

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL
NATIONAL INSTITUTE FOR OCCUPATIONAL
SAFETY AND HEALTH

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ADVISORY BOARD ON RADIATION AND
WORKER HEALTH

+ + + + +

SUBCOMMITTEE ON PROCEDURES REVIEW

+ + + + +

MONDAY
JANUARY 9, 2012

+ + + + +

The Work Group convened in the
Brussels Room of the Cincinnati Airport
Marriott, 2395 Progress Drive, Hebron,
Kentucky, at 9:00 a.m., Wanda I. Munn, Chair,
presiding.

PRESENT:

WANDA I. MUNN, Chair
RICHARD LEMEN, Member*
PAUL L. ZIEMER, Member

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ALSO PRESENT:

TED KATZ, Designated Federal Official
BOB ANIGSTEIN, SC&A*
HANS BEHLING, SC&A*
ELIZABETH BRACKETT, ORAU Team*
STU HINNEFELD, DCAS
STEVE MARSCHKE, SC&A
JOHN MAURO, SC&A*
MICHAEL RAFKY, HHS*
SCOTT SIEBERT, ORAU Team*
MUTTY SHARFI, ORAU Team*
MATT SMITH, ORAU Team*
JOHN STIVER, SC&A
ELYSE THOMAS, ORAU Team*
BRANT ULSH, DCAS

*Participating via telephone

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1 P-R-O-C-E-E-D-I-N-G-S

2 9:00 a.m.

3 MR. KATZ: Wanda, it is your
4 agenda.

5 CHAIR MUNN: All right. Does
6 everybody have the agenda, including those on
7 the phone? It was only sent last week. So,
8 you haven't had it for a very long time, but,
9 hopefully, you have had a chance to take a
10 look at it.

11 Does anyone have any additions,
12 corrections, or deletions from what we have on
13 the agenda currently?

14 MR. KATZ: And, folks on the
15 phone, we have a couple of additions to the
16 agenda. One is --

17 MR. MARSCHKE: OTIB-6

18 MR. KATZ: -- OTIB-6.

19 MR. MARSCHKE: Findings 3 and 4.

20 MR. KATZ: Findings 3 and 4.
21 Plus, at the end of the day, under
22 administrative details, we have -- discuss

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1 whether there are new procedures to be
2 considered by SC&A and, also, discuss the path
3 forward for PER reviews. So that is what is
4 on the plate so far, folks on the phone.

5 DR. ULSH: Wanda, I don't have the
6 agenda open in front of me right at the
7 moment, but we are prepared to talk about
8 OTIB-70.

9 CHAIR MUNN: We are?

10 DR. ULSH: "We" meaning NIOSH.

11 CHAIR MUNN: Yes, and "we" meaning
12 the Committee.

13 DR. ULSH: OTIB-52, and I think we
14 already talked about OTIB-6.

15 CHAIR MUNN: OTIB-52, we will
16 include OTIB-6. We also had OTIB-10, Bob
17 Anigstein's report review, and you have a
18 couple of things to talk to us about under the
19 status of the PERs. Yes, that is what I have.
20 I believe we are okay.

21 The first item we have, as usual,
22 is our concern with the database review and

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1 where we are. At our last meeting in
2 September, we were hoping that there would be
3 one or more productive meetings of the folks
4 who were working on that database to try to
5 resolve some of the issues that we had
6 discussed at that meeting and at previous
7 meetings, and to see if we could get one step
8 closer to where we need to be.

9 Steve, do you want to talk to us
10 about that? Did you have an opportunity to
11 meet with all the parties involved?

12 MR. MARSCHKE: We didn't really
13 have any kind of a formal meeting between SC&A
14 and NIOSH on this thing. What we have done is
15 we have attempted to use the database. In
16 using the database, whenever -- once in a
17 while I will come across some bugs or
18 glitches, and I will send off an email to
19 Brant.

20 A couple of them, I have one here
21 on the screen -- basically trying to create --
22 one of the things that we talked about last

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1 time was a PDF file and being able to create
2 the PDF file --

3 CHAIR MUNN: Right.

4 MR. MARSCHKE: -- from the
5 document. That has been implemented, but when
6 I tried to use it, I was, you know, 90 percent
7 successful. In one case, it didn't work. And
8 so, I sent the email off, and I don't know,
9 that is, I guess, being taken care of.

10 And then, just recently, when I
11 tried to look at the findings of OTIB-10, I
12 got an error message. The issue, again, you
13 can see what came up in red. There was an
14 issue loading the comment, finding details.

15 These are the types of things you
16 would expect to find during the, I guess you
17 would call it, the beta phase of software
18 development. These are just normal, typical
19 things, I think. These are probably going to
20 continue for some time, as we get into the
21 nitty details and start working with the
22 software, and these things are going to creep

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1 up, and we'll continue to -- but I mean,
2 Wanda, you had probably the most significant
3 thing was we still don't have a way to
4 generate the summary table.

5 CHAIR MUNN: Right, which we were
6 hoping for --

7 MR. MARSCHKE: Actually, we don't
8 have any way to get any kind of summary
9 information. It used to be SC&A's finding
10 summary report, and that has gone away. So,
11 right now, there is no way to get any kind of
12 summary information out of the database. I
13 mean, I think that probably should move to the
14 top of the list of things to do.

15 CHAIR MUNN: I would very much
16 like to see that moved to the top of the list,
17 for more reasons than one. Not only is it the
18 best tool that, in my opinion, we have had
19 since we started this process, but also it is
20 the ideal mode for reporting out to people
21 outside of both the Subcommittee and outside
22 of the Board itself as to the progress that we

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1 are making here. Certainly, without it, there
2 is simply no few set of words, few set of data
3 points that can be put in front of someone to
4 say this is what we are doing; this is how far
5 we have gone. So, yes.

6 And we all agree that that needs
7 to move up to the top of the list for next
8 time. So I really would like to see this
9 happen.

10 DR. ULSH: Yes, to go back to our
11 last meeting, the highest-priority item coming
12 out of the last meeting was the ability to
13 generate the PDF --

14 CHAIR MUNN: The PDF file.

15 DR. ULSH: -- summary findings.

16 CHAIR MUNN: Correct.

17 DR. ULSH: And that has been done.

18 CHAIR MUNN: Good. Hopefully.

19 DR. ULSH: Well, with occasional
20 bugs.

21 CHAIR MUNN: Yes.

22 DR. ULSH: But, by and large, it

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1 has been done.

2 CHAIR MUNN: It is ready.

3 DR. ULSH: So we will continue to
4 work on the individual bugs as they come out,
5 but --

6 CHAIR MUNN: Now the crucial
7 question is, is it ready enough for the
8 Subcommittee Chair to be able to get out of it
9 what she wants?

10 (Laughter.)

11 DR. ULSH: Well, let's leave that
12 to be determined. But, for the next meeting,
13 we will move this priority item up to generate
14 the summary list. It used to be the SC&A
15 summary list, for lack of a better term.

16 CHAIR MUNN: Yes.

17 MR. MARSCHKE: Well, there were
18 two summaries. I mean, there was what we call
19 the "Wanda summary list" or the summary table
20 from the Access database. And this SC&A
21 summary list or findings report that is here
22 was something that I think, NIOSH, you guys

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1 put together when we migrated over to the SQL,
2 to this database.

3 And so, we really want to get the
4 so-called "Wanda summary table" or the summary
5 table that we had back in the Access database.

6 It gave a breakdown. Yes, it was more like
7 this table here, which had the date when the
8 findings were generated, and then it goes --

9 MEMBER ZIEMER: We talked with the
10 IT guy about this last time, didn't we, I
11 thought?

12 MR. MARSCHKE: We talked with them
13 numerous times, Paul.

14 MEMBER ZIEMER: Was there another
15 column that had to be added? Or there was
16 something else that had to be searched. Was
17 it the date of the report or --

18 MR. MARSCHKE: One of the things
19 we talked about --

20 MEMBER ZIEMER: -- was missing
21 that didn't permit us to sort the way we
22 wanted on this.

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1 MR. MARSCHKE: Oh, I don't know
2 about on this, sorting on this, because there
3 really wasn't much to sort on this.

4 One of the things that we have
5 talked in the past about missing is a little
6 descriptor, describer, as to what this date
7 is. This is really the first package of --

8 CHAIR MUNN: This is the group.

9 MR. MARSCHKE: This is the group.
10 Maybe this one here is the review of OTIB-52.
11 Maybe this one is the review of PROC-70. And
12 so there should be a little bit of a
13 descriptor associated with each one of these
14 dates. I mean, we have talked about that
15 going back to when we were on the Access
16 database, and we determined at that time,
17 because we were migrating over, that it wasn't
18 worth making the change. But if we are on
19 this one, we may want to add a column here
20 saying, you know, a little descriptor as to
21 what each one of these dates are.

22 MR. HINNEFELD: If I could have

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1 one of those, I will take it. Brant is going
2 on travel tonight. So I will take it back to
3 Tom.

4 MEMBER ZIEMER: These were dates
5 of groups of findings.

6 (Simultaneous speakers.)

7 CHAIR MUNN: There were only three
8 groups of findings. The others were
9 individuals that came up from some generalized
10 Board discussion that directed them to our
11 attention.

12 MEMBER ZIEMER: Right. Like the
13 first one was 183 findings. That was
14 multiple.

15 CHAIR MUNN: Correct.

16 MR. MARSCHKE: Yes, the three in
17 there where you see a hundred findings
18 associated with them, those are multiple
19 reviews. The other ones are all individual
20 documents.

21 MR. STIVER: Those were the three
22 big sets.

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1 CHAIR MUNN: That is correct.

2 MR. HINNEFELD: These are all
3 dates of SC&A deliverables.

4 MEMBER ZIEMER: Exactly. Those
5 are SC&A dates.

6 MR. STIVER: Rather than those
7 three with hundreds we are not quite sure
8 exactly what drove those dates on the other --

9 MR. MARSCHKE: Those are dates of
10 the report.

11 MR. HINNEFELD: Dates of the
12 deliverable, dates of the report.

13 MR. MARSCHKE: Dates of the
14 report, dates of the deliverable.

15 MEMBER ZIEMER: And the report
16 was --

17 CHAIR MUNN: There were groups in
18 that.

19 MEMBER ZIEMER: -- a whole bunch
20 of, a certain set of procedures were reviewed
21 in that report. And that 183, or whatever the
22 number is --

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1 CHAIR MUNN: Correct.

2 MEMBER ZIEMER: -- is a
3 compilation of all the findings in multiple
4 reports.

5 CHAIR MUNN: There was one in
6 2005, one in 2006, one in 2007.

7 MEMBER ZIEMER: And they were
8 tasked in groups.

9 MR. HINNEFELD: Right.

10 CHAIR MUNN: The others were
11 individual assignments from --

12 MR. MARSCHKE: I know the
13 construction worker was one of the individual
14 ones, and I think PROC-70 was an individual
15 one.

16 CHAIR MUNN: Yes.

17 MR. MARSCHKE: There was -- what
18 was it, 6000.

19 CHAIR MUNN: Yes, there are
20 several, all the others potentially.

21 MR. MARSCHKE: Yes, all the other
22 ones are -- individual reports. I think

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1 OTIB-54 -- before 44, I don't know even know
2 if that is on this list, but that was another
3 one.

4 MR. KATZ: Right.

5 CHAIR MUNN: And what you have up
6 on the screen right now, my system, if I click
7 on the SC&A finding reports, I get an error
8 message.

9 MR. MARSCHKE: Yes, yes, you get
10 an error message on that, right. That is not
11 working.

12 CHAIR MUNN: So there is just
13 nothing --

14 MR. MARSCHKE: There is nothing.

15 CHAIR MUNN: -- other than what we
16 have up on the screen right now.

17 MR. MARSCHKE: Exactly. There is
18 no way to get any kind of automated summary
19 out of the way it stands right now.

20 MEMBER ZIEMER: Unless you had a
21 column identifying the SC&A finding date.

22 MR. MARSCHKE: And you could

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1 search on it. But, then, you would have to
2 add them up by hand.

