1 areas, the facilities and the people that they
2 worked with. And I imagine that's the same thing
3 that's going on --
4 **MR. JERNIGAN:** It's a very big problem, and
5 especially when you get into, in your case,
6 survivors having to get involved in placing
7 claims. Like Mr. Dennis said -- Mr. Rocque said,
8 years ago they were not allowed to even talk to
9 their families about what they did on that plant.
10 Even people come in today to go through the
11 screening process, they want to know if we have
12 permission for them to talk to us. And they never
13 told anybody where they worked. They just knew
14 they -- families just knew they worked at Savannah
15 River Site, so unless -- I don't know, you'd have
16 to have a crystal ball with those people to figure
17 out where -- where those people worked. And from
18 my experience with DOE and Savannah River Site,
19 you get very little help from out there.
20 **DR. MELIUS:** Just along the same lines, when
21 you use various -- I don't know exactly what you
22 use. I know I've helped with the -- when they set
23 up the Fernald program in terms of sort of
24 pictures and buildings and -- from the past to
25 help people remember where they might have worked

1 or where a project took place. Have you used
2 that, and also have you -- to what extent have you
3 tried to piece together what happened in a
4 particular job out there that -- you know, from
5 fellow workers or from what information people
6 have that at least --
7 **MR. JERNIGAN:** We go through a process, like
8 we do have overviews of every area out there that
9 has all the buildings on it. We have maps on the
10 wall which we walk them through and -- and you ask
11 them questions like do you remember if the
12 building was above ground or below ground, was it
13 a tall building or a short building. You know,
14 you go through a pretty lengthy process of trying
15 to help them remember anything they can -- do you
16 remember your foreman's name, do you remember
17 anything about the people you worked for. We --
18 we train our interviewers to really do an in-depth
19 interrogation with these people, and we start off
20 with maps and pictures. And sometimes you get
21 very little.
22 **DR. ZIEMER:** Thank you very much. Again we
23 have another comment here.
24 **MR. ROWE:** I'm Gordon Rowe, construction
25 electrician out of Augusta, Georgia. I worked at

1 the Savannah River plant for approximately 15
2 years. As construction workers, we were moved
3 about to various areas wherever they needed help,
4 wherever there was a need for workers at a certain
5 time, depending on what areas were building up or
6 revamping and what-not. We were told to go into
7 various buildings and what-not. There was -- lot
8 of times we were -- there was no markings. We
9 would dress out, go into various areas --
10 radiation exposure areas, but there was no
11 markings as to what we were exposed to or anything
12 like that. And a lot of times we worked in areas
13 that the maintenance people -- the production
14 workers, we helped them out. There was areas that
15 they didn't -- didn't have worker for -- workers
16 enough to do it or for various reasons, we were
17 loaned out to production doing work that they were
18 supposed to do. We as workers just went in and
19 did our jobs. Then when we -- when I came down
20 and went through this screening program, I was
21 asked about various chemicals, all kind of
22 situations and products that I had never heard of
23 before, had -- had there been -- my point is, if
24 Savannah River Plant had pointed out the exposure
25 or the things that were harmful to construction

1 workers, they would have been more careful and
2 therefore would have probably -- the health
3 conditions would have been better in the long run.
4 **DR. ZIEMER:** Okay, thank you. Follow-up
5 questions?
6 **DR. MELIUS:** Just one quick question. When
7 you were working alongside production workers,
8 were -- were there situations where they were
9 being monitored, they had film badges or whatever,
10 and were you monitored in those -- those
11 situations?
12 **MR. ROWE:** Yeah, we were given -- whenever we
13 had to dress out and go into a -- a danger or
14 radiation -- where there was radiation, we were
15 given commonly a radiation monitor, a pencil
16 badge, as we normally called it. And -- but we
17 had to turn it in when we left the plant site and
18 then we'd pick it up, and at times there -- we
19 found out that these monitors were not always
20 accurate, you did not always get the same monitor,
21 and when you turned it in -- in short, there was -
22 - there was room for a lot of mistakes. And I
23 personally have seen reports where at the end of -
24 - you get a quarterly report as to how many rems
25 of radiation exposures you had, and I personally

have seen reports where a man that worked in a radiation area lot of times during the month would have the same exposure record as the man that never went into radiation, that worked in the tool room on the outside of the buildings and what-not. So as construction workers, we were doubtful about whether records were accurate or not.

