergency medical care, is a policy that will undoubtedly result in medical negligence. This is unfair to the medical personnel at Guantánamo and exposes them and the facility to serious legal and professional liability. Most importantly, it subjects detainees to the risk of substandard care and its health consequences.

We stand ready to support efforts by Guantánamo medical personnel to effect policy changes that are commensurate with medical and surgical imperatives and the standard of care. Thank you for your consideration.

Sincerely,

Homer Venters, MD, MS

Director of Programs

Physicians for Human Rights

Vincent Iacopino, MD, PhD

Senior Medical Advisor

Physicians for Human Rights

CC:

Admiral Kurt W. Tidd

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HADI-3-002181

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

Commander, United States Southern Command

Rear Admiral Edward B. Cashman

Commander, Joint Task Force Guantánamo, United States Southern Command

CLASSIFICATION: ~~UNCLASSIFIED~~

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002182

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

**From:** [REDACTED] [CAPT USN NAVHOSP GTMO CU \(US\)](#)  
**To:** [REDACTED] [MAJ USARMY MEDCOM EACH \(US\)](#)  
**Cc:** [REDACTED] [CAPT USN NAVHOSP GTMO CU \(US\)](#)  
**Subject:** FW: Hadi Al Iraqi - Cashman Medical Emergency Memo (6 Sep 2017) ATTORNEY WORK PRODUCT  
(UNCLASSIFIED//FOUO)  
**Date:** Thursday, September 7, 2017 11:58:36 AM  
**Attachments:** [Hadi Al Iraqi - Cashman Medical Emergency Memo \(6 Sep 2017\) ATTORNEY WOR....docx](#)  
**Importance:** High

---

SSMO,

You have the con on providing proper reply Please cc me and DEPCOM with your submission

R [REDACTED]

-----Original Message-----

**From:** [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
**Sent:** Thursday, September 07, 2017 11:48 AM  
**To:** Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
**Cc:** Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US); [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED] CDR USN (US); [REDACTED] LCDR USN (US); [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] CIV SOUTHCOM JTF GTMO J2 (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO PAO (US); SOUTHCOM NS Guantanamo Bay JTF GTMO SJA MESG LSS; [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
**Subject:** RE: Hadi Al Iraqi - Cashman Medical Emergency Memo (6 Sep 2017) ATTORNEY WORK PRODUCT  
(UNCLASSIFIED//FOUO)  
**Importance:** High

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Copy all Admiral

For all on the cc-line, please let me know NLT 1500 today if you have any suggested changes to the attached draft the Admiral reviewed and edited Specifically, I need the SSO chop on proper classification markings, and from medical I need a final review to make sure we have the language correct (e g , the Admiral added the descriptor "conservatively" I recommend something like "a congenital degenerative condition previously diagnosed and being monitored and treated consistent with accepted medical standards" to capture that this is a condition he had long before he was in our custody and we've been treating it all along with an appropriate standard of care)

Thanks  
[REDACTED]

-----Original Message-----

**From:** Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
**Sent:** Thursday, September 07, 2017 10:00 AM  
**To:** [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
**Cc:** Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)  
[REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US)  
[REDACTED] CDR USN (US)  
[REDACTED] LCDR USN (US)  
[REDACTED] MAJ USARMY MEDCOM EACH (US)  
[REDACTED] CIV SOUTHCOM JTF GTMO J2 (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO PAO (US)  
[REDACTED] SOUTHCOM NS Guantanamo Bay JTF GTMO SJA MESG LSS

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HADI-3-002183

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

[REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CAPT USN NAVHOSP GTMO CU (US)

Subject: RE: Hadi Al Iraqi - Cashman Medical Emergency Memo (6 Sep 2017) ATTORNEY WORK PRODUCT  
~~(UNCLASSIFIED//FOUO)~~

Thanks

Made a few tweaks in this version - pls review for correctness and appropriateness

I think it is still strictly consistent with the medical Memo Added bits

Pointing out that both this procedure, and any future procedures are at the discretion and approval of the patient/detainee Two places - the just completed procedure and reference any future procedures

I assume we do not want to go into details of his diagnosis - and recommendation that he have a follow on cervical surgical interventions (and he may well refuse that surgery which he can do if he chooses ) So I did not provide those details, but do think its worthwhile to point out again - if there are follow on recommendations for surgery or any other procedures - they'll be offered to the detainee (not to anyone else) I also understand that there may / will likely be a request for discovery - turnover the details on the whole trail to the court and the defense team I think our position is "fine - let that process work, we should not try to pre-empt it "

I'll want to send this to SOUTHCOM, and get their vote on forwarding to Commissions team

Pls let me know all appropriate have reviewed for correctness

Thanks again and VR

-----Original Message-----

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)

Sent: Thursday, September 07, 2017 7:44 AM

To: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US) [REDACTED]

Cc: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)

[REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US)

[REDACTED] CDR USN (US)

LCDR USN (US)

GTMO SJA (US)

[REDACTED] CDR USN SOUTHCOM JTF

[REDACTED] MAJ USARMY MEDCOM EACH (US)

[REDACTED] CIV SOUTHCOM JTF GTMO J2 (US)

[REDACTED] CDR USN SOUTHCOM JTF GTMO PAO (US)

[REDACTED] SOUTHCOM NS Guantanamo Bay JTF GTMO SJA MESG LSS

Subject: FW: Hadi Al Iraqi - Cashman Medical Emergency Memo (6 Sep 2017) ATTORNEY WORK PRODUCT  
~~(UNCLASSIFIED//FOUO)~~

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Admiral

Attached is a draft memo for your review It is U/FOUO (cc'ing SSO) and I think covers the basics of what occurred sufficiently to help vector some of the churn from the Commissions It may also be of use regarding PAO (cc'd), but I still think we need to be very limited in what we put out officially regarding specifics of detainee medical care If defense counsel float it to the press then that's on them and doesn't create any issues for JTF (assuming it is accurate) Also attached is a draft memo from SMO (cc'd) regarding the more complete timeline on ISN 10026's medical progression for reference

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~~UNCLASSIFIED//FOUO/Pending DoD Review~~

If you concur with the memo then I will finalize classification markings, format and distribution for signature. In addition to SC, I recommend sending to OMC, OMCP, OMCD.

Standing by to answer any questions.

Vr

-----Original Message-----

From: [REDACTED] MAJ USARMY MEDCOM EACH (US)

Sent: Wednesday, September 06, 2017 5:41 PM

To: [REDACTED] USN (US)

Cc: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)

Subject: RE: Hadi Al Iraqi - Cashman Medical Emergency Memo (6 Sep 2017) ATTORNEY WORK PRODUCT  
~~(UNCLASSIFIED//FOUO)~~

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CDR [REDACTED]

Memo updated as requested. Timeline to follow shortly.

V/R,  
SMO

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~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002185

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

From: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
 To: [REDACTED] LCDR USN NAVHOSP PORS VA (US)  
 Cc: [REDACTED] CAPT USN NAVHOSP PORS VA (US); [REDACTED] CAPT USN NAVMED EAST PORS VA (US);  
 [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] LT USN (US);  
 [REDACTED] LCDR USN NAVHOSP PORS VA (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO JMG (US);  
 CAPT USN (US); [REDACTED] MAJ USARMT MEDCOM EACH (US); [REDACTED] LTC USARMT  
 SOUTHCOM SC-CC (US); [REDACTED] Col USAF SOUTHCOM SC-CC (US); [REDACTED] LCDR USN  
 NAVHOSP PORS VA (US)  
 Subject: FW: JMG DACU SITREP 2017 SEP 23 (UNCLASSIFIED//FOR PUBLIC RELEASE)  
 Date: Saturday, September 23, 2017 6:04:07 PM  
 Attachments: 2017 09 21 Medical Timeline Summary.docx

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

ALCON

A smaller distro group.

Dr. [REDACTED] the SMO, the CO, and I have discussed medical options.

We believe that we should have a few medical items on hand in the event we need them urgently.

We do not have these items in GTMO as they are outside the usual requirements for this type of medical facility.

In GTMO, one is none and two is one. I would request two of everything.

Dr. [REDACTED] has advised that a lumbar drain kit would be quite useful in the event we need to reduce CSF pressure.

If nutrition continues to be an issue, and a small-bore feeding tube can't be passed, then the patient may need a PEG. We have a scope and an experienced surgeon. We need a PEG kit.

Finally, an expeditious way to get 2 lumbar drains and 2 PEG kits here would be to have them hand-carried on the rotator from Norfolk to GTMO on Tuesday 26 SEP.

The person we would most-like to hand-carry that material would be an ultrasound-tech (corpsman).

The reason is that a comprehensive ultrasound examination of the upper extremities and lower extremities would be helpful in assessing the clot burden in the various areas to assess risk.

We are repeating a neck CT scan now to re-assess for CSF leak vs seroma today to assist us in being complete.

I am standing by at all hours for any contacts.

v/r

[REDACTED]

[REDACTED] MD, MS, FACP, FCCP, FAASM CAPT, MC, USNR Deputy  
Commander, Joint Medical Group Deputy Surgeon, JTF GTMO

DSN: [REDACTED]

COMM: [REDACTED]

On-Island Office [REDACTED]

Mobile: [REDACTED]

NIPR [REDACTED]

SIPR: [REDACTED]

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002186

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

-----Original Message-----

From: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
Sent: Saturday, September 23, 2017 5:33 PM  
To: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
[REDACTED] Col USAF SOUTHCOM SC-CC  
(US)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US)  
[REDACTED] CAPT USN NAVHOSP  
GTMO CU (US) [REDACTED] CAPT USN  
NAVMED EAST PORS VA (US)  
MAJ USARMY MEDCOM EACH (US) [REDACTED] LCDR  
USN NAVHOSP PORS VA (US) [REDACTED] CAPT USN  
NAVHOSP PORS VA (US) [REDACTED] Gabavics, Stephen Emil  
(Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)  
[REDACTED] LTC USARMY SOUTHCOM  
JTF GTMO JDG (US) [REDACTED] LTC USARMY  
(US) [REDACTED] CDR USN  
SOUTHCOM JTF GTMO SJA (US) [REDACTED]  
LCDR USN NAVHOSP PORS VA (US) [REDACTED]  
Subject: JMG DACU SITREP 2017 SEP 23 (~~UNCLASSIFIED//FOUO SENSITIVE~~)

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

COL [REDACTED] (and esteemed shipmates),  
I am attaching a brief timeline of care provided by our SMO (Senior Medical Officer) regarding both the 04SEP surgery and the 18SEP surgery. It covers events up to 21SEP.

BLUF  
18 SEP ACDF (Anterior Cervical Discectomy and Fusion) went well.

Results: Urinary incontinence and lower extremity pain have improved. The patient is ambulating with Physical Therapy assistance (CGx2).

Good news: no fevers or signs of infection.

Assets: Excellent Spine Surgery Fellowship-trained orthopedic surgeon, ENT surgery, General surgery, Internal Medicine, Pulm/CCM. Appropriate GenSurg OR sets.

Complications:

1. C5 Nerve Root irritation causing a left arm weakness that we expect to improve with physical therapy over the next 4-24 weeks.
2. Left lower lobe posterior subsegmental artery of the lung blood clot (LLL posterior subsegment pulmonary embolism) associated with lung abnormality and left sided chest pain, low blood oxygen, and swollen left upper extremity.
  - 2.a. Treatment of the blood clot of the lung resulted in significant bleeding from the wound due to thin blood and oozing.
  - 2.b. When lovenox (blood thinner) was discontinued due to bleeding, the bleeding stopped.
  - 2 c. The blood thinner will eventually need to be restarted.
3. Wound swelling to a mass with a roughly 5 inch diameter. This is thought to be either a seroma, hematoma, or perhaps Cerebro-Spinal Fluid leak. Given the headache, neck rigidity, and photophobia, there is a high probability of

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HADI-3-002187



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CSF leak.

3.a. The neck swelling is enough to compress the esophagus, which is allowing him to swallow oral secretions but not oral liquids.

3.b. The airway (trachea) is not currently compromised. We have a suture kit and scalpel immediately available if necessary.

3 c. The patient will remain off lovenox for now. Conservative management of a CSF leak requires 1-3 weeks of observation with head of bed > 45 degrees.

If the leak gets better, we wait a week and start blood thinners. If the leak does not improve, then repeat surgery may be required.

3.d. Nutrition remains a concern. He has been below-feeding target for approx. 1 week. Initial plan is that we allow his swelling to subside and then resume oral liquid nutrition. If not, then a dobhoff enteral feeding tube may be required later this week.

We will have some logistical supply requirements to mitigate potential future risk here. I will include those requests on the high side (as already noted in RDML Cashman's email earlier this hour).

Clearly a very complex and fluid situation.

I will keep you up to date via NIPR/SIPR/cell as relevant.

v/r

[REDACTED]

[REDACTED] MD, MS, FACP, FCCP, FAASM CAPT, MC, USNR Deputy  
Commander, Joint Medical Group Deputy Surgeon, JTF GTMO

DSN: [REDACTED]

COMM: [REDACTED]

On-Island Office: [REDACTED]

Mobile: [REDACTED]

NIPR: [REDACTED]

SIPR: [REDACTED]

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002188

~~UNCLASSIFIED//Pending DoD Review~~

From: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
To: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
Subject: GIMO Tasking  
Date: Friday, October 13, 2017 7:08:09 PM

---

MAJ [REDACTED]

[REDACTED]

[REDACTED] Please let me know that I can do to assist making this as smooth a transition for you as possible given the short tasker nature of this.

V/R,  
MAJ [REDACTED]

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002189

~~UNCLASSIFIED//Pending DOD Review~~

**From:** [REDACTED] [CDR USN \(US\)](#)  
**To:** [REDACTED] [MAJ USARMY MEDCOM EACH \(US\)](#)  
**Subject:** ISN 26 (UNCLASSIFIED)  
**Date:** Friday, September 8, 2017 3:06:28 PM

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CLASSIFICATION: ~~UNCLASSIFIED~~

SMO,

A few questions for you which the Prosecution needs answers to in order to answer the mail on a motion to abate the legal proceedings that they owe an answer on.

- 1) Can the Accused currently communicate effectively and coherently with his legal counsel (from a medical perspective, regardless of whether he would choose to or not)? If not, can you estimate how long he will need to recover prior to likely being able to communicate with counsel? I'm trying to determine when the Accused will reach the legal standard of being able to participate in his own defense.
- 2) Can the Accused currently be moved from his current location to the ELC without significant pain/distress or risk to his safety? If not, can you estimate how long he will need to recover prior to likely being able to move to the ELC?
- 3) Can you estimate how long after his next surgery he will be able to (insert same questions from #1 and #2 above)?
- 4) Is it possible for his current location to be used for attorney-client meetings, i.e., not be monitored by government personnel and not accidentally overheard by individuals outside of his room?

v/r,

[REDACTED]

CLASSIFICATION: ~~UNCLASSIFIED~~

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HADI-3-002190

~~UNCLASSIFIED//Pending DoD Review~~

**From:** [REDACTED] [MAJ USARMY MEDCOM EACH \(US\)](#)  
**To:** [REDACTED] [CAPT USN NAVHOSP GTMO CU \(US\)](#)  
**Subject:** ISN 10026 update (ISN 10026)  
**Date:** Wednesday, November 22, 2017 11:21:24 AM

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CLASSIFICATION: ~~UNCLASSIFIED~~

Sir,  
As requested, sorry for the delay.

On 13 November ISN 10026 underwent C3-T2 posterior fusion with anterior plate removal and decompression of the C5 nerve root. The procedure went smoothly and the patient has had an uncomplicated post-operative course. He transitioned seamlessly to ward care and will likely transition to SNF care within the next 24hrs. Currently we are working to control his pain and continue to encourage increasing diet. Like anyone undergoing this procedure, aggressive rehab is not anticipated to begin until about 8 weeks post-operatively.

SMO

CLASSIFICATION: ~~UNCLASSIFIED~~

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002191

~~UNCLASSIFIED//Pending DoD Review~~

**From:** [REDACTED] MAJ USARMY MEDCOM FACH (US)  
**To:** [Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC \(US\)](#)  
**Subject:** Neurosurgeon Summary  
**Date:** Wednesday, September 6, 2017 11:02:40 AM

---

RDML Cashman,

I had our Neurosurgeon summarize the recent events in case we need to justify up the chain our recent events as part of AARs. I have provided it to other local leadership but wanted to ensure you had it as well. The surgeon did not have access to SIPER so this is a generalized summary. I also wanted to give kudos to all the many hands and man hours that made this happen in a truly unprecedented undertaking. Safe travels.