3 CHAIR MUNN: Or we could even say
4 group one, group two, group three.

5 MEMBER ZIEMER: Well, if any ones
6 that had this first date on it, if you
7 searched on that, you would get that whole
8 group of one --

9 CHAIR MUNN: That's correct.
10 That's correct.

11 MEMBER ZIEMER: That's all I'm
12 saying.

13 MR. STIVER: That's true. Yes,
14 you could do it that way.

15 MEMBER ZIEMER: If each finding,
16 where it says "Total Findings" on that
17 document, if you had the date, the SC&A date
18 of those findings, you could search on it.

19 MR. STIVER: It would pull up that
20 group, wouldn't it?

21 MEMBER ZIEMER: Yes, I think it
22 would.

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1 CHAIR MUNN: Well, we would hope
2 so, in any case.

3 I will make every effort, later
4 this week or early next, to see how successful
5 I am with getting the PDF files up. That will
6 be most helpful to the Work Groups as we
7 transfer --

8 MR. MARSCHKE: Actually, Wanda, we
9 can run through an example, either during one
10 of the breaks or if you want to do it when the
11 Subcommittee is in session, we can run through
12 the steps of how to generate a PDF file, if
13 you --

14 CHAIR MUNN: I wouldn't mind doing
15 that right now.

16 MR. MARSCHKE: Okay.

17 CHAIR MUNN: Because there may be
18 others from time to time who will need that,
19 and certainly people outside those sitting in
20 this room will need it from time to time, if
21 they don't get it from there.

22 MR. MARSCHKE: Okay.

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1 MR. STIVER: This is John Stiver.
2 I'm sorry to interrupt.

3 But before we move on to the PDFs,
4 I just wanted to say that maybe this is a
5 question for both Brant and Steve. Is there a
6 particular reason why generating this and
7 sorting by finding is particularly difficult?

8 Or is it just that it hasn't been addressed
9 fully as a priority item? It has been about a
10 year and a half since we were able to generate
11 that summary table.

12 DR. ULSH: Well, and over the past
13 year and a half, we have gone from having
14 pretty much nothing to where we are --

15 MR. STIVER: Right. I know a lot
16 of progress has been made here.

17 DR. ULSH: Well, yes. As in
18 previous meetings where we have organized the
19 priorities, this has been near the top, but
20 the highest thing has been generating PDF.

21 CHAIR MUNN: The PDF.

22 DR. ULSH: So, this is now moved

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1 up to the top.

2 MR. STIVER: I would just add that
3 this is a tool that, to me, is very central.
4 It is a very simple table, but it provides all
5 that trending data right upfront, and it is
6 very useful for Wanda, but it would also be
7 useful for me in tracking our progress from
8 SC&A's standpoint.

9 And I would just suggest that an
10 interim measure. We can certainly put
11 together the summary reports ourselves until
12 such time as the automated system is
13 available.

14 We have one of our junior
15 engineers who is database-savvy, or several,
16 who could spend a day or two pulling the
17 information out by hand, generating the table.

18 I am going to essentially have that done on
19 my side, and we can provide that to Wanda.

20 MR. MARSCHKE: Well, let's see.
21 When we schedule the next meeting, and it
22 probably will be in three or four months, I

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1 would assume.

2 MR. STIVER: See where we stand.

3 MR. MARSCHKE: See where we stand
4 on the automated one. And if we can do it
5 with a click of a button, it is going to be a
6 lot easier than if we have to spend a day or
7 two to do it.

8 MR. STIVER: Yes. Well, we will
9 see where we are a month out from --

10 MR. MARSCHKE: But if we can't get
11 it a month out or a couple of weeks out, if it
12 is not available, then we can have somebody, a
13 junior engineer, go through and make this,
14 similar to a table like this before the next
15 meeting.

16 CHAIR MUNN: I would really
17 appreciate that, John. Thank you very much
18 for the offer. We will keep our fingers
19 crossed and hope that it isn't necessary, that
20 we will be able to push a magic button and do
21 what we need to do by the time we meet again,
22 which I hope is not going to be more than

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1 three months from now. I would like for us --

2 MR. KATZ: Yes, so let's just
3 check in two weeks before the meeting, and if
4 we need it, that will be great.

5 CHAIR MUNN: Excellent.

6 MR. MARSCHKE: Shall we move on?

7 The next kind of outstanding issue
8 or problem with the database is -- again, we
9 talked about this the last time -- this column
10 that we call "Total Active Findings." That
11 still does not seem to be working correctly.

12 I use OTIB-54 as my example of
13 this because it is very illustrative.
14 Basically, last time we talked we tried to
15 discuss and determine what do we mean by
16 active findings. And I think we settled on a
17 definition of any finding except for those
18 that are either closed or in progress is an
19 active finding.

20 But you can see, basically, if you
21 look at OTIB-54, you can see it has 26 total
22 findings, and according to this database, it

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1 has 26 active findings. But if you click on
2 the details of OTIB-54, you can go in here and
3 you can see basically -- oh, I'm sorry, I
4 screwed up the definition of active.

5 Anything that is closed or
6 anything that is in abeyance -- well, that is
7 not what we decided last time. We said,
8 basically, in abeyance or closed were the ones
9 kind of similar to what was the trip for the
10 two-pagers. Anything that would generate a
11 two-pager, all the findings had to be either
12 in abeyance or closed. And so, we were kind
13 of trying to use the same definition for here.

14 If you remember from the previous
15 screen, it had 26 total and 26 active. Well,
16 you can see from the detail screen, the first
17 one is in abeyance. The second one is closed.
18 The third one is closed. The fourth one is
19 closed. So you get the idea.

20 CHAIR MUNN: Right.

21 MR. MARSCHKE: So that column is
22 not working. I think that probably should be

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1 priority number two because that is a
2 convenient way, if that is working, that is a
3 convenient way to kind of like assign
4 priorities to the procedures, as to which ones
5 have the most active findings, and so which
6 ones should we tackle maybe next or get the
7 most bang for your buck.

8 CHAIR MUNN: Well, if we are
9 successful in getting our ability to get a
10 "Wanda report" out, a summary out, then that
11 will automatically take care of itself.

12 MR. MARSCHKE: That will help in
13 that area as well.

14 CHAIR MUNN: Right.

15 MR. KATZ: Well, no, but the
16 "Wanda report" will be inaccurate. So it is
17 just as important because the "Wanda report"
18 won't be correct, right?

19 MR. MARSCHKE: I don't know how --
20 it depends upon how they do the calculation,
21 how they prepare the "Wanda report" and how
22 they prepare this.

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1 DR. ULSH: It is all right. We
2 can have two top priorities.

3 (Laughter.)

4 CHAIR MUNN: We can do that, yes.
5 Which is priority 1? Priority 1 and priority
6 1 plus.

7 MR. MARSCHKE: Now, coming back to
8 Wanda's request to demonstrate, I mean,
9 generating a PDF file is very simple at this
10 point. The way it has been set up is that you
11 generate a PDF file for each finding. It is
12 finding-driven.

13 So, for example, if I wanted to
14 get a PDF of OTIB-54, Finding No. 1, all you
15 have to do is come over here and click on the
16 PDF thing, and it basically comes up in a
17 separate window. You can blow it up, and it
18 shows all the history of Finding No. 1.

19 And then, you can come over here
20 to the file and click on the file and just go
21 to print. And again, it is going to come up
22 here. It will print it to Document Writer or

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1 you can down here to CDC PDF Writer, click on
2 that.

3 CHAIR MUNN: I'm sorry, I missed
4 that. Go down to where?

5 MR. MARSCHKE: Hang on for a
6 second.

7 Go back and go up to file here,
8 click on print, and then when it says up here
9 "Printer Type" up in the upper lefthand
10 corner, basically, you click on it, and it
11 basically says all the different types of
12 printers. And two of them are -- I don't know
13 what the difference is between CDC PDF Writer
14 in Session 7 and CDC PDF Writer down here.
15 But let's just pick one, and you just click on
16 that, and now it is going to generate a PDF
17 file. And you click on OK. And it should
18 come back. Okay, it comes back with a notice.
19 You click on OK.

20 MR. STIVER: Wait a second. I got
21 lost in that last little step there. It
22 didn't work out for me. Okay.

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1 MR. MARSCHKE: And then, it asks
2 you where do you want to put it.

3 MR. STIVER: You used PDF Writer
4 in Session or the --

5 MR. MARSCHKE: I used the Session
6 7.

7 CHAIR MUNN: You used Session 7?

8 MR. KATZ: Although when you are
9 hooked up to a printer, if you use in session,
10 it will send it to your printer. That's it.

11 MR. MARSCHKE: Yes, right.
12 Obviously, if you say PDF Writer, it is going
13 to send it to a file, a PDF file, and you have
14 to tell it where you want to put it in the
15 PDF, in the file, where you want the file to
16 be.

17 CHAIR MUNN: Okay.

18 MR. HINNEFELD: Can you just not
19 "Save As" when the PDF first comes up? Can
20 you just not do the "Save As" and save it that
21 way? Do you have to run it through the PDF
22 printer? It comes up as a PDF.

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1 MR. STIVER: Yes, I think that is
2 kind of a redundant step.

3 MR. MARSCHKE: Well, let's try it.
4 Let's see. Save As. "This document does not
5 allow you to save any changes." Okay. That's
6 okay.

7 MR. HINNEFELD: It means that you
8 can save; you just can't edit it.

9 MR. MARSCHKE: Yes, you can do it
10 that way.

11 MR. STIVER: You know, it has a
12 little, if you look at it, if you just run
13 your mouse down to your bottom of the page, a
14 little bar will come up and it has the
15 different icons for either printing or saving.
16 So, you can just use that.

17 MR. MARSCHKE: Yes, you can use
18 that. You can click on this. So, there's
19 multiple ways that you can save it as a PDF
20 file.

21 So, this has been implemented.

22 It just so happened I was working

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1 on OTIB-6. I was able to generate the PDF
2 file for Finding 4. I could not generate it
3 for Finding 3. I went and checked if I could
4 generate it for Finding 1. No problem.
5 Finding 2, no problem. But Finding 3, it just
6 refused to do it. So, I don't know what that
7 is all about. It is just going to get these
8 little hiccups.

9 MR. STIVER: Yes, some glitch that
10 needs to be worked through.

11 MR. MARSCHKE: So, I mean, it is
12 pretty simple, pretty straightforward.

13 CHAIR MUNN: Okay. Until I have
14 done this a couple of times, and until I have
15 actually gotten it into the hands of another
16 Work Group Chair, I will take at faith the
17 idea that I am doing something when I am doing
18 this.

19 All right. I have now saved,
20 hopefully, Rev. OPC-1.

21 Now I have a question for those
22 who have been working with this. In the past,

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1 we have had one long continual batch of
2 procedures which were really easy to scroll
3 down. Now, on my computer, I have to change
4 pages. Was it necessary for us to paginate
5 this?

6 MR. MARSCHKE: Well, what do you
7 mean by changing pages?

8 CHAIR MUNN: In order for me to
9 get to OTIB-54, for example, I could not just
10 simply scroll down, looking at the document
11 number. I can only scroll down to RPG-44 and
12 then I have to click on page 2 --

13 MR. MARSCHKE: Right.

14 CHAIR MUNN: -- to go further
15 down.

16 MR. MARSCHKE: Yes. That is the
17 way, this database is set up that way.

18 CHAIR MUNN: Do we have a choice
19 or is it necessary?

20 MR. HINNEFELD: I don't know.

21 CHAIR MUNN: If it is necessary,
22 then that is one thing. If we have a choice,

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1 it would be my choice to be able to scroll the
2 entire list. But I don't know what the
3 intricacies are.

4 MR. MARSCHKE: Right now, what you
5 can do, Wanda, is you can use the Search --

6 CHAIR MUNN: So, I have to use the
7 Search screen?

8 MR. MARSCHKE: Use the Search
9 screen. Right now, the way the thing is set
10 up, you don't have a choice. You have to use
11 the Page Down. You can make your life easier
12 by using the Search screen. You can make your
13 life easier by basically doing sorts. You can
14 sort on the various document headings. You
15 can do filters to filter out. But, right now,
16 really, the way the thing is set up, you have,
17 I think it is 20 documents per page, and
18 there's no way to increase that number.