DR. MELIUS: Thank you.

MR. ROWE: Okay.

DR. ZIEMER: Okay, thank you very much. Are there others who wish to make comments?

MS. GANTZ: Hello, I'm Julie Gantz. I worked out at Savannah River Site approximately four and a half years. I was clerical. The office -- the last office that I worked in backed up to a fab lab where they were constantly melting stuff. There was no retaining wall. Myself and two other women and my boss all came down with cancer. My boss has since died, two years ago. You know, we were always told we were safe, but we weren't. There were -- we always had to monitor out when we left the building, and a lot of times those monitors would go off and tell you, you know, that a part of your body was contaminated. And we were always told if -- if the monitor went off, to go

1 back around and if it gave you the all clear sign,
2 you were free to go. Or health protection would
3 stick their head out and say oh, the monitors
4 aren't working right today; go on and go, you're
5 fine. You never knew what was going on out there.
6 It was always a need-to-know basis, and if you
7 didn't need to know it, you did not know it, so...
8 **DR. ZIEMER:** Thank you very much. Again,
9 follow-up question -- here's one, if you --
10 **MR. GIBSON:** Did the company do any
11 additional monitoring on you like they did the
12 production workers?
13 **MS. GANTZ:** No. And also in the area that I
14 worked in, they had -- the way the hallway was
15 shaped, it was kind of like a U-shape with labs in
16 the middle of the hallway, and I could stand and
17 talk to a lab worker who was fully dressed out,
18 and all there was was a door in between us with a
19 glass window. She was fully dressed out and I was
20 not, and it was as -- and we could talk as if we
21 were standing right next to each other.
22 **MR. GIBSON:** And so you -- you folks were
23 never afforded the same opportunity to bioassay
24 testing --
25 **MS. GANTZ:** I never did any kind of bioassay

1 samples. There were other -- other people that
2 worked back in the area where I did, they had to
3 do that, but I never had to get an-- only testing
4 I ever had out there was a drug test, right before
5 I left.
6 **MR. GIBSON:** That seems to be more important
7 to them. Thank you.
8 **DR. ZIEMER:** One more question, I think.
9 Dr. Andrade?
10 **DR. ANDRADE:** I'm curious, without revealing
11 a name or any sort of information about your
12 supervisor or personal information, can you tell
13 us what type of cancer the person passed away
14 from?
15 **MS. GANTZ:** Cancer of the esophagus.
16 **DR. ANDRADE:** Esophagus?
17 **MS. GANTZ:** Uh-huh. Thank you.
18 **DR. ZIEMER:** Okay, thank you very much. Are
19 there others?
20 **MR. HILLS:** I'd like to say good evening
21 again, and my name is Warren Hills, Sr. I just
22 want to make some comments for the benefit of the
23 committee here with our screening program here in
24 Augusta. Charles I think explained pretty well
25 what we did and what we went through with the

1 screening, until the point of filing the claim.
2 Going through the screening, after explaining
3 everything to those that were interviewing --
4 where you worked at, how long you were there,
5 whatever you was in, was it under the area, was it
6 in the reactor area, whether you were around
7 radiation, was it inside, outside, was there a lot
8 of dust or whatever the case may be. After having
9 done all that, they send you to get a physical.
10 After the physical -- the physical comes back,
11 most time when they come back they say you had a
12 hearing loss or you have an enlarged heart. As
13 far as skin cancer, nothing was mentioned there if
14 you had any type cancer on your skin. We had a
15 lot of folks that had lung cancer. In my local we
16 had about three that worked at Savannah River
17 Plant. They found a spot on their lung. They
18 removed the spot. A couple of years later they
19 died from lung cancer. Those cases haven't been
20 settled yet, and that's what a lot of the families
21 in this area are wondering why that Savannah River
22 Plant is being, we feel, looked over as far as
23 settling these claims or NIOSH finding some way to
24 figure out a dose and say if you do have cancer
25 and your doctor say you had it and you worked at