V/R,  
[REDACTED]

Forward from Neurosurgeon:

Pt with lumbar stenosis long standing previously diagnosed many years ago. Unfortunately his symptoms have been progressing over the last 3 weeks to involve increasing weakness and numbness. On Sunday, his symptoms worsened to include urinary incontinence, saddle anesthesia and weakness. These are the signs and symptoms of Cauda Equina syndrome (CES) which is a surgical emergency. His symptoms improved already within 12 hours from surgery. The natural course for patients with lumbar spondylosis is that the symptoms usually worsen slowly and gradually. It is not the normal course for it to progress to CES. Onset of these symptoms is unpredictable even in severe lumbar stenosis which this patient clearly had on CT Myelogram. I do not believe that this could have been expected or prevented. Can provide references upon my return for any further questions.

LCDR [REDACTED] MC, USN  
Neurosurgeon  
NMC Portsmouth, VA

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HADI-3-002192

~~UNCLASSIFIED//Pending DoD Review~~

**From:** [REDACTED] [MAJ USARMY MEDCOM EACH \(US\)](#)  
**To:** [REDACTED] [CAPT USN NAVHOSP GTMO CU \(US\)](#)  
**Cc:** [REDACTED] [CAPT USN NAVHOSP GTMO CU \(US\)](#)  
**Subject:** Neurosurgery update (~~UNCLASSIFIED~~)  
**Date:** Tuesday, September 5, 2017 7:24:17 PM

---

CLASSIFICATION: ~~UNCLASSIFIED~~

CAPT [REDACTED]

As per your request, from LCDR [REDACTED]

Forward from Neurosurgeon:

Pt with lumbar stenosis long standing previously diagnosed many years ago. Unfortunately his symptoms have been progressing over the last 3 weeks to involve increasing weakness and numbness. On Sunday, his symptoms worsened to include urinary incontinence, saddle anesthesia and weakness. These are the signs and symptoms of Cauda Equina syndrome (CES) which is a surgical emergency. His symptoms improved already within 12 hours from surgery. The natural course for patients with lumbar spondylosis is that the symptoms usually worsen slowly and gradually. It is not the normal course for it to progress to CES. Onset of these symptoms is unpredictable even in severe lumbar stenosis which this patient clearly had on CT Myelogram. I do not believe that this could have been expected or prevented. Can provide references upon my return for any further questions.

LCDR [REDACTED] MC, USN  
Neurosurgeon  
NMC Portsmouth, VA

CLASSIFICATION: ~~UNCLASSIFIED~~

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002193

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

**From:** [REDACTED] CDR USN DHA WRNMMC (US)  
**To:** [REDACTED] CDR USN NAVMED EAST PORS VA (US); [REDACTED] Col USAF SOUTHCOM SC-CC (US);  
**Cc:** [REDACTED] CAPT USN NAVMED EAST PORS VA (US); [REDACTED] CAPT USN NAVHOSP GTMO CU  
 (US); [REDACTED] CAPT USN NAVMEDCEN SANJUAN (US); [REDACTED] MAJ USARMY MEDCOM EACH  
 (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO JMC (US); [REDACTED] CAPT USN NAVHOSP  
 PORS VA (US); [REDACTED] LCDR USN NAVHOSP PORS VA (US); [REDACTED] COL USARMY JS  
 OCICS (US); [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CIV SOUTHCOM SC33  
 (US); [REDACTED] CAPT USN SOUTHCOM SCHQ-LNO-NAVSO (US); [REDACTED] Col USAF AFELM  
 TRANSCOM (US); [REDACTED] CIV DHA NCR MEDICAL DIR (US); [REDACTED] CAPT USN DHA (US);  
 [REDACTED] CAPT USN COMUSNAVSO MAY FL (US); [REDACTED] SGT USN NAVHOSP PORS VA  
 (US); [REDACTED] LCDR USN DHA WRNMMC (US); [REDACTED] CAPT USN DHA WRNMMC (US);  
 [REDACTED] MAJ USARMY DHA WRNMMC (US); [REDACTED] CIV DHA NCR MEDICAL DIR (US)

**Subject:** RE: (off record sensitive) GTMO detainee neurosurgical case (off record sensitive)  
**Date:** Tuesday, November 7, 2017 1:22:10 PM  
**Attachments:** [Supply List for AP C-spine Reconstruction.docx](#)  
[Personnel List AP Cervical Reconstruction.docx](#)

CDR [REDACTED]

To follow up:

- For personnel requirements, I am requesting that the operative team come from WRNMMC. This would include:
  - Surgeons: CDR [REDACTED] USN, CAPT [REDACTED] USN
  - Circulating Nurse: LT [REDACTED] USN
  - Surg Techs: SGT [REDACTED] USA, HN [REDACTED] USN
  - Neuromonitoring: [REDACTED] MD. Of note, Dr. [REDACTED] is a civilian contractor neuroanesthesiologist at WRNMMC who can fill this role. He has informed me that he does possess a clearance, but I have not independently verified this.
  - Anesthesiologist would be provided by the onsite anesthesia team (CDR [REDACTED] USN) at USNH Guantanamo Bay

For the remaining personnel required (Critical Care physician (1), Critical care nurses (2), Medsurg nurses(2), X-ray tech (1), Neuroradiologist(1)) I would defer to NME on the most ideal candidates for the job. I am happy to make recommendations as needed.

- Ideally, the equipment that is on the list would come from WRNMMC. As far as the procurement process, I would need to defer to those who have more experience on the most appropriate means.

V/R

[REDACTED]

[REDACTED] MD, FAANS  
 CDR, MC, USN  
 Program Director, Neurosurgery  
 National Capital Consortium  
 Walter Reed National Military Medical Center

-----Original Message-----

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002194

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

From: [REDACTED] CDR USN NAVMED EAST PORS VA (US)  
 Sent: Tuesday, November 07, 2017 11:20 AM  
 To: [REDACTED] CDR USN DHA WRNMMC (US)  
 Cc: [REDACTED] CAPT USN NAVMED EAST PORS VA (US); [REDACTED]  
 Col USAF SOUTHCOM SC-CC (US); [REDACTED] COL USARMY JS OCJCS  
 (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED]  
 [REDACTED] CAPT USN NAVMEDCEN SAN CA (US); [REDACTED] MAJ USARMY  
 MEDCOM EACH (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO JMG (US);  
 [REDACTED] CAPT USN NAVHOSP PORS VA (US); [REDACTED] LCDR USN NAVHOSP  
 PORS VA (US); [REDACTED] COL USARMY JS OCJCS (US); [REDACTED]  
 [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CIV SOUTHCOM  
 SCJ3 (US); [REDACTED] CAPT USN SOUTHCOM SCHQ-LNO-NAVSO (US); [REDACTED]  
 [REDACTED] Col USAF AFELM TRANSCOM (US); [REDACTED] CIV DHA NCR MEDICAL DIR  
 (US); [REDACTED] CAPT USN DHA (US); [REDACTED] CAPT USN  
 COMUSNAVSO MAY FL (US); [REDACTED] SCPO USN NAVHOSP PORS VA (US)  
 Subject: FW: ~~(U//FOUO/SENSITIVE)~~ GTMO detainee neurosurgical case  
~~(UNCLASSIFIED//FOUO)~~  
 Importance: High

CDR [REDACTED]

Good morning. I hope your day is going well. To get the ball rolling, I have a couple of RFIs for you and your team at WRNMMC.

1. From the mission personnel requirements list provided by you on Monday, 6 November, what assets/specific line items will be sourced from WRNMMC? We need to know how many (by line item and who) will be sourced from WRNMMC so my team can begin staffing the remaining personnel from NMC Portsmouth (or AOR). Our POMI Team will also work with JTF/JMG/USNHGB on sourcing any personnel that are already in place down there to support requirements.
2. From the attached supply/equipment list provided by you on Monday, 6 November, what supplies/equipment/specific line items will be provided by WRNMMC? What will need to be procured and will WRNMMC take lead on procurement or will support be needed from other MTFs/Region?

My lead here at the Region will be LCDR [REDACTED] (cc'd here). I also included your POMI Mr. [REDACTED] that will be involved in this process.

V/R [REDACTED]

CDR [REDACTED], MSC, USN  
 Deputy Chief of Staff  
 Manpower/Personnel (M1)  
 Navy Medicine East  
 620 John Paul Jones Circle  
 Suite 1400  
 Portsmouth, VA 23708-2106

E-Mail: [REDACTED]  
 Phone: [REDACTED] / DSN: [REDACTED]  
 Cell: [REDACTED]

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HADI-3-002195



~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

Insurance Portability and Accountability Act, Public Law 104-191, and DoD Directive 6025.18. It must be protected in accordance with those provisions.

-----Original Message-----

From: [REDACTED] Col USAF SOUTHCOM SC-CC (US)  
Sent: Monday, November 6, 2017 6:37 PM  
To: [REDACTED] CDR USN DHA WRNMMC (US)  
[REDACTED] COL USARMY JS  
OCJCS (US) [REDACTED]  
CAPT USN NAVHOSP GTMO CU (US) [REDACTED]  
[REDACTED] CAPT USN NAVMEDCEN SAN CA (US) [REDACTED]  
[REDACTED] CAPT USN DHA WRNMMC (US) [REDACTED]  
[REDACTED] MAJ USARMY MEDCOM  
EACH (US) [REDACTED] CAPT USN  
NAVMED EAST PORS VA (US) [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO JMG (US) [REDACTED]  
[REDACTED] CAPT USN NAVHOSP PORS VA (US) [REDACTED]  
[REDACTED] LCDR USN NAVHOSP PORS VA (US) [REDACTED]  
[REDACTED] CDR USN NAVMED EAST PORS VA (US) [REDACTED]  
[REDACTED] COL USARMY JS  
OCJCS (US) [REDACTED] LTC USARMY  
SOUTHCOM SC-CC (US) [REDACTED] CIV  
SOUTHCOM SCJ3 (US) [REDACTED]  
Subject: RE: (U//FOUO SENSITIVE) GTMO detainee neurosurgical case  
(UNCLASSIFIED//FOUO)

Thank you [REDACTED]

Appreciate everyone's expertise, and support!!

v/r,

-Col [REDACTED]

[REDACTED] Col, USAF, MC, SFS  
Command Surgeon  
United States Southern Command  
Comm: [REDACTED]  
DSN: [REDACTED]  
BB: [REDACTED]  
[REDACTED]

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-----Original Message-----

From: [REDACTED] CDR USN DHA WRNMMC (US)

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002196

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

Sent: Monday, November 6, 2017 5:23 PM  
To: [REDACTED] Col USAF SOUTHCOM SC-CC (US)  
[REDACTED] COL USARMY JS  
OCJCS (US); [REDACTED]  
CAPT USN NAVHOSP GTMO CU (US); [REDACTED]  
[REDACTED] CAPT USN NAVMEDCEN SAN CA (US); [REDACTED]  
[REDACTED] CAPT USN DHA WRNMMC (US); [REDACTED]  
[REDACTED] MAJ USARMY MEDCOM  
EACH (US); [REDACTED] CAPT USN  
NAVMED EAST PORS VA (US); [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO JMG (US); [REDACTED]  
[REDACTED] LCDR USN NAVHOSP PORS VA (US); [REDACTED]  
Subject: RE: ~~(U//FOUO SENSITIVE)~~ GTMO detainee neurosurgical case  
~~(UNCLASSIFIED//FOUO)~~

COL [REDACTED]

Attached is the initial equipment/supply list for the case as well as anticipated personnel. I declined at this time to place names on most of the spots so as not to place obligations that I am unable officially make at this time. That being said, the OR team has been identified.

V/R

[REDACTED]

[REDACTED] MD, FAANS  
CDR, MC, USN  
Program Director, Neurosurgery  
National Capital Consortium  
Walter Reed National Military Medical Center

-----Original Message-----

From [REDACTED] Col USAF SOUTHCOM SC-CC (US)  
Sent: Monday, November 06, 2017 5:12 PM  
To: [REDACTED] COL USARMY JS OCJCS (US); [REDACTED] LTC  
USARMY SOUTHCOM SC-CC (US); [REDACTED] CAPT USN NAVHOSP GTMO  
CU (US); [REDACTED] CAPT USN NAVMEDCEN SAN CA (US); [REDACTED]  
[REDACTED] CDR USN DHA WRNMMC (US); [REDACTED] CAPT USN DHA WRNMMC (US);  
[REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] COL  
USARMY JS OCJCS (US); [REDACTED] CAPT USN NAVMED EAST PORS VA (US);  
[REDACTED] CIV SOUTHCOM SCJ4 (US); [REDACTED] CDR USN SOUTHCOM  
JTF GTMO JMG (US); [REDACTED] Col USAF SOUTHCOM SCHQ-LNO-AFSOUTH  
(US); [REDACTED] CAPT USN NAVHOSP PORS VA (US); [REDACTED] LCDR USN  
NAVHOSP PORS VA (US); [REDACTED] LTC USARMY SOUTHCOM SC-CC (US)  
Subject: RE: ~~(U//FOUO SENSITIVE)~~ GTMO detainee neurosurgical case  
~~(UNCLASSIFIED//FOUO)~~

Thanks [REDACTED] --good point!

ALL-appreciate everyone's inputs, and your support.

CAPT [REDACTED] and CDR [REDACTED] ---we will await the near-final list of staff and equipment req's.

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002197

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

v/r,

[REDACTED]

[REDACTED] Col, USAF, MC, SFS  
Command Surgeon  
United States Southern Command  
Comm: [REDACTED]  
DSN: [REDACTED]  
BB: [REDACTED]  
[REDACTED]

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-----Original Message-----

From: [REDACTED] COL USARMY JS OCJCS (US)  
Sent: Monday, November 6, 2017 4:35 PM  
To: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US)  
[REDACTED] CAPT USN NAVHOSP  
GTMO CU (US) [REDACTED] Col USAF  
SOUTHCOM SC-CC (US) [REDACTED]  
CAPT USN NAVMEDCEN SAN CA (US) [REDACTED]  
[REDACTED] CDR USN DHA WRNMMC (US)  
[REDACTED] CAPT USN DHA WRNMMC (US)  
[REDACTED] MAJ USARMY MEDCOM  
EACH (US) [REDACTED] COL  
USARMY JS OCJCS (US) [REDACTED] CAPT  
USN NAVMED EAST PORS VA (US) [REDACTED]  
CIV SOUTHCOM SCJ4 (US) [REDACTED] CDR  
USN SOUTHCOM JTF GTMO JMG (US) [REDACTED]  
[REDACTED] Col USAF SOUTHCOM SCHQ-LNO-AFSOUTH (US)  
[REDACTED] CAPT USN NAVHOSP PORS VA  
(US) [REDACTED] LCDR USN NAVHOSP PORS VA  
(US) [REDACTED] LTC USARMY SOUTHCOM SC-CC  
(US) [REDACTED]  
Subject: RE: ~~(UNCLASSIFIED//FOUO/SENSITIVE)~~ GTMO detainee neurosurgical case  
~~(UNCLASSIFIED//FOUO)~~

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One consideration I forgot to mention on the call - there was a comment made that the patient refused to have a female provider examine him. When putting the team together, we should keep this in mind to avoid sending someone there who may have challenges performing their duties.

COL [REDACTED]  
Office of the Joint Staff Surgeon  
O: [REDACTED] C: [REDACTED]

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HADI-3-002198

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

-----Original Appointment-----

From: [REDACTED] COL USARMY JS OCJCS (US) On Behalf Of [REDACTED]  
[REDACTED] LTC USARMY SOUTHCOM SC-CC (US)  
Sent: Monday, November 6, 2017 1:37 PM  
To: [REDACTED] COL USARMY JS OCJCS (US)  
Subject: FW: GTMO detainee neurosurgical case (~~UNCLASSIFIED//FOUO~~)  
When: Monday, November 6, 2017 3:30 PM-4:15 PM (UTC-05:00) Eastern Time (US & Canada).  
Where: Telephone Conference Please dial in today (06NOV17) at 1530 hrs (EST)  
Dial-in number # [REDACTED] meeting ID: [REDACTED]  
Importance: High

-----Original Appointment-----

From: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US)  
Sent: Monday, November 6, 2017 1:35 PM  
To: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED]  
[REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] Col USAF SOUTHCOM  
SC-CC (US); [REDACTED] CAPT USN NAVMEDCEN SAN CA (US); [REDACTED]  
[REDACTED] CDR USN DHA WRNMMC (US); [REDACTED] CAPT USN DHA  
WRNMMC (US); [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED]  
[REDACTED] COL USARMY JS OCJCS (US); [REDACTED] CAPT USN NAVMED EAST  
PORS VA (US); [REDACTED] CIV SOUTHCOM SCJ4 (US); [REDACTED] CDR  
USN SOUTHCOM JTF GTMO JMG (US); [REDACTED] Col USAF SOUTHCOM  
SCHQ-LNO-AFSOUTH (US); [REDACTED] CAPT USN NAVHOSP PORS VA (US); [REDACTED]  
[REDACTED] LCDR USN NAVHOSP PORS VA (US); [REDACTED] LTC USARMY SOUTHCOM  
SC-CC (US)  
Subject: GTMO detainee neurosurgical case (~~UNCLASSIFIED//FOUO~~)  
When: Monday, November 6, 2017 3:30 PM-4:15 PM (UTC-05:00) Eastern Time (US & Canada).  
Where: Telephone Conference Please dial in today (06NOV17) at 1530 hrs (EST)  
Dial-in number # [REDACTED] meeting ID: [REDACTED]  
Importance: High

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

USSOUTHCOM CMD SG, Col [REDACTED] requests your participation this afternoon for a COA development discussion centered on the pending neurosurgical case, the timeline, personnel and logistical requirements, air movement, and funding.

