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Association of Medical Professionals with Hearing Losses
1216 Timber Hawk Trail
Dayton, OH 45458

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MAR 26 2007
FEDERAL ROOM

Ms. Magalie Roman Salas
Secretary
Federal Communications Commission
445 Twelfth Street, SW
Washington, DC 20554

EX PARTE OR LATE FILED

Re: Ultra-Wideband, ET Docket 98-153

Dear Ms. Salas:

On behalf of the Association of Medical Professionals with Hearing Losses, I am writing to urge the Commission to move forward without delay in approving the use of the spectrum above 2 GHz for communications systems involving Ultra-wideband (UWB), low-power, short-range technology. This technology has the potential to enhance independent living for persons with disabilities, by making local area networking (LAN) easier and more affordable through high-capacity low cost wireless networking.

UWB networking has the potential to enhance independent living in several ways. First, UWB will make it possible to monitor and provide emergency assistance more easily to those living independently. In the event of trouble, a simple device carried with them or worn could bring help quickly. Additionally, UWB will make "smart home" technology a reality, allowing voice activation of lights, televisions, computers, security systems, appliances, and other networked devices for people with limited mobility. These potential services are also being examined by hospitals as a way to monitor patients more effectively and inexpensively. Furthermore, UWB can help bridge the digital divide, very literally – a UWB networked computer gives a person in a wheelchair the power to connect to a high-speed, high-capacity Internet connection without being constrained by the placement of telephone jacks or tangles of network wires.

We also ask the Commission to urge the developers of UWB technologies to consider the needs of persons with disabilities as products using this technology are brought to market. Many technologies have developed over the years which had the potential to dramatically enhance the living of persons with disabilities. Unfortunately, many of these technologies failed to assure basic disability access in the early stages of planning. Previous examples, such as the inclusion of closed captioning on television sets (which costs only \$.25 per TV set, yet makes a tremendous difference in the ability of disabled persons to "view" TV), have shown that making products accessible at an early stage in the planning process for products can create a "win-win" situation for both manufacturers and members of the disability community (as well as the general public). The potential of UWB is such that

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the needs of the disability community must be considered in the creation of new UWB devices.

Some commenters in this proceeding have expressed concerns that UWB products may cause interference with existing spectrum uses. While these concerns need to be addressed, we urge the Commission to move forward as expeditiously as possible to make UWB technology – and particularly UWB technology above the 2 GHz level – available to the public. The potential impact on the disabled community, particularly those with limited mobility seeking independent living, cannot be underestimated.

Sincerely,



Danielle N. Rastetter, D.V.M.
President and Director
Association of Medical Professionals with Hearing Losses

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MAR 26 2001
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