1 that plant at least six, seven, eight, nine, ten
2 years, some of them 20 years, and there's still no
3 settlements. Some of the folks even had colon
4 cancer and we know that cigarettes has a lot to do
5 with lung cancer, but the thing is that these
6 people worked at Savannah River Plant most of
7 their lives.
8 We understand that Oak Ridge, Tennessee and
9 Portsmouth, Ohio; Paducah, Kentucky, even Alaska -
10 - all the uranium workers in the Paducah and in
11 the Oak Ridge area have been paid -- their
12 families have been paid or whatever. Over $13
13 million has been paid out to date for this program
14 in all of these areas I just mentioned. Nothing
15 has been spent -- not one penny, I think -- as far
16 as compensation for any worker in the Savannah
17 River area. We feel that we should be under that
18 Special Exposure Cohorts. And the other reason we
19 feel that they're just looking over Savannah River
20 Plant 'cause when duPont was there, even after
21 duPont left in '89 and Westinghouse-Bechtel took
22 over, duPont supposed to have been the most safest
23 plant in the world, and right now we're under the
24 star program. So if this plant was so safe, how
25 can anybody get exposed? They say there wasn't

1 any belenium (sic) on the site, and after going
2 through some of these physicals, these 37,000
3 people, they found about eight that did have it.
4 But to date these people still haven't received
5 any compensation and the families don't know who
6 to go to, who to talk to. And you go over and you
7 file a claim, everybody help you -- they even come
8 to your house to help you file a claim. Well,
9 once the claim is filed, they say everything is up
10 to NIOSH. And all these other areas except
11 Savannah River Plant, the bomb factory, the one
12 that did the thing that was supposed to be done to
13 defend this country, and now the families and the
14 relatives of gets nothing except committees,
15 committees, committees. I think this is the fifth
16 year, and that's my comments.
17 **DR. ZIEMER:** Thank you for your comment.
18 Again, let's see if there's any follow-up
19 questions here.
20 **MR. HILLS:** I'm sorry?
21 **DR. ZIEMER:** No, that's okay. I guess there
22 are none. You're okay.
23 **MR. HILLS:** I apologize.
24 **DR. ZIEMER:** Perhaps there are no comments.
25 Okay, thank you, sir.

1 Now others?

2 (No responses)

3 There will be another public comment period
4 tomorrow, late morning. It's scheduled for the
5 end of our morning session at 11:30, so if there's
6 anyone here this evening that has second thoughts
7 and said you know, I really should have said
8 something, you can come back tomorrow and we'd be
9 glad to hear you. Again, I don't want to cut
10 things short. If anyone else has a comment they
11 wish to make -- another gentleman. Thank you.

12 **MR. BEATTY:** Again, my name is Ray Beatty.
13 I'm from Fernald site, and the reason I hesitated
14 coming to the mike, I wanted to not infringe upon
15 my brothers and sisters of the unions here. This
16 is, you know, your site, your time to speak. But
17 a couple of things were mentioned -- specifically
18 one Board member mentioned Fernald site -- and we
19 do have some baseline summaries, books that shows
20 what went on in specific buildings, what those
21 people did in those buildings, and it's probably
22 very helpful. But I'd like to tell you another
23 side of the story where an individual on our site
24 has been there for over 20 years, he applied
25 through the program. And I'm not sure if in the

1 Federal program he was compensated or not. It
2 doesn't really matter at this point on -- on this
3 particular issue that I'd like to share with the
4 Board. But he has applied through the Workers
5 Compensation or the Subtitle D, as I'm informed
6 that -- upon the time of his hearing, and I'd like
7 for my brothers and sisters to hear this very
8 clearly -- you do get an opportunity to go before
9 a panel and to hear your case heard. Watch and
10 see just how many adversaries come to that same
11 table. It happened to my friend at the Fernald
12 site, where the subcontractor that's there now
13 came there and opposed his application for this
14 fee -- or this -- for this award, and he's -- he's
15 been there for over 20 years. That
16 subcontractor's been on our site for 12 years. He
17 is affected with beryllium disease and this has
18 all been documented by the tests and various
19 things in Colorado. He shared a great deal of
20 this information with me personally, but I was
21 under the impression talking with him that that
22 sort of adversarial result was not supposed to
23 happen, and this subcontractor did this. They
24 sent their own industrial hygienist to the
25 hearings to oppose his application. So please

take note of that for what it's worth. It did happen. Verification is there. Thank you.