19 CHAIR MUNN: Okay. And the
20 numbers are not always sequential as they were
21 on the old --

22 MR. MARSCHKE: Again, if you do

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1 the sort on document number, then they should
2 be sequential.

3 CHAIR MUNN: Well, is that true
4 now of OTIB-54? No.

5 MR. MARSCHKE: If you get into the
6 OTIB area --

7 CHAIR MUNN: I see OTIB-54, 66,
8 and 70 are four pages away from the first
9 batch of OTIBs.

10 MR. MARSCHKE: Yes, but I think
11 that is more because we have so many OTIBs.
12 But I think if you look at OTIB -- I mean, all
13 the OTIBs, I mean, if you look on this page,
14 it starts with OTIB-39, 43, 47, and it is
15 pretty much sequential until you get to
16 OTIB-70 and then you get into the PROCs.

17 CHAIR MUNN: Oh, no, not on my
18 page. What page are you? Oh, you are sorting
19 by filter.

20 MR. MARSCHKE: No, I didn't sort
21 by filter. I did a sort on the document
22 number.

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1 CHAIR MUNN: Okay.

2 DR. ULSH: If you just click on
3 the document --

4 CHAIR MUNN: All right. Very
5 good. I was just going from the bare menu.

6 MR. MARSCHKE: If you click on the
7 document -- no, no, the bare menu, it is not
8 quite sequential. It is kind of sequential in
9 the order that they were added to the
10 database.

11 MEMBER ZIEMER: So, that sorts by
12 document number or sorts by document title.

13 MR. MARSCHKE: Yes. And then, if
14 you wanted to really filter it out, I would
15 just go in here and filter by TIBs. I guess
16 you can't really filter by OTIBs, but you can
17 filter by --

18 CHAIR MUNN: I will get
19 comfortable with the pagination. It is just a
20 personal preference to be able to scroll the
21 whole length of that.

22 All right. Thank you very much

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1 for the work with the PDF file. I hope that
2 whatever glitches exist in there now will
3 magically disappear between now and the time I
4 start to get serious about getting these files
5 into the proper hands.

6 MR. MARSCHKE: Wanda --

7 CHAIR MUNN: Yes?

8 MR. MARSCHKE: -- there is one
9 other thing about the database. And you have
10 it kind of here as a carryover item, about the
11 db link. I know you have that, you know, we
12 have the OTIB-21-04, OTIB-51-01. I think that
13 was the link to supplemental documents.

14 CHAIR MUNN: It was a link to
15 supplemental documents.

16 MR. MARSCHKE: And I don't know if
17 you want to wait until we get to the carryover
18 items or, if not, if we are talking about the
19 database, do you want to do it here?

20 CHAIR MUNN: I think while we are
21 in the database, let's talk about it because
22 links to the supplemental documents are

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1 actually as important as being able to
2 transmit the PDF file for anyone outside this
3 room who is working on this item.

4 MR. MARSCHKE: I am just going to
5 go to OTIB-51, and 51-01, it says. I really,
6 to tell you the truth, Wanda, I have not
7 checked into this. I don't know if Elyse is
8 on the phone. Maybe she has really looked
9 into this. I haven't been keeping track on
10 this one.

11 CHAIR MUNN: She was on earlier.
12 I hope she is still there.

13 Are you with us, Elyse?

14 MS. THOMAS: Yes. Yes, I am still
15 on.

16 CHAIR MUNN: Great.

17 MR. MARSCHKE: And just looking at
18 OTIB -- it says down here that George Kerr,
19 for Finding OTIB-51-01, it says the last entry
20 was from George Kerr, and it has a file
21 attached to it, a PDF file attached to it.
22 And you click on it, and, sure enough, it

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1 comes right up. You can look at it.

2 DR. ULSH: I think that was the
3 other high-priority item from the last one as
4 well.

5 MR. MARSCHKE: I believe you are
6 right.

7 CHAIR MUNN: I am sorry. Will you
8 go back and do that one more time?

9 MEMBER ZIEMER: You're doing 51?

10 CHAIR MUNN: I was looking at my
11 screen and not yours. I should have been
12 watching what you were doing.

13 MR. STIVER: Fifty-one-01.

14 MR. HINNEFELD: Oh, that's
15 interesting. If you close that PDF, it closes
16 the --

17 MR. MARSCHKE: That is what I just
18 found out, too.

19 (Laughter.)

20 CHAIR MUNN: So, what did you do?

21 MR. HINNEFELD: I clicked on the
22 top right "X" button to close that PDF that

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1 opened up, and it took me out of the
2 application.

3 MR. MARSCHKE: It takes you right
4 out of the application.

5 MR. HINNEFELD: It took me back to
6 the tools screen.

7 MR. MARSCHKE: Maybe if we had a
8 preference, we may want to open the PDF in a
9 separate --

10 MR. HINNEFELD: Open the PDF in a
11 separate window.

12 MR. MARSCHKE: In a separate
13 window, so that when you close it, it doesn't
14 close the application. But, as far as having
15 the ability to attach it, it seems to be --

16 MR. STIVER: Yes, the attachment
17 seems to work. You can actually back out just
18 by using the back arrow.

19 MR. MARSCHKE: Yes.

20 MEMBER ZIEMER: There is no back
21 arrow on the PDF. There is no back arrow on
22 the PDF sheet.

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1 MR. MARSCHKE: Yes, there is. Up
2 to the right up there.

3 MR. STIVER: It comes up on a
4 web tab.

5 MR. KATZ: Look at the top of the
6 page.

7 MR. HINNEFELD: Yes, that is where
8 Paul is looking and it is gray. It is not
9 activated. But that looks like a different
10 -- what happens if you minimize that?

11 MEMBER ZIEMER: That was this.

12 MR. HINNEFELD: Oh, that's that.
13 That's that. Okay. Yes, you printed a PDF
14 here.

15 MEMBER ZIEMER: Oh, I'm sorry.

16 MR. HINNEFELD: Expand this.
17 Expand this.

18 MEMBER ZIEMER: Okay. I'm doing
19 the wrong thing.

20 CHAIR MUNN: Now wait.

21 MR. HINNEFELD: Now scroll down.

22 MEMBER ZIEMER: Expand it there.

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1 MR. HINNEFELD: Now scroll down.

2 MEMBER ZIEMER: Oh, now --

3 MR. HINNEFELD: You're looking at
4 the details. Keep going down. No, keep going
5 down.

6 MEMBER ZIEMER: Right.

7 MR. HINNEFELD: Right there.

8 MR. MARSCHKE: There.

9 MEMBER ZIEMER: Oh, I see what you
10 are saying. Okay. Yes.

11 (Simultaneous speakers.)

12 MR. MARSCHKE: Now that one is
13 activated. So, you can back out of that.

14 MEMBER ZIEMER: Got you.

15 MR. HINNEFELD: So, that is what
16 George wrote. That's George's response.

17 MR. MARSCHKE: What George wrote
18 should probably be -- and, Elyse, you can
19 correct me if I am wrong -- but I believe
20 probably, if you go up and look --

21 MEMBER ZIEMER: You don't want to
22 close this.

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1 MR. HINNEFELD: No, if you "X" out
2 of that, it takes you out of the application.

3 MEMBER ZIEMER: Yes.

4 MR. HINNEFELD: You want to back
5 out.

6 MR. KATZ: You want to back out.

7 MEMBER ZIEMER: Yes.

8 MR. MARSCHKE: If you look at
9 basically this portion here where it says,
10 "Unspecified OCAS OD user", there is a whole
11 -- this goes on for a long time. I think this
12 is probably what is in the PDF file.

13 MS. THOMAS: Yes, that is true for
14 this one, for 51-01. And for some of the
15 others that were carryover items, the
16 attachment contains tabulated data that we
17 weren't able to put in the response because of
18 the limitations of the database.

19 But for 51-01, the only difference
20 between the previously-loaded response, okay,
21 that Steve was talking about, that you see the
22 long text there, and the attached PDF file or

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1 the linked file, is just formatting. The
2 references that George had provided are a lot
3 easier to read in the link than they are in
4 the response in the database.

5 CHAIR MUNN: Yes, the summary is
6 too short.

7 MS. THOMAS: Yes. But, like I
8 said, that is just the case for 51-01. For
9 some of the others like 21-04, 47-02, and 19
10 -- I can't remember what the finding number is
11 on No. 19, but we will see it -- those all had
12 tabulated data that was new. The Subcommittee
13 talked about it, but it wasn't able to be
14 linked into the database until now.

15 So, I hope that helps.

16 CHAIR MUNN: A little. Elyse, do
17 you foresee this problem with links to tabular
18 data as being an insurmountable obstacle or is
19 this just something that you are having to
20 cope with behind the scenes right now? Are we
21 going to be able to do eventually or not?

22 MS. THOMAS: Yes, we can do it

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1 now. NIOSH worked on that between the last
2 meeting and this meeting. And so, we are now
3 able to, by linking or attaching files, we can
4 look at tabulated data as part of the
5 response.

6 CHAIR MUNN: Good.

7 MR. HINNEFELD: Wanda, the problem
8 she referred to was, when you try to enter it
9 into the entry screen, when you try to enter
10 it --

11 CHAIR MUNN: It won't go here,
12 yes.

13 MR. HINNEFELD: It is hard to get
14 the tabulation onto the entry screen.

15 CHAIR MUNN: Right, right, right.

16 MR. HINNEFELD: That is the
17 problem.

18 CHAIR MUNN: But the link it will
19 take.

20 MR. HINNEFELD: Oh, certainly.

21 MR. MARSCHKE: Wanda, this is the
22 way the data looked when we entered it

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1 previously. See, you have a table, table 1,
2 and it just all kind of runs together.

3 CHAIR MUNN: I remember trying
4 to --

5 MR. MARSCHKE: And you can't read
6 it. Now what they have done now is, when you
7 add the -- this is 47-02 I am looking at,
8 Elyse. And we go down here and you look at
9 it, and you click on the PDF file. Now,
10 basically, the tables are there.

11 CHAIR MUNN: Yes. Excellent. All
12 right. Then, my question was a non-question.
13 Thank you all. That's good.

14 MS. THOMAS: The only thing that
15 is a little bit confusing, although it is not
16 a big problem, I don't think, is it looks like
17 some of the findings were entered out of
18 order. But that is why I put the original
19 date on there and made a statement, something
20 to the effect that it couldn't be linked
21 previously and that kind of thing.

22 CHAIR MUNN: Dates are always

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1 helpful. Chronology holds us up when all else
2 fails.

3 All right. Thank you very much,
4 Elyse, and thank you, Steve.

5 MR. STIVER: Elyse, this is John
6 Stiver.

7 Are the links limited to PDFs or
8 are there other file formats that can be
9 linked in?

10 MS. THOMAS: I will have to defer
11 to Brant on that one or Stu.

12 DR. ULSH: I think you can link
13 other file formats.

14 MR. STIVER: Okay.

15 MR. HINNEFELD: I would think you
16 would be able to link whatever you want. I
17 think it is just a link to another folder. It
18 just pulls up a file that you put in that --

19 MR. STIVER: Right.

20 MR. HINNEFELD: I would think it
21 wouldn't matter, but I will check to make
22 sure. I don't know. I don't know.

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1 CHAIR MUNN: Well, originally, we
2 had talked about whether or not the links were
3 going to be something that anyone could alter,
4 which is one of the reasons we were talking
5 about PDF files. They would be read-only
6 files for the purpose of transferring them,
7 when we were transferring them to someone
8 else.

9 MR. STIVER: True. That could be
10 a problem.

11 CHAIR MUNN: Yes. But, of course,
12 when we are in the position where the Work
13 Groups are going to pursue the issue, and they
14 will need to be making either additional files
15 or adding to the files that are there, I guess
16 one could make an argument either way.