Please dial in today (06NOV17) at 1530 hrs (EST) - Dial-in number # [REDACTED]  
meeting ID: [REDACTED]

The detainee was noted to have worsening left sided numbness and tingling which accelerated imaging with CT to the left x 3 days. Neck CT was found to be relatively unchanged but flex/extension plain films revealed arthrosis. It is felt a now third surgical procedure is not emergent, but rather urgent and should be performed sooner rather than later.

Thank you in advance for your participation, we look forward to the discussion.

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002199

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

R/  
LTC [REDACTED]  
USSOUTHCOM  
[REDACTED]

From: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
Sent: Monday, November 6, 2017 12:23 PM  
To: [REDACTED] Col USAF SOUTHCOM SC-CC (US)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US)  
Subject: FW: NS Team

[REDACTED]  
Below are the key personnel for our next great neurosurgical adventure>

USN Neurosurgery Specialty Leader:  
[REDACTED] (AD/USN/CAPT)

WRNMMC Neurosurgeons:  
[REDACTED] (AD/CDR/USN; [REDACTED]  
[REDACTED] (AD/CAPT/USN [REDACTED]

New JMG Secret SMO:  
[REDACTED] (AD/USA/MAJ; she is relieving MAJ [REDACTED]

This should get us started.

VR [REDACTED]

-----Original Message-----

From: [REDACTED] CAPT USN NAVMEDCEN SAN CA (US)  
Sent: Friday, November 03, 2017 8:14 PM  
To: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
Cc: [REDACTED] CDR USN DHA WRNMMC (US); [REDACTED] CAPT  
USN DHA WRNMMC (US); [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED]  
[REDACTED] MAJ USARMY MEDCOM EACH (US)  
Subject: NS Team

CAPT [REDACTED]

Copied above are CDR [REDACTED] and CAPT [REDACTED]. We discussed the conf call today and the potential timeline. They have assembled the requisite personnel and already discussed details with LCDR [REDACTED]. I was told by Maj [REDACTED] today that the CT is planned for Monday due to other scheduling conflicts.

In terms of coordination, the CT by itself will not necessarily be the trigger for additional intervention, and we discussed the comprehensive preparation for any further surgery to include anticoagulation assessment and cessation, patient nutritional optimization, possible bone optimization with Forteo as well as adjuncts to the surgery.

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HADI-3-002200

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

In regards to timing, the need for surgery can be discussed through LCDR [REDACTED] with the two surgeons above. The list you provided for coordination was helpful, but they may certainly have input on that as well.

Phone numbers for coordination:

CAPT [REDACTED]  
CDR [REDACTED]

r/

CAPT [REDACTED], MD, MBA, FAANS, FACS  
Neurosurgery Specialty Leader to the Surgeon General  
Department of Neurosurgery  
Naval Medical Center, San Diego  
34800 Bob Wilson Drive  
San Diego, CA 92134  
[REDACTED]

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002201

~~UNCLASSIFIED//Pending DoD Review~~

**From:** [REDACTED] [CDR USN \(US\)](#)  
**To:** [REDACTED] [MAJ USARMY MEDCOM EACH \(US\)](#)  
**Subject:** RE: 10026\_SMO Declaration 1NOV17 SMO (~~UNCLASSIFIED~~)  
**Date:** Tuesday, November 14, 2017 8:04:46 AM  
**Attachments:** [10026\\_SMO Declaration 14NOV17 SMO.docx](#)

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CLASSIFICATION: ~~UNCLASSIFIED~~

SMO,

Please see attached. A few additional pieces of information I'm hoping you can add to this one.

-----Original Message-----

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Sent:** Monday, November 13, 2017 3:47 PM  
**To:** [REDACTED] CDR USN (US) [REDACTED]  
**Subject:** 10026\_SMO Declaration 1NOV17 SMO (~~UNCLASSIFIED~~)

CLASSIFICATION: ~~UNCLASSIFIED~~

Sir,  
Here is document #2.

Lady SMO

CLASSIFICATION: ~~UNCLASSIFIED~~

CLASSIFICATION: ~~UNCLASSIFIED~~

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002202

~~UNCLASSIFIED//Pending DoD Review~~

From: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
To: [REDACTED] COL USARMY MEDCOM EACH (US)  
Subject: RE: [REDACTED] (UNCLASSIFIED)  
Date: Monday, November 13, 2017 4:59:43 PM

---

CLASSIFICATION: ~~UNCLASSIFIED~~

Sir,

I had actually planned to do an official counseling on Dr. [REDACTED] after the last patient complaint, but he was out of the state and the plan was to get together the next time he worked (which worked out with me leaving prior to him coming back). I will ask [REDACTED] to ensure it gets done prior to his next shift. Mainly it was to make him aware of the complaints and discuss what changes might need to be made. I didn't want to be in a position where if the complaints continued, that I didn't have a paperwork trail to back me up.

I have not had any complaints from the staff about him, but we have had several patient complaints about how he has interacted with patients (short, not doing proper introductions, not listening). I've also had complaints from coding (but that I take with a grain of salt). I can't remember off the top of my head where he is at as far as patients/hr. And I do not recall any cases that we have done internal reviews on where he was the primary.

So although I think he is rough around the edges, I don't think there is anything at this point that would warrant or support not credentialing him.

If you didn't hear sir, [REDACTED] is back and has his cardiology appointment scheduled. I think his black cloud may be lifting.....usually takes a little time for those things to blow-over. The SMO mobile did just get upgraded from a ford focus to a F150 .....

Have a good day sir,

[REDACTED]

-----Original Message-----

From: [REDACTED] COL USARMY MEDCOM EACH (US)  
Sent: Monday, November 13, 2017 3:58 PM  
To: [REDACTED] MAJ USARMY MEDCOM EACH (US) [REDACTED]  
Subject: Bussey (UNCLASSIFIED)

CLASSIFICATION: ~~UNCLASSIFIED~~

His creds file is up for renewal. File's kind of dirty with past behavioral issues.

Any concerns or do you rec for renewal?

[REDACTED]

CLASSIFICATION: ~~UNCLASSIFIED~~  
CLASSIFICATION: ~~UNCLASSIFIED~~

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002203



~~UNCLASSIFIED//FOUO/~~  
~~PROTECTED BY PRIVACY ACT/Pending DoD Review~~

From: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
 To: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
 Cc: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US); [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED] COL USARMY SOUTHCOM JTF GTMO J3 (US); Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] Col USAF SOUTHCOM SC-CC (US); [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CDR USN NAVOSPSTCEN GRL IL (US)  
 Subject: RE: Current DMC Patient Update (UNCLASSIFIED//FOUO/PROTECTED BY PRIVACY ACT)  
 Date: Wednesday, October 11, 2017 2:30:49 PM

Thanks Doc,

[REDACTED] Pls give

-----Original Message-----

From: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
 Sent: Tuesday, October 10, 2017 8:56 PM  
 To: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
 Cc: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US); [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED] COL USARMY SOUTHCOM JTF GTMO J3 (US); Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] Col USAF SOUTHCOM SC-CC (US); [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CDR USN NAVOSPSTCEN GRL IL (US)

Subject: Current DMC Patient Update (UNCLASSIFIED//FOUO/PROTECTED BY PRIVACY ACT)

CLASSIFICATION: ~~UNCLASSIFIED//FOUO/~~ PROTECTED BY PRIVACY ACT

RDML Cashman,

As I am in the RIP process, I thought I would update the group on the status of our current inpatient. CDR [REDACTED] is copied here as my replacement.

1. he is currently in an inpatient rehab status. This is doctor visits, nursing during the day with a corpsman and physical therapy. At night, just a single corpsman [REDACTED]
2. He is walking with a walker. He can't use a cane yet. We expect a more outpatient status next week.
3. Radiology visit today indicates an extensive blood clot in his left arm. (For the MDs: brachial and basilica veins open. IJV and SCV clotted with early recanalization - not surprising for 3 weeks out).
4. We intend to start blood thinning initially with an injection (Iovenox) and then transition to an oral blood thinner (specific med TBD). This treatment will last 6 months because we know he also has a clot in his lung.
5. Before thinning blood, we will double check with the spine surgeon to validate that the patient is safe to undergo this phase of treatment.

v/t  
 [REDACTED]

~~UNCLASSIFIED//FOUO/~~  
~~PROTECTED BY PRIVACY ACT/Pending DoD Review~~

HADI-3-002204

~~UNCLASSIFIED//FOUO/~~  
~~PROTECTED BY PRIVACY ACT/Pending DoD Review~~

=====

[REDACTED] MD, MS, FACP, FCCP, FAASM  
CAPT, MC, USNR  
Deputy Commander, Joint Medical Group  
Deputy Surgeon, JTF GTMO

DSN: [REDACTED]  
COMM: [REDACTED]  
On-Island Office: [REDACTED]  
Mobile: [REDACTED]

NIPR: [REDACTED]  
SIPR: [REDACTED]

CLASSIFICATION: ~~UNCLASSIFIED FOR OFFICIAL USE ONLY PROTECTED BY PRIVACY ACT~~

~~UNCLASSIFIED//FOUO/~~  
~~PROTECTED BY PRIVACY ACT/Pending DoD Review~~

HADI-3-002205

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

From: [REDACTED] LCDR USN (US)  
 To: Hecker, Karen L CIV OSD OGC (US)  
 Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CIV (US); [REDACTED] CIV OSD OGC (US); [REDACTED] CIV OSD OGC (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
 Date: Monday, October 2, 2017 1:21:13 PM  
 Attachments: Draft medical declaration ISN 10026.docx  
 Importance: High

Karen,

Our SMO was able to work through most of the draft declaration. I had a few thoughts, and I am sure you have more. So, if you would like we can discuss via phonecon. He is able to work through the document via email, and might be available from the phone as he prepares for his trip.

V/r,

LCDR [REDACTED]  
 JTF GTMO SJA

-----Original Message-----

From: Hecker, Karen L CIV OSD OGC (US)  
 Sent: Monday, October 02, 2017 1:13 PM  
 To: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CIV (US); [REDACTED] CIV OSD OGC (US); [REDACTED] CIV OSD OGC (US); [REDACTED] LCDR USN (US)

Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~UNCLASSIFIED//FOUO~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

DOJ is not available today as they're crashing on a status report ordered by Judge Sullivan regarding the future course of this litigation.

In the meantime, I did draft up a proposed declaration for JDG/CC. See attached. Paragraphs 4-9 contain info about how FCEs are done, taken from a 2014 declaration by prior commander. I'm not sure DOJ will want all that in there but I included it just in case.

The two highlighted paragraphs at the end are the ones we definitely need for this litigation. Do you want to take a look and make any edits based on your knowledge/thoughts and then we can talk?

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002206

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

Karen L. Hecker  
DoD Office of General Counsel  
[REDACTED] cell [REDACTED]

-----Original Message-----

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Sent: Monday, October 2, 2017 12:06 PM  
To: Hecker, Karen L CIV OSD OGC (US) [REDACTED]  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US)  
[REDACTED] CIV (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] LCDR USN (US)

Subject: RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

Karen - I'm available now ... long morning. I am also available up until  
about 1400. Is now a good time and are there others you would like on the  
line?

Vr  
[REDACTED]

-----Original Message-----

From: Hecker, Karen L CIV OSD OGC (US)  
Sent: Sunday, October 01, 2017 10:54 AM  
To: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US)  
[REDACTED] CIV (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] LCDR USN (US)  
[REDACTED] CDR USN  
[REDACTED] SOUTHCOM JTF GTMO SJA (US)  
Subject: Re: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

I can and will be by my phone from 9 on, [REDACTED]

Thank you.

Sent from my BlackBerry 10 smartphone.

Original Message

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Sent: Saturday, September 30, 2017 9:18 PM  
To: Hecker, Karen L CIV OSD OGC (US)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CIV  
(US); [REDACTED] CIV OSD OGC (US); [REDACTED] CIV OSD

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002207

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

OGC (US); [REDACTED] LCDR USN (US); [REDACTED] CDR  
USN SOUTHCOM JTF GTMO SJA (US)  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

Karen

As [REDACTED] notes below, we will work with the current SMO on this declaration  
but he may be headed off island. We will also make sure the MO who will  
likely take over those duties temporarily is tracking everything.

On the attorney access for visitation piece, we're available to discuss  
Monday but it will probably be after 0900 - is there a number we should  
call?

Cheers  
[REDACTED]

-----Original Message-----

From: Hecker, Karen L CIV OSD OGC (US)  
Sent: Saturday, September 30, 2017 3:30 PM  
To: [REDACTED] LCDR USN (US) [REDACTED]  
Cc: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
[REDACTED] LTC USARMY SOUTHCOM SC-CC  
[REDACTED] CIV (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)

Subject: Re: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

Thanks! Can we talk Monday morning?

Sent from my BlackBerry 10 smartphone.

Original Message

From: [REDACTED] LCDR USN (US)  
Sent: Saturday, September 30, 2017 12:26 PM  
To: Hecker, Karen L CIV OSD OGC (US)  
Cc: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US);  
[REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CIV (US);  
[REDACTED] CIV OSD OGC (US); [REDACTED] CIV OSD OGC  
(US)  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

Hi Karen,

Received your documents. We (are) will work the SMO declaration and/or  
alternate. Also, not sure if you have discussed with [REDACTED] but would like  
to discuss counsel access piece so we can provide the most responsive  
information. Hope you are having a great weekend!

Sincerely,

LCDR [REDACTED]

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002208

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

JTF GTMO SJA

Cell: [REDACTED]  
[REDACTED]

-----Original Message-----

From: Hecker, Karen L CIV OSD OGC (US)

Sent: Friday, September 29, 2017 9:46 PM

To: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)

[REDACTED] LTC USARMY SOUTHCOM SC-CC

(US) [REDACTED] LCDR USN (US)

Cc: [REDACTED] CIV (US)

[REDACTED] CIV OSD OGC (US)

[REDACTED] CIV OSD OGC (US)

Subject: Draft SMO declaration for use with govt response to Hadi PI motion

\*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

Importance: High

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

[REDACTED]

Attached is a draft declaration for the HVD SMO which we will need to file with our PI opposition on Thursday. Our starting point was the two memos Admiral Cashman signed regarding his past history. We also added some additional information and imbedded some questions within the document on information we would like included but do not have access ourselves.

Can you coordinate this with the SMO? We are available to (and would like to) speak to him about any question he has about what we're asking for. I know the detainee's situation is dynamic and the doctors are busy but if we could get a preliminary response back from him on Tuesday, that would allow us to run that product back through DOJ to ensure we've covered what they believe is necessary to prevent the PI from being issued and so they can fold the facts into the brief they are working on.

[REDACTED] mentioned the SMO may be unavailable this coming week due to his own medical issues. If that is the case, can you advise us on who would be an alternate declarant?

I am also working on a draft declaration for a JDG declarant regarding the FCI and counsel access issues. I will send it down your way once I get DOJ's comments on it.

DOJ is in possession of Judge Rubin's two orders and is considering how to incorporate those developments into our response.

Thanks again for your assistance! Please let us know what we can do to facilitate this project.

I've also attached the PI motion that was filed last night, as I wasn't sure if we had already sent it. Please let us know if you have any thoughts

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002209

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

after reading it, especially on the factual matters contained within it.

