PAULETTE: They always will be able to identify you and come back to you. Understand, it's just like when you return something to a store and you go to the first person and they say you have got to go over there. So you go over there and tell your story again, and then you go over there and tell your story again. If they have your name they can always come back to you.

WOMAN: What is the likelihood and what is our protection against litigation against us personally?

PAULETTE: Where does that enter into it?

MALE: Are you protected?

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WOMAN: If someone takes exception with us and you know, kind of go after us - you know because they have our name. And our name is the only one that they have and they don't like what we said and they don't like how we said it.

MAN: Most attorneys are not going to sue you individually. They are going to sue the corporation but there is always the possibility that they are going to sue you. In that case, the corporation picks up your defense. Corporation [undiscernible]. If it didn't, they would defend you throughout the law suit. It is not a common practice at all. It is becoming more common for them to sometimes sue our Reps that are out there in the field. The guys that are selling the stuff. And, even there we have been getting most of those guys out, but we have two or three law suits now where they have sued our Reps and we come in and defend our Reps. Now if it turns out that the Rep says something absolutely horrible that they were never authorized to do or say, then that might be a different story. That is why it is important that the information that you are supposed to give out, you give out that information and you stick to that information. For example, if you came out and said something that was way way off the wall. well yes sure, you know you don't have to be confined to 1200 bucks, we'll pay you a million. Then all of a sudden it came up and some one says we aren't going to pay a Million Dollars. But she promised me a Million Dollars! Then there could be some problems. I mean that's not going to happen but that is the example where there may become a divergence of interest of the corporation and you as individuals. Because if you did something that was absolutely horrendous that was not authorized, what used to be called in corporate lingo, the ultravirous act - something that is totally against the interest of the corporation, something that is totally unauthorized - that type of thing. That is just not going to happen.

PAULETTE: I think it is important for you to know that the Company stands behind you and supports you definitely. However, I think we should take note of what Jim said. You know, if you go off on your own and deviate into all these other areas where you're on these tangents that you are not supposed to be on, you know what you are supposed to say, by the time you leave here Friday - you will know what you are supposed to say. And, if you go off, then there may be a problem there.

MALE: By the same token, I don't want everyone to walk out of here absolutely paranoid oh God, if I said three words that aren't on the authorized list - that's not going to happen. Really what it comes down to, is if you have made an effort on your time and in the

corporations interest and, if it is something even if you weren't fully authorized to do but there is an appearance of authority, that the corporation has to pick up the defense that is the way it's got to be. It is just when you get way way off the path. So don't anybody walk out paranoid, oh God no, I have to think for 5 minutes about each word I say - that is not to say don't think about the words you say, but don't be paranoid because you know if you are new at the job with the corporation, the corporation is going to defend you. [Undiscernible] Absolutely [Undiscernible].

WOMAN: I love the personal allegations and that is my next question. This is where my name comes in handy, you couldn't hardly find me, they'll never find me.

[Laughter and mixed conversation.]

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MAN: There's more than one with your first name too?

WOMEN: I think there's five --- five Jan Smith's.

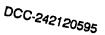
MAN: I have trouble, there's only two Jim Hayes'.

WOMAN: And in Midland, my name is spelled Janis which is not real common and even there are people out there, there is a woman in Midland who has the same name. Who by the way, had some bad checks and a detective looking for her. God, it was a different bank and I had to defend myself immediately.

MAN: I don't know how great the mail people are but I get all this mail that says Midland Plant, Mail Number 003, which is Midland Plant. It seems like they can't read, I get all the latest Engineering, State Border Magazines and all this other stuff. He probably gets all the Legal publications, I haven't been getting them lately so it's really...part of it is....he gets more parts of mine than I do of his because I have a IV after my name and my name is at the very end of the H's, like Dan has the same problem, because his is James R. and mine is James J., instead of mine being up ahead of his, I keep trying to tell the people that my last name is not Hayes the IV. They don't understand that Hayes the IV hasn't come as the last name so they put it at the end, so he gets a lot of my mail. It leads to some tough problems because a lot of the stuff I do is highly confidential, a lot of the Labor stuff I get and arguably there could be an inadvertent waiver of attorney/client privilege if that happens. So it is a tough issue and still hasn't been solved.

WOMAN: Is there a possibility we could be subpoenaed into Court to testify.

MAN: Always that possibility that you would have your deposition taken. Into Court? They really can't subpoena you unless it is in the State of Michigan. The subpoena power is here. If you have cases in the State of Michigan they can subpoena you directly. Otherwise, they couldn't. The flip side of that is, if we are going to court and we wanted to bring you as a witness because of allegations, we could always have you appear as a witness for us. However, we wouldn't have subpoena you all we would have to do is ask you.



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PAULETTE: One thing that I want to say about that, about being subpoenaed, keep in mind that what you are taking down on your call report form really falls into hearsay...you don't know these things to be fact. This woman is saying these things, that doesn't mean that it is true. Always remember that, because you are going to hear all kinds of things and, as I told you this morning, some of these things you know aren't true some of them you are going to be going "What? Where did she get this." So always remember this is her version. And, I have no doubt that many of these women believe that this is what happened to them. That does not necessarily make it fact.