17 MR. STIVER: Yes, that is kind of
18 what I was envisioning.

19 MEMBER ZIEMER: What other formats
20 were you thinking about?

21 MR. STIVER: Well, just like Excel
22 tables.

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1 MEMBER ZIEMER: Well, but an Excel
2 table can be put into PDF form for this
3 purpose.

4 MR. STIVER: Sure. I understand
5 that, but if you wanted to transfer --

6 MEMBER ZIEMER: And the same with
7 a JPEG or whatever.

8 MR. STIVER: Yes, I was just
9 thinking, though, if you wanted to transfer
10 it, say, to a Work Group, and then they would
11 see the PDF, but they wouldn't be able to
12 extract the data or manipulate it. Whereas,
13 if you sent them the link directly to the
14 Excel table, they would have that capability.

15 CHAIR MUNN: Yes, I guess the
16 thinking at the time was whatever we transfer
17 to them needs to be a part of the permanent
18 record, and it does not need to go away. If
19 they need to add to it or to revise it in any
20 way, they need to, in effect, duplicate that
21 material.

22 MEMBER ZIEMER: Or request the

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1 original from whoever generated it.

2 MR. STIVER: Yes, they could
3 request the original.

4 MR. KATZ: Most of the stuff is
5 probably on this Site Research Database
6 anyway.

7 MR. MARSCHKE: Yes, most of the
8 time, I don't see that a big problem. I mean,
9 I think we are talking past each other a
10 little bit because we are talking about PDF
11 files which are being generated versus the PDF
12 files which are linked.

13 I am not even sure how this works.
14 When you generate a PDF file, for example, of
15 Finding OTIB-47-02, does that PDF file that
16 you generated include the attached PDF file or
17 does it just basically include the stuff which
18 in the database itself, the database proper?

19 So, you may not even, when you
20 generate your PDF file -- and I don't know how
21 that works. That is a question. But if it
22 does not include the PDF, what you would end

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1 up having to do is send to the other Work
2 Group not only the PDF file that you generate
3 out of this database, but also the attachment
4 file.

5 MR. HINNEFELD: Why don't we find
6 out?

7 CHAIR MUNN: Well, yes, I can tell
8 you that it is my intent to transmit what is
9 here, and what happens in the Work Group is
10 their problem, not mine. But, as long as we
11 have gotten to this point where what we pick
12 up from the PDF file is going to be in a
13 correct, readable form and can be distributed
14 to the Members of the Work Group, then that is
15 key from our selfish perspective here.

16 So, let me give that a try and get
17 more familiar with the way we are set up now
18 and try to get comfortable with it.

19 Thank you all for the work you
20 have done on this. I know this is tedious for
21 all of us concerned.

22 DR. ULSH: I think there are a

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1 number of these findings where the only reason
2 they weren't closed was we wanted to make sure
3 that this link was established. I don't know
4 how you want to go through that today, whether
5 you want to wait and do that or do you want to
6 go through all of them?

7 CHAIR MUNN: No, I do want to wait
8 to do it --

9 DR. ULSH: Okay.

10 CHAIR MUNN: -- because, until I
11 personally feel more comfortable manipulating
12 this file, then you are going to spend more
13 time trying to show me what to do than is
14 worthwhile. This need not be an instruction
15 session, and that is essentially what it would
16 be, I'm afraid. So, let's wait on that.

17 MR. MARSCHKE: According to the
18 test that we just performed with OTIB finding
19 47-02, the PDF file that you generate from the
20 database does not include the PDF file that
21 was attached to the database.

22 MR. HINNEFELD: So, it would have

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1 to be provided in addition to the printout.

2 MR. MARSCHKE: Basically, all you
3 have in the PDF --

4 MR. HINNEFELD: You have the name
5 of it there.

6 MR. MARSCHKE: Yes, you have the
7 name of it, but it doesn't actually pull the
8 data from it and merge the two PDF files
9 together. It does not actually do that.

10 So, what you would have to do,
11 then, is when you send it to your counterpart
12 at a Work Group, you would have to send two
13 files. You would have to send this file that
14 you just generated from the database. Then,
15 you would have to know, you would have to
16 send, also, this --

17 CHAIR MUNN: Pull that up
18 individually and send it?

19 MR. MARSCHKE: Yes, exactly.

20 CHAIR MUNN: All right.

21 MR. MARSCHKE: I don't know where
22 they are stored. I don't know where to tell

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1 you to go pick them up. There is probably a
2 directory somewhere on here where they can
3 basically -- or you can pull it up and save
4 it. When you open it, you could probably pull
5 it up and save it.

6 CHAIR MUNN: That is probably what
7 is going to have to happen --

8 MR. MARSCHKE: Yes.

9 CHAIR MUNN: -- at least for the
10 time being.

11 MR. STIVER: How tricky of a
12 programming feat would it be to nest that
13 within the new PDF?

14 MR. HINNEFELD: I am making a note
15 to that.

16 MR. KATZ: We don't have any
17 computer whizzes here.

18 (Laughter.)

19 MR. MARSCHKE: I couldn't even
20 find a button on my computer to get on the
21 internet.

22 (Laughter.)

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1 MR. STIVER: We had a similar
2 problem at a my former job and we were able to
3 solve it. I don't remember exactly how we
4 solved it. I didn't do it myself.

5 CHAIR MUNN: Well, the combination
6 of individual idiosyncracies and individual
7 even computer idiosyncracies, my system, for
8 example, has the title of the procedure I am
9 looking at in big, bold type over the top of
10 the information I am looking at.

11 MR. MARSCHKE: That is just a
12 click of the button. I don't know button to
13 tell you to click.

14 CHAIR MUNN: Which button it is?

15 MR. MARSCHKE: I said I don't know
16 which one it is, but I know that they told me
17 that before, and it is just a click of a
18 button to get that fixed.

19 CHAIR MUNN: Yes, I know. But, as
20 I said, my buttons are not known to me always.
21 So, we do the best we can.

22 Good. Thank you.

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1 Anything else anyone wants to
2 express any concerns about? Or any further
3 discussion we need to devote to the database
4 and where we are with it?

5 DR. ULSH: Well, we just -- sorry,
6 go ahead.

7 MEMBER ZIEMER: No, it looks good
8 to me.

9 DR. ULSH: We discussed
10 specifically finding OTIB-51-01. Is there a
11 status on that?

12 MEMBER ZIEMER: That is on the
13 agenda later, isn't it?

14 DR. ULSH: Oh, okay, never mind
15 then.

16 MEMBER ZIEMER: Fifty-one-01,
17 carryover item?

18 MR. MARSCHKE: That was, again,
19 for the link.

20 MR. KATZ: That was just the
21 linking. That was all that was left to do.

22 CHAIR MUNN: I think, yes, the

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1 link was all that we had, yes.

2 MR. MARSCHKE: What was the status
3 of 51-01?

4 CHAIR MUNN: It says 51-01 is in
5 progress. "Lacking technical details and
6 clarity. Critical experiments. Facility is
7 mentioned in several places." On pages 7 and
8 11, it is stated "the main missed neutron dose
9 because of the energy threshold of the NTA
10 film. This 55 percent was determined in
11 1960." Reference is made to RPRT 33.

12 MR. MARSCHKE: Basically -- I
13 think we discussed this, we discussed 51-01
14 during the March 22nd, 2011 meeting. We can
15 pull up the transcript on that. And our
16 conclusion was that the administrative problem
17 with the linking, upon correction of this
18 problem, the issue can be closed.

19 CHAIR MUNN: Then, let's hope so
20 because that is an old finding.

21 DR. ULSH: Right. So, it looks
22 like the only thing that was keeping this

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1 finding open was establishing this link which
2 we just looked at. So that it is linked now.

3 MS. THOMAS: This is Elyse again.

4 I think all of those carryover
5 items were essentially closed, but they
6 remained on the agenda simply because of the
7 linking issue.

8 OTIB-21-04, all of the others
9 except for 51-01, you know, there's four
10 listed there, they are all closed in the
11 database. 51-01 was the only one that was not
12 actually closed. In other words, the status
13 was not changed.

14 But I agree with Steve it should
15 be the same as the others. In other words, it
16 should be closed. I think the technical
17 discussions or approaches were agreed upon.
18 It was just a linking issue, and now that is
19 corrected.

20 MR. MARSCHKE: So, just --

21 CHAIR MUNN: Shall we change it at
22 this moment or shall we wait until we get to

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1 the proper spot?

2 MR. KATZ: Why not close them?

3 CHAIR MUNN: Dick, are you still
4 with us?

5 MEMBER LEMEN: Yes, I am.

6 CHAIR MUNN: Do you have any
7 objection to our closing this item now?

8 MEMBER LEMEN: No, I don't.

9 CHAIR MUNN: All right.

10 MEMBER LEMEN: I think it is a
11 good idea.

12 MEMBER ZIEMER: Where is the
13 attachment? Am I looking at the wrong one?
14 Are you finding the attachments?

15 CHAIR MUNN: Well, the very bottom
16 one. You have to go through about five, six,
17 and then at the very bottom you will find
18 George's.

19 MR. MARSCHKE: A big improvement
20 over the old database with this database is
21 that you can have multiple attachments to one
22 finding. The old database, if you remember,

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1 we were limited to just a single attachment.

2 MR. STIVER: In theory, there is
3 no limit.

4 MR. MARSCHKE: In theory, there is
5 no limit.

6 DR. ULSH: There must be some
7 limit, but --

8 (Laughter.)

9 MEMBER ZIEMER: No, I am at the
10 bottom of it.

11 MR. HINNEFELD: What is going on?
12 Paul doesn't have the last entry. And he
13 also doesn't have 51-03.

14 MEMBER ZIEMER: This is 51-01.

15 MR. HINNEFELD: No, see, he
16 doesn't have the last entry. But, then, you
17 also have 51-04, and my next one is 51-03.

18 MEMBER ZIEMER: This is 51-01.
19 OTIB-51-01.

20 MR. HINNEFELD: Yes.

21 MR. STIVER: Finding 1.

22 MEMBER ZIEMER: There is --

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1 MR. HINNEFELD: There is all that
2 stuff.

3 CHAIR MUNN: There is the long
4 one.

5 MR. HINNEFELD: Yes, all the long
6 one.

7 MEMBER ZIEMER: No attached file.
8 No attached. The third one, no attached.

9 CHAIR MUNN: The fourth one --

10 MEMBER ZIEMER: No attached file.

11 CHAIR MUNN: The fifth one --

12 MEMBER ZIEMER: I don't have a
13 fifth one.

14 CHAIR MUNN: And the sixth one is
15 George's.

16 MR. HINNEFELD: How did you get to
17 where you are? How did you get to this
18 application?

19 MEMBER ZIEMER: I just expanded
20 it.

21 MR. HINNEFELD: Yes, but, I mean,
22 the entire database, how did you get here to

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1 start it?

2 MEMBER ZIEMER: Let me go back.

3 MR. HINNEFELD: I'm wondering
4 because it seems like you have got an old one.

5 MR. MARSCHKE: That is what I was
6 wondering, too.

7 MEMBER ZIEMER: I sorted on TIBs.

8 MR. HINNEFELD: Okay, but just
9 close the thing. Just close out the database
10 altogether.

11 MEMBER ZIEMER: Oh, go out?

12 MR. HINNEFELD: Just close out the
13 database.

14 MEMBER ZIEMER: Close it out?

15 MR. HINNEFELD: Yes.

16 MEMBER ZIEMER: Okay, and then go
17 back?

18 MR. HINNEFELD: And now, how did
19 you get here?

20 MEMBER ZIEMER: Oh, well, you have
21 got to open it through the -- pull it up here
22 in order to use this. Then I went to the

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1 TIBs. Then, I guess it was on page 3. I
2 expanded this.

3 MR. KATZ: I am going to
4 interrupt. I am going to close the record
5 just for now because this is all completely
6 process discussion. It is not really useful
7 for the transcript. So, we will reopen it
8 when we are back to work.

9 (Whereupon, the foregoing matter
10 went off the record at 9:55 a.m. and went back
11 on the record at 9:56 a.m.)