Karen L. Hecker  
DoD Office of General Counsel  
[REDACTED] cell [REDACTED]

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~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002210



~~UNCLASSIFIED//FOUO/Pending DoD Review~~

**From:** [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
**To:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Cc:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] LCDR USN (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
(UNCLASSIFIED//FOUO)  
**Date:** Monday, October 2, 2017 9:51:27 PM  
**Attachments:** [Draft Medical Declaration 10026.docx](#)

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Gents

One proposed edit - the rest looks fine to me.

Vt  
[REDACTED]

-----Original Message-----

**From:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
**Sent:** Monday, October 02, 2017 8:07 PM  
**To:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
[REDACTED] LCDR USN (US)  
**Cc:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CDR USN  
SOUTHCOM JTF GTMO SJA (US)  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* (UNCLASSIFIED//FOUO)

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ALCON

I sat with SSMO and we edited and wordsmithed the document.  
This is the up to date version at this time.  
This is a draft document with a question to our JTF SJA in regards to what the appropriate legal response is to a Habeas petition and is thereby protected.  
This is Attorney-client work product.

-----  
[REDACTED] CAPT, MC, USNR  
Deputy Surgeon JTF-GTMO  
Deputy Commander, Joint Medical Group  
Internal Medicine, Pulmonary Disease, Critical Care Medicine, Sleep  
Medicine, and Clinical Informatics

The information provided herein was obtained from records maintained as part of Navy Medicine's Quality Assurance Program and is strictly confidential and privileged. No part of this information may be disclosed, subject to discovery, or admitted into evidence in any judicial or administrative proceeding, except in accordance with 10 U.S.C section 1102.

-----Original Message-----

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002211



~~UNCLASSIFIED//FOUO/Pending DoD Review~~

From: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
Sent: Monday, October 02, 2017 7:43 PM  
To: [REDACTED] LCDR USN (US) [REDACTED]  
Cc: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CAPT USN NAVHOSP  
GTMO CU (US) [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US) [REDACTED]  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

ALCON,

I have updated the medical declaration. Please edit ASAP and return to me.  
Thanks.

V/R,  
SMO

-----Original Message-----

From: [REDACTED] LCDR USN (US)  
Sent: Monday, October 02, 2017 1:32 PM  
To: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
[REDACTED]  
Cc: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CAPT USN NAVHOSP  
GTMO CU (US) [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US) [REDACTED]  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~  
Importance: High

SMO,

Could you provide a quick update to the Admiral's Memo on 26 medical status?  
The Commissions judge ordered bi-weekly (clarified to 2 x month) medical  
updates. So we are approaching the deadline for the Admiral's memo. Please  
'cc CDR [REDACTED] to fast-track to Admiral. Thanks!

V/r,  
[REDACTED]

LCDR [REDACTED]  
JTF GTMO SJA  
[REDACTED]  
[REDACTED]

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~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002212

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

**From:** [REDACTED] LCDR USN (US)  
**To:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
~~(UNCLASSIFIED//FOUO)~~  
**Date:** Thursday, October 5, 2017 2:22:54 PM

---

Ok, no problem I will be around then.

-----Original Message-----

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Sent:** Thursday, October 05, 2017 2:22 PM  
**To:** [REDACTED] LCDR USN (US) [REDACTED]  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
~~(UNCLASSIFIED//FOUO)~~

[REDACTED]

Will do, I am not sure how long my meeting is I would guess 30-60 minutes

V/R,  
SMO

---

**From:** [REDACTED] LCDR USN (US)  
**Sent:** Thursday, October 05, 2017 12:20 PM  
**To:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
~~(UNCLASSIFIED//FOUO)~~

SMO,

Can you come by after your meeting? They are (trying) to send now despite a few tech issues on their end.

V/r,  
[REDACTED]

-----Original Message-----

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Sent:** Thursday, October 05, 2017 1:44 PM  
**To:** [REDACTED] LCDR USN (US) [REDACTED]  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
~~(UNCLASSIFIED//FOUO)~~

[REDACTED]

I was wondering when today you would be around for me to come sign the declaration. I have a 1500 meeting but otherwise I am free. Thanks,

V/R,  
SMO

---

**From:** [REDACTED] LCDR USN (US)  
**Sent:** Wednesday, October 04, 2017 10:07 AM  
**To:** [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] CAPT USN NAVHOSP  
GTMO CU (US)  
**Cc:** [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002213

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

Thanks SMO. They sent a few more items. I will check to see if they change the medical information in any way, but if not, I will make changes etc.  
Almost done (hopefully)....

V/r,  
[REDACTED]

LCDR [REDACTED]  
JTF GTMO SJA  
[REDACTED]

-----Original Message-----

From: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
Sent: Wednesday, October 04, 2017 11:09 AM  
To: [REDACTED] LCDR USN (US) [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
Cc: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

ALCON,

Edits reviewed and ready for your cleaning up and additional edits.

V/R,  
SMO

-----Original Message-----

From: [REDACTED] LCDR USN (US)  
Sent: Tuesday, October 03, 2017 6:26 PM  
To: [REDACTED] MAJ USARMY MEDCOM EACH (US) [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
Cc: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Subject: FW: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~  
Importance: High

SMO:

Here is the DOJ/OGC edits. Please review to make sure you are comfortable.  
This should be last cut. I will add a footnote describing why your name will not be used, but only after you review/add this version.

V/r,  
[REDACTED]

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002214

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

-----Original Message-----

From: Hecker, Karen L CIV OSD OGC (US)  
Sent: Tuesday, October 03, 2017 4:46 PM  
To: [REDACTED] LCDR USN (US); 'Wiltsie, Ronald (CIV)'  
[REDACTED]; 'Henry, Terry (CIV)'  
[REDACTED] 'Warden, Andrew (CIV)' [REDACTED] (CIV)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US) [REDACTED]  
[REDACTED] CIV (US) [REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO  
SJA (US)  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT  
PRIVILEGE\*\*\*~~(UNCLASSIFIED//FOUO)~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

Thank you!

Here is that version with some comments/edits from us and DOJ.

Karen L. Hecker  
DoD Office of General Counsel  
[REDACTED] cell [REDACTED]

-----Original Message-----

From: [REDACTED] LCDR USN (US)  
Sent: Tuesday, October 3, 2017 3:52 PM  
To: Hecker, Karen L CIV OSD OGC (US) <[REDACTED]>; 'Wiltsie, Ronald (CIV)'  
[REDACTED] 'Henry, Terry (CIV)'  
[REDACTED] 'Warden, Andrew (CIV)' [REDACTED] (CIV)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US) [REDACTED]  
[REDACTED] CIV (US) [REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO  
SJA (US) [REDACTED] CDR USN SOUTHCOM JTF  
GTMO SJA (US)  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT  
PRIVILEGE\*\*\*~~(UNCLASSIFIED//FOUO)~~  
Importance: High

Alcon:

An update from our SMO which I left in track changes.

V/r,  
[REDACTED]

LCDR [REDACTED]  
JTF GTMO SJA

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002215

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

[REDACTED]

-----Original Message-----

From: [REDACTED] LCDR USN (US)  
Sent: Tuesday, October 03, 2017 1:07 PM  
To: Hecker, Karen L CIV OSD OGC (US); [REDACTED] Wiltzie, Ronald (CIV)  
[REDACTED] Henry, Terry (CIV); [REDACTED] Warden, Andrew (CIV)  
[REDACTED] (CIV)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED]  
[REDACTED] CIV (US); [REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO  
[REDACTED] SJA (US); [REDACTED] CDR USN SOUTHCOM JTF  
[REDACTED] GTMO SJA (US)  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT  
PRIVILEGE\*\*\* (~~UNCLASSIFIED//FOUO~~)  
Importance: High

Alcon:

Attached is the latest from our SMO. Please let us know if you need more information. For JDG (FCE)  
Declaration, we are comparing draft against updated SOP from 2016. We are also trying to pull data on FCEs  
discussed yesterday.

V/r,

[REDACTED]

LCDR [REDACTED]  
JTF GTMO SJA

[REDACTED]

-----Original Message-----

From: Hecker, Karen L CIV OSD OGC (US)  
Sent: Monday, October 02, 2017 1:24 PM  
To: [REDACTED] LCDR USN (US) <[REDACTED]>; Wiltzie, Ronald  
(CIV); [REDACTED] Henry, Terry (CIV); [REDACTED] Warden, Andrew (CIV)  
[REDACTED] (CIV)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED]  
[REDACTED] CIV (US); [REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO  
[REDACTED] SJA (US)  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT  
PRIVILEGE\*\*\* (~~UNCLASSIFIED//FOUO~~)

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HADI-3-002216

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

Thanks, adding DOJ in an effort to save time give SMO's status. When does the SMO leave the island?

Karen L. Hecker  
DoD Office of General Counsel  
[REDACTED] cell [REDACTED]

-----Original Message-----

From: [REDACTED] LCDR USN (US)  
Sent: Monday, October 2, 2017 1:21 PM  
To: Hecker, Karen L CIV OSD OGC (US) [REDACTED]  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US) [REDACTED]  
[REDACTED] CIV (US) [REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO  
SJA (US) [REDACTED]  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT  
PRIVILEGE\*\*\* (~~UNCLASSIFIED//FOUO~~)  
Importance: High

Karen,

Our SMO was able to work through most of the draft declaration. I had a few thoughts, and I am sure you have more. So, if you would like we can discuss via phonecon. He is able to work through the document via email, and might be available from the phone as he prepares for his trip.

V/r,

LCDR [REDACTED]  
JTF GTMO SJA  
[REDACTED]  
[REDACTED]

-----Original Message-----

From: Hecker, Karen L CIV OSD OGC (US)  
Sent: Monday, October 02, 2017 1:13 PM  
To: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US) [REDACTED]  
[REDACTED] CIV (US) [REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] LCDR USN (US) [REDACTED]  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT  
PRIVILEGE\*\*\* (~~UNCLASSIFIED//FOUO~~)

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

[REDACTED]  
DOJ Is not available today as they're crashing on a status report ordered by Judge Sullivan regarding the future course of this litigation.

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002217

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

In the meantime, I did draft up a proposed declaration for JDG/CC. See attached. Paragraphs 4-9 contain info about how FCEs are done, taken from a 2014 declaration by prior commander. I'm not sure DOJ will want all that in there but I included it just in case.

The two highlighted paragraphs at the end are the ones we definitely need for this litigation. Do you want to take a look and make any edits based on your knowledge/thoughts and then we can talk?

Karen L. Hecker  
DoD Office of General Counsel  
[REDACTED] cell [REDACTED]

-----Original Message-----

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Sent: Monday, October 2, 2017 12:06 PM  
To: Hecker, Karen L CIV OSD OGC (US) [REDACTED]  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US) [REDACTED]  
[REDACTED] CIV (US) [REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] LCDR USN (US) [REDACTED]  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*~~(UNCLASSIFIED//FOUO)~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

Karen - I'm available now ... long morning. I am also available up until about 1400. Is now a good time and are there others you would like on the line?

Vr  
[REDACTED]

-----Original Message-----

From: Hecker, Karen L CIV OSD OGC (US)  
Sent: Sunday, October 01, 2017 10:54 AM  
To: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US) [REDACTED]  
[REDACTED] CIV (US) [REDACTED] CIV OSD OGC (US)  
[REDACTED] CIV OSD OGC (US)  
[REDACTED] LCDR USN (US) [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US) [REDACTED]  
Subject: Re: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*~~(UNCLASSIFIED//FOUO)~~

I can and will be by my phone from 9 on, [REDACTED]

Thank you.

Sent from my BlackBerry 10 smartphone.

Original Message

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Sent: Saturday, September 30, 2017 9:18 PM  
To: Hecker, Karen L CIV OSD OGC (US)  
Cc: [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CIV (US); [REDACTED]

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002218

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

CIV OSD OGC (US); [REDACTED] CIV OSD OGC (US); [REDACTED] LCDR USN (US); [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT  
PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

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Karen

As [REDACTED] notes below, we will work with the current SMO on this declaration but he may be headed off island. We will also make sure the MO who will likely take over those duties temporarily is tracking everything.

On the attorney access for visitation piece, we're available to discuss Monday but it will probably be after 0900 - is there a number we should call?

Cheers

[REDACTED]

-----Original Message-----

From: Hecker, Karen L CIV OSD OGC (US)  
Sent: Saturday, September 30, 2017 3:30 PM  
To: [REDACTED] LCDR USN (US) [REDACTED]  
Cc: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
[REDACTED] LTC USARMY SOUTHCOM SC-CC  
(US) [REDACTED] CIV (US) [REDACTED]  
[REDACTED] CIV OSD OGC (US) [REDACTED] CIV OSD OGC  
(US) [REDACTED]  
Subject: Re: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT  
PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

Thanks! Can we talk Monday morning?

Sent from my BlackBerry 10 smartphone.

Original Message

From: [REDACTED] LCDR USN (US)  
Sent: Saturday, September 30, 2017 12:26 PM  
To: Hecker, Karen L CIV OSD OGC (US)  
Cc: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US); [REDACTED] LTC  
USARMY SOUTHCOM SC-CC (US); [REDACTED] CIV (US); [REDACTED] CIV OSD OGC (US);  
[REDACTED] CIV OSD OGC  
(US)  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT  
PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

Hi Karen,

Received your documents. We (are) will work the SMO declaration and/or alternate. Also, not sure if you have discussed with [REDACTED] but would like to discuss counsel access piece so we can provide the most responsive information. Hope you are having a great weekend!

Sincerely,

LCDR [REDACTED]  
JTF GTMO SJA

[REDACTED]

Cell: [REDACTED]  
[REDACTED]

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002219



~~UNCLASSIFIED//FOUO/Pending DoD Review~~

[REDACTED]

-----Original Message-----

From: Hecker, Karen L CIV OSD OGC (US)

Sent: Friday, September 29, 2017 9:46 PM

To: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)

[REDACTED] LTC USARMY SOUTHCOM SC-CC

(US) [REDACTED] LCDR USN (US) [REDACTED]

Cc: [REDACTED] CIV (US) [REDACTED] CIV OSD OGC (US)

[REDACTED] CIV OSD OGC (US)

Subject: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*~~(UNCLASSIFIED//FOUO)~~

Importance: High

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

[REDACTED]

Attached is a draft declaration for the HVD SMO which we will need to file with our PI opposition on Thursday. Our starting point was the two memos Admiral Cashman signed regarding his past history. We also added some additional information and imbedded some questions within the document on information we would like included but do not have access ourselves.

Can you coordinate this with the SMO? We are available to (and would like to) speak to him about any question he has about what we're asking for. I know the detainee's situation is dynamic and the doctors are busy but if we could get a preliminary response back from him on Tuesday, that would allow us to run that product back through DOJ to ensure we've covered what they believe is necessary to prevent the PI from being issued and so they can fold the facts into the brief they are working on.

[REDACTED] mentioned the SMO may be unavailable this coming week due to his own medical issues. If that is the case, can you advise us on who would be an alternate declarant?

I am also working on a draft declaration for a JDG declarant regarding the FCI and counsel access issues. I will send it down your way once I get DOJ's comments on it.

DOJ is in possession of Judge Rubin's two orders and is considering how to incorporate those developments into our response.

Thanks again for your assistance! Please let us know what we can do to facilitate this project.

I've also attached the PI motion that was filed last night, as I wasn't sure if we had already sent it. Please let us know if you have any thoughts after reading it, especially on the factual matters contained within it.

Karen L. Hecker  
DoD Office of General Counsel

[REDACTED] cell [REDACTED]

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~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002220

UNCLASSIFIED//FOR PUBLIC RELEASE

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

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CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002221

UNCLASSIFIED//FOR PUBLIC RELEASE

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**To:** [REDACTED] LCDR USN (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
**Cc:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CDR USN  
[REDACTED] SOUTHCOM JTF GTMO SJA (US)  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
~~(UNCLASSIFIED//FOUO)~~  
**Date:** Tuesday, October 3, 2017 2:46:29 PM  
**Attachments:** [Draft Medical Declaration 10026 a.docx](#)

---

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ALCON,

Few edits from our Orthospine surgeon.

V/R,  
SMO

-----Original Message-----

**From:** [REDACTED] LCDR USN (US)  
**Sent:** Tuesday, October 03, 2017 9:16 AM  
**To:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] MAJ USARMY MEDCOM  
[REDACTED] EACH (US)  
**Cc:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CDR USN  
[REDACTED] SOUTHCOM JTF GTMO SJA (US)  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

Gentlemen,

Thank you. I will take a look and get back to you ASAP.