MAN: And it is good to be clear in your notes as to who said what. What you said, what she said, what they said...

PAULETTE: She alleges.

MAN: You may have to take some notes and fill them in later, make sure you do that because if you ever did get subpoenaed for a deposition your notes are going to be put right there and if they are wrong - they are going to come back to haunt you.

WOMAN: Are the lines recorded, are the conversations recorded?

PAULETTE: No. Confidentiality.

WOMAN: I thought they would be. On these forms we are supposed to make them as accurate as possible but where do they go? Do we keep them here are these admissible evidence or attorney work product or just for our files.

MAN: In fact, we have turned them over in situations where we have thought we have turned over complaints. Also, complaint files start out with one of those forms. You guys should have a procedure as to what....

PAULETTE: We do have a procedure, they all stay within our office. I came very close to being called into a case in New york and it was only because, I had had several conversations with this woman and the dates that she called me coincided with dates certain things happened to her and what got me out of that was

MAN: Which one is this.

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PAULETTE: Oh gosh, her name is Lois Burkhardt, and she was in a malpractice suit with the surgeon that had no problem with Dow Corning or our implant whatsoever. It just happened that every date that she called me and, this woman had numerous problems, she had to have mastectomies and she had several surgeries over a period of nine months culminating in the end with the implants falling out in her hands. The only reason that they thought I would be called at all was because the dates coincided with all of the incidents that had happened. We developed a relationship and you are going to find that you do develop relationships with certain women and every time something would happen to her she would call me and we would discuss it.

MAN: A lot of these women just need someone to talk to, they don't know to turn to and they want someone to provide the shoulder and empathize with them.

WOMAN: Jim, what will happen if Reuben doesn't, we can't open up the hot lines. What happens?

MAN: Good question. I think they would have to shut down the program and I think there would probably be some consideration for appeal. Especially, in light of the fact that we are not releasing them and they can still be part of the class. If it is made clear to Reuben, a release, he may say we can't even release them for the surgery. And my guess, although I don't know and I am not speaking for the Company right now, my guess is that if that was the case we wouldn't have any release for the surgery that still would go at 1200 bucks.

PAULETTE: They have taken that out Jim.

MAN: Oh so there's no more release?

PAULETTE: There is no more release for the surgery, there is nothing.

MAN: I can't see them ruling against on the 1200 Dollars on the claim stuff they may. But that is a different story.

WOMAN: How did the Implant Information Center come into this then because we are not to be talking to claimant's attorneys (clients).

MAN: They are treating that as almost a arm of litigation so that the defendants and defendants attorneys are in essence can almost have a pipeline into the claims, where the claims are represented by counsel. That's probably a bigger issue now then the 1200 Dollars. We'll see what happens on Friday. I would guess that they will probably will allow that. I don't know what he'll do with Lynne and Shelly with the claims that are processed down there. That's a touchier issue because we could get releases as soon as we can [undiscernible].

Anybody else have any questions.

PAULETTE: Silicone Injections. I did bring this from Art's office.

MAN: You may [cough] silicone injection. Very popular in New York, in California - specifically Southern California, Florida - specifically Southern Florida, there was also some activity in Pennsylvania and even Michigan. We had a law suit in Michigan. Some of these doctors have been buying silicone, some of them say it's Dow Corning fluid. But from what we gather they are buying the non-360 medical fluid buying 200 fluid industrial grades and they are injecting it into women and men but I have never had a call from a man always women.

PAULETTE: We have, Yes, Several men.

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MAN: I would guess that most of the calls are from women though. They go and have injections into their face for acne or whatever, in fact, I think the law suit I have in Michigan is a man. He had an injection for severe acne, and they would inject little micro-droplets of silicone into the face. Supposedly to fill out the face to solve the problems. It worked for a while and then there were some major problems. Dow Corning has never, other than in clinical programs has never ever, approved silicone for injection purposes and it doesn't now. At the present time, I don't think there are any clinical programs going on. There were some in the 60's, 70's and there was one in the 80's for a while but I think it was the [undiscernible]. We have never sold silicone fluid for injection purposes and will not sell it, it has warnings on the medical fluid pens. If you get calls about silicone injection, I think you should let Paulette know immediately and Paulette then you should let me know because what we do when find some one has been injected with silicone that may be ours we notify FDA. FDA jumps all over it.

PAULETTE: Which should prompt you, if you get one of these calls, to try to get a doctor's name.

MAN: If you get the doctor's name, when they were injected and where they were injected...then advise them we have never authorized sold it or authorized it for injection. If they are having medical problems they should probably talk to another doctor, whether it's a plastic surgeon, dermatologist.

WOMAN: It was my understanding we couldn't ask questions.

PAULETTE: We are talking silicone injections not breast implants. This is different.

WOMAN: Right, I know it is different so it has......

MAN: They aren't part of the class action.

PAULETTE: It has different kind of guidelines. The problem is that out there, there are people injecting when this is not an approved process and when they are using or saying they are using your product. We are getting law suits on this so if we can find a doctor who is using our fluid to inject then we need to deal with that so we can handle it.

WOMAN: So in this case it is different, we can ask questions.