12 MR. KATZ: Back on the record.

13 MR. MARSCHKE: Are we back on the
14 record?

15 Now are we closing OTIB-51-01?

16 CHAIR MUNN: You bet. We have
17 heard no objection, and the statement seems to
18 be fairly straightforward. We have completed
19 the requirement of the linking, and that is
20 all that was necessary for that particular
21 finding. So, that one is now closed.

22 MR. STIVER: If I refresh, it

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1 should come up as closed.

2 MR. MARSCHKE: No, not yet. Give
3 me a second.

4 (Laughter.)

5 CHAIR MUNN: Now does anyone else
6 have anything they need to say or ask about
7 the database before we move on to our next
8 item?

9 MR. KATZ: Just a question. I
10 don't have the agenda in front of me, but
11 didn't we have a few of these linking items?

12 CHAIR MUNN: Yes, we have got them
13 under carry forward, yes.

14 MR. KATZ: They could all be
15 closed, then, I guess, the same way. It is
16 the same problem, right?

17 MR. MARSCHKE: Elyse says they all
18 were closed except for 51-01.

19 MR. KATZ: Oh, okay.

20 DR. ULSH: I think they are
21 individual agenda items. As we walk through
22 them, that might very well be the resolution

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1 then.

2 MR. KATZ: No, I am saying we
3 could just close them now.

4 MR. STIVER: I believe she said
5 they were closed technically, but they still
6 were open.

7 MR. KATZ: Right, right. So, just
8 as we have closed this formally now, we could
9 close the rest, the other two or three, or
10 whatever they are.

11 MS. THOMAS: Yes, the others are
12 closed.

13 MR. KATZ: Oh, they are?

14 MS. THOMAS: Yes.

15 CHAIR MUNN: We were only carrying
16 them on our agenda here as an agreement that
17 Elyse and I would track them to make sure that
18 the linking did occur.

19 MR. KATZ: Got it. Thank you.

20 CHAIR MUNN: That it is going to
21 occur.

22 MR. MARSCHKE: The link of the PDF

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1 file has been implemented. Thus, the
2 Subcommittee has closed this finding.

3 CHAIR MUNN: Correct.

4 MEMBER LEMEN: I am confused about
5 the closing. Are you saying that OTIB-21-04,
6 OTIB-47-02, OTIB-19, all of those on the
7 agenda are closed?

8 CHAIR MUNN: Yes, they were closed
9 already. In prior meetings, we had closed
10 them because all of the actions were complete.

11 What was not complete was the link to the
12 supporting documents that would make it
13 possible for us to track what had happened and
14 what the final resolution was. The document
15 was out there, but it was not connected in any
16 way to the database.

17 MEMBER LEMEN: So, does that mean
18 on our agenda on carryover items that we still
19 have TIB-10 and --

20 CHAIR MUNN: That's correct. We
21 are still looking at TIBs.

22 MEMBER LEMEN: That is all we have

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1 on there.

2 CHAIR MUNN: Ten is an entirely
3 different thing.

4 MEMBER LEMEN: Then, that is the
5 only thing we have left on the agenda for the
6 carryover items, right?

7 CHAIR MUNN: We have TIB-10. We
8 have TIB-13, and we have --

9 MEMBER LEMEN: Right. I'm sorry,
10 I missed that. Yes.

11 CHAIR MUNN: Yes, we have 52, and
12 we have added 6.

13 MEMBER LEMEN: But all the others
14 are closed out?

15 CHAIR MUNN: The ones that are
16 closed out are OTIB-21-04. Today we closed
17 out OTIB-51-01.

18 MEMBER LEMEN: Right.

19 CHAIR MUNN: We have already
20 closed out OTIB-47-02 --

21 MEMBER LEMEN: Right.

22 CHAIR MUNN: -- and OTIB-19.

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1 MEMBER LEMEN: Right. Okay, I'm
2 with you now. Thank you.

3 CHAIR MUNN: Okay? Thank you.

4 Very good. Our next item is
5 OTIB-70, status, changes and update. It is, I
6 believe, NIOSH's response.

7 DR. ULSH: And I am going to call
8 on Elyse.

9 MS. THOMAS: Okay, and I will call
10 on Mutty.

11 (Laughter.)

12 MR. MARSCHKE: Before we move on,
13 I can't get the status on OTIB-51-01, I can't
14 get the status to change, speaking of beta
15 versions and bugs in the beta version.

16 I go in. You guys can test me
17 out, but I have done it twice now. I add a
18 response. Wait a minute.

19 MR. STIVER: Maybe it is in the
20 comment field.

21 MR. MARSCHKE: Maybe I am doing it
22 wrong. Added status. Maybe I am doing it

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1 wrong. Okay. Never mind. Operator error.

2 CHAIR MUNN: Let's see if it
3 works.

4 MR. KATZ: Closed, yes.

5 Mutty, you can continue.

6 MR. SHARFI: Okay. Did you want
7 me to go through them one-by-one or?

8 CHAIR MUNN: For 70? Yes, I think
9 that is probably a good idea.

10 MR. SHARFI: The first finding I
11 believe deals with the 1 percent per day
12 source-term depletion rate as it compares to
13 the resuspension factor that is recommended.

14 Basically, the 1 percent per day
15 has been revised. This was already done
16 inside the Norton ER. I believe SC&A reviewed
17 that part. It has been changed to a .067
18 percent per day. This is based on other sites
19 that have actually done calculated source-term
20 depletion rates, Blockson, Dow Madison,
21 General Atomics, Simond Saw, General Steel.

22 We have used that data to

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1 recalculate a generic source-term depletion
2 rate. That is being now updated and OTIB-70
3 is currently being revised to include that new
4 value.

5 We should be pretty close, if you
6 use the SC&A approach to calculate our
7 resuspension factor. I think it gives you
8 pretty close to a value of 1E minus 6.

9 Do you any comments or shall I
10 just move on?

11 CHAIR MUNN: No, hold on a minute
12 because I have a question as to how your
13 report now goes into our database.

14 MR. HINNEFELD: Well, it sounds to
15 me as if we now need to enter essentially what
16 Mutty said --

17 CHAIR MUNN: Yes.

18 MR. HINNEFELD: -- into the
19 database.

20 MR. STIVER: You have to add a
21 response.

22 MR. HINNEFELD: Then, you add a

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1 response.

2 CHAIR MUNN: Yes.

3 MR. HINNEFELD: And so, at that
4 point or now, I guess at that point, then,
5 SC&A may want to look and see, is this
6 satisfactory? What we actually write there,
7 is this a satisfactory closure to the finding?
8 And if they concur, then, theoretically, they
9 could provide recommendations and put this in
10 abeyance until that document is revised.

11 MR. KATZ: Well, they may be able
12 to respond to some of these in real time, I
13 mean during our meeting here.

14 MR. HINNEFELD: Well, I mean, I
15 don't know if you guys want to --

16 MR. KATZ: Yes.

17 MR. HINNEFELD: The discussion on
18 that has occurred elsewhere.

19 MR. KATZ: Right.

20 MR. HINNEFELD: It has occurred in
21 another Work Group meeting.

22 MR. STIVER: From what Mutty said,

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1 he is basically concurring with our
2 recommendation.

3 MR. HINNEFELD: Yes, yes.

4 MR. STIVER: It is just a matter,
5 has it gone into the document yet?

6 MR. KATZ: That's what I am
7 saying.

8 MR. HINNEFELD: We have accepted
9 the fact of 1 percent a day isn't right, and
10 we have proposed a different value in whatever
11 site that was. I believe we have some
12 comments from that Work Group on that value.

13 MR. STIVER: Yes, this was
14 discussed in detail --

15 CHAIR MUNN: I believe so, yes.

16 MR. STIVER: -- at the last
17 meeting.

18 MR. HINNEFELD: Yes. And so, we
19 can do whatever we want, I mean whatever the
20 Work Group is comfortable with, the
21 Subcommittee is comfortable with.

22 CHAIR MUNN: My question, does

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1 SC&A concur with Mutty's report?

2 MR. STIVER: Yes.

3 CHAIR MUNN: Then, is our only
4 action that is necessary not to simply report
5 that here, that NIOSH indicates this change is
6 being made; SC&A accepts that? The item is
7 closed. Do we need to do anything other than
8 that? All we need to do is an entry here now,
9 right?

10 MEMBER ZIEMER: Do we have copies
11 of his words?

12 MR. STIVER: We would need to
13 actually verify that it is in the document as
14 stated.

15 MR. MARSCHKE: It would be not
16 closed; it is in abeyance.

17 MR. STIVER: So, I think it should
18 be changed to in abeyance at this point.

19 CHAIR MUNN: Okay, in abeyance.
20 In abeyance.

21 MR. STIVER: Until we can actually
22 verify that, yes, it has been.

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1 CHAIR MUNN: That's fine.

2 MEMBER ZIEMER: Do we have a copy
3 of what he just gave us?

4 MR. MARSCHKE: I don't.

5 MR. STIVER: I do not have an
6 extra copy of that.

7 CHAIR MUNN: I am sure it is
8 possible for him to email that to you today.

9 MR. STIVER: Mutty, this is John
10 Stiver.

11 MR. MARSCHKE: I don't know that
12 he has got anything written.

13 MR. KATZ: It will be entered into
14 the database. I mean, that would be the way
15 to do this. So, it doesn't need a separate
16 email.

17 MS. THOMAS: This is Elyse.

18 I have those responses, and NIOSH
19 has looked at them. I thought I had entered
20 them into the database, and they are not in
21 there. If the Subcommittee or NIOSH would
22 like, and you can give me like 30 minutes, I

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1 can get those entered. And then, when you go
2 through the OTIB-70 items, you will see the
3 responses as well. If that would make it
4 easier for the Subcommittee, I would just need
5 a little bit of time to get that done.

6 CHAIR MUNN: That would be most
7 helpful, Elyse, if you would.

8 MS. THOMAS: Okay.

9 MEMBER ZIEMER: Yes, I would like
10 to see the wording on that, if she has that.
11 But just informally, so instead of the 10 to
12 the minus 6, what is the new number? Is it
13 .67 times --

14 MR. STIVER: It was to match the
15 depletion rate, the source term depletion rate
16 with resuspension factor.

17 MR. HINNEFELD: The value that we
18 are backing away from is not necessarily the
19 10 to the minus 6, although we may have done
20 that also. The value we are backing away from
21 is the 1 percent per day depletion --

22 CHAIR MUNN: The 1 percent,

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1 correct.

2 MEMBER ZIEMER: Oh, right. Okay.

3 Okay, yes.

4 DR. MAURO: The resuspension
5 factor did not change.

6 This is John Mauro. Maybe I could
7 help out.

8 When we discussed this, we all
9 agreed that there was a linkage between the
10 resuspension factor and the rate at which it
11 would decline. Under circumstances where the
12 site has been cleaned up already --

13 MEMBER ZIEMER: Right.

14 DR. MAURO: -- the 10 to the minus
15 6 holds, and we are fine with that. Under
16 circumstances where the site has not been
17 cleaned up and you've got loose contamination,
18 the resuspension factor could be quite a bit
19 higher.

20 And it turns out that the rate of
21 removal is linked to that resuspension factor.

22 I recall Jim indicating that they have some

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1 evidence that the rate of removal goes down
2 substantially when the resuspension factor is
3 very low, for obvious reasons. And the number
4 that Jim cited when we discussed this -- and
5 perhaps, Elyse, when you put this together --
6 this story could be told in sort of like a
7 summary fashion.

8 I remember a number, instead of 1
9 percent per day, it might go down to .05
10 percent per day, on that order, like a
11 twentyfold change in the rate at which it
12 declines. But they are not independent. It
13 was agreed during the discussion that the two
14 are linked. So, that might help a little when
15 we try to capture the sentiment here in the
16 attachment that will go with this.

17 DR. BEHLING: John, this is Hans
18 Behling. I just want to make a comment.

19 I tend to agree with you in a
20 sense that there is a linkage between the
21 resuspension factor and the depletion rate.
22 However, it is not one-to-one.