V/r,  
[REDACTED]

-----Original Message-----

**From:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
**Sent:** Monday, October 02, 2017 8:07 PM  
**To:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
[REDACTED] LCDR USN (US)  
**Cc:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CDR USN  
[REDACTED] SOUTHCOM JTF GTMO SJA (US)  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

ALCON

I sat with SSMO and we edited and wordsmithed the document.  
This is the up to date version at this time.  
This is a draft document with a question to our JTF SJA in regards to what  
the appropriate legal response is to a Habeas petition and is thereby

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HADI-3-002222

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

protected.  
This is Attorney-client work product.

== == ==

[REDACTED] CAPT, MC, USNR  
Deputy Surgeon JTF-GTMO  
Deputy Commander, Joint Medical Group  
Internal Medicine, Pulmonary Disease, Critical Care Medicine, Sleep  
Medicine, and Clinical Informatics

The information provided herein was obtained from records maintained as part of Navy Medicine's Quality Assurance Program and is strictly confidential and privileged. No part of this information may be disclosed, subject to discovery, or admitted into evidence in any judicial or administrative proceeding, except in accordance with 10 U.S.C section 1102.

-----Original Message-----

From: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
Sent: Monday, October 02, 2017 7:43 PM  
To: [REDACTED] LCDR USN (US) [REDACTED]  
Cc: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CAPT USN NAVHOSP  
GTMO CU (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US) [REDACTED]  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* (~~UNCLASSIFIED//FOUO~~)

ALCON,

I have updated the medical declaration. Please edit ASAP and return to me.  
Thanks.

V/R,  
SMO

-----Original Message-----

From: [REDACTED] LCDR USN (US)  
Sent: Monday, October 02, 2017 1:32 PM  
To: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
[REDACTED]  
Cc: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CAPT USN NAVHOSP  
GTMO CU (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US) [REDACTED]  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* (~~UNCLASSIFIED//FOUO~~)  
Importance: High

SMO,

Could you provide a quick update to the Admiral's Memo on 26 medical status?  
The Commissions judge ordered bi-weekly (clarified to 2 x month) medical  
updates. So we are approaching the deadline for the Admiral's memo. Please  
'cc CDR [REDACTED] to fast-track to Admiral. Thanks!

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002223

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

V/r,  
[REDACTED]

LCDR [REDACTED]  
JTF GTMO SJA  
[REDACTED]

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CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002224

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**To:** [REDACTED] LCDR USN (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
**Cc:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CDR USN  
SOUTHCOM JTF GTMO SJA (US)  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
(UNCLASSIFIED//FOUO)  
**Date:** Tuesday, October 3, 2017 3:06:47 PM  
**Attachments:** [Draft Medical Declaration 10026 b.docx](#)

---

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ALCON,

Try this copy. Sorry.

V/R,  
SMO

-----Original Message-----

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Sent:** Tuesday, October 03, 2017 2:46 PM  
**To:** [REDACTED] LCDR USN (US); [REDACTED]  
[REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED]  
**Cc:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CDR USN  
SOUTHCOM JTF GTMO SJA (US); [REDACTED]  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* (UNCLASSIFIED//FOUO)

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

ALCON,

Few edits from our Orthospine surgeon.

V/R,  
SMO

-----Original Message-----

**From:** [REDACTED] LCDR USN (US)  
**Sent:** Tuesday, October 03, 2017 9:16 AM  
**To:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] MAJ USARMY MEDCOM  
EACH (US)  
**Cc:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CDR USN  
SOUTHCOM JTF GTMO SJA (US); [REDACTED]  
**Subject:** RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* (UNCLASSIFIED//FOUO)

Gentlemen,

Thank you. I will take a look and get back to you ASAP.

V/r,  
[REDACTED]

---

HADI-3-002225

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

-----Original Message-----

From: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
Sent: Monday, October 02, 2017 8:07 PM  
To: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
[REDACTED] LCDR USN (US)  
Cc: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CDR USN  
SOUTHCOS JTF GTMO SJA (US) [REDACTED]  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

ALCON

I sat with SSMO and we edited and wordsmithed the document.  
This is the up to date version at this time.  
This is a draft document with a question to our JTF SJA in regards to what  
the appropriate legal response is to a Habeas petition and is thereby  
protected.  
This is Attorney-client work product.

== == ==

[REDACTED] CAPT, MC, USNR  
Deputy Surgeon JTF-GTMO  
Deputy Commander, Joint Medical Group  
Internal Medicine, Pulmonary Disease, Critical Care Medicine, Sleep  
Medicine, and Clinical Informatics

The information provided herein was obtained from records maintained as part  
of Navy Medicine's Quality Assurance Program and is strictly confidential  
and privileged. No part of this information may be disclosed, subject to  
discovery, or admitted into evidence in any judicial or administrative  
proceeding, except in accordance with 10 U.S.C section 1102.

-----Original Message-----

From: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
Sent: Monday, October 02, 2017 7:43 PM  
To: [REDACTED] LCDR USN (US) [REDACTED]  
Cc: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CAPT USN NAVHOSP  
GTMO CU (US) [REDACTED]  
[REDACTED] CDR USN SOUTHCOS JTF GTMO SJA (US) [REDACTED]  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~

ALCON,

I have updated the medical declaration. Please edit ASAP and return to me.  
Thanks.

V/R,  
SMO

---

HADI-3-002226

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

-----Original Message-----

From: [REDACTED] LCDR USN (US)  
Sent: Monday, October 02, 2017 1:32 PM  
To: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
Cc: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] CAPT USN NAVHOSP  
GTMO CU (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US) [REDACTED]  
Subject: RE: Draft SMO declaration for use with govt response to Hadi PI  
motion \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* ~~(UNCLASSIFIED//FOUO)~~  
Importance: High

SMO,

Could you provide a quick update to the Admiral's Memo on 26 medical status?  
The Commissions judge ordered bi-weekly (clarified to 2 x month) medical  
updates. So we are approaching the deadline for the Admiral's memo. Please  
'cc CDR [REDACTED] to fast-track to Admiral. Thanks!

V/r,

[REDACTED]

LCDR [REDACTED]  
JTF GTMO SJA  
[REDACTED]  
[REDACTED]

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HADI-3-002227



~~UNCLASSIFIED//Pending DoD Review~~

**From:** [Van Dalen, Matthew D Col USAF OSD OMC CA \(US\)](#)  
**To:** [\[REDACTED\] MAJ USARMY MEDCOM EACH \(US\)](#)  
**Subject:** RE: GTMO MRI (~~UNCLASSIFIED~~)  
**Date:** Thursday, December 7, 2017 5:10:10 PM  
**Attachments:** [SOP for Use of MRI Scanner PDF](#)

---

MAJ [REDACTED]

Following up on our prior discussions, the MRI techs are good to go on the potential additional MRIs on the dates sought.

One question was posed, however: How are the images planned to be transferred/stored? In the attached SOP (para j), it specifies:

"The results of the MRI imaging will be stored on a DVD disk without any additional identifying information, marked as UNCLASS//FOUO, and turned over to the requesting party... To the extent technologically possible, data related to defense images will be purged from the MRI system at the end of each session."

That's the procedure for the litigation-related MRIs, but you can do anything you want with your medical scans, we'll just need to let the tech know.

Thanks,

Matt

-----Original Message-----

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Sent:** Thursday, December 7, 2017 10:09 AM  
**To:** Van Dalen, Matthew D Col USAF OSD OMC CA (US) [REDACTED]  
**Subject:** GTMO MRI (~~UNCLASSIFIED~~)

CLASSIFICATION: ~~UNCLASSIFIED~~

LTC Van Dalen,

Sir, I got your name from CAPT [REDACTED]

While we have the MRI on GTMO, I would like to arrange to get 2 of my patients a scan. Both have been recommended to have scans by spinal specialty providers. What do I need to do to get the process rolling?

Thank you

MAJ [REDACTED]

CLASSIFICATION: ~~UNCLASSIFIED~~

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HADI-3-002228

~~UNCLASSIFIED//FOUO/Pending DoD review~~

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 To: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
 Cc: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US); [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED] CDR USN (US); [REDACTED] LCDR USN (US); [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] CIV SOUTHCOM JTF GTMO J2 (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO PAO (US); SOUTHCOM NS Guantanamo Bay JTF GTMO SJA MESG LSS; [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 Subject: RE: Hadi Al Iraqi - Cashman Medical Emergency Memo (6 Sep 2017) ATTORNEY WORK PRODUCT (UNCL//FOUO//FOUO)  
 Date: Thursday, September 7, 2017 11:48:27 AM  
 Attachments: Hadi Al Iraqi - Cashman Medical Emergency Memo (6 Sep 2017) ATTORNEY WOR....docx  
 Importance: High

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

Copy all Admiral

For all on the cc-line, please let me know NLT 1500 today if you have any suggested changes to the attached draft the Admiral reviewed and edited. Specifically, I need the SSO chop on proper classification markings, and from medical I need a final review to make sure we have the language correct (e.g., the Admiral added the descriptor "conservatively" ... I recommend something like "a congenital degenerative condition previously diagnosed and being monitored and treated consistent with accepted medical standards" to capture that this is a condition he had long before he was in our custody and we've been treating it all along with an appropriate standard of care).

Thanks  
[REDACTED]

-----Original Message-----

From: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
 Sent: Thursday, September 07, 2017 10:00 AM  
 To: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 Cc: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US); [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED] CDR USN (US); [REDACTED] LCDR USN (US); [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] CIV SOUTHCOM JTF GTMO J2 (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO PAO (US); [REDACTED] SOUTHCOM NS Guantanamo Bay JTF GTMO SJA MESG LSS; [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
 Subject: RE: Hadi Al Iraqi - Cashman Medical Emergency Memo (6 Sep 2017) ATTORNEY WORK PRODUCT (UNCL//FOUO//FOUO)

Thanks

Made a few tweaks in this version - pls review for correctness and appropriateness.

I think it is still strictly consistent with the medical Memo. Added bits.

Pointing out that both this procedure, and any future procedures are at the discretion and approval of the patient/detainee. Two places - the just completed procedure and reference any future procedures...

I assume we do not want to go into details of his diagnosis - and recommendation that he have a follow on cervical surgical interventions... (and he may well refuse that surgery ... which he can do if he chooses...) So I did not

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HADI-3-002229

~~UNCLASSIFIED//FOUO/Pending DoD review~~

provide those details, but do think its worthwhile to point out again - if there are follow on recommendations for surgery or any other procedures - they'll be offered to the detainee (not to anyone else). I also understand that there may / will likely be a request for discovery - turnover the details on the whole trail to the court and the defense team.. I think our position is .. "fine - let that process work, we should not try to pre-empt it...."

I'll want to send this to SOUTHCOM, and get their vote on forwarding to Commissions team.

Pls let me know all appropriate have reviewed for correctness.

Thanks again and VR

-----Original Message-----

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Sent: Thursday, September 07, 2017 7:44 AM  
To: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US) [REDACTED]  
Cc: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)  
[REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US)  
[REDACTED] CDR USN (US)  
[REDACTED] LCDR USN (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
[REDACTED] MAJ USARMY MEDCOM EACH (US)  
[REDACTED] CIV SOUTHCOM JTF GTMO J2 (US)  
[REDACTED] CDR USN SOUTHCOM JTF GTMO PAO (US)  
[REDACTED] ; SOUTHCOM NS Guantanamo Bay JTF GTMO SJA MESG LSS

Subject: FW: Hadi Al Iraqi - Cashman Medical Emergency Memo (6 Sep 2017) ATTORNEY WORK PRODUCT  
(UNCLASSIFIED//FOUO)

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Admiral

Attached is a draft memo for your review. It is U/FOUO (cc'ing SSO) and I think covers the basics of what occurred sufficiently to help vector some of the churn from the Commissions. It may also be of use regarding PAO (cc'd), but I still think we need to be very limited in what we put out officially regarding specifics of detainee medical care. If defense counsel float it to the press then that's on them and doesn't create any issues for JTF (assuming it is accurate). Also attached is a draft memo from SMO (cc'd) regarding the more complete timeline on ISN 10026's medical progression for reference.

If you concur with the memo then I will finalize classification markings, format and distribution for signature. In addition to SC, I recommend sending to OMC, OMCP, OMCD.

Standing by to answer any questions.

Vr  
[REDACTED]

-----Original Message-----

From: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
Sent: Wednesday, September 06, 2017 5:41 PM  
To: [REDACTED] CDR USN (US)  
Cc: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Subject: RE: Hadi Al Iraqi - Cashman Medical Emergency Memo (6 Sep 2017) ATTORNEY WORK PRODUCT  
(UNCLASSIFIED//FOUO)

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HADI-3-002230

~~UNCLASSIFIED//FOUO/Pending DoD review~~

CDR [REDACTED]

Memo updated as requested. Timeline to follow shortly.

V/R,  
SMO

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

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~~UNCLASSIFIED//FOUO/Pending DoD review~~

HADI-3-002231

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

From: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
 To: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 Cc: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US); [REDACTED] CAPT USN SOUTHCOM JTF GTMO CLO (US); Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO PAO (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] COL USARMY SOUTHCOM JTF GTMO J3 (US); CDR USCG SOUTHCOM JTF GTMO PSU (US); [REDACTED] CDR USN (US); [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CAPT USN SOUTHCOM SCHQ-LNO-JTF-GTMO (US); [REDACTED] Lt Col USAF SOUTHCOM JTF GTMO BEEF (US); [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED] CIV SOUTHCOM SCJ3 (US); [REDACTED] LTC USARMY SOUTHCOM SCJ3 (US); McCubbin, Todd J Brig Gen USAF SOUTHCOM SCJ3 (US); Droz, Michael SES SOUTHCOM SCJ3 (US)  
 Subject: RE: HOT -- CANCELLATION of October 2017 US v HADI Session (UNCLASSIFIED//FOUO)  
 Date: Friday, September 22, 2017 8:54:33 AM

Roger - thanks

This helps establish a timeline for modifications to ECHO II, perhaps other locations - as well as receipt of wheelchair accessible DMVs and any other equipment we need.

Obviously depends on his recovery and rehabilitation as well - we just need to make sure things we need to do are not the limiting factor on his ability to meet or participate.

VR

-----Original Message-----

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 Sent: Thursday, September 21, 2017 9:53 PM  
 To: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
 Cc: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)  
 [REDACTED] CAPT USN SOUTHCOM JTF GTMO CLO (US) Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)  
 [REDACTED] CDR USN SOUTHCOM JTF GTMO PAO (US) [REDACTED] CAPT USN NAVHOSP GTMO CU (US) [REDACTED] COL USARMY SOUTHCOM JTF GTMO J3 (US) [REDACTED] CDR USCG SOUTHCOM JTF GTMO PSU (US) [REDACTED] CDR USN (US) [REDACTED] MAJ USARMY MEDCOM EACH (US) [REDACTED] CAPT USN NAVHOSP GTMO CU (US) [REDACTED] CAPT USN SOUTHCOM SCHQ-LNO-JTF-GTMO (US) [REDACTED] Lt Col USAF SOUTHCOM JTF GTMO BEEF (US) [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US) [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US)  
 Subject: FW: HOT -- CANCELLATION of October 2017 US v HADI Session (UNCLASSIFIED//FOUO)  
 Importance: High

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

Admiral

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002232

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

You may have already gotten this word but the Hadi hearings for first week of October are now officially cancelled. Interestingly, the judge did not reschedule the hearing and merely says other scheduled dates remain ... I believe the next Hadi dates are 11-15 December so we'll see whether he's able to participate by then. There would need to be A-C meetings prior to those dates -probably NLT right after thanksgiving sometime - so efforts to ADA-ify various locations for meetings will likely need to be tracking on at least that timeline, but ideally ahead of that timeframe to facilitate earlier meetings if he's medically able to get there.

Standing by to answer any questions.

Vr

[REDACTED]

-----Original Message-----

From: [REDACTED] CDR USN (US)  
Sent: Thursday, September 21, 2017 6:22 PM  
To: SOUTHCOM NS Guantanamo Bay JTF GTMO SJA List SJA-ALL  
[REDACTED] LCDR  
USN (US) [REDACTED]  
Subject: FW: HOT -- CANCELLATION of October 2017 US v HADI Session  
(UNCLASSIFIED)  
Importance: High

CLASSIFICATION: ~~UNCLASSIFIED~~

~~Not for release to public.~~

-----Original Message-----

From: Taylor, Fred P CIV OSD OMC TJ (US)  
Sent: Thursday, September 21, 2017 5:18 PM  
To: Brown, Gary D (HQE) CIV OSD OMC CA (US) [REDACTED]  
Bumpus, Tyrone A (Ty) CIV WHS IO AND WHS STAFF (US)  
[REDACTED] SOUTHCOM NS Guantanamo Bay JTF GTMO CLO List  
CLO-Leadership [REDACTED]  
Imhof, John V CIV OSD OMC CA (US) [REDACTED]  
[REDACTED] CIV OSD OMC CA (US) [REDACTED] McCloud, Anthony Wade  
CIV OSD OMC CA (US) [REDACTED] CIV OSD  
OMC TJ (US) [REDACTED] Sheeran, Edward J CIV OSD OMC CA  
(US) [REDACTED] CDR USN (US)  
[REDACTED] Wilkins, Donna Lee CIV OSD OMC CA (US)  
Subject: HOT -- CANCELLATION of October 2017 US v HADI Session  
Importance: High

ALCON:

The attached orders cancel the October 2017 session in the trial of US v.  
Hadi al Iraqi.  
Neither order has gone thru the DoD Review Team process, thus they are not  
releasable to the public.  
I am providing them to you for your planning purposes.

Regards  
FPT

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002233

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

FRED P. TAYLOR  
Staff Director, Trial Judiciary  
Office of Military Commissions  
[REDACTED]

CLASSIFICATION: ~~UNCLASSIFIED~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002234



~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

**From:** [REDACTED] [CAPT USN NAVHOSP GTMO CU \(US\)](#)  
**To:** [REDACTED] [MAJ USARMY MEDCOM EACH \(US\)](#)  
**Subject:** RE: JMG DACU SITREP (~~UNCLASSIFIED//FOUO SENSITIVE~~)  
**Date:** Tuesday, September 19, 2017 4:08:41 PM

---

SSMO,

Please give me a call once you are done with email.

Thanks,  
[REDACTED]

-----Original Message-----

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Sent:** Tuesday, September 19, 2017 4:07 PM  
**To:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
**Subject:** RE: JMG DACU SITREP (~~UNCLASSIFIED//FOUO SENSITIVE~~)

No Sir, plan is to start Physical therapy and see what recovery is from first surgery.

V/R,  
[REDACTED]

---

**From:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
**Sent:** Tuesday, September 19, 2017 2:05 PM  
**To:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Cc:** [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
**Subject:** RE: JMG DACU SITREP (~~UNCLASSIFIED//FOUO SENSITIVE~~)

SSMO,

Is LCDR [REDACTED] still planning for lumbar fusion WEDS evening?

R [REDACTED]

-----Original Message-----

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Sent:** Tuesday, September 19, 2017 3:18 PM  
**To:** Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US); [REDACTED]  
[REDACTED] CAPT USN NAVHOSP GTMO CU (US); Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)  
**Cc:** [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED]  
[REDACTED] COL USARMY JS OCJCS (US); [REDACTED] Col USAF SOUTHCOM SC-CC (US); [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED]  
[REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] LTC USARMY (US); [REDACTED]  
[REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US); Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
**Subject:** RE: JMG DACU SITREP (~~UNCLASSIFIED//FOUO SENSITIVE~~)

RDML Cashman,

SITREP JMG DACU:

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002235



~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

As CAPT [REDACTED] stated, this was a challenging surgical case. The patient has a complication which known to cervical spinal fusion. He has a left C5 nerve palsy. Clinically this means he has significant weakness of parts of his left arm. We obtained CT and plain film imaging which showed the hardware placement was without issue and decompression of the spinal cord was successful. There are not current surgical needs at this time for the cervical spine. Symptoms have improved from this AM already. The surgeons agree that with this type of injury the best treatment going forward is aggressive physical therapy. This injury typically improves with time to what extent is difficult to say. This will likely require an extension on the timeline we have for the physical therapist to provide for rehabilitative needs. No procedures for the lumbar spine will be done at this time to allow for recovery from current surgery.

V/R,

MAJ [REDACTED]

From: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)

Sent: Tuesday, September 19, 2017 6:22 AM

To: [REDACTED] CAPT USN NAVHOSP GTMO CU (US); Stevenson, Charles G

Brig Gen USAF SOUTHCOM JTF GTMO CC (US)

Cc: [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED]

[REDACTED] COL USARMY JS OCJCS (US); [REDACTED] Col USAF SOUTHCOM SC-CC

(US); [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CAPT

USN NAVMED EAST PORS VA (US); [REDACTED] CAPT USN NAVHOSP GTMO

CU (US); [REDACTED] CAPT USN NAVHOSP PORS VA (US); [REDACTED]

MAJ USARMY MEDCOM EACH (US); [REDACTED] LTC USARMY (US); [REDACTED]

[REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US); Gabavics, Stephen Emil (Steve) COL

USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] CDR USN

SOUTHCOM JTF GTMO SJA (US)

Subject: RE: JMG DACU SITREP (UNCLASSIFIED//FOUO/SENSITIVE)

Roger - thanks Doc,

Tracking. Saw the team that took over at 0500 this morning.

VR

-----Original Message-----

From: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)

Sent: Tuesday, September 19, 2017 8:10 AM

To: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)

[REDACTED] Stevenson, Charles G Brig Gen USAF SOUTHCOM  
JTF GTMO CC (US)

Cc: [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US)

[REDACTED] COL USARMY JS OCJCS

(US) [REDACTED] Col USAF SOUTHCOM

SC-CC (US) [REDACTED] LTC USARMY

SOUTHCOM SC-CC (US) [REDACTED] CAPT

USN NAVMED EAST PORS VA (US)

[REDACTED] CAPT USN NAVHOSP GTMO CU (US)

[REDACTED] CAPT USN NAVHOSP PORS VA (US)

[REDACTED] MAJ USARMY MEDCOM EACH (US)

[REDACTED] LTC USARMY (US)

[REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US)

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002236

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)  
[REDACTED] CDR USN  
SOUTHCOM JTF GTMO SJA (US) [REDACTED]  
Subject: JMG DACU SITREP ~~(UNCLASSIFIED//FOUO SENSITIVE)~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

RDML Cashman,  
SITREP JMG DACU:  
The patient underwent cervical spine fusion last night. He came out of the OR around 0400 and was recovering well. There were no major complications. Surgery was not easy, there was a relatively minor complication based on anatomy. Based on his recovery, the team would also like to repair his low-back with a fusion, perhaps as soon as Wednesday. The patient will stay for now at the hospital and not return to DACU until the neurosurgeon declares he is stable for transport. CAPT [REDACTED] was scrubbed into the surgery and assisted all night. Postop OR team is in place and providing care. JMG is standing by to continue support.

v/r  
[REDACTED]

=====

[REDACTED] MD, MS, FACP, FCCP, FAASM CAPT, MC, USNR Deputy  
Commander, Joint Medical Group Deputy Surgeon, JTF GTMO

DSN: [REDACTED]  
COMM: [REDACTED]  
On-Island Office: [REDACTED]  
Mobile: [REDACTED]

NIPR [REDACTED]  
SIPR: [REDACTED]

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002237

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoB Review~~

**From:** Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
**To:** LTC USARMY (US); MAJ USARMY MEDCOM EACH (US);  
 CAPT USN NAVHOSP GTMO CU (US); Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)  
**Cc:** CAPT USN SOUTHCOM JTF GTMO CC (US); COL USARMY JS OCJCS (US);  
 Col USAF SOUTHCOM SC-CC (US); LTC USARMY SOUTHCOM SC-CC (US);  
 CAPT USN NAVHOSP GTMO CU (US); LTC USARMY SOUTHCOM JTF  
 GTMO JDG (US); Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US);  
 CDR USN SOUTHCOM JTF GTMO SJA (US)  
**Subject:** RE: JMG DACU SITREP (UNCLASSIFIED//FOUO/SENSITIVE)  
**Date:** Thursday, September 21, 2017 11:24:21 AM

Thanks

Just got an update from the Doc.

VR

-----Original Message-----

**From:** LTC USARMY (US)  
**Sent:** Thursday, September 21, 2017 4:43 AM  
**To:** MAJ USARMY MEDCOM EACH (US) Cashman, Edward  
 B RDML USN SOUTHCOM JTF GTMO CC (US) CAPT  
 USN NAVHOSP GTMO CU (US) Stevenson, Charles G Brig Gen USAF  
 SOUTHCOM JTF GTMO CC (US)  
**Cc:** CAPT USN SOUTHCOM JTF GTMO CC (US)  
 COL USARMY JS OCJCS (US) Col USAF  
 SOUTHCOM SC-CC (US) LTC USARMY SOUTHCOM SC-  
 CC (US) CAPT USN NAVHOSP GTMO CU (US)  
 LTC USARMY SOUTHCOM JTF GTMO JDG (US)  
 Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO  
 JDG (US) CDR USN SOUTHCOM JTF  
 GTMO SJA (US)  
**Subject:** RE: JMG DACU SITREP (UNCLASSIFIED//FOUO/SENSITIVE)

ALCON,

The patient is complaining of chest pains and is being moved to have a CT scan. I will update when the procedure is complete.

LTC

Sent from my T-Mobile 4G LTE Device

----- Original message -----

**From:** MAJ USARMY MEDCOM EACH (US)"  
**Date:** 9/19/17 3:17 PM (GMT-05:00)  
**To:** "Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)"  
 CAPT USN NAVHOSP GTMO CU (US)" "Stevenson,  
 Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)"  
**Cc:** CAPT USN SOUTHCOM JTF GTMO CC (US)"  
 COL USARMY JS OCJCS (US)" Col  
 USAF SOUTHCOM SC-CC (US)" LTC USARMY  
 SOUTHCOM SC-CC (US)" CAPT USN NAVHOSP

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoB Review~~

HADI-3-002238

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

GTMO CU (US)" [REDACTED] LTC USARMY (US)"  
 [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US)"  
 "Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO  
 JDG (US)" [REDACTED] CDR USN SOUTHCOM JTF  
 GTMO SJA (US)" [REDACTED]  
 Subject: RE: JMG DACU SITREP (UNCLASSIFIED//FOUO SENSITIVE)

RDML Cashman,

SITREP JMG DACU:

As CAPT [REDACTED] stated, this was a challenging surgical case. The patient has a complication which known to cervical spinal fusion. He has a left C5 nerve palsy. Clinically this means he has significant weakness of parts of his left arm. We obtained CT and plain film imaging which showed the hardware placement was without issue and decompression of the spinal cord was successful. There are not current surgical needs at this time for the cervical spine. Symptoms have improved from this AM already. The surgeons agree that with this type of injury the best treatment going forward is aggressive physical therapy. This injury typically improves with time to what extent is difficult to say. This will likely require an extension on the timeline we have for the physical therapist to provide for rehabilitative needs. No procedures for the lumbar spine will be done at this time to allow for recovery from current surgery.

V/R,

MAJ [REDACTED]

From: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
 Sent: Tuesday, September 19, 2017 6:22 AM  
 To: [REDACTED] CAPT USN NAVHOSP GTMO CU (US); Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)  
 Cc: [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED] COL USARMY JS OCJCS (US); [REDACTED] Col USAF SOUTHCOM SC-CC (US); [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CAPT USN NAVMED EAST PORS VA (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CAPT USN NAVHOSP PORS VA (US); [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] LTC USARMY (US); [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US); Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 Subject: RE: JMG DACU SITREP (UNCLASSIFIED//FOUO SENSITIVE)

Roger - thanks Doc,

Tracking. Saw the team that took over at 0500 this morning.

VR

-----Original Message-----

From: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
 Sent: Tuesday, September 19, 2017 8:10 AM  
 To: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US); [REDACTED]  
 Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)  
 Cc: [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); [REDACTED] COL USARMY JS OCJCS (US); [REDACTED] Col USAF SOUTHCOM SC-CC (US); [REDACTED] LTC USARMY SOUTHCOM SC-CC (US); [REDACTED] CAPT USN NAVMED EAST PORS VA (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CAPT USN NAVHOSP PORS VA (US)

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002239

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

[REDACTED] MAJ USARMY MEDCOM EACH (US)  
[REDACTED] LTC USARMY (US) [REDACTED]  
LTC USARMY SOUTHCOM JTF GTMO JDG (US) [REDACTED] Gabavics, Stephen Emil  
(Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US) [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US) [REDACTED]  
Subject: JMG DACU SITREP (UNCLASSIFIED//FOUO SENSITIVE)

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

RDML Cashman,  
SITREP JMG DACU:  
The patient underwent cervical spine fusion last night. He came out of the OR around 0400 and was recovering well. There were no major complications. Surgery was not easy, there was a relatively minor complication based on anatomy. Based on his recovery, the team would also like to repair his low-back with a fusion, perhaps as soon as Wednesday.  
The patient will stay for now at the hospital and not return to DACU until the neurosurgeon declares he is stable for transport.  
CAPT [REDACTED] was scrubbed into the surgery and assisted all night.  
Postop OR team is in place and providing care.  
JMG is standing by to continue support.

v/r  
[REDACTED]

=====

[REDACTED] MD, MS, FACP, FCCP, FAASM CAPT, MC, USNR Deputy Commander, Joint Medical Group Deputy Surgeon, JTF GTMO

DSN: [REDACTED]  
COMM: [REDACTED]  
On-Island Office: [REDACTED]  
Mobile: [REDACTED]

NIPR: [REDACTED]  
SIPR [REDACTED]

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002240

~~UNCLASSIFIED//Pending DoD Review~~

**From:** [REDACTED] CDR USN (US)  
**To:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Subject:** RE: Legal Meetings for Hadi (UNCLASSIFIED)  
**Date:** Tuesday, December 5, 2017 7:44:46 AM

---

CLASSIFICATION: ~~UNCLASSIFIED~~

SMOrrific,

Awesome. The RDML has been informed and we'll let the defense counsel know today. It's up to 26 on whether he accepts the meetings. Interested to hear his concerns though.

v/r,

[REDACTED]

[REDACTED]

CDR, JAGC, USNR  
Chief, Litigation Support  
JTF GTMO

-----Original Message-----

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Sent:** Monday, December 4, 2017 8:33 PM  
**To:** [REDACTED] CDR USN (US) [REDACTED]  
**Subject:** RE: Legal Meetings for Hadi (UNCLASSIFIED)

CLASSIFICATION: ~~UNCLASSIFIED~~

JAG-arama,

He has been cleared to be transported to and from. However, he has some concerns and I can discuss these with you at a more appropriate location ;)

SMO-tastic

-----Original Message-----

**From:** [REDACTED] CDR USN (US)  
**Sent:** Monday, December 4, 2017 1:04 PM  
**To:** [REDACTED] MAJ USARMY MEDCOM EACH (US) [REDACTED]  
**Subject:** Legal Meetings for Hadi (UNCLASSIFIED)

CLASSIFICATION: ~~UNCLASSIFIED~~

MAJ SMOtastic,

Just checking in with you on the status of Hadi and his ability to be transported to and from legal meetings. Just let me know!

Thanks.

v/r,

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002241

~~UNCLASSIFIED//Pending DoD Review~~



CDR, JAGC, USNR  
Chief, Litigation Support  
JTF GTMO

CLASSIFICATION: ~~UNCLASSIFIED~~  
CLASSIFICATION: ~~UNCLASSIFIED~~  
CLASSIFICATION: ~~UNCLASSIFIED~~

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002242

~~UNCLASSIFIED//Pending DoD Review~~

From: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
 To: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
 Cc: [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] LCDR USN NAVHOSP PORS VA (US);  
 [REDACTED] CDR USN SOUTHCOM JTF GTMO JMG (US); [REDACTED] CAPT USN NAVMED EAST  
 PORS VA (US); Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US); Stevenson,  
 Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)  
 Subject: RE: Medical Update  
 Date: Wednesday, October 25, 2017 9:38:19 AM

---

Sir,

BLUF: The cervical fusion has failed.

Just finished reviewing the evening's CT scan with LCDR [REDACTED] (NMCP Ortho Spine Surgeon); it does not look good. He will be putting together this AM a visual presentation of the scans that will best illustrate this issue.

There are essentially 3 COAs...

- 1) The patient wears a C-collar and we hope for the best (i.e., the plate stabilizes, doesn't perforate adjacent structures like the esophagus, and the bone doesn't get infected).
- 2) We go to the OR at USNH, get the hardware out of his neck (need to get the proprietary screw driver from NMCSP), he wears a C-collar, and we hope for the best.
- 3) If the patient were at NMCP (or any medical center that has the support systems in place to perform these complex procedures), he would go to the OR, get the hardware removed, get repositioned on a special OR table, and proceed with a C3-T2 posterior fusion. This is a BIG operation with a level of complexity and risk that surpasses previous interventions.

These COAs were briefly reviewed with the patient last night after the CT. He is appropriately concerned and scared about the prospects of additional surgery. He is now wearing his C-collar.

There is NO surgical emergency at this time. We have ample time to discuss the COAs and develop a plan. The prospect of attempting COA #3 at USNH scares the hell out of me.

VR [REDACTED]

-----Original Message-----

From: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
 Sent: Wednesday, October 25, 2017 8:54 AM  
 To: [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED]  
 [REDACTED] CDR USN SOUTHCOM JTF GTMO JMG (US); Gabavics, Stephen Emil (Steve) COL  
 USARMY SOUTHCOM JTF GTMO JDG (US)  
 Cc: Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)  
 Subject: Medical Update

Any initial evaluation from last night's CT scan?

VR

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002243



~~UNCLASSIFIED//Pending DoD Review~~

RDML Ed Cashman  
Commander, JTF Guantanamo  
Office: [REDACTED]  
Cell: [REDACTED]

---

HADI-3-002244

~~UNCLASSIFIED//Pending DoD Review~~

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**To:** [REDACTED] LCDR USN NAVHOSP PORS VA (US)  
**Subject:** RE: Movement of your patient  
**Date:** Thursday, October 26, 2017 2:40:10 PM

---

I agree

**From:** [REDACTED] LCDR USN NAVHOSP PORS VA (US)  
**Sent:** Thursday, October 26, 2017 10:17 AM  
**To:** [REDACTED] CDR USN SOUTHCOM JTF GTMO JMG (US)  
**Cc:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Subject:** RE: Movement of your patient

He is medically stable. He transfers independently, walks with assisted devices to bathroom independently. He sits in a chair for most of the day. So in my opinion, he is cleared to fly with corpsman support, with c-collar immobilization, in a seat or bed, whichever is easier. I would not anticipate any specialized equipment or supplies in his current medical state. SMO your thoughts?

LCDR [REDACTED] MD  
Adult and Pediatric Spine Surgery  
Naval Medical Center Portsmouth

-----Original Message-----

**From:** [REDACTED] CDR USN SOUTHCOM JTF GTMO JMG (US)  
**Sent:** Thursday, October 26, 2017 11:22 AM  
**To:** [REDACTED] LCDR USN NAVHOSP PORS VA (US); [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Cc:** [REDACTED] Col USAF SOUTHCOM SC-CC (US); [REDACTED] LTC USARMY SOUTHCOM SC-CC (US)  
**Subject:** Movement of your patient

CDR [REDACTED] and S SMO,

RDML Cashman also asked for a list of the medical personnel, equipment and supplies that might be needed for a MAC flight for your patient. Also in what condition/ position would he fly? A gurney? Hospital bed? Head of bed elevated 45 degrees?

Thanks for all.

V/r

CDR [REDACTED]

[REDACTED] MD, FACEP, FAAP  
CDR, MC, USNR  
Deputy Commander, Joint Medical Group  
Deputy Surgeon, JTF GTMO

DSN: [REDACTED]  
COMM: [REDACTED]  
On-Island Office: [REDACTED]

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002245

~~UNCLASSIFIED//Pending DoD Review~~

Cell: [REDACTED]

NIPR [REDACTED]  
SIPR [REDACTED]

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002246

~~UNCLASSIFIED//Pending DoD Review~~

**From:** Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)  
**To:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Subject:** RE: Neurosurgeon Summary  
**Date:** Wednesday, September 6, 2017 10:47:13 AM

[REDACTED] thank you very much, this will be important to keep on hand.

VR  
COL G

Sent from my T-Mobile 4G LTE Device

----- Original message -----

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)"  
**Date:** 9/6/17 10:45 AM (GMT-05:00)  
**To:** "Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)"  
[REDACTED]  
**Subject:** Neurosurgeon Summary

COL G,

I had our Neurosurgeon summarize the recent events in case we need to justify up the chain our recent events as part of AARs. I wanted to provide this to you to have for your records as well. He does not have access to the high side so this is a generalized summary. Safe travels.

V/R,  
[REDACTED]

Forward from Neurosurgeon:

Pt with lumbar stenosis long standing previously diagnosed many years ago. Unfortunately his symptoms have been progressing over the last 3 weeks to involve increasing weakness and numbness. On Sunday, his symptoms worsened to include urinary incontinence, saddle anesthesia and weakness. These are the signs and symptoms of Cauda Equina syndrome (CES) which is a surgical emergency. His symptoms improved already within 12 hours from surgery. The natural course for patients with lumbar spondylosis is that the symptoms usually worsen slowly and gradually. It is not the normal course for it to progress to CES. Onset of these symptoms is unpredictable even in severe lumbar stenosis which this patient clearly had on CT Myelogram. I do not believe that this could have been expected or prevented. Can provide references upon my return for any further questions.

LCDR [REDACTED] MC, USN  
Neurosurgeon  
NMC Portsmouth, VA

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002247

~~UNCLASSIFIED//Pending DoD Review~~

**From:** [REDACTED] [CDR USN \(US\)](#)  
**To:** [REDACTED] [MAJ USARMY MEDCOM EACH \(US\)](#)  
**Subject:** RE: New Memo (UNCLASSIFIED)  
**Date:** Tuesday, October 24, 2017 3:14:25 PM

---

CLASSIFICATION: ~~UNCLASSIFIED~~

Waiting with bated breath.

v/r,

[REDACTED]

-----Original Message-----

**From:** [REDACTED] MAJ USARMY MEDCOM EACH (US)  
**Sent:** Tuesday, October 24, 2017 2:37 PM  
**To:** [REDACTED] CDR USN (US) [REDACTED]  
**Subject:** RE: New Memo (UNCLASSIFIED)

[REDACTED]

Big changes today, will have more information for you later tonight/tomorrow AM.

V/R,  
SMO

-----Original Message-----

**From:** [REDACTED] CDR USN (US)  
**Sent:** Tuesday, October 24, 2017 10:55 AM  
**To:** [REDACTED] MAJ USARMY MEDCOM EACH (US) [REDACTED]  
**Subject:** New Memo (UNCLASSIFIED)

CLASSIFICATION: ~~UNCLASSIFIED~~

SMO,

Can you please draft up a new update memo which provides a medical update and focuses on the fact that, absent changes to his medical condition, Hadi will be able to meet with his legal counsel in a CJTF approved attorney-client meeting space beginning 1 November?

v/r,

[REDACTED]

CLASSIFICATION: ~~UNCLASSIFIED~~

CLASSIFICATION: ~~UNCLASSIFIED~~

~~UNCLASSIFIED//Pending DoD Review~~

HADI-3-002248

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

From: Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)  
To: [REDACTED] LTC USARMY (US); [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US); Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
Cc: [REDACTED] MAJ USARMY MEDCOM EACH (US); [REDACTED] COL USARMY SOUTHCOM JTF GTMO J3 (US)  
Subject: RE: Patient Status  
Date: Tuesday, September 19, 2017 4:56:31 AM

Roger. Thanks

Sent from my T-Mobile 4G LTE Device

----- Original message -----

From: [REDACTED] LTC USARMY (US)" [REDACTED]  
Date: 9/19/17 4:19 AM (GMT-05:00)  
To: "Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)" [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US)" [REDACTED] CAPT USN NAVHOSP GTMO CU (US)" [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US)" [REDACTED] "Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)" [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)" [REDACTED]  
Cc: [REDACTED] MAJ USARMY MEDCOM EACH (US)" [REDACTED] COL USARMY SOUTHCOM JTF GTMO J3 (US)" [REDACTED]  
Subject: RE: Patient Status

Sir,

The surgery is finally done and the patient is recovering. Per SMO it was not an easy procedure and there may be complications from the surgery that surface in the next few days. Follow on procedures may be required based on what, if any, complications arise. I'm not a doctor so I will leave the full explanation to them.

Based on how the patient recovers the docs are going to talk to him on WEDS about a follow on surgery to his lower back to stabilize it. The docs would like to do that surgery on weds.

LTC [REDACTED]

Sent from my T-Mobile 4G LTE Device

----- Original message -----

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002249

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoB Review~~

From: "Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)"  
[REDACTED]  
Date: 9/18/17 7:58 PM (GMT-05:00)  
To: [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US)"  
[REDACTED] CAPT USN NAVHOSP GTMO CU  
(US)" [REDACTED] CAPT USN SOUTHCOM JTF  
GTMO CC (US)" [REDACTED] LTC USARMY (US)"  
[REDACTED] "Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF  
GTMO CC (US)" [REDACTED]  
CDR USN SOUTHCOM JTF GTMO SJA (US)" [REDACTED]  
Cc: [REDACTED] MAJ USARMY MEDCOM EACH (US)"  
[REDACTED] COL USARMY SOUTHCOM JTF GTMO  
J3 (US)" [REDACTED]  
Subject: RE: Patient Status

Roger. Thanks.

Sent from my T-Mobile 4G LTE Device

----- Original message -----

From: [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US)"  
[REDACTED]  
Date: 9/18/17 7:50 PM (GMT-05:00)  
To: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)"  
[REDACTED] CAPT USN SOUTHCOM JTF GTMO  
CC (US)" [REDACTED] LTC USARMY (US)"  
[REDACTED] "Cashman, Edward B RDML USN SOUTHCOM JTF GTMO  
CC (US)" [REDACTED] "Stevenson, Charles G Brig Gen USAF  
SOUTHCOM JTF GTMO CC (US)" [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)"  
Cc: [REDACTED] MAJ USARMY MEDCOM EACH (US)"  
[REDACTED] COL USARMY SOUTHCOM JTF GTMO  
J3 (US)" [REDACTED]  
Subject: Patient Status

Gentlemen -

Patient in route to hospital.

v/r,

[REDACTED]

Sent from my T-Mobile 4G LTE Device

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoB Review~~

HADI-3-002250



~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

----- Original message -----

From: [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US)"  
[REDACTED]  
Date: 9/15/17 8:46 PM (GMT-05:00)  
To: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)"  
[REDACTED] CAPT USN SOUTHCOM JTF GTMO  
CC (US)" [REDACTED] LTC USARMY (US)"  
[REDACTED] "Cashman, Edward B RDML USN SOUTHCOM JTF GTMO  
CC (US)" [REDACTED] "Stevenson, Charles G Brig Gen USAF  
SOUTHCOM JTF GTMO CC (US)" [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)"  
Cc: [REDACTED] MAJ USARMY MEDCOM EACH (US)"  
Subject: Patient Update 1300 - 16 Sep

Gentlemen,

Like meet at the CE conference room to discuss options given current refusal. Team has COA to present for consideration. COA low risk and neurosurgeon approved. Operationally feasible.

Sincerely,

[REDACTED]

Sent from my T-Mobile 4G LTE Device

----- Original message -----

From: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)"  
[REDACTED]  
Date: 9/14/17 12:01 PM (GMT-05:00)  
To: [REDACTED] CAPT USN SOUTHCOM JTF GTMO CC (US)"  
[REDACTED] LTC USARMY (US)"  
[REDACTED] LTC USARMY SOUTHCOM JTF GTMO  
JDG (US)"  
Cc: [REDACTED] MAJ USARMY MEDCOM EACH (US)"  
Subject: RE: Accepted: Walk-Through with LTC [REDACTED] (~~UNCLASSIFIED//FOUO SENSITIVE~~)

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

Gents,

LIMDIS

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoD Review~~

HADI-3-002251



~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoB Review~~

Since I'm going tomorrow, and I don't know where I'm going, can I ride with someone?

And if so, do we meet at HQ at 0645? Or somewhere else?

v/r

█

-----Original Appointment-----

**From:** Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)

**Sent:** Wednesday, September 13, 2017 5:23 PM

**To:** Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US); Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US); Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US); █ CAPT USN SOUTHCOM JTF GTMO CC (US); █ SGTMAJ USMC SOUTHCOM JTF GTMO CC (US); █ LTC USARMY (US); █ LTC USARMY SOUTHCOM JTF GTMO JDG (US); █ CAPT USN NAVHOSP GTMO CU (US)

**Subject:** Accepted: Walk-Through with LTC █ ~~UNCLASSIFIED//FOUO SENSITIVE~~

**When:** Friday, September 15, 2017 7:00 AM-7:30 AM (UTC-05:00) Eastern Time (US & Canada).

**Where:** Extensions

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

RDML Cashman,

Pending approval from CAPT █ I will be on the Camp walk-through to assess for the feasibility of conversion of a camp area to an ADA compliant space.

v/r

█

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY SENSITIVE~~

~~UNCLASSIFIED//FOUO/SENSITIVE/Pending DoB Review~~

HADI-3-002252

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 To: [REDACTED] MAJ USARMY MEDCOM EACH (US); Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US); [REDACTED] LTC USARMY (US); [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
 Cc: [REDACTED] CDR USN (US); [REDACTED] LCDR USN (US); [REDACTED] CPT USARMY SOUTHCOM JTF GTMO SJA (US); [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 Subject: RE: Special Requests \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* (UNCLASSIFIED//FOUO)  
 Date: Tuesday, September 26, 2017 12:00:01 PM

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

Copy all - I was just trying to call you. We are not approving the defense requested "visit" so there will likely be MTF on all this. As noted - there is no litigation planned until January now so that affects the calculus substantially. Thanks for the update.

Vr

[REDACTED]

-----Original Message-----

From: [REDACTED] MAJ USARMY MEDCOM EACH (US)  
 Sent: Tuesday, September 26, 2017 11:55 AM  
 To: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 [REDACTED] Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US); [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
 [REDACTED] LTC USARMY (US)  
 [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US)  
 [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
 Cc: [REDACTED] CDR USN (US); [REDACTED] LCDR USN (US)  
 [REDACTED] CPT USARMY SOUTHCOM JTF GTMO SJA (US)  
 Subject: RE: Special Requests \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* (UNCLASSIFIED//FOUO)

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

ALCON,

He has not mentioned it so far today. My thoughts are that he was just extubated yesterday and needs to recover first. He is not moving anywhere today or likely soon. It will be at least a few weeks until he will be able to be transported to a legal meeting. Secondly, his commission has been cancelled for OCT I am not certain why an urgent meeting would be needed but perhaps SJA could better answer that. COL G to answer your question, he is still writing and receiving mail from his legal team nearly daily. Please let me know if I can be of further assistance.

V/R,

[REDACTED]

-----Original Message-----

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 Sent: Monday, September 25, 2017 10:14 PM  
 To: Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)  
 [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
 [REDACTED] LTC USARMY (US)  
 [REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US)  
 [REDACTED] MAJ USARMY MEDCOM EACH (US)  
 Cc: [REDACTED] CDR USN (US); [REDACTED] LCDR USN (US)  
 [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)  
 [REDACTED] CPT USARMY SOUTHCOM JTF GTMO SJA (US)

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002253

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

Subject: RE: Special Requests \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* (UNCLASSIFIED//FOUO)

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

Gentlemen

We should discuss this in the morning. I agree that the detainee wanting to meet with his attorneys is not determinative of anything, but I think it is a relevant factor in assessing when and how he may eventually be able to meet with the attorneys in an approved location consistent with existing SOPs. We need to make sure we have all the medical facts straight and can decide what COAs are viable from there.

I have one member leaving on the early ferry but will be into the office shortly after 0800 and I will come back up on the net then to try to sort through this.

Vr

-----Original Message-----

From: Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)

Sent: Monday, September 25, 2017 9:45 PM

To: [REDACTED] CAPT USN NAVHOSP GTMO CU (US) [REDACTED]  
LTC USARMY (US) [REDACTED] LTC USARMY SOUTHCOM JTF GTMO  
JDG (US) [REDACTED]

Cc: [REDACTED] MAJ USARMY MEDCOM EACH (US) [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US) [REDACTED]

Subject: Re: Special Requests \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* (UNCLASSIFIED//FOUO)

How in the hell would he know the legal team is on island? This had to have been scheduled previously.

I do not see this changing anything.