MAN: It may be that they don't know whose fluid they're, they've heard Dow Coming so they call us. That's all right, take down the name and the doctor's name and get the information and we will turn it over.

PAULETTE: You may not get a doctor's name. It is very common that they will not give a doctor's name.

WOMAN: But it would be helpful to get as much information as we could get.

PAULETTE: Yes.

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MAN: Get as much information as you can get. The other thing is there may not be doctor injected, there are a lot of people, nurses who have set up shop and have people that claiming to be nurses who have set up shop in hotel rooms and whatever else injecting people. It is mostly the face and lips, there is a doctor down in Miami that they call Doctor Lips "if you want the full luscious lips come and get injected with silicone". They inject in chins, some doctors have injected into the legs and feet. I don't know of any doctor who is still injecting into breasts. California doctors did it big time back in the 60's and we're talking a lot. Guys who are injecting in the face they will get little 1, 2 to 5 ccs, very tiny amounts injecting micro droplets. The guys who did the breasts injected 20 ccs a big syringe full of the stuff into the breasts at one time and so we had just incredible problems and we had law suits and we have always usually just gotten out for minimal amounts and you always have to pay something cause they just won't dismiss you out but we just got dismissal of one in California - the lady had run the statute of limitations. There were doctors out there, they were injecting thousands of women and they were charging them like \$50 and they would have them in like 3 or 4 times each and charge them \$50 to \$100 an injection. They had one doctor that was going around Las Vegas and he was just...he had a big drum of industrial grade he bought from a furniture manufacturer. It may have been Dow Corning fluid ... he bought it from a furniture manufacturer that he knew and he had a big drum he was carrying around and he was injecting all the show girls in Las Vegas and one of them died with all kinds of problems. They called him Silicone Jack. There are a lot of horror stories out there. But that doesn't go on any more although we still see law suits occasionally from the West Coast from women who had silicone injected breasts.

PAULETTE: When they are injecting, if that gets into a vein it acts as an embolism so that can kill you. It is a very dangerous practice. The doctors that were involved in clinicals' are trained to use this and most doctors aren't.

MAN: These guys, one of the big guys in Los Angeles, a guy named Richard Arendsen, a Dermatologist, and he was injecting [undiscernible] no plastic surgeon even a Dermatologist, this guy has been on news like 60 Minutes, he has since ceased his practice but we have several law suits [undiscernible] and he has been injecting people for years but never in the breasts but Arendsen I wouldn't be surprised if he is still injecting silicone in breasts. We had him in a deposition a couple years ago in a case and two young ladies came to the door when we were in his outside waiting room to take his deposition. They came early, they figured they wanted to move their appointment up and we were in the middle of the deposition and their appointment was supposed to be like at 2:00 P.M. and it was like 12:30 P.M. They came in and they wanted to see him, they couldn't have been more than 18, 19, 20 years old and they didn't have any dermatology problems at all, they were beautiful and I wouldn't be surprised if this guy was still injecting. Can't prove it. But wouldn't be surprised in this case. They find some way to get the fluid when they aren't getting the medical fluid, may be they're getting food grade or other kind.

PAULETTE: Not even two years, this girl from Atlanta, several of her friends and her Mother answered an 800 ad in the paper went to a motel room in Atlanta, they were all injected with silicone, it was \$500 a visit, the person that was injecting them was a transvestite, it was very obvious, dressed as a woman. That case ended up, this person was traveling all over the country, they were making thousands and thousands of dollars a day.

MAN: It was a non-medical person, too. No nurse, no doctor.

PAULETTE: That's right. That person that called us about this was having the injections in her buttocks, her Mother had had them in her breasts and her friends had had them in various places.

MAN: Yes, in the buttocks was very popular, too.

PAULETTE: I can't even imagine going into a doctor's office with his diploma hanging on the wall let alone a motel room, answering an 800 number, but those things happen. How she got to us was by going to a restroom into a bathroom in the hotel room the toilet paper was out so she opened a cupboard and there was a cylinder with the label half ripped off but Dow Corning was still there, so she was able to get a lot number and why she thought to write it down is beyond me but she did. We sent that to the Crime Lab in Houston who did arrest those people with the syringes, with the fluid in the syringes. Sometimes we are able, that's why it's important to get as much as we can.

MAN: Was that a medical grade?

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PAULETTE: No. That was bought through a furniture ... also, because they use it to take the squeaks out of furniture.

MAN: It is used in furniture polish. 200 Fluid is used in several different products.

PAULETTE: But this person has used it a lot. Of course, the person that called us was scared to death. What's going to happen to me. Her husband didn't know and he was in the Gulf at the time, but I suppose I'll have to tell him now.

MAN: Any how you may get some of those calls. Take down the information. Suggest that they see somebody. I have been the one handling all those injection cases with the exception of sylvia Anderson which you know about that's been going on for about ten years.

PAULETTE: I usually do try to suggest to these people that they set themselves up with a plastic surgeon so that they know their history and someone is there to know what is going on with them. But this is the one exception to the rule of no questions. Ask as many as you can as much information as you can and listen to what they are telling you, just as breast implant patients will say well you know my Mother has Lupus and has never had breast implants. Those are things we need to know -- listen to what they are telling you. They will reveal a lot in the conversation.