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1 I mean, just conceptually
2 speaking, think about the situation where you
3 had a facility that was hermetically sealed,
4 where there is no expulsion of resuspended
5 particles by way of a ventilation system,
6 where you would have, essentially, a
7 resuspension factor that remains around
8 essentially constant with zero depletion. Now
9 I am not saying that you don't remove some of
10 the resuspended material by virtue of a
11 ventilation system that may have HEPA filters
12 or something else. However, I don't think it
13 is a one-to-one relationship. To match the
14 resuspension factor to the depletion rate on a
15 one-to-one basis may not be correct.

16 DR. MAURO: And I agree. I
17 believe that that sensibility was captured in
18 Jim's proposed strategy for revising OTIB-70.

19 I know when we discussed it, in principle, we
20 all agreed, yes, you're right, I mean, it
21 could be somewhat complex. But, apparently,
22 Jim had some empirical data which showed the

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1 rate of decline that he is prepared to work
2 into OTIB-70.

3 So, I mean, really, what we are
4 really saying here, I guess, is there is a
5 record in the transcript where this issue was
6 discussed. At the time of that discussion,
7 SC&A agreed in principle that that strategy
8 was a reasonable strategy to take. I guess it
9 would be a good idea to capture that sense in
10 an attachment to closing this issue, or at
11 least putting it in abeyance.

12 MR. STIVER: John, this is John
13 Stiver.

14 Essentially, that is what is
15 included in the comment by Steve, as of
16 December 30th, 2010. This discussion is there
17 in the database.

18 DR. MAURO: It is? Oh, okay.

19 CHAIR MUNN: Yes, it is.

20 MR. STIVER: It is there.

21 CHAIR MUNN: And we all remember
22 it very well. This is one of those items that

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1 verged on categorization as an overarching
2 issue because it affected so many sites.

3 DR. MAURO: Yes.

4 CHAIR MUNN: But you can't apply
5 it broad-brush to all sites, obviously. But
6 this was agreed to, and we've covered this one
7 very thoroughly from a variety of sources. It
8 should be, in my view, now closed. We have
9 what I consider to be full technical agreement
10 that, certainly, in most cases the definitions
11 that we have laid out are going to be
12 applicable and will be both claimant-favorable
13 and highly defensible from a technical point
14 of view.

15 MR. STIVER: Wanda, this is John
16 Stiver again.

17 I recall in going through the
18 transcript now, to account for what Hans is
19 bringing up, that each individual site would
20 have to be looked at.

21 CHAIR MUNN: That's correct.

22 MR. STIVER: Yes.

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1 CHAIR MUNN: That's correct.

2 MEMBER ZIEMER: Right. It was
3 more of a methodology.

4 MR. STIVER: Yes, it was more it
5 would be a generalized methodology.

6 MEMBER ZIEMER: Right.

7 CHAIR MUNN: Yes.

8 MEMBER ZIEMER: So, what NIOSH was
9 saying today, basically they are agreeing with
10 what we have here then?

11 CHAIR MUNN: Yes.

12 MR. STIVER: Yes.

13 MEMBER ZIEMER: And it is agreeing
14 to an approach as opposed to a number.

15 MR. STIVER: Exactly.

16 CHAIR MUNN: Correct.

17 MR. STIVER: My only concern about
18 whether to close it or keep it in abeyance is
19 whether that language has actually gone into
20 TIB-70.

21 CHAIR MUNN: I understand.

22 MS. THOMAS: This is Elyse again.

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1 Excuse me for interrupting.

2 But I went ahead and added the
3 NIOSH response for Finding 01, OTIB-70,
4 Finding 01. So, I think if you refresh your
5 screens, you might be able to see that. And I
6 will go on and do the others as you are
7 discussing it, but I think, if you refresh
8 your screen, you ought to see a new response
9 added there at the end of the string.

10 MR. KATZ: Thank you, Elyse.

11 CHAIR MUNN: Thank you, Elyse,
12 very much.

13 MR. STIVER: And there it is, by
14 Mutt, as of today. The time is a little off,
15 though, 12:00 a.m.

16 (Laughter.)

17 MEMBER ZIEMER: There it is.
18 Okay.

19 MR. STIVER: The very last line
20 is, the OTIB is currently being revised to
21 reflect this change. And so, I know we would
22 go into abeyance until we actually verify that

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1 it is in the document.

2 MR. KATZ: Right.

3 MEMBER ZIEMER: So, the .00067 is
4 a default, if you don't have the actual data,
5 is that correct?

6 DR. BEHLING: That is correct.

7 MEMBER ZIEMER: Otherwise, you
8 would use the starting and ending point.

9 MR. STIVER: Right.

10 MEMBER ZIEMER: Yes. Okay.

11 DR. MAURO: We always prefer to
12 use actual scientific --

13 MEMBER ZIEMER: Right.

14 CHAIR MUNN: All right. Are we
15 good?

16 MR. KATZ: So, Steve will put
17 abeyance?

18 CHAIR MUNN: Yes. It will show in
19 abeyance.

20 MR. KATZ: And, Mutty, I guess you
21 can move on. No?

22 MR. MARSCHKE: Well, again, are

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1 you going to give Elyse a chance to enter --

2 MR. KATZ: I think she is doing
3 that.

4 MS. THOMAS: Yes. If you would
5 refresh your screen again, you should be able
6 to discuss Finding 02.

7 MR. SHARFI: A lot of 02 is going
8 to be similar to 01. This is a lot of
9 discussion once again on the resuspension
10 factor and the source term depletion rates and
11 how they interact. The response is actually
12 identical, I think, to Finding 1.

13 This is, rather than talking about
14 the resuspension factor, we are talking about
15 resuspension rates and how they apply to the
16 source term depletion rate.

17 Based on this comment, we would
18 still probably put this in abeyance if
19 everybody still agrees --

20 CHAIR MUNN: That is correct.

21 MR. KATZ: Right.

22 MR. SHARFI: -- as a result of

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1 that issue.

2 CHAIR MUNN: We agree. Let's abey
3 it.

4 MR. SHARFI: Finding 3 is going to
5 be the identical way. It is a direct comment
6 about the 1 percent per day. Finding 1 was
7 really more about the resuspension factor.
8 Finding 2 is more about the resuspension rate.

9 And Finding 3 is the direct statement on the
10 1 percent per day. One, 2, and 3 are kind of
11 all interrelated.

12 And so, the comments, the response
13 is still the same. The fact that the average
14 depletion rate of the four sites that is going
15 to be used is going to change the 1 percent
16 per day to the 0.00067 per day rate.

17 MR. STIVER: So, that one can go
18 into abeyance, as well.

19 CHAIR MUNN: Correct, 2 and 3 both
20 go into abeyance. We probably need to have
21 the comment that refers it back to Finding 1.

22 MR. SHARFI: Finding 4 is already

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1 closed. Finding 5 deals with attachment B.
2 There is thorium intake rates or survey data
3 that is provided for generic sites. However,
4 this data has never been used, and we have no
5 intention of using it. So, this attachment is
6 actually going to be removed from the OTIB
7 during the revision.

8 CHAIR MUNN: And do we say that?

9 MEMBER ZIEMER: Which one is this?

10 CHAIR MUNN: Five.

11 MR. SHARFI: Five.

12 MS. THOMAS: Yes, if you refresh
13 your screen, you should be able to see the
14 response for 5.

15 MR. HINNEFELD: How about 3?

16 MS. THOMAS: Three, yes. I
17 entered 3, as well.

18 CHAIR MUNN: Both 2 and 3 have
19 gone into abeyance.

20 MR. SHARFI: Finding 6 will be the
21 same.

22 MR. MARSCHKE: Wanda, is it

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1 changed to in abeyance?

2 CHAIR MUNN: Yes, on my screen 2
3 and 3 are changed to abeyance. I have not yet
4 seen the change on 5.

5 MR. MARSCHKE: Do you want 5
6 changed?

7 CHAIR MUNN: Yes.

8 MEMBER ZIEMER: It has been
9 entered. It is here.

10 MR. MARSCHKE: Yes, the response
11 is there.

12 MR. SHARFI: Five and 6 are
13 interrelated. They are both the same thing.
14 One is specific to one of the sites listed; 6
15 is specific to the Horizon site. But, once
16 again, the whole attachment is being deleted.
17 So, 6 will have the same NIOSH response.
18 That Attachment B is being deleted in the next
19 revision of the OTIB.

20 CHAIR MUNN: And No. 9?

21 MR. SHARFI: Nine is still part of
22 Attachment B. It is another site-specific

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1 question. It has to do with the Linde data
2 that is inside Attachment B. Once again,
3 Attachment B will be deleted. So, 9 should
4 follow 5 and 6.

5 MR. MARSCHKE: Elsy, are you
6 entering the response to 6?

7 MEMBER ZIEMER: It is in.

8 MR. MARSCHKE: It is?

9 MS. THOMAS: I am trying. I am
10 getting an error message here. So, I am not
11 able to go on to 9 or 10. I was about one
12 step ahead of you and now I'm not.

13 (Laughter.)

14 MR. MARSCHKE: Yes, I wanted to
15 wait until you entered the response before I
16 closed Finding 6 or I put Finding 6 in
17 abeyance.

18 MS. THOMAS: Yes. See, my screen
19 says that Finding 6 in abeyance, and I am
20 wondering if that is why I am having trouble
21 saving it. But I am going to get out of 6 and
22 move on to 9 and 10, and see if I can enter

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1 those before you discuss them, and then I will
2 go back to 6.

3 MR. MARSCHKE: Elyse, sometimes
4 when you enter the finding, when you enter a
5 new comment for a finding and you put somebody
6 else's name, the database has a tendency to
7 change the status of the finding. So, you
8 might want to check that. Make sure that when
9 you enter your comments under 6 that, when you
10 click the Save --

11 MS. THOMAS: Okay.

12 MR. MARSCHKE: -- it still saved
13 as in progress.

14 MS. THOMAS: Okay. I just tried
15 that. Let's see. That seemed to take. Okay.
16 Very good. Thank you.

17 You can look at 6, Finding 6, and
18 I will get 9 and 10 entered here.

19 MEMBER ZIEMER: Nine doesn't show
20 up.

21 MR. MARSCHKE: So, the status on 6
22 is now in abeyance.

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1 MEMBER ZIEMER: Here it is, yes.

2 MR. MARSCHKE: Nine is already in
3 abeyance. Ten is the next one.

4 CHAIR MUNN: Yes, I think Elyse is
5 working on it right now.

6 MS. THOMAS: Yes, give me a
7 minute, please, on 10.

8 DR. MAURO: I would like to say it
9 is really great to see we are back in real-
10 time mode again. It has been a while.

11 (Laughter.)

12 Congratulations.

13 CHAIR MUNN: Yes, it is nice,
14 isn't it?

15 MR. KATZ: I agree, John.

16 MR. STIVER: It took some time,
17 but we got that.

18 CHAIR MUNN: It seems boring at
19 the moment, but it is great at the end of the
20 day.

21 DR. MAURO: Now all we need is
22 that summary table to see how much progress we

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1 made during the day.

2 CHAIR MUNN: Exactly. We're never
3 satisfied. Everybody is an expert.

4 MS. THOMAS: Okay, 10 should be
5 ready to go. Thank you.

6 CHAIR MUNN: Thank you.

7 MR. SHARFI: Number 10 is directly
8 about the 1E minus 6 resuspension factor.
9 This goes to what John was alluding to before
10 about when it is appropriate and whether or
11 not higher numbers can be used.

12 This generically for NIOSH is that
13 four sites that have been cleaned up and you
14 are applying a generic resuspension factor of
15 the 1E to the minus 6. It is claimant-
16 favorable, not only because we are applying it
17 generically to all contamination, not just the
18 removable. We have to remember that
19 resuspension factors are really more designed
20 for the removal fraction, not the total
21 surface contamination. And generically, we
22 apply this to all, you know, the total

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1 contamination level. So, there is an inherent
2 factor that is built in because we are not
3 looking at just removable contamination.

4 However, the OTIB is not locking
5 anybody into the 1E minus 6. If there are
6 situations, as John alluded to, where a higher
7 resuspension factor is needed, the OTIB allows
8 for that. The default is still listed as 1E
9 minus 6.

