SUMMARY OF SETTLEMENT OPTIONS

FOR DOW CORNING FOREIGN BREAST IMPLANT CLAIMANTS IN CLASS 6.2

SECTION 1. WHAT ARE THE FOUR (4) SETTLEMENT OPTIONS FOR CLASS 6.2 CLAIMANTS?

If you are in Class 6.2, you must select one (1) of the following four (4) Settlement Options. The Settlement Option you choose may depend on whether you have written documents that show that you were implanted with a Dow Corning breast implant. Read the Proof of Manufacturer criteria carefully before choosing your Settlement Option.

OPTION 1 – If you have any of the written documents described below in Section 2 that show you were implanted with a Dow Corning breast implant, then you may apply for 1) a $1,750 (U.S.) Explant Payment or $3,000 (U.S.) Increased Explant Payment, and 2) an $8,750 (U.S.) Rupture Payment (including a Premium Payment), and either 3) a $700 (U.S.) Expedited Release or Disease Payment ranging from $4,200 to $105,000 (U.S.) (including a Premium Payment).

OR

OPTION 2 – If you have any of the written documents described below in Section 2 that show you were implanted with a Dow Corning breast implant, then you may apply for the $1,200 (U.S.) Expedited Release Payment.

OR

OPTION 3 – If you filed a "Proof of Claim" on or before February 14, 1997 indicating that you were implanted with a Dow Corning breast implant, simply sign the Option 3 Claim Form and you will receive $600 (U.S.).

OR

OPTION 4 – If your medical records from your implant surgery were destroyed because of a war or natural disaster that can be verified but you were implanted with a Dow Corning breast implant, then you can supply specific information about the implant surgery to determine if it matches sales information from Dow Corning. If it matches, you can apply for either a $750 (U.S.) Expedited Release *or* Limited Disease Payment. *(Read Q5-1 in the Option 4 Claimant Information Guide.)*

SECTION 2A. ACCEPTABLE PROOF OF MANUFACTURER FOR OPTIONS 1 AND 2

To be eligible for Options 1 or 2, you must submit one (1) of the following types of medical records or documents:

A. Hospital records of the surgeon's report of the breast implant surgery — written at or near the time of your implant surgery — that specify a Dow Corning brand name or Dow Corning as the manufacturer. The list of Dow Corning brand names is at Question 2B below.

B. A "certified copy" of your medical records that contains the breast implant package label demonstrating a Dow Corning breast implant. Note: a certified copy is required *only if:*

1. The label is on a page that does not affirmatively reveal it to be a part of your hospital or medical records and does not have a *lot* number, *serial* number, or *catalog* number on it; ***or***
2. The hospital records are organized so that the breast implant label/sticker was put on a page by itself. If the page containing the breast implant label/sticker clearly comes from the hospital's contemporaneous record of the breast implant surgery, has other information relating to your hospitalization on that page, and has sufficient patient identification for the Settlement Facility to tell that it came from your records, it falls into the acceptable proof category of contemporaneous hospital records, and does not have to be certified.

C. Breast implant labels clearly marked with a *lot, serial* or *catalog* number. These labels do not have to be certified.

D. Medical records of your implanting surgeon — written at the time of your breast implant surgery — that specify a Dow Corning brand name or Dow Corning as the manufacturer. The list of Dow Corning brand names is at Question 2B below.

E. An affirmative statement from your implanting physician (or a responsible person at the treating facility where your breast implant surgery took place) *attesting* that you were implanted with a Dow Corning breast implant. The person making this affirmative statement must also provide the *basis* for that conclusion. This type of proof is acceptable *only if:*

1. The records outlined in subparagraphs A and B above are not available; *and*
2. It must include a description of what steps were taken to try to secure the types of proof outlined in subparagraphs A and B above; *and*
3. It must explain why those records were not available. The statement of steps taken can be provided by your attorney if you are represented by counsel. This statement cannot rest upon "unacceptable proof".

F. A health insurance claim form, signed by your implanting physician reasonably close to the date of the breast implant surgery, naming the type of breast implant used.

G. Medical records of the physician who removed your breast implant (or other physician or appropriate professional who examined your breast implant during or after removal surgery) — written at the time of the examination of your breast implant — if that physician or other appropriate professional points out a *specific characteristic* of the breast implant that is on the list of "Unique Identifiers" for Dow Corning breast implants. The list of "Unique Identifiers" for Dow Corning breast implants is at Question Q5-8 in the Option 1 Claimant Information Guide.

H. A photograph of your removed breast implant that shows one (1) of the "Unique Identifiers" for a Dow Corning breast implant *if:*

1. The photograph is accompanied by a statement from the physician who removed your breast implant; *and*
2. (S)he identifies the breast implant in the photograph as one (s)he removed from you.

I. Dow Corning or brand-specific implant "control sheets", with cross-references to you, that reasonably appear to be contemporaneously kept records in the hospital or implanting physician's office.

J. Dow Corning's invoice or packing list contained in your medical or hospital records relating to the breast implant surgery. If the Settlement Facility cannot determine that the invoice or packing list actually was included in those records, they may require a "certified copy" of the records or a supplemental statement from the records custodian.

K. Dow Corning's catalog with a particular type or style of breast implant circled or otherwise marked, if contained in a "certified copy" of your medical or hospital records relating to the implant surgery, which were compiled and/or produced before or about the time of that surgery.

L. "Patient Informed Consent" forms signed by you and dated close to the date of your breast implant surgery, accompanied by other contemporaneous medical or hospital records verifying that the breast implant surgery actually occurred and identifying Dow Corning as the manufacturer of the breast implant.

M. Admissions in pleadings or letters written by Dow Corning to you, your representative or your physician acknowledging that your breast implants were manufactured by Dow Corning.

N. For breast implants implanted after July 1986, participation in Dow Corning's "Product Replacement Expense Program" ("PREP") as documented by a signed PREP brochure, statement, or similar document if contained in a "certified copy" of your contemporaneous medical or hospital records.

O. Participation in Dow Corning's "Removal Assistance Program" after March 1992 documented by correspondence enclosing payment for uninsured medical expenses issued under the program based on receipt of proper documentation. Dow Corning will provide the names of persons it can document that participated in the Removal Assistance Program. If you are identified by Dow Corning as having participated in the Removal Assistance Program, the Settlement Facility will inform you of this, and you will not need to submit additional proof of manufacturer documents.

P. If you rely on the following standard, you must submit all of the following:

1. A Dow Corning invoice, sales receipt, packing statement, or import receipt that would ordinarily have accompanied a breast implant sold for implantation, where such invoice, receipt or statement references a Dow Corning breast implant; *and*

2. It must contain either the claimant's name or other information identifying the claimant; *and*

3. It must be accompanied by medical records that show that the claimant was later implanted with a Dow Corning breast implant within a reasonable amount of time after the date of the invoice, sales receipt, statement, or import receipt.

SECTION 2B. ACCEPTABLE BRAND NAMES FOR DOW CORNING BREAST IMPLANTS

If your medical records or other documents are based on Section 2A, paragraphs A-F or I-P above, then any of the following are an acceptable brand name for Dow Corning Breast implants:

BRAND NAME	STATUS
Cronin	Acceptable if your breast implants were implanted in or from 1963 - 1971
Dow Corning	Acceptable
Dow Corning Wright	Acceptable
DC or DCW	Acceptable
Mueller, V. or V. Mueller	Acceptable if your breast implants were implanted after January 1, 1968 and before August 31, 1974
SILASTIC or Silastic	Acceptable
SILASTIC II or Silastic II	Acceptable
SILASTIC MSI or Silastic MSI	Acceptable
“silastic” - in all lower case letters	Acceptable if it is contained in a contemporaneous operative report for a breast implantation prior to 1969, provided that there is no other information in your records that is inconsistent with a Dow Corning product. This type of proof shall be used only if you do not have any explant records demonstrating a “Unique Identifier.”
Varifil	Acceptable

SECTION 3. PROOF OF MANUFACTURER FOR OPTION 3

To be eligible for Option 3, you must be able to sign the Option 3 Claim Form under oath that you were implanted with one (1) of the Dow Corning brand names listed in Section 2B above.

SECTION 4. PROOF OF MANUFACTURER FOR OPTION 4

If all of your records from the surgery where you were implanted with a Dow Corning breast implant have been destroyed because of a war or natural disaster that can be verified, complete the Option 4 Claim Form. On the Claim Form, provide information about when and where you were implanted with a Dow Corning breast implant and the reason why you believe that implant was made by Dow Corning. The Settlement Facility will determine if the information matches sales records of Dow Corning.

SECTION 5. HOW TO SUBMIT A CLAIM FOR ONE (1) OF THE FOUR (4) SETTLEMENT OPTIONS

Choose one (1) of the four (4) Settlement Options described above. Once you have made your choice, complete and submit the Claim Form(s) for that Option. A complete description of the benefits and deadlines for each Settlement Option is contained in the Claimant Information Guide.