MAN: Any other questions. Is this another one where you work 1/2 time at this or full time or?

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PAULETTE: No these are full time, well except for Ann, Mark won't give Ann up.

ANN: He changes his mind every half hour.

PAULETTE: We are trying to meet the tenets of an objective of a 24 hour response.

MAN: A commitment for the resources is good.

PAULETTE: It's a big shoe to fill but we are going to try. We'll just keep trying. Thanks Jim, I owe you one.

MAN: Your welcome. If you have any questions that come up afterwards, talk to Paulette or give me a call.

ALL: Thank you.

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IMPLANT HOTLINE PROGRAM TRAINING SESSION MARCH 25, 26, 27, 1992

TAPE 2 SIDE B

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WOMAN: I was just going to ask if these woman would or people would be getting silicone injections which would may be cost \$300 upward but for sure they are going to have medical problems that are going to be in the thousands, you know, if not removal plastic surgery because of [Paulette and Woman talking at same time?]

PAULETTE: Liposuction to get it out. Oh, yes really.

WOMAN: Oh, yes it is really just bad.

PAULETTE: But, I want you also to understand that there are people that have had silicone injections, Dow Corning was involved in a study and not all of them had major complications. As a matter of fact, a very small number of the over 100 patients have fitted in to that study of problems. Not everybody has problems. But it is a real danger if you are using an industrial grade because we don't know what contaminants are in there. It is not a medical pure grade fluid Number 1, Number 2 when you have doctors, the doctors who participated in this study went through a program to learn how to inject this silicone, what amounts to use and what time periods to look at; I have a film later on where you will see some silicone injections that have come out beautifully but if you are not trained and you are a Dermatologist, these were all plastic surgeons by the way that were involved in the clinical study, you are not a plastic surgeon you do not have those make ups and you are out there playing with fire and you need to be very careful.

WOMAN: Or walking into a motel room, with a transvestite for \$500.

PAULETTE: And going back several times.

WOMAN: Some kind of red light should have gone off somewhere.

PAULETTE: I would think there were flags going up all over the place.

WOMAN: Except you know I would think you have to look at the mentality of these ladies, they have a very poor self image and if this is what it is going to take to raise their self esteem they are desperate and they are going to do it.

PAULETTE: They are denying the red flags. It's absolutely amazing. I will tell you from dealing with a lot of them, I wonder if they see the red flags.

WOMAN: They may be so programmed they don't even see the red flags.

PAULETTE: I think that their minds are so tuned into I'm going to look better, this is the

answer to all my problems....

WOMAN: Case in point, my daughter has a beautiful friend and she is beautiful, she is gorgeous. She models for bikini's down in Florida but her dream is to get breast implants even though all this stuff has been going on, she says she doesn't care. She wants to be the best on the beach and she will do what it takes. If she can't silicone gel now she is going to get saline.

PAULETTE: You know I have to tell you that if I need to get a breast implant that I would get one without any hesitation. And, if my daughter needed them, I would allow her to do it without any hesitation whatsoever.

WOMAN: But I would only want Dow Corning Gel.

PAULETTE: I would to, unfortunately....

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WOMAN: It's a real bummer. You can't get them now.

PAULETTE: I think that is a real downside, especially for us because we know Dow Corning. We know the Company that we are and it's a real downside to think that, you know breast cancer 1 in 9, that's not real good odds ladies and, if we have to go somewhere else to get our implants. I'm sorry but I'm going to have a lot of questions for whoever I'm getting my implants from. Especially me, I'm going to have a lot of questions.

So are you when you walk out of here on Friday. You'll be going with a list.

Let's finish up the letters. We'll try to get Connie Chung and the other show that have from Britain, a program that was aired over there. Let's try to get those in before lunch. We're kind of falling a little behind schedule but don't worry we'll have a lot of time at the end of the day.

Again, it's special letters sometimes you will have to write the catalog number, you will have to write down what implant they have, I believe that the letters should always state, and I want you to know that I have a notebook of form letters that you can go to and look at okay for answers, and it's also for people who have a copy of that so you can say, Paragraph A from Letter 1 and Paragraph C from Letter 23 and it fits together and this is the answer to that. You will have to fill in some blanks. I think it is very important that when we are writing letters about catalog numbers and lot numbers and identifying implants, that we state to them the numbers that you indicated -- we don't want anyone to think that we are making these numbers up. Or, that we are putting this into their heads. It is very possible that if this ended up in a law suit sometime, that this letter would be brought forth. So, if we are making sure that they realize this is the numbers you gave me, this is the answer to those numbers. Okay. Also, that you may very well get questions about nursing or something like that you will need to bring into that letter that deviates from the norm. It's very possible. All letters must be cleared through me preferably, if I am not there then through Wendy or Dawn. The reason for that is my background is legal. That is what my education is in and that is what I do. We want to make sure that everything that goes out is legally correct, we don't have a problem there. And Wendy and Dawn have been around long enough to know, to know what goes in and what doesn't.