10 MR. MARSCHKE: Is this a change?

11 I mean --

12 MR. SHARFI: Not really.

13 MR. MARSCHKE: Basically, the
14 same?

15 MR. SHARFI: We are still in the
16 OTIB list of 1E to minus 6 as the default, but
17 noting that it is guidance; it is not a fixed
18 number that you have to use.

19 MR. KATZ: That is different from
20 before.

21 DR. MAURO: Is there language in
22 there that it is appropriate to use when the

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1 site has gone through some D&D? I would just
2 suggest that that type of language is
3 important because that is really when it
4 applies.

5 We have many, many circumstances
6 at AWE sites where the sites, you know, the 10
7 to the minus 6 was used in the past, when the
8 site still had visible surface contamination.

9 So, I mean, certainly, put as much qualifier
10 in as you feel is appropriate, but I just want
11 to caution that 10 to the minus 6 worked out
12 just fine, for example, I believe it was on
13 Linde after there was a D&D period. But a
14 number of other sites we found it didn't work
15 out. So, as long as there is cautionary
16 language in there, I think the dose
17 reconstructor will be okay.

18 MR. SHARFI: I will have to check,
19 John. I don't have it in front of me, the
20 revision, but I can check to see if there is
21 language that helps clarify that situation.

22 DR. ANIGSTEIN: This is Bob

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1 Anigstein.

2 I would like to interject a
3 comment just about a statement that was made a
4 moment ago, about the resuspension factor
5 applying to removable contamination.
6 Historically, the literature on resuspension
7 factors that I am familiar with describes
8 resuspension in terms of total contamination.

9 I am talking about if you could measure with
10 a survey meter or some other radiation-
11 measuring device. Whereas, removal of
12 contamination really depends on the technique
13 you use with a wipe test.

14 That is not the way it is usually
15 -- I mean, logically, you say, if it is not
16 removable, it can't be resuspended. But I
17 believe that the literature refers to total
18 contamination.

19 DR. MAURO: I could help a little
20 bit, too, there, Bob.

21 You are correct. When you folks
22 use resuspension factors, as applied to

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1 surface contamination, your starting point for
2 the surface contamination more times than not
3 is based on this deposition velocity approach,
4 where you know the dust loading in the air and
5 you use that .0075 meters per second
6 deposition.

7 So, when you do it that way, it is
8 total. In other words, what you end up
9 calculating is dpm per meter squared, and it
10 is total.

11 However, as Bob correctly points
12 out, there are occasions, though, when the
13 activity, surface activity, in dpm per 100
14 centimeters squared, for example, is based on
15 a swipes test. Then what you are looking at
16 is the removable material.

17 And then, of course, there are
18 times when it is based on a survey meter, and
19 you back out. There are places where this is
20 done where you say, okay, this is what you
21 would measure, this is what was measured with
22 a survey meter. And on that basis, you could

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1 figure out what would be on the surface from
2 the survey meter. In all likelihood, that
3 would be the total.

4 So, unfortunately, I think we have
5 a bit of a mixed bag. But I would say that,
6 notwithstanding that the 10 to the minus 6
7 probably holds up pretty good, as a rule of
8 thumb, I know Reg Guide 1.86 -- and, Bob, you
9 could correct me -- assumes that 20 percent of
10 whatever the total is is the removable
11 fraction.

12 DR. ANIGSTEIN: No, they have
13 separate limits on total and removable. I
14 don't have it in front of me. They state them
15 separately.

16 DR. MAURO: Yes.

17 DR. ANIGSTEIN: They say so many
18 dpm total, so many dpm removable. And it may
19 be that it is 20 percent, but it is two
20 separate limitations. You will not exceed the
21 total and you will not exceed the removable.

22 CHAIR MUNN: We have discussed

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1 this at length, and we have agreed to the
2 caveat that, although this is in many respects
3 an overarching issue, we must take into
4 consideration the situation that exists at
5 individual sites. So, I think we have put the
6 issue to bed. I believe everybody concerned
7 understands what the caveats are and what the
8 limits are within which we have to operate
9 when we do this.

10 DR. MAURO: Wanda, we accept your
11 admonition, and Bob and I will tone it down.

12 CHAIR MUNN: Thank you. You see,
13 we are running a little late, and we are past
14 time for a break.

15 MEMBER ZIEMER: I did have a
16 question, though. I notice in the previous
17 comment by Rosanna, which was dated in August,
18 she has a quote that says, "NIOSH recommends a
19 resuspension factor of 10 to the minus 6 per
20 meter is inappropriate." Is that a correct
21 quote?

22 MR. MARSCHKE: I would have to

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1 check that. What Rose did was, back in last
2 January, we had a meeting and we discussed
3 OTIB-70, but the database wasn't working. And
4 so, when the database became working, I asked
5 Rose to go through all the transcripts and
6 pull out the appropriate, if we talked about
7 something. And she pulled this out. I'm not
8 sure, it is kind of out of context.

9 MEMBER ZIEMER: It is out of
10 context because it stands contrary to what
11 they were recommending.

12 MR. MARSCHKE: If we take a break,
13 I would like to go to the January 2011
14 transcript and pull up page 263 and see what
15 it is exactly saying there.

16 MEMBER ZIEMER: And then, just a
17 comment here. I think Mutty's most recent
18 comment addresses the issues that Bob and John
19 have raised.

20 My understanding is that this
21 applies to clean sites, and even there, NIOSH
22 is assuming, even though we agree that, in

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1 general, on a clean site there is not much
2 loose contamination; in a dirty site it is
3 maybe 10 to 20 percent removable.

4 But, in any event, this says that
5 NIOSH is assuming that all of the
6 contamination on the surface is potentially
7 removable, and that you apply the 10 to the
8 minus 6 to that, even though, in practice, it
9 is almost 100 percent fixed. I think that
10 took into consideration all of these issues
11 that were raised again this morning, because
12 we have had this discussion about five times
13 already in the past.

14 Anyway, I was a little puzzled by
15 the previous remark that is in here that NIOSH
16 is not recommending that.

17 MR. MARSCHKE: It is a little bit
18 out of context here, Paul, and we would have
19 to go back and look at the transcript.

20 MR. STIVER: We can go back and
21 check that transcript.

22 MR. MARSCHKE: Yes, and find out

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1 exactly what it means.

2 Wanda, if you want to take a
3 break, we can look at it during our break.

4 CHAIR MUNN: This is an
5 appropriate time for us to do so. Fifteen
6 minutes, please.

7 (Whereupon, the foregoing matter
8 went off the record at 10:33 a.m. and went
9 back on the record at 10:52 a.m.)

10 MR. KATZ: Okay. We are
11 reconvening.

12 Dick, are you back on the line?

13 MEMBER LEMEN: Yes, this is Dick.

14 MR. KATZ: Great. Okay. We are
15 getting started again.

16 CHAIR MUNN: I believe we have
17 come to the conclusion that we are going to
18 edit OTIB-70-10/36, not Mutty's, but the
19 preceding one from August 5th. It is
20 misleading in its language and we are
21 refreshing that right now.

22 Thank you, Paul, for calling that

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1 to our attention.

2 Thank you, Steve, for doing that.

3 MR. MARSCHKE: Okay. So, that has
4 been changed, Paul.

5 MEMBER ZIEMER: I just need to
6 refresh, then?

7 CHAIR MUNN: Refreshing is less
8 than a refreshing activity.

9 (Laughter.)

10 MR. STIVER: Maybe we should give
11 it a new name.

12 MEMBER ZIEMER: Yes, that is good.

13 MR. MARSCHKE: What did the
14 Subcommittee decide on the status? Have they
15 decided on the status?

16 CHAIR MUNN: Yes.

17 MR. STIVER: Another aspect of the
18 10 to the minus 6 being --

19 MEMBER ZIEMER: Right.

20 CHAIR MUNN: It is more of an in
21 abeyance.

22 MR. HINNEFELD: I almost hate to

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1 bring this up. This is Stu.

2 It is not clear to me from the
3 most recent response from us, the one that
4 just went in --

5 MEMBER ZIEMER: For which one?

6 MR. HINNEFELD: This is --

7 MEMBER ZIEMER: Ten?

8 MR. HINNEFELD: -- 70-10. It has
9 got Mutty's name on it, 12-6-2011, NIOSH
10 response. It is not clear to me that we are
11 saying that we are going to edit OTIB-70. It
12 seems to say that -- Mutty, since you were the
13 one who was talking about this, are you saying
14 here in this response that the OTIB already
15 says that 10 to the minus 6 isn't chiseled in
16 concrete; it is just out there and it has to
17 be --

18 MR. SHARFI: I committed to John
19 to verify whether it does leave the caveat in,
20 whether there is a caveat in there, and if
21 not, then I will add the caveat.

22 MR. HINNEFELD: Okay. All right.

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1 MR. SHARFI: I wasn't really
2 committing either way because I have to go
3 back and look at what is currently in the
4 hopper.

5 MR. HINNEFELD: Okay. All right.

6 CHAIR MUNN: Are we all on the
7 same page now?

8 MR. HINNEFELD: So, we are all on
9 the same page, except we don't know what the
10 status is going to be, right?

11 MR. KATZ: In abeyance.

12 MEMBER ZIEMER: It is going to be
13 in abeyance.

14 CHAIR MUNN: It is in abeyance.

15 MR. HINNEFELD: Okay. Steve is
16 doing it now? Okay. All right.

17 MEMBER ZIEMER: A quick question,
18 you used plural "caveats" and then "a caveat".
19 Is there more than one.

20 MR. STIVER: No, it is just a
21 caveat.

22 MEMBER ZIEMER: It has

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1 inappropriate caveats then.

2 MR. STIVER: Single.

3 MEMBER ZIEMER: Yes.

4 CHAIR MUNN: So, where are we now?

5 MEMBER ZIEMER: So, this will be
6 in abeyance, is that right?

7 CHAIR MUNN: In abeyance, correct.

8 MR. MARSCHKE: Okay?

9 CHAIR MUNN: Correct.

10 Now next is -- where did we
11 leave --

12 MR. KATZ: Mutty --

13 MR. SHARFI: Yes?

14 MR. KATZ: Finding 10 is in
15 abeyance, and then we are ready to move on.

16 MR. SHARFI: Okay. Eleven deals
17 with the NUREG-1400 approach that was inside
18 the OTIB-70. It talks about source-term
19 analysis approach. There seemed to be some
20 question on whether or not it is applicable.
21 We have never really used this approach. It
22 was just something that was inside the OTIB.

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1 So, we just agreed to remove it from the OTIB,
2 and that is currently being done in the
3 current revision.

4 MR. KATZ: Does SC&A concur with
5 that?

6 CHAIR MUNN: Well, it was their
7 finding.

8 MR. MARSCHKE: Basically, it seems
9 like they were taking -- we had problems with
10 NUREG-1400 and how they have committed to not
11 using NUREG-1400. I don't believe we have
12 any --

13 DR. MAURO: We have never used the
14 approach, I think, on anything else.

15 MR. STIVER: Since it is being
16 removed, I don't see that we have any --

17 MR. KATZ: Yes, I just wanted to
18 be explicitly --

19 MR. STIVER: I was just reading
20 our previous response up here.

21 MR. KATZ: Right.

22 CHAIR MUNN: You may close it.

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1 MR. MARSCHKE: Close it or in
2 abeyance? In abeyance.

3 MR. KATZ: In abeyance until the
4 new document is out.

5 CHAIR MUNN: I guess it does need
6 to be taken out.

7 MR. SHARFI: Ready for 12?

8 MR. KATZ: Sure, Muttu.

9 MR. SHARFI: Twelve has to do with
10 a reference to Battelle-TBD-6001. Yes,
11 Battelle-6001 has been cancelled, based on the
12 Battelle Working Group recommendations or
13 discussion that has gone through there. So,
14 all references to Battelle-6001 is being
15 -- I'm sorry, this is No. 13, not 12. Twelve
16 is already addressed. This is 13. Basically,
17 all references to Battelle-TBD-6001 are being
18 removed.

