## Teacher Answer Key

**Case Study**

1. Records made at the time capture dates, symptoms, and conditions before memory fades or reshapes them — and before anyone knows what will matter legally or medically. Her dated notes let families prove symptom onset, which retrospective recollection could never establish as credibly.
2. She embodied 'count first': systematically documenting who was exposed and what happened, even while official reassurance said counting was unnecessary. That is exactly the surveillance logic behind the WTC Health Registry — records created early became the foundation for care and compensation decades later.

**Multiple Choice**

1. B
2. D
3. A

**Matching**

1-E, 2-D, 3-B, 4-A, 5-C

**Fill-in-the-Blank**

1) 71,000, 2) detective, 3) 2092

**Short Answer (Sample Responses)**

Q1: Exposure-driven diseases follow biological timetables: respiratory illness appeared in weeks, but cancers emerged a decade or more later and asbestos diseases can take forty years. Programs sized to months would have expired before most of the harm existed — hence the 75-year and 2092 horizons.
Q2: Every major gain — the 2010 act, the 2015 extension, the 2019 fund renewal — followed organized campaigns by sick responders and advocates, including nationally televised testimony. The programs exist because citizens converted moral claims into political pressure, not because institutions acted on their own.

Q3: Answers will vary. Strong responses cite the 2002 Bioterrorism Act's funding of hospital surge plans, the Strategic National Stockpile, linked laboratory networks, and syndromic surveillance, and note these systems were the infrastructure later tested by H1N1 and COVID-19.