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Letters on a whole that come into Dow Corning are being routed to the Center. If they are addressed to Communications, obviously they go there. I will tell you letters have come in that are Dow Corning Corporation, Dow Corning Chemical Corporation, and I mean these letters, the Mail Room just doesn't have any idea of where these go and they do open them up and if they are dealing with implants they send them to us and we have been working on this, Mark and I in my vantage area and Barry and several other people. And, the feeling is, at least my feeling really, is and I believe Mark's also is that if they are dealing with implants and they are not addressed to anybody, they need to come to our Center. We are the ones that are trained to distribute them. We know if they belong in Legal, we know if the belong in Communications and you will also be in involved in handling those letters and you will come to know if you have any question, usually just by reading the letter you'll know where this letter goes. However, if you have any questions, certainly go ask someone where do you think this one should go. The reason that I think that all letters should be cleared through us is that, for example, I picked a pack of letters up from Barry Carmichael the other day to answer. A couple of the letters, I either had a photostatic copy of one of those letters and had already answered it or she had a photostatic copy of my original letter that I had already answered. We don't want three or four people answering the same letter. We just want one person answering that letter. Another point that Mark makes very emphatically is that we deal with those people every day. We know how to deal with them, we know how to answer their questions. Therefore, we are the best ones to answer the patient letters (inquiries). We deal with almost everything in the letters, the times that we might send them to Communications is that if they are asking for Corporate Policy. We do not deal with Corporate Policy, Communications does. But if they are asking questions that we answer every day, we answer them. That goes if that is the media calling in or if it's or some media aspect writing a letter. We deal with them. In the same manner and answering the same questions that we do every day. The times we do not get involved with the media is if it is Corporate Policy. We do not know Corporate Policy and we don't make it. And, we have had 60 Minutes, we have had Entertainment Tonight, we have had these kind of people calling into the Center looking for information. This is perfectly fine. If it is a letter dealing with the removal program that is going on, then we will send it next door too. We will not deal with that at all. At some point in time we will because it will be absorbed into this Center. But we don't have to look for that for at least 3 to 6 months. Because we are not going to deal with that right now. There may be some questions on those type of letters as to whether it is really Removal or Claims. Deal with it to the best of your ability, if you have a question on it then ask somebody, what do you think.

Getting close to lunch.

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WOMAN: Want an M&M?

PAULETTE: Thank you. Some of the letters that are in this notebook, I am trying to create one that is all encompassing. But what I'm finding is they just don't fit, you have to write a letter. May be a paragraph or two might but it will not fit. So those letters you are going to have to write. They will just have to be approved before they go out. You will also be asked to pay special attention to certain calls that come in on the BMX. Obviously, increasing our staff is hoping to cut down on the BMX. I will tell you that probably at any point yesterday, during the day on the backup BMX, there was 200 plus calls, and somebody was constantly

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WOMAN: I think it stopped at 72.

PAULETTE: On the first line?

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WOMAN: Yes, and it went down to, I think yesterday it stopped at 30.

PAULETTE: Yes. It was my understanding that, see we had to create this backup BMX, and it was my understanding that the first one would only go 50, and then it would kick into the next one. So may be it holds more than 50.

WOMAN: Yes. It is holding more than 50. But right at 72 it kicked down to 40 [both Paulette and woman talking at once]. All of a sudden there was 72 and I dialed the back system and it's like oh we just gained 30, went back to the first one it dumped.

PAULETTE: It dumped on the first. The second BMX, the backup is inexhaustible, it can hold as many as comes in, as many as it dumps. I tell you the story behind backup BMX. In November, the American Trial Lawyers Association put out an ad in several newspapers, if you have implants and you would like to sue call this 800 number. So, Dow Corning counteracted that by putting out an ad in 23 major papers across the country. If you would like current accurate information about breast implants, call this 800 number which was our Center number. We took 1500 calls in two days on that number. The second day that we came to work, there were 469 on the BMX. I had someone taking it off all day long. By the time I left that night there was still 400 plus on there. Theresa Sevenski who handles our telephone called me at home, Paulette you have to take them off your going to shut the Corp down for BMX so we have to get them off. Wendy, Dawn and I spent the night taking shifts taking them off BMX. But that was the reason for the backup when there are surges of calls or surges of, I am sure April 20th, when Kessler comes down with his decision, we are going to be bombarded with calls. As law suits are filed, I am sure Friday, when this comes to Court we are going to be bombarded with calls. Fortunately, we have never made it up to 400 again which is good. But, these things are going to happen. I think one thing you are going to have to understand is that you can only do what you can do. You can't do any more than that, you have to handle what you can handle and that is it. You can't feel guilty. Obviously, we all feel bad, we want to get to these women and we want to get them their answers but there we can only handle what we can handle, we are only human. This is the Lot Search I was taking about that we created and what this does, there are catalog numbers and you are going to see here in the beginning we did not have catalog numbers, okay. But then as they start they come down and these are the very early ones, they're dated by year and this is the implant it was a round, sterile, thin envelope, this is a contour envelope. What we did was that we went back into all the Sales Catalogues from those years and this is 1982, I'm sorry 1981. What we did was take all of the Catalog Numbers out of here so that there is quick reference in the front for you to look. If your Catalog Number is in among these numbers, you know you are in the right year. Let's take a Catalog Number here, let's pick 928. Under the Catalog Number we need to find 928, this may take time to find it.

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WOMAN: I see it. Down at the bottom, over there.

PAULETTE: This is 38.

WOMAN: Right next door.

PAULETTE: This is 58.

WOMAN: No.

PAULETTE: Oh, I am sorry and see what you mean. When you find your Catalog Number it also tells you your ccs. It is 350 ccs in the Catalog. This is a Celastic Mammary Implant Contour Design. It tells you exactly what it is and that is what you give them. This side had fixation patches, so 928 had fixation patch, it is important to put that in also. They were dacron fixation patches on the back of some of these implants and they need to know that. Okay. Also, in this Catalog are package inserts, if she says she wants her package insert also, then you have to come in here to find the package insert. Certainly understand that one package insert could cover several years. They weren't updated every year. The first thing I would do, that was in 1981, is that I would go to 1980, we don't have a 1981, so I don't remember what the name of the Implant was.

WOMAN: Contour.

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PAULETTE: I think I can show you what I'm talking about without looking it up. This package insert will do just fine.

WOMAN: And this is a case where she specifically asked [woman coughing] for her or whoever.

PAULETTE: Because in the packet there are package inserts. But if she says I want my package.....

WOMAN: Mine, then we send it.

PAULETTE: So let's say this is a mammary prothesis, that this is the one we are looking for, one thing that I want you to do before you send this out, is to make sure that your number is back here, the Catalog Number is on the back of the package insert. I want you to know that not all of the package inserts have those Catalog Numbers on the back and if they don't then you probably got the right one any way. Because you are going by the name. But certainly make sure. I will tell you that we have had people call back and say hey you sent me package insert and my Catalog Number is not on the back. So make sure that you check that that is back there. Okay. That you are sending the right one out. Here is a good example, here's a mammary prothesis, as medical science advances and we learn more we put it into our package inserts. We will talk more about package inserts later because there are some things you do need to know about them. It is very easy to use, just look up the number, you will all have one of these books. You will also all have a directory. All of the doctors that are registered with the

American Society of Plastic and Reconstructive Surgeons, their rosters, it has their office numbers and their addresses.

Some of the other BMX, special attention to BMX that you may get when people are calling in, pulling off the BMX, they may come to you and say these people need a call back, it could be a doctor - doctor's are our customers, we give them their call backs immediately, they're not put into the pile and we get back to them and find out what they want and try to help them. Another person that might be on there that you might need to get back to would be Sales Reps. Some of the Sales Rep business might very well slow down because we are not selling the product any more because we are out of the plastic surgery business and we will not be dealing with as many Sales Reps, however, there are certainly plans in the future to expand the Implant Center, which we will talk about also.

WOMAN: So if it's a Doctor, Sales Rep, we give them an immediate response.

PAULETTE: Well as quickly as you can. Somebody will come around that has been taking off BMX and they will say I have two doctors that need to be called back, then I would expect you to say, sure fine.

WOMAN: It is a matter of priority.

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PAULETTE: That is exactly correct and what you need to understand is that they have probably given some to other people too, not just you. Sure, it's spread around. Because not one person can just do that. When we get into a flow and we have certain people that are doing just call backs, then I think it would be a good idea to aim those at those people because they are already calling back they are not on a phone line for anything else and I think that would be a good idea. But up until that procedure is established and in use, then if they come to you and say do it, I would appreciate that you do it. Hysterical women. They do call on BMX, they do leave some very intense messages sometimes those people need to be called back immediately. I will tell you that there are times when, you know, this woman and 20 others are hysterical, yes we know, it is unfortunate but that is the way it is. But if someone from the removal side comes over and says I have a hysterical woman on my line, then I expect one of my Associates to go over there and handle that. They are not trained, they cannot answer questions in the Removal Program, they are very limited, their scope of knowledge has been limited on purpose, we do not want them to talk about complications, we do not want them to know those answers because that is the Implant Centers' job and these are the people, you are the people trained to deal with situation. These are six month temporary jobs, we do not feel that they really need to get into those, the Implant Center will handle that. If somebody comes over and says I have a hysterical woman, I need some help, you need to go over and answer that. If you are on the phone, obviously, they are not going to interrupt you. But somebody that is not on the phone, you know if you are walking back for coffee and they say they have a hysterical woman, then I expect you to go take that call. And it is not always easy to take those calls but somebody has to handle them and it is not the Removal people, they are not trained to do that. So we don't allow them to do that.

Bob all ready told you that we will not be selling breast implants any more, we are out of that

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business completely. The OBPU for plastic surgery has been shut down.

Our main concern in the Implant Center is to service the concerns of women and to do it in an empathetic and understanding way. I have said this repeatedly and I say it to my people all the time, we realize that there are 2 million women out there with implants, we realize that yes she may be experiencing capsilliary contracture and so may all these other people but to that woman that calls in that is her most important thing. If I am experiencing it, this is the most important thing to me. It doesn't matter that all these other women care and that is how you need to deal with it. As if she is the most important person of those 2 million. She is the one you need to deal with.

WOMAN: Otherwise you come across like doctors.

PAULETTE: Exactly.

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WOMAN: Like a herd of cattle or something.

PAULETTE: There was talk in the beginning when the Center was created about having nurses on the line and the reason that both my manager and I argued against that is because when you are going through surgery there are certain things or when you are going through any medical problems, there are certain things that are standard that always happen after surgery. We felt that medical people may tend to down play those. But if it is happening to you it doesn't matter if it is normal procedure to happen that does not matter, it is happening to me and I don't want it to happen. I'm going to go over a little bit with you of the objectives that we have set for the Center just so you kind of understand what we aspire.

WOMAN: Will we have a copy of that.

PAULETTE: I apologize for not having given you one before that actually. Our over all objectives are to reinforce Dow Corning Corporations' positive public image by providing the accurate and current information on silicones and silicone implants positions, current and potential patients, media and the government. Of course, things have changed a little bit, we don't have any potential patients any more. Develop the ability to independently assess and appropriately respond to external verbal and written requests for information. These are the things that our office reviewed [background noise]. Respond appropriately to telephone inquiries within 24 hours and to written inquiries within 3 working days and also are being changed[background noise]. We would like to see a 24 hour response. If there is a written letter into the Center and there is a phone number, then we will call and say we have gotten your letter and will get you your answers and get it out. That's a response, that doesn't mean we have to answer that letter, obviously, we want to answer it as soon as possible but it doesn't mean that we have to answer that right away in 24 hours. If there is no phone number then you need to just answer it as soon as possible [background noise]. Continue efforts.....

WOMEN: It's getting blurry, we are all getting blurry.

Is that what it is?

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I don't know.

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PAULETTE: Continue efforts to stay current with breaking news reports, medical and technical developments which impact information to be communicated to the public. We have news service who does clips for us, that means you get it about two weeks after it appeared in the paper. But media, our Communications people do try to keep us up to date, certainly on their communications with the press, you know we do get press releases from Dow Corning previous to being put out there. Understand they cannot keep us up to date on every body. Certainly if we know there is a television program coming on, Donahue or any of those programs, and they know about it, they let us know. I have some real good resources over there. Now Barry is wonderful, unfortunately Bob Grump left and he was my favorite. He was very, very good. Now Michelle Kataske who worked for Bob, is still very good, she gets them to me as soon as she can. I can tell you that I go through thousands and thousands of news clippings and I will pick out pertinent ones for you to see. I don't want you to think that I am only giving you the ones I want you to see but a lot of them deal with the same topic over and over again stating just different ways. There is a file drawer that is located right now, cause they are changing those offices back there, just behind Dawns' Office and in the bottom drawer are news clippings from way back that are dated monthly, month by month and year by year, from 1991 until now and you are welcome to it any point in time that you want to read those clippings. I am not hiding them from you, I am just giving you copies of ones that I think you need to see. Also, I want you to understand about the news clippings or any of those kind of things that I give that unless I tell you that you can quote them on the phone, you cannot quote them on the phone. We do have every day prior to this happening, understand that it depends on calls, we try to have a meeting at 1:30 every day. We go back into a Lab and we may have to change it to the Lab behind my office now that we are putting offices in there. We try to get together at 1:30 everybody gets on the phone and report. It's a little quick meeting, we are not there to resolve problems but we are there to get what is going on. Gee something must have broke in Dallas today, everybody is calling from Dallas or wow I'm getting all Western calls today. Whatever it is and whatever I have to update you on will be updated at that time. You will get it at that time. Understand that this is also kept in a Log Book dated, the date that this change came in so that if you are off on vacation or whatever you can go to the log book, you can read from the day you left what you missed until you got back. I think it is really important to document those things so people realize that if they have to be gone and may be back to your area of training, you are not missing out.

Participate as an active and cooperative team member in achieving the objectives of the Dow Corning Implant Information Center as established by the Corporation. This is an area where teamwork is very, very important, you have to support each other, you have to look out for each other, it's just that kind of job, stress is hot and heavy and it is there all the time. I can guarantee you that if you need help from anybody in there, you will get it.

I think it is important for you to understand too that it has been stressed to support people in the office who have also [background noise] training so they understand what you have to deal with. If you come out of an office and say I need this now, you can walk away, they are going to do it. You don't have stand over their shoulder to make sure it is done and they should not be giving you any problems about doing it. If they are, I want to know about it immediately. Most

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important thing is to keep you on the phones and we do have a system set up where on your desks there are stackable files anything goes in them. I don't care if it's letters you signed from yesterday or it's a call reports that you need to send out or packets you need sent out or if they're todays or if they're just a packet or if they're for the removal program. Anything going out goes in that top box and then four times a day 8:00, 10:00, 12:00, 2:00 and 4:00 o'clock somebody from the support staff comes through and takes those out and deals with them. They sort them out, they put them in the right area, your job is to be on the phone to answer those questions, that is what you are trained to do. Again, keeping in mind, if you are stressed do not go on the phone, I understand that.

The second one is letters to be signed, letters that need to be signed, they're bringing in your mail, they're bringing in your letters, that need to be signed and they will put them in the second box (your second stackable). I think the third one is work in progress. May be you have to back this up with a letter to LeVier and find out about, can I still blow glass because I had an implant ... The heat from it can I still blow glass or can I

WOMEN: It's a concern.

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PAULETTE: Can I scuba dive, can I you know.

WOMEN: Will the implant slosh when I'm skiing the Alps?

PAULETTE: That's work in progress. That's things you have got to do. And, what's the bottom one?

WOMAN: The return letters, the ones that we need to file into our files.

PAULETTE: I do expect you to do your own filing, to keep current with your own filing. There is just too much for the front office to do for them to keep current with your files. It is just impossible. But they will bring them back, obviously, we can label these and some of them [background noise] but we will get that done to, you will have time to organize your office. We don't expect you to [several laughing and talking].

WOMAN: I wasn't sure.

PAULETTE: I don't know, I said time, I didn't say how much time.

WOMAN: You got ten minutes. Go.

PAULETTE: Hang your pictures and get it right.

There are somethings we need to talk about [undiscernible] because you need to understand that the complaints is not Corporate. It's very different over there.

WOMEN: Yes...Very different

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PAULETTE: I mean I like it there because the atmosphere is relaxed and

WOMEN: Cafeteria is close by....pop machine is right there

PAULETTE: By the way ladies, Friday is jeans day, wear them every Friday, by the way don't feel that you have to dress to the [undiscernible]...you certainly do not. If we are having visitors we usually do try to dress up, if we know in advance, we will certainly let you know. But there are times when you have ABC news or Channel 5 show up, we just didn't know about it. I'm real glad I live close - go home and put on a suit.

You will need to demonstrate an understanding of [undiscernible] selected medical materials, product lines, life cycles, associated risks and complications. Exhibit a grasp for the interrelationship between Dow Corning Corporation and Dow Corning Wright, from the Medical Plant and the physicians as customers, patients and the government.

Skill Objectives: Demonstrate the ability to work with people. Obtain necessary information either orally or in writing. Prioritize tasks and I think that is going to become very important, it is one of the reasons you were all chosen was your ability to prioritize in order to follow through in a timely manner on all responses to outside inquiries and internal housekeeping needed to report to executive management. Take the initiative to advise people to know of potential problems. I can't be every where at once, if you are seeing something that needs to be addressed, I need to know. Come to think of it, I am everywhere at once. At least I think I am everywhere at once.

Judgement Objectives: To exhibit evidence of balanced decisions which recognize when and which matters should be referred and to whom. Demonstrate recognition and appropriate use of authority to the Company to a physician.

The Corporate rating exceeded on your personal I.Q. is the center of [undiscernible] that means by creating an innovative or performing objectives at higher than expected levels. Corporate Rating meant to us, means that you have mastered all of these objectives. Corporate rating to the center means you need improvement and what I believe needs improvement means that you just might need more training. And we need to look at that. You all have been chosen because of your abilities and the high standing that you have in the Company. I think what we are doing is may be [undiscernible] and Legal what we need to look at is the fact that we need to go over some things to clarify them. What time do we have?

WOMEN: About 25 after.

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We're going to know, I hope before performance review time, that there are some things that we feel that we have that should be worked on.

PAULETTE: I think you are going to know that long before I do. You are going to say hey I need to work on

WOMAN: And we will be given an opportunity to resolve that before our performance review.

PAULETTE: Definitely.

WOMAN: On performance reviews, it seems to me that it would be real fitting to have much more frequent reviews. That's the annual thing. Because this is so fast paced and so tense that is it set up like every 6 weeks, every quarter, what?

PAULETTE: It is set up yearly right now. But I want you to know that there is a monitoring procedure that we will talk about later which will help us get into any problems before that performance review ever comes up. I cannot see a problem, I realize that everyone is concerned about their performance review, as am I, and everybody is. And, everybody gets them. But I think that what you need to understand is that I am not looking to slam you when performance is due, if there is a problem let's talk about it long before we ever get to that point. There is monitoring going on -- not only by us but by FDA and those things by themselves and outside people calling in and I think we are going to know before then and, again, if you are not sure of an answer then let's talk about it. If you are not sure about some aspect of a complication let's talk about it -- let's get it straight.

WOMAN: Okay.

PAULETTE: Definitely. As Ann pointed out, this is a very stressful strenuous thing and I don't expect you to just whiz bang it, but I am sure you all will be very [noise].

WOMAN: Another question on the performance reviews, because of the special nature of this group is it also relegated to the [undiscernible] that doesn't officially exist, it does exist every place in the Corporation. Like are you committed to one-fourth can get high grades then the middle ground and then one-fourth has to get the low grades.

PAULETTE: No.

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WOMAN: You don't?

PAULETTE and WOMEN: All talking.

PAULETTE: These are your objectives how did you meet them. Not, okay as a group some of you are just not going to make the grade, no matter what you do. I think this is a very unique area in fact that it is our mutual - first attempt at anything like this. It is very innovative, it is very new, and I will tell you [low verbal] a lot of recognition coming your way by the people who have been through this and realize that [low verbal]...did Mark tell you [low verbal]

WOMAN: No.

PAULETTE: did he just huff? I said you mean to tell me that in an emergency you will run. He said I will run for coffee, I will run for Coke, I will get lunches, I will polish shoes, but I don't want to answer phones. So there is a real recognition, this is a very special area in that as far as I am concerned there is recognition. It is how you perform your task that I am concerned about. Let's watch a couple of

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