19 MR. STIVER: This is Stiver.

20 I am looking at Steve Marschke's
21 comment from Thursday, December 30th, 2010.
22 This was a comment by Bill Thurber that this

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1 could be also be a residual problem. Even
2 though NIOSH decides to eliminate TBD-6001 and
3 the appendices, this is in relation to the
4 inhalation doses in TBD-6001 prior to 1948 and
5 extrapolating those backward in time.

6 So, I guess as long as the
7 residual period was after 1948, this would not
8 be an issue. So, that was kind of nested with
9 this whole discussion of removing TBD-6001.

10 John Mauro, do you have any more
11 in-depth understanding of how that transpired?

12 Are you out there, John?

13 (No response.)

14 CHAIR MUNN: We lost him.

15 MR. KATZ: Do we have anyone on
16 the line? Dick, are you on the line?

17 DR. BEHLING: This is Hans Behling
18 on the line. I'm not sure I fully understand
19 the question.

20 MR. KATZ: Okay.

21 MEMBER LEMEN: This is Dick. I'm
22 on the line.

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1 MR. KATZ: Okay. Great.

2 CHAIR MUNN: Do you want to try to
3 call John?

4 MR. STIVER: I am not sure whether
5 he will have that knowledge at this point.

6 I think that, why don't we just go
7 ahead and put it in abeyance? And then, we
8 will look at the changes that take place. I
9 think was more of a hypothetical comment that,
10 if in that time period had been considered,
11 that we might have a problem.

12 CHAIR MUNN: All right. So, it is
13 in abeyance.

14 Are you ready for 14, Mutty?

15 MR. SHARFI: Fourteen?

16 MS. THOMAS: Excuse me, Mutty, for
17 interrupting. This is Elyse.

18 And I was not able to add the
19 responses for Finding 14 or 15. I tried
20 repeatedly. So, they are short. Maybe Mutty
21 can read them to you, or whatever you would
22 like to do. I will try to get that addressed.

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1 But, right now, those responses are not yet
2 entered.

3 CHAIR MUNN: Then, we will just
4 have to do it, hopefully, with what we have.
5 Do you want to start with 14, Mutty?

6 MR. SHARFI: Yes, 14 goes along
7 with 13. It is about Battelle-TBD-6001.
8 Since it is being removed, it is going to fall
9 in the same lines as 13, where we are removing
10 all references to the 6001 TBD.

11 It goes, once again, into that
12 prior-to-1948 situation, which now would be
13 handled on a site-by-site basis. The OTIB is
14 just not going to give generic guidance for
15 pre-'48. It will have to be looked at based
16 on its individual merits.

17 MR. STIVER: Mutty, this is
18 Stiver.

19 Is there going to be any change in
20 the language to indicate that expressly?

21 MR. SHARFI: At pre-'48, you would
22 have to look at the site-specific situation?

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1 MR. STIVER: Correct.

2 MR. SHARFI: I don't think there
3 is any specific wording to that. I mean, a
4 guidance document doesn't give you guidance --
5 I can't give you guidance on every small,
6 little issue that may come up. So, I don't
7 know what I would say.

8 MR. STIVER: In any case, this one
9 would be, as we have put in here in August, it
10 would be addressed in Finding 13.

11 DR. ULSH: The current status for
12 14 is in progress. I know that we have a
13 category called "addressed in finding".

14 MR. STIVER: Yes, so that is --

15 DR. ULSH: Is that what you are
16 proposing?

17 MR. STIVER: I was proposing that
18 we change that to addressed in finding because
19 it is identical to 13.

20 CHAIR MUNN: We had gone back and
21 forth about that. I think that we did that
22 earlier, didn't we? Yes.

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1 MR. HINNEFELD: It should be
2 changed.

3 CHAIR MUNN: From our January
4 meeting last year, we changed it from "in
5 progress" to "addressed in." It should have
6 been.

7 MEMBER ZIEMER: Well, the original
8 finding had to do with an approach used in
9 TBD-6001 for inhalation, is that correct? So,
10 when 6001 went away, the Work Group that used
11 to be the 6001 Work Group, which is I think
12 Henry Anderson's Work Group, now will handle,
13 as I understand it, those facilities that
14 would have fallen into the appendices. Is
15 that correct?

16 MR. KATZ: That is correct. Yes.

17 MEMBER ZIEMER: So, in each case,
18 since there no longer will be a generic
19 approach to the inhalation, unless it is taken
20 from a different document, you would have to
21 have an individual finding, I would think, for
22 a particular facility.

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1 MR. STIVER: Right.

2 MEMBER ZIEMER: Because these are
3 going to go away as generic approaches, is
4 that correct, my understanding of that? Or,
5 Stu --

6 MR. HINNEFELD: Well, 6001 is
7 going away as a generic.

8 MEMBER ZIEMER: As a generic.

9 MR. HINNEFELD: It was never
10 really used very generically anyway.

11 CHAIR MUNN: And from now on, it
12 will be an individual site.

13 MEMBER ZIEMER: So, one of the
14 sites now that has an inhalation situation,
15 would they draw on some other generic document
16 or would it be site-specific? Or it could be
17 either, I suppose?

18 MR. HINNEFELD: Well, the
19 approaches would be, the approaches for those
20 could be site-specific information or there
21 may be a use of, well, we know that there was
22 some sort of surrogate use. But it would be

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1 to address a particular site.

2 MEMBER ZIEMER: Right. So, then,
3 there would be an SC&A review of that
4 document?

5 MR. HINNEFELD: Yes.

6 MR. STIVER: There would be some
7 further review.

8 MEMBER ZIEMER: Right, right.

9 So, I think the solution here is
10 that it goes away and you just --

11 MR. STIVER: And, then, it becomes
12 a site-specific issue when something comes
13 up, and it is addressed within --

14 MR. HINNEFELD: That is the way it
15 seems to me. I mean, I am not familiar with
16 -- you know, it says it refers to the 6001,
17 but you don't really know exactly.

18 MEMBER ZIEMER: Right. You are
19 not using it for anything.

20 MR. HINNEFELD: Yes.

21 CHAIR MUNN: So, that leaves us
22 where?

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1 MEMBER ZIEMER: Well, it is not
2 going to be addressed in something else. That
3 is the point I am making. It says, I think
4 the last entry I have here for No. -- is it
5 13?

6 MR. HINNEFELD: Fourteen.

7 MEMBER ZIEMER: Fourteen, the same
8 as item 13, change to "addressed in". It is
9 not going to be addressed in something, right?

10 MR. STIVER: Yes, they are
11 basically the same.

12 MR. SHARFI: It will be addressed
13 in 13.

14 MR. STIVER: Yes.

15 MEMBER ZIEMER: Oh, I see.

16 MR. STIVER: Thirteen is getting
17 rid of --

18 MEMBER ZIEMER: I got you. I got
19 you.

20 MR. STIVER: It is 6001 is going
21 away.

22 MEMBER ZIEMER: I got you.

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1 MR. STIVER: It is just two
2 aspects of that same issue.

3 MR. KATZ: So, you can just close
4 this one because you have 13, which is in
5 abeyance, right?

6 MR. STIVER: Isn't that a separate
7 category "addressed in finding"?

8 MEMBER ZIEMER: What does
9 "addressed in" mean?

10 MR. HINNEFELD: Basically, it is a
11 resolution of this other finding.

12 MR. STIVER: A lot of these
13 findings are really all related to the same
14 basic --

15 MEMBER ZIEMER: Well, you say,
16 "addressed in Finding 13."

17 CHAIR MUNN: Correct.

18 MEMBER ZIEMER: I got you.

19 CHAIR MUNN: All right. Are we
20 finished with 14?

21 MR. KATZ: Yes.

22 CHAIR MUNN: All right. We will

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1 move on to 15.

2 MR. SHARFI: Fifteen is already in
3 abeyance.

4 CHAIR MUNN: It is, indeed. And
5 that is the bottom of my list, am I correct?

6 MR. KATZ: That is correct for 70.

7 CHAIR MUNN: We have, with Mutty's
8 assistance and Steve's perseverance, gotten
9 through 70.

10 MR. KATZ: That's good.

11 CHAIR MUNN: Is there anything
12 open on this? Eleven still shows in progress.

13 MR. KATZ: Eleven is in abeyance.

14 CHAIR MUNN: That is just an
15 artifact of where I am, I guess.

16 MR. KATZ: Yes.

17 CHAIR MUNN: There it goes.

18 And 14, my 14 is still showing in
19 progress.

20 MR. HINNEFELD: Steve is still
21 changing that.

22 MR. MARSCHKE: Yes, you have got

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1 to get a faster secretary.

2 (Laughter.)

3 CHAIR MUNN: All right.

4 MR. STIVER: We prefer accuracy to
5 speed.

6 (Laughter.)

7 MR. HINNEFELD: It should show up
8 as "addressed in finding" at this point.

9 CHAIR MUNN: Excellent.

10 MR. KATZ: So, TIB-70, you could
11 have a two-pager written. Everything is
12 either closed or in abeyance, is that correct?
13 Right?

14 CHAIR MUNN: It appears to be.

15 MR. KATZ: So, we can task SC&A
16 with a two-pager on this.

17 CHAIR MUNN: We can, indeed.

18 Now the next item on our agenda is
19 the PERs. We have three that were items of
20 concern.

21 The first one was 008, and the
22 last time we met Ted said he would take the

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1 responsibility for seeing that our transcript
2 notations got over to Dr. Richardson after --
3 did that happen?

4 MR. KATZ: No. You have to remind
5 me even what notations you mean. Or what was
6 the issue here?

7 MEMBER ZIEMER: It had to do with
8 the IREP model, whether there was -- I don't
9 know the --

10 MR. STIVER: Yes, actually, this
11 is an issue that Hans had raised about the
12 time dependence in the Probability of
13 Causation. It is handled in IREP. Remember,
14 there were two different situations with that.
15 Actually, there were more than two.

16 If the onset was like 20 years
17 later or four years later, you are basically
18 in the same PoC. So, we agreed that this was
19 kind of an overarching science issue that
20 needed to be transferred to that Work Group.

21 MR. KATZ: And this is in the
22 transcript notations for transcript made --

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1 MR. STIVER: It would have been
2 the September 30th.

3 MR. KATZ: September?

4 CHAIR MUNN: March 22.

5 MR. KATZ: March 22?

6 CHAIR MUNN: March 22, pages 132
7 to 184.

8 MR. KATZ: One --

9 CHAIR MUNN: One thirty-two to
10 184.

11 MR. KATZ: I may have sent those
12 to David, but I don't recall, because that
13 would have been so long ago. But I can
14 double-back and check that.

15 I mean, that fits with what that
16 Science Work Group has signed up to do, in a
17 sense, because all of their priorities to date
18 are risk-model-related work. So, it fits
19 within that sense. Now they have a long
20 laundry list, and when that will get addressed
21 is anybody's guess, given how long their
22 laundry list is.

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1 But, anyway, I will follow up
2 after this meeting and check to see either
3 that I sent those transcript pages or send
4 them again. I will send them again, in any
5 event, actually, to David, so that he has
6 those in mind at least.

7 CHAIR MUNN: And the next item,
8 018, which was my commitment to do that. Even
9 though the Los Alamos Group knows what we are
10 sending to them, I was going to see it that it
11 got to them in written form and was, frankly,
12 hoping to see if I could do that in PDF. Now
13 that I can do it, I will proceed to do so, but
14 it has not yet been done.

15 And on PER-020, we had a question
16 with respect to the Blockson division. NIOSH
17 was going to take a look at the universe of
18 claims that we had to see whether there
19 actually would even be any claimants affected
20 by our items.

21 DR. ULSH: Wanda, I don't --

22 MR. HINNEFELD: What is the date

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1 of that meeting? I think I asked Tom and I
2 got an answer. What was the date of the
3 meeting? This is from the September meeting?

4 MR. STIVER: Right.

5 MR. KATZ: Yes.

6 CHAIR MUNN: Correct.

7 MR. MARSCHKE: Basically, yes,
8 September. I have got a note saying Stu will
9 find out whether these issues affect anyone.

10 MