

Thursday, December 1st, 2011 | Posted by [MRG Editorial Staff](#)

The CIA, AMF and NIH Implants

Source: RandallMorton.com

Dave Larson's investigation of the Central Intelligence Agency (CIA), Alfred Mann Foundation (AMF), and National Institutes of Health (NIH).

The Alfred Mann Foundation (AMF) held contracts from William Heetderks at the National Institutes of Health (NIH). NIH funds the Alfred Mann Foundation which is a CIA Special Access Program (SAP) developer of implants under Naval Space Warfare (SPAWAR) contract #N6600106C8005. Alfred Mann has publicized the development of millimetre sized radio controlled and powered implants. Dave Larson has publicized submillimeter implants surgically removed from him while working for NIH.

The Alfred Mann Foundation contract was closely integrated with the cortical/visual prosthesis contract of Phil Troyk at the Pritzker Institute/IIT. *The device specified and designed in this contract has significantly higher packaging and functional density (is smaller) than any other implantable neural prosthesis previously developed.*

See AMF webpage

Special Access Program CIA Biomedical Sources and Methods.htm

Summary

On March 18, 2008, the Central Intelligence Agency responded in writing to a Larson Media Freedom of Information Act request. The document discloses that the CIA's use of biomedical intellectual property developed at the Alfred Mann Foundation, Second Sight LLC, Advanced Bionics, and under Naval Space Warfare (SPAWAR) contract #N6600106C8005 is "currently and properly classified pursuant to an executive order in the interest of national security" and applies to the CIA Director's "statutory obligation to protect from disclosure, intelligence sources and methods". [View CIA Document](#) The technology, developed under the DARPA programs of Tony Tether, Col. Geoffrey Ling and N.I.H programs of William Heetderks have been protected as a Defense "Special Access Program"¹ (SAP), which is the official terminology for a "black project". The research has resulted in implantable devices that are millimeter and submillimeter in size [\(click to view\)](#), can be surreptitiously implanted¹⁰, are fabricated in a manner that the devices cannot be detected or localized by clinical medical or radiology techniques and provides a shocking amount of surveillance capability regarding a subjects activities which may include visual and auditory biofeedback data. Additionally, the devices are capable of delivering testosterone or any other biological agent. [View testosterone Document](#)

The FCC has provided a bandwidth allocation allowing remote wireless data communication [click to view](#). Additionally, the devices include a method for delivery of testosterone³ or any other biological agent for behavior modification and tactical weapon applications [click to view](#). The SAP holds “unacknowledged”² status and statutory disclosure mandates to Congress were “waived”⁴. Under the program, Department of Defense components misappropriated monies that were allocated by Congress for Children’s Health research, engaged in unlawful research efforts, and the failure to disclose the SAP activities to Congress violates U.S. Title 10 (Subtitle A, Part I, Chapter 2, § 119). In 2006, Russel Tice, a NSA and DIA Agent who worked within SAP’s attempted to disclose to Congressional Members that NSA Director Michael Hayden was engaging in unconstitutional and unlawful acts and using SAP to mask illegality. While Tice couldn’t publicly disclose details, media interviews revealed that his specialty was telemetry and sensors and that his disclosure would be far more shocking than the NY Times story disclosing that Bush was circumventing FISA and wiretapping Americans without a warrant. Larson Media founder Dave Larson became involved in very early research efforts in March of 1997 when Gerald Loeb of the Alfred Mann Foundation implanted a quantity of small millimeter sized biomedical devices in his person for research purposes while under NIH contract. Some of the devices became infected and were removed by General Practice Physicians, however many residual devices remain implanted and have been misused in retaliation and reprisal for whistleblower efforts. [View medical documents](#) Additionally the Bush Administration has obstructed hundreds of good faith based efforts to seek appropriate resolution, has derailed civil motions for injunctive relief and which sought no monetary damages, has obstructed investigations which were eagerly initiated by the FBI, has prevented the FBI from submitting recovered devices to the FBI crime lab, and has continued to engage in acts of torture domestically.