DR. ZIEMER: Thank you for that comment. Let's see if there's any questions any Board members have.

(No responses)

Was there someone else? Yes.

MS. MILLER: I'm a little short. I'm a little bit nervous so please bear with me. I just wanted to reinforce what Ms. Gantz --

DR. ZIEMER: Identify for the record, please, your name and --

MS. MILLER: Oh, I'm sorry. My name is Kay Miller, and I just wanted to reinforce what Ms. Gantz had previously said. Three of us clerical ladies worked in the same office. Within about a year's time of being in that office, we all developed cancer. As she said, our boss had worked in there prior to the three of us. He died about two years ago.

There was no retaining wall between our office and a fabrication laboratory in the basement underneath us that was classified as an RCA. We were not told the wall was not there and had no knowledge that it wasn't there. I found

1 out by mistake, actually when a maintenance worker
2 was changing fluorescent light bulbs in the
3 office. We had been getting real horrendous odors
4 in that office and no other office on that
5 hallway, and they would be so bad that you could
6 only be in the room about five minutes before you
7 developed a severe headache. And I asked the
8 worker to lift the ceiling tile to see if he could
9 see where those odors may be coming from, and at
10 that point we discovered there wasn't a wall
11 separating our office from that laboratory.
12 I guess the thing that concerns me the most
13 is both my claim and Ms. Gantz's has been denied,
14 and it seems that that was based primarily on our
15 TLD readings. We believe that we were exposed to
16 something, that the probability of four people
17 working in the same office all developing cancer
18 is just a little bit for me to believe that it
19 wasn't due to something we were exposed to, and
20 that's all I've got to say.
21 **DR. ZIEMER:** Thank you. Let me again ask for
22 questions.
23 (No responses)
24 Okay, thank you very much. Do we have any
25 others yet this evening?

1 (No responses)
2 It appears that we have no other individuals
3 to make public comment, in which case we will
4 recess for the evening. Again remind you that the
5 Board will reconvene in the morning. We reconvene
6 at 8:00 o'clock. Our actual session will formally
7 begin at 8:30. The Board will be discussing a
8 number of matters and then have another public
9 comment session at the end of the morning. Our
10 session in the afternoon is a closed session that
11 will involve discussion and review of a task order
12 proposal and independent government cost estimate
13 and therefore will be a closed session.
14 With that, again, I thank all of those who
15 came out tonight. We appreciate the input that
16 you provided, your comments. Again, you recognize
17 that on an individual basis, the Board does not
18 deal with those cases, but in a collective basis
19 those experiences that you have and have relayed
20 to us will help us as we go forward in doing our
21 task, and we appreciate your all taking the time
22 to come and be with us and share with us this
23 evening. And with that, I'll declare that we're -
24 - oop, yes, Richard Miller. I know --
25 **MR. MILLER:** I -- I -- I promised I wouldn't

1 speak this evening.

2 **DR. ZIEMER:** No, I --

3 **MR. MILLER:** My name is Richard Miller with

4 the Government Accountability Project. I have a

5 procedural question for both the Board, for NIOSH,

6 for ORAU, for the audit contractor, and all the

7 people who are getting paid to work on this

8 program.

9 The woman who just spoke raised a really,

10 really, really interesting and important question.

11 I don't know what the causes of her or her

12 colleagues' cancer were or whether she was exposed

13 to chemicals or radiation. We don't even know the

14 details. But what we do know is this much: That

15 the Savannah River site profile probably skirted

16 over that issue at about 25,000 feet.

17 And the second thing that sort of strikes me,

18 just from having listened to Dr. Neton's

19 presentation today about the efficiency guidelines

20 that are developed is they assume that where you

21 have unmonitored dose it couldn't possibly exceed

22 more than ten percent of the maximum permissible

23 body burden.

24 Now the procedural question I guess I have is

25 this. What inquiry is anybody in this room going

1 to make about the testimony we've heard today to
2 figure out whether your site profile missed the
3 specific circumstances in that case by a mile? Is
4 anybody going to look into that, or is this just
5 going to stay on the record and collect dust and
6 people can read it on the web site if they're
7 interested? What -- what specific follow-up will
8 take place, if anything?
9 **DR. ZIEMER:** Richard, you pose a question
10 that probably is not answered on the spur of the
11 moment but certainly is a thought-provoking
12 question in terms of saying could in fact this
13 kind of exposure not be captured, is what you're
14 asking, in the assumptions made.
15 **MR. MILLER:** I'm making no assumption about
16 the individual's case or her story --
17 **DR. ZIEMER:** No, I understood --
18 **MR. MILLER:** -- but I am saying an unshielded
19 circumstance, if as-described is true, is a very
20 interesting item uncaptured and clearly will be
21 well disposed of through the efficiency methods --
22 very efficiently disposed of. And I don't know
23 whether NIOSH or anybody in this room is going to
24 make a commitment to deal with that situation, but
25 I would really like to hear somebody on the

1 Federal payroll step up and say we're going to
2 take a look at it. And since the record remains
3 silent, I guess it speaks for itself.
4 **DR. ZIEMER:** Thank you. Michael?
5 **MR. GIBSON:** I'm not certain, Paul, but I
6 believe that the Department of Energy was
7 instructed not to oppose Workers Comp claims --
8 Subtitle D claims, and I was wondering if there's
9 any Department of Energy officials in the
10 audience, or will be tomorrow, that could address
11 this, which seems to be in direct violation of
12 what then-Secretary Richardson ordered when this
13 law was being enacted.
14 **DR. ZIEMER:** Is there anyone here that -- DOE
15 people that can speak to that, or can any of the
16 other Feds?
17 **MR. ELLIOTT:** I don't believe there's any DOE
18 folks here tonight, and I -- I'm -- I don't know
19 if L. P. Singh will be here -- is L. P. here
20 tonight?
21 **UNIDENTIFIED:** (Inaudible)
22 **DR. ZIEMER:** I'm sorry, we -- we're not
23 picking that up on the transcript here. We'll
24 need to have you use the mike again.
25 **MS. MILLER:** Again, my name is Kay Miller.

1 We received a letter stating that workers -- our
2 state Workers Comp had been notified that our
3 claim was denied, and our understanding is that if
4 your claim is denied you do not receive any
5 benefits from state Workers Comp. That was the
6 gist of the letter that I received.
7 **DR. ZIEMER:** Okay, thank you. The other
8 question had to do with the opposition in the
9 testimony. Right? And I -- again, we -- I guess
10 we don't have anyone here from DOE to respond to
11 that.
12 **MR. GIBSON:** Paul, I was mainly referring to
13 -- well, not only to this case, but the case that
14 the brother -- that the gentleman brought up from
15 Fernald.
16 **MR. ANFIELD:** My name is Isaiah Anfield. I'm
17 a former employee with E.I. duPont, local 1137
18 union. Referring to the lady just stepped up to
19 the ball plate, they did me the same way, and I
20 don't see why DOE keep playing with all these
21 people that really actually something that
22 happened. I done been to three or four different
23 doctors. You're still getting the same -- same
24 correspondence. You know, it's clear to me
25 they're just playing simple ball game. You know,

1 and a lot of people dying, and it's not about the
2 money, you know. It's about my health. I got my
3 paperwork right here with me 'cause they did me
4 the same way, writing all that bull junk talking
5 about ain't nothing wrong with me, and there
6 something is wrong with me. I got all my -- all -
7 - I done (Inaudible). I done went to three or
8 four different doctors. Now... So what is DO
9 (sic) going to do? Y'all can have all that
10 Advisory Board to meet and committee meeting.
11 That ain't worth nothing if you ain't going to
12 compensate them employees over there. You know
13 you're just playing games. That's what it seems
14 like to me. You can have 20 different meetings.
15 You can have a meeting every month. That's not
16 comprehending (sic) nobody and that ain't helping
17 nobody. What is the deal? What you going to get
18 out of it? You go to four or five different --
19 and then another thing, DOE want to send them to
20 they own doctors 'cause they -- they pay them by
21 the government 'cause the government going to
22 stick by one another.
23 **DR. ZIEMER:** Okay, thank you. Any further
24 comments tonight?
25 (No responces)

1 Again, we thank all those who made comments
2 and participated. We will recess until tomorrow
3 morning, as indicated, and declare this session
4 adjourned.
5 (Whereupon, an adjournment was taken to
6 Friday, February 6, 2004 at 8:00 a.m.)
7