VR

Steve

Sent from my T-Mobile 4G LTE Device

----- Original message -----

From: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)" [REDACTED]

Date: 9/25/17 9:36 PM (GMT-05:00)

To: [REDACTED] LTC USARMY (US)" [REDACTED] "Gabavics, Stephen Emil (Steve) COL  
USARMY SOUTHCOM JTF GTMO JDG (US)" [REDACTED] LTC  
USARMY SOUTHCOM JTF GTMO JDG (US)" [REDACTED]

Cc: [REDACTED] MAJ USARMY MEDCOM EACH (US)" [REDACTED]  
[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)" [REDACTED]

Subject: RE: Special Requests \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\* (UNCLASSIFIED//FOUO)

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

Forwarding to SJA since he was previously in receipt of a formal request for visit.

v/r

-----Original Message-----

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002254

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

From: [REDACTED] LTC USARMY (US)  
Sent: Monday, September 25, 2017 9:35 PM  
To: Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)  
[REDACTED] LTC USARMY SOUTHCOM  
JTF GTMO JDG (US)  
Cc: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)  
[REDACTED] MAJ USARMY MEDCOM  
EACH (US)  
Subject: RE: Special Requests \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
~~(UNCLASSIFIED//FOUO)~~

Sir,

For your SA. 26 is aware his lawyers are on island according to SMO. He has been demanding (SMO'S words) to see them.

LTC [REDACTED]

Sent from my T-Mobile 4G LTE Device

----- Original message -----

From: "Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)"  
[REDACTED]  
Date: 9/25/17 8:34 PM (GMT-05:00)  
To: [REDACTED] LTC USARMY (US)" [REDACTED]  
[REDACTED] LTC USARMY SOUTHCOM JTF GTMO JDG (US)"  
Cc: [REDACTED] CAPT USN NAVHOSP GTMO CU (US)"  
[REDACTED] MAJ USARMY MEDCOM  
EACH (US)" [REDACTED]  
Subject: Fwd: Special Requests \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
~~(UNCLASSIFIED//FOUO)~~

Gents please see below and get word out in case the defense team tries to visit.

VR  
COL G

Sent from my T-Mobile 4G LTE Device

----- Original message -----

From: "Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)"  
[REDACTED]  
Date: 9/25/17 8:28 PM (GMT-05:00)  
To: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)"  
Cc: "Gabavics, Stephen Emil (Steve) COL USARMY SOUTHCOM JTF GTMO JDG (US)"  
[REDACTED]  
Subject: RE: Special Requests \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*  
~~(UNCLASSIFIED//FOUO)~~

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002255

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

Pls make sure we get word to the Guard Force not to let anyone in who is not on the access list, but don't be provoked if someone shows up and acts like a butt.

Sent from my T-Mobile 4G LTE Device

----- Original message -----

From: [REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)"

Date: 9/25/17 7:59 PM (GMT-05:00)

To: "Cashman, Edward B RDML USN SOUTHCOM JTF GTMO CC (US)"

[REDACTED] "Gabavics, Stephen Emil (Steve) COL USARMY  
SOUTHCOM JTF GTMO JDG (US)" [REDACTED]

Cc: "Stevenson, Charles G Brig Gen USAF SOUTHCOM JTF GTMO CC (US)"

[REDACTED] CDR USN (US)"

[REDACTED] LCDR USN (US)"

[REDACTED] CDR USN

SOUTHCOM JTF GTMO SJA (US)"

[REDACTED] MAJ USARMY MEDCOM EACH (US)"

[REDACTED] CAPT USN NAVHOSP GTMO CU (US)"

[REDACTED] CAPT USN NAVHOSP GTMO

CU (US)" [REDACTED] CPT USARMY

SOUTHCOM JTF GTMO SJA (US)"

Subject: FW: Special Requests \*\*\*ATTORNEY-CLIENT PRIVILEGE\*\*\*

~~(UNCLASSIFIED//FOUO)~~

CLASSIFICATION: ~~UNCLASSIFIED//FOR OFFICIAL USE ONLY~~

Gentlemen

BLUF: Attached is a request from 10026's defense team indicating they arrived on island today (staying through Wednesday) and would like to "visit" him tomorrow or Wednesday at whatever location he is currently recuperating. While I think it is understandable that they would want to visit him to try to continue to build their rapport with him as his counsel, there is no court order requiring us to facilitate such a visit and I recommend that we deny this request. I am also not sure whether, even if you decide you want to grant such a request, that it is medically advisable so in the interest of time I am cc'ing the SMO and JMG Commander/Deputy for input.

It would obviously be a deviation from our current SOPs to authorize such a visit, but to be fair, with a case like this we are not in, nor likely soon to be in, a "standard" set of circumstances. I anticipate there will be continuous interest and building pressure to eventually allow some kind of visit if 10026 does not eventually recover to the point where he is able (and medically cleared) to go to an approved meeting location. I also anticipate that if 10026 does not regain the capability to correspond with his defense team, then this pressure will likely increase faster and we will need to decide the most appropriate way to maintain transparency under these challenging circumstances.

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002256

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

Even if the medical folks believe such a visit is possible, I recommend we deny this specific request with language along the lines below. That said, we probably need to draft a current update memo for forwarding to SC for follow-on distribution as deemed appropriate to facilitate some information flow.

Admiral - if you concur, we will send the denial and draft an updated memo regarding current status and prognosis for your review.

Standing by to answer any questions.

Vr  
[REDACTED]

\*\*\*\*\*

Your request to visit your client was received. Such a visit on the dates indicated is denied. Updated information relevant to when your client may be able to participate in attorney-client meetings in approved locations, and follow-on legal proceedings, is forthcoming.

-----Original Message-----

From: SOUTHCOM NS Guantanamo Bay JTF GTMO SJA Mailbox LSS

Sent: Monday, September 25, 2017 4:57 PM

To: [REDACTED] CDR USN (US)

[REDACTED] LCDR USN (US)

[REDACTED] CDR USN SOUTHCOM JTF GTMO SJA (US)

Subject: FW: Special Requests ~~(UNCLASSIFIED)~~

26's team sent another meeting request.

-----Original Message-----

From: Cooper, Aimee M CDR OSD OMC Defense [REDACTED]

Sent: Monday, September 25, 2017 4:53 PM

To: SOUTHCOM NS Guantanamo Bay JTF GTMO SJA Mailbox LSS

Cc: Kegler, Julie A CTR (US) [REDACTED]

Subject: RE: Special Requests ~~(UNCLASSIFIED)~~

Good Afternoon,

Attached, please find the special request form in accordance with the e-mail exchange below.

As always, thank you for your time and attention in this matter.

V/r CDR Cooper

Aimee Cooper

CDR JAGC USN

Military Commissions Defense Organization

-----Original Message-----

From: SOUTHCOM NS Guantanamo Bay JTF GTMO SJA Mailbox LSS

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

HADI-3-002257

~~UNCLASSIFIED//FOUO/Pending DoD Review~~

[REDACTED]  
Sent: Friday, September 15, 2017 4:59 PM  
To: Cooper, Aimee M CDR OSD OMC Defense [REDACTED]  
Subject: Special Requests (~~UNCLASSIFIED~~)

CLASSIFICATION: ~~UNCLASSIFIED~~

CDR Cooper,

We have been notified by OMC-P that you may have an additional special request regarding your client, ISN 10026. We request you utilize the special request form to submit any such request and we will respond in a timely manner.

V/R,  
LSS

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DEPARTMENT OF DEFENSE  
OFFICE OF MILITARY COMMISSIONS  
4800 MARK CENTER DRIVE  
ALEXANDRIA, VA 22304-2100

DEC 04 2017

## MEMORANDUM FOR MILITARY COMMISSION DEFENSE TEAM(S)

SUBJECT: Convening Authority Guidance for Use of MRI Relating to Commissions Litigation

1. **Background:** A mobile, 1.5T magnetic resonance imaging (MRI) scanner arrived at Naval Station Guantanamo Bay in mid-October 2017 and will remain available until approximately mid-February 2018. The MRI is provided to comply with a judicial order in the case of *United States v. Al Nashiri*, but use of the MRI by defense teams for other ongoing Commissions cases is potentially available. The following guidance is provided to clarify the utilization process.

2. **Applicability:** This guidance applies to all defense teams seeking MRI images on behalf of their client related to litigation currently pending, or in anticipation of litigation, before a Military Commission convened under the Military Commissions Act of 2009 (as amended). This guidance does not apply to MRI images created for the purpose of medical treatment of any detainee at the request of a health care provider.

3. **Procedures:** Each defense team that seeks an MRI scanned image during the available time period must abide by the following guidance:

a. Once ordered by the Court, requests to schedule an MRI scan must be routed through the JTF-GTMO Litigation Support division via email message to: [REDACTED]

[REDACTED] If an MRI is not currently ordered by the Court, a defense team may still request MRI imaging through the Convening Authority via email message to: Colonel Matt van Dalen, [REDACTED]

b. No written or verbal communications made by defense counsel, the detainee, or any defense team member prior to, during, or after the MRI scanning process which is made outside of the designated attorney-client meeting area(s) shall be deemed to be privileged, confidential, or protected in any way from disclosure.

c. All scheduling requests must be made at least 14 calendar days in advance of the desired neuroimaging date(s) to allow coordination between the Office of Military Commissions, the Joint Detention Group, and the on-call, CONUS-based MRI technician team that will deploy to carry out the scanning. A request for a specific date does not guarantee scheduling on that particular date; instead, a confirmation of an approved date will be provided to the requester after all necessary coordination with all parties occurs. The more lead time that is provided, the greater the chances of the request being accommodated.

d. Requests must outline the type of scanning or neuroimaging desired, specific formats (if known), and location(s) on body of desired scan(s) in sufficient detail to allow a trained MRI technician to carry out the imaging without further information or input.

e. All requests for MRI imaging must be accompanied by the MRI screening form found in Attachment 1.

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- a. All detainees undergoing non-medically indicated MRIs will have a medical screening exam conducted by the Senior Medical Officer in an effort to minimize any complications from the testing. This testing will necessarily include a full body X-Ray. If the detainee refuses the X-Ray, or there is any concern that is raised by the exam, the detainee and his legal team will be informed of the concern and the potential risks associated with moving forward with the MRI.
- f. Prior to entering the mobile MRI trailer for imaging, all detainees shall be subject to a final metal detection sweep of the body to help ensure no interference with the powerful MRI magnet occurs.
- g. Due to physical space limitations and security requirements, all MRI scans of detainee(s) will only be performed in the presence of the MRI technician operating the scanner, the approved neuro radiologist, a government interpreter, and necessary security personnel. Any exceptions to this requirement must be approved in advance utilizing the special request form found in Attachment 2.
- h. Once scheduled, MRI imaging will be performed consistent with the approved descriptions of requested imaging from paragraph 3(d) above.
- i. The technician operating the MRI scanner, in consultation with an on-site radiologist, shall be the sole arbiter as to the sufficient quality, completeness, and accuracy of the scans performed on the day the neuroimaging is carried out. If additional or follow-up MRI scanning is desired, a new request must be submitted in accordance with the above-described SOPs (special requests submitted in a timely manner to allow most efficient use of on-site radiology techs will receive priority consideration).
- j. The results of the MRI imaging will be stored on a DVD disk without any additional identifying information, marked as UNCLASS//FOUO, and turned over to the requesting party. Because the information stored on the DVD was recorded for potential defense mitigation purposes and not for medical treatment, it will not be placed into detainee medical files, or reviewed by medical personnel for the purpose of diagnosis or treatment. No copies will be retained by the Government (JTF or OMCP), and such images are specifically not covered by any current preservation order. To the extent technologically possible, data related to defense images will be purged from the MRI system at the end of each session.

  
GARY D. BROWN  
Chief of Staff  
Office of Military Commissions

Attachments:

- 1. MRI Screening Form
- 2. Sample Request for Exception to Policy—Additional Individual Present During MRI Scan

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## Attachment 1

Magnetic Resonance (MRI) Screening Form

MRI scanners use very strong magnetic fields that may be hazardous to persons entering the MRI examination room. Therefore all individuals must complete a screening form prior to entering the MRI scanner room.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Wt: \_\_\_\_\_ Ht: \_\_\_\_\_  
 Last First Middle Day/Month/Year  
 Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Please answer every item. (Use back of form if needed).

Kidney disease	<input type="checkbox"/> Yes <input type="checkbox"/> No	Multiple Myeloma	<input type="checkbox"/> Yes <input type="checkbox"/> No
Hypertension	<input type="checkbox"/> Yes <input type="checkbox"/> No	Transplanted organ	<input type="checkbox"/> Yes <input type="checkbox"/> No
Diabetes mellitus	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Have you EVER had any surgery? ☐ Yes ☐ No  
 If yes, please describe and list date: \_\_\_\_\_  
 Have you EVER worked with metal? (Sheet metal, welding, etc) ☐ Yes ☐ No  
 If yes, please describe: \_\_\_\_\_  
 Have you EVER worked with metal had an injury to your eye? ☐ Yes ☐ No  
 If yes, please describe: \_\_\_\_\_  
 Had an allergic reaction to a Radiographic contrast or Benadryl? ☐ Yes ☐ No  
 If yes, please describe: \_\_\_\_\_  
 Have you ever had an MRI? If yes, when? \_\_\_\_\_ Where? \_\_\_\_\_ ☐ Yes ☐ No  
 Do you get anxious or nervous in confined places? ☐ Yes ☐ No  
 Do you have any allergies? ☐ Yes ☐ No  
 If yes, please list: \_\_\_\_\_  
 Do you have asthma? ☐ Yes ☐ No  
 Are you taking any medications? ☐ Yes ☐ No

Cardiac Pacemaker	<input type="checkbox"/> Yes <input type="checkbox"/> No	Implanted Cardiac Defibrillator	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any type of eye or ear implant	<input type="checkbox"/> Yes <input type="checkbox"/> No	Removable dental work	<input type="checkbox"/> Yes <input type="checkbox"/> No
Breathing or motion problems	<input type="checkbox"/> Yes <input type="checkbox"/> No	Liver disease	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any medicine pump under the skin	<input type="checkbox"/> Yes <input type="checkbox"/> No	Acupuncture Needles	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bio- or neuro-stimulator	<input type="checkbox"/> Yes <input type="checkbox"/> No	Aneurysm Clips	<input type="checkbox"/> Yes <input type="checkbox"/> No
Medication patch	<input type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Heart Valve	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cochlear implant	<input type="checkbox"/> Yes <input type="checkbox"/> No	Artificial limb	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any type of chest coil filter	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hearing Aid	<input type="checkbox"/> Yes <input type="checkbox"/> No
Penile implant	<input type="checkbox"/> Yes <input type="checkbox"/> No	Staples	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tattoo	<input type="checkbox"/> Yes <input type="checkbox"/> No, if yes, when? _____		
Body Piercing	<input type="checkbox"/> Yes <input type="checkbox"/> No, if yes, where? _____		
Any other implanted metal?	<input type="checkbox"/> Yes <input type="checkbox"/> No, if yes, list: _____		

**Females:**  
 Are you possibly pregnant? ☐ Yes ☐ No Breast feeding ☐ Yes ☐ No  
 Date last menstrual cycle: \_\_\_\_\_ IUD/Disphragm/Pectary ☐ Yes ☐ No  
 Oral contraceptives or hormone treatment ☐ Yes ☐ No Breast implants ☐ Yes ☐ No

**IMPORTANT SAFETY INSTRUCTIONS:**  
 No metallic support devices may accompany patient into the magnet (i.e. IV Pump). On the day of your exam, DO NOT wear any jewelry, dentures, hair pins, dog tags, hearing aids, eye makeup, hair spray, magnetic nail polish or hair oils. You will be advised or required to wear hearing protection during the MRI examination. Your physician will be notified in case of any no-shows. Your MRI procedure may require you to receive an IV injection of contrast medium, usually gadolinium based. Please consult the MRI staff should you have any questions. All external metal piercings must be removed! No exceptions.

I attest that the above information is correct to the best of my knowledge.

Patient's or Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

For Official Use only:  
 Patient Education Performed ☐ Yes ☐ No  
 Contrast Agent Used ☐ Yes ☐ No Agent Name: \_\_\_\_\_ Dose: \_\_\_\_\_ GFR: \_\_\_\_\_  
 Signature of MRI Level 2 Personnel: \_\_\_\_\_

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**Attachment 2**

MEMORANDUM FOR THE CONVENING AUTHORITY

FROM:

SUBJECT: Request for Exception to MRI Standard Operating Procedures

In the matter of *United States v.* \_\_\_\_\_, I request an exception to paragraph 3(h) of the Guidelines for MRI Use to allow \_\_\_\_\_ to be present within the MRI trailer during the scanning procedure, subject to security requirements.

The justification for this request is as follows:

The request is APPROVED / DISAPPROVED.

\_\_\_\_\_  
Printed Name:  
Office of Military Commissions  
Office of the Convening Authority

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this email in error, please notify this office immediately by return email  
(see 5 U.S.C. § 552 and Army Regulations 25-55 and 27-26).

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HADI-3-002264

Filed with TJ  
4 January 2019

Appellate Exhibit 131E (al Hadi)  
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