SPECIAL ACCESS Evidence Larson v_ CIA, FCC, Mann.htm

Evidence Summary

1. Complainant has a quantity of small biomedical devices that were implanted for research purposes in March 1997 by Dr. Gerald Loeb under a Special Access Program that holds “unacknowledged” classification status. Physicians have removed some of the devices, however some remain residually implanted due to complications and have yet to be removed. Substantial medical records document the surgical removal of devices and complications caused by remaining, residual devices which cannot be removed. [View Medical Documents](#)
2. Research efforts at the Alfred Mann Foundation have personnel using FCC regulated RF spectrum to remotely interact with these devices using experimental FCC license WD2XLW and 216-225MHz spectrum. [View FCC Document](#)
3. The research has been presented to the public and to Congress as “medical technology”, however it was later discovered that the program was a Defense “Special Access Program” (SAP) intended to develop defense and intelligence applications. When complainant discovered that elements of the program were being entirely concealed from Congress in violation of U.S. Title 10 (Subtitle A, Part I, Chapter 2, § 119), complainant sought to disclose unlawful domestic research and misappropriation of funds to appropriate Congressional members.
4. Personnel affiliated with the Mann Foundation DOD/CIA contracts began using devices residually implanted in plaintiff in a cruel and malicious manner to willfully inflict pain in

retaliation and reprisal for complainant whistleblower efforts. This repeated unlawful behavior has caused complainant to file [police reports](#), phone 911 in response to these incidents, meet with Federal Authorities, and has resulted in a [DOD Inspector General investigation case #103586](#). In 2002, the technology developed under the program transitioned to the current status of “sources and methods” employed by the CIA as part of the detainee interrogation program. [View CIA Document](#) The implantable devices allow surveillance with significant information and data on a subjects activity with auditory and visual biofeedback data attainable via a back-telemetry link. Additionally, the use of electrical stimulus and delivery of testosterone in a automated, closed loop fashion provides a torture/interrogation method that can be programmed to loop endlessly.

5. Alfred Mann and affiliated personnel have repeatedly contacted complainant via HAM radio (both parties are FCC licensed operators) to threaten physical harm and loss of property unless complainant remains silent about the unlawful acts occurring as part of “The Program”. Additionally, Intelligence personnel have asserted that review or investigation by Congress, the Judicial branch, or the FBI would jeopardize national security and have invoked provisions to obstruct investigation and prevent all oversight. Intelligence personnel continue to obstruct any congressional or judicial review and continue to physically harm complainant and misuse national security provisions to conceal ongoing criminal acts. A new civil motion has been prepared and will be filed under seal February 20, 2009 in U.S. District Court.

Larsonmedia\AMF Research.htm

Alfred Mann Foundation

Clinical Studies to Improve and Restore Function

Forty-five devices were implanted in subject with the intent to restoring function to paralyzed upper limbs. Between 5 and 7 microstimulators were implanted on the nerve or motor point of the affected muscles in each of seven patients to exercise the limb. The study demonstrated that exercising the paralyzed limb with these devices for 2 hours per day for 12 weeks, significantly reduced the severity of the spasticity in several of the patients, and partially reduced the severity of the spasticity in the remainder of the patients. All patients were partially paralyzed for over a year as a result of their stroke. Normally they would not have expected any improvement after this long period.

LARSON media Special Access Program History.htm

A proprietary wireless telemetry protocol called Suspended Carrier3 permits bidirectional data and power transfer between implanted devices and remote workstation. The back telemetry ability also permits wireless monitoring of patient biological parameters such as pulse, respiratory, EEG, EMG for muscle position/activity, and even visual and auditory biofeedback data.

fcc_knapp_10222008.pdf

Patent licensing for Alfred Mann Foundations “BION” transponder implant is at 400MHz, they can communicate with an implanted microstimulator device in excess of 200 feet.

Intel Corps FCC comments, state that even at 25 μ -watt (less than 1-milliwatt), Intel was able to use 403MHz (same as Mann Foundation license) to achieve a range of approximately 1600 meters.

The Mann Foundation under FCC licensed radio operator K6BWA, license WD2XLW, established a telemetry link consisting of a group of radio repeaters operating at 224.840MHz, which is amateur HAM radio spectrum.

LARSON media Special Access Information.htm

Preventing devices from being detected or localized by clinical radiology methods

In order to accomplish this, the devices would have to be very small, but more importantly, they would have to be constructed using completely non-ferous materials.

The bulk of the devices consist of integrated tantalum capacitor/electrodes which does not show a contrast artifact during radiology methods such as Magnetic Resonance (MRi), Computerized Tomography (CT), Ultrasound, or traditional x-ray radiography.

CIA Implant

The following are implants removed from Steve Wilson after being spoken to and listening to a high pitched sound for days on end. The implant removed was confirmed by Dave Larson (Larsonmedia.com) to be that developed under the CIA detainee program and the Department of Defence US Naval Space Warfare Centre SPAWAR contract N66001060805.

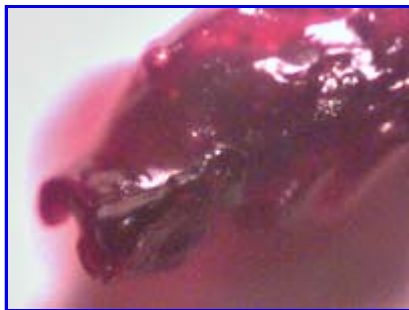
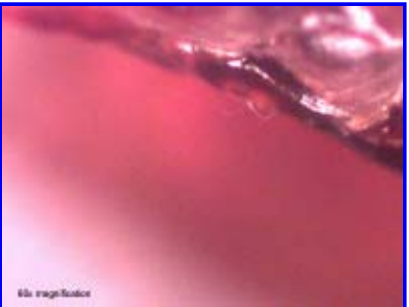


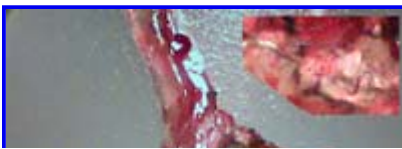
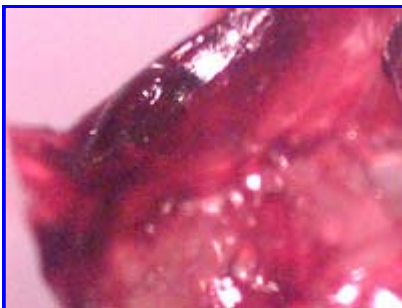
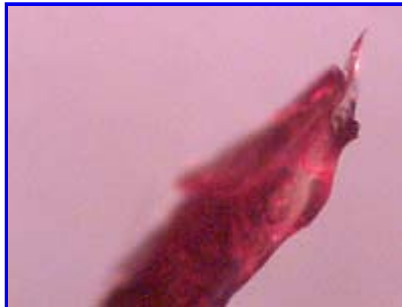
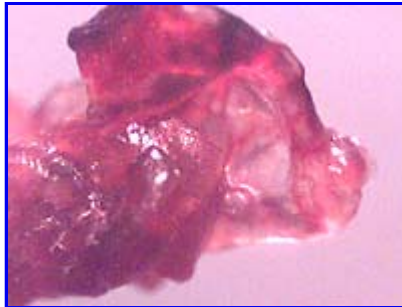


The following are implants removed from the

whistleblower Dave Larson after working for and being tortured by the National Institutes of Health (NIH) who are Special Access Program (black ops) contractors for the CIA.

http://www.larsonmedia.net/special_access/biomed.htm





Recovered devices match U.S. Patent Office Submissions and NIH devices.



Recovered Device #60
60x magnification

Recovered Device #60 (above) is compared to various device photos (shown on right) provided to NIH Program Manager/Director William Heetderks as part of contract progress reports from contractors EIC Labs and University of Michigan. For implantable wireless microstimulator devices, it is a common design element to fold or bend the platform where the ASIC chip is mounted. This 90° bend allows the shank to penetrate the tissue while allowing the chip platform to lay flat for a lower profile. recovered evice number 60 (above) is shown at 60x magnification and actual size is only about 2mm in length.

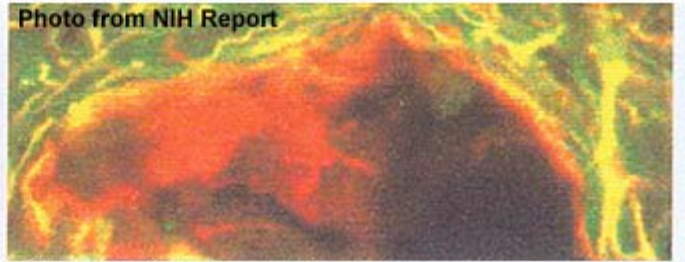


Photo from NIH Report

Fig. 7: Co-Labeling for Vimentin (red) and GFAP (green) IR one week following electrode placement in the auditory cortex. The innermost layer is made up of Vimentin IR cells with a small rim of GFAP cells making up a second layer.

The image above is from a Quarterly Progress Report submitted to William Heetderks at the NIH under contract N01-NS-0-2329 from the University of Michigan. It shows a microstimulator device implanted in-vivo into auditory cortex.

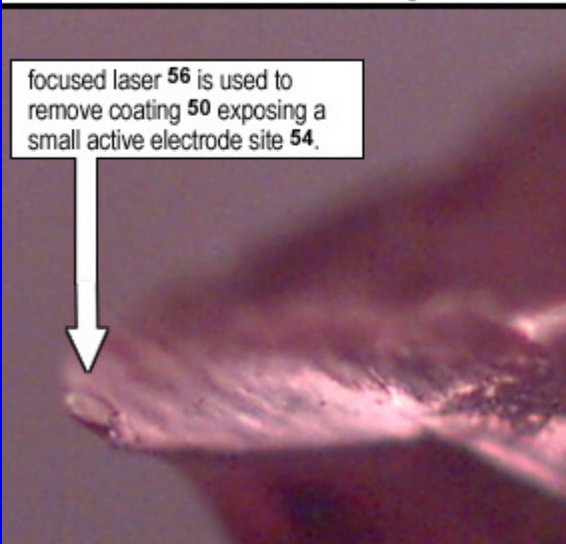


This photo is also from a University of Michigan QPR submitted to Bill Heetderks under contract. It shows a microelectrode (raw substrate prior to addition of telemetry chip) fabricated with the 90° bend at top.



This image is from QPR#9, NIH contract #NS8-2387 and also shows a 90° bend.

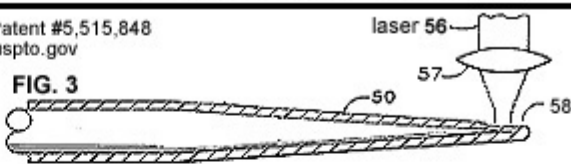
Recovered Device Magnified 60x



focused laser 56 is used to remove coating 50 exposing a small active electrode site 54.

Gerald Loeb U.S. Patent #5,515,848

U.S. Patent #5,515,848
www.uspto.gov



...is covered with a thin film coating of a dielectric material 50 which is compatible with being implanted within a living body. An active electrode site 54 is provided at the distal end of the microelectrode by ablating the coating of dielectric material 50 using a highly focused UV laser beam 56. Preferably, for use of the electrode in providing electrical interconnection with neurons, an active electrode site about 0.001 inch (25 microns) long including the sharpened point of the electrode body is cleaned of its dielectric coating by use of such a laser beam 56, focused to a spot having a diameter 58 on the order of 25µm.



← Left: Recovered device #36

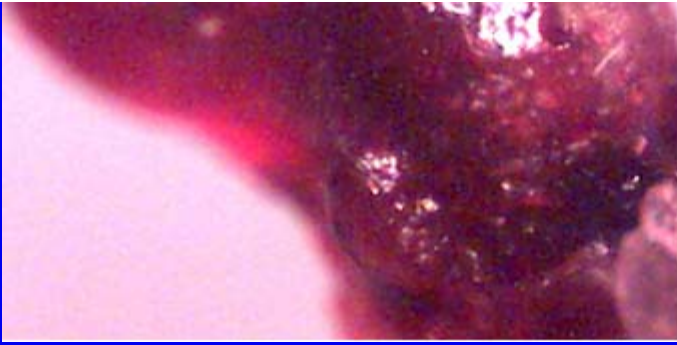
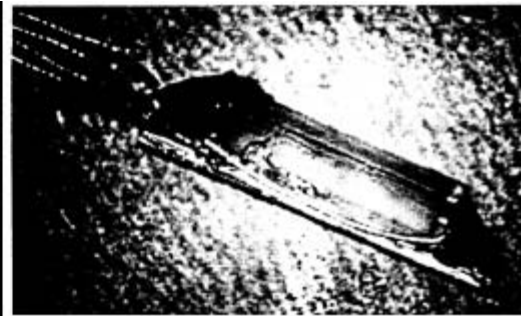


Figure 2.37: Photograph of the long-term tested package of Figure 2.35.

↑ Above: Microstimulator device photo sent to Bill Heetderks under NIH/NPP contract #NS4-2319 "Hermetic feedthroughs".

← Left: Recovered device shows similar fabrication and packaging methods



↑ Above: Microstimulator device photo sent to Bill Heetderks under NIH/NPP contract #NS4-2319 "Hermetic feedthroughs".

← Left: Recovered device shows similar fabrication and packaging methods

3.1 Sample #111 vs. US Patent 6,214,032 "System for implanting a microstimulator"
 Inventors: Gerald Loeb, Frances Richmond Assignee: Advanced Bionics

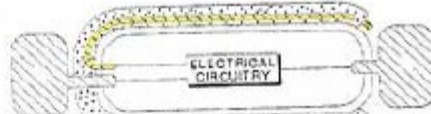


Fig 4 from Schulman/Loeb US Patent 6,214,032

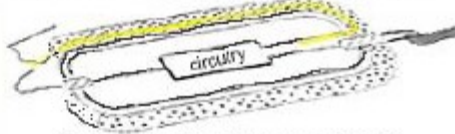
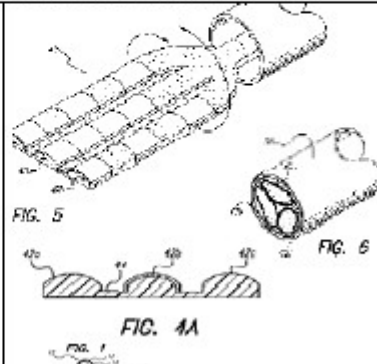
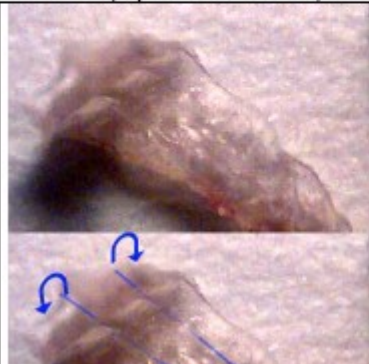


Fig 4 modified to match perspective of sample number 111, shown at left

The image on the left shows my recovered device #111. Patent 6,214,032 on the right (top) illustrates an invention of Frances Richmond and Gerald Loeb (this same illustration appears in several patents held by Loeb and Schulman) in which the yellow highlighted path represents encapsulated wire containing electrode

3.2: Sample 110 vs. US Patent 6,205,381 "Implantable expandable multicontact electrodes"
 Inventors: Mann/Advanced Bionics

This invention describes an integrated circuit on flexible substrate (so that it will conform to the shape of the scalp, or muscle etc) with attached electrodes, and is designed to be "folded" into a syringe/hypodermic needle and injected into the target location. Upon being injected, the electrode array unfolds or "expands" to an open position. Although this device lists Mann as the inventor, and Advanced Bionics as the assignee, Gerald Loeb played a role in it's development as Advanced Bionics' "Chief Scientist".



multiple circuits in a stacked configuration (with a coil on top, #172 in patent illustration) and the stacking is done to save space, however, such stacking complicates assembly and lowers yield. Schulman and Loeb claim that no such stacking of chips was performed, nor required by the "BION" microstimulator, however my sample #122 at left, US Patent # 6,067,474, at right, combined with Schulman reporting "unexplainable" low yields throughout his contract (as low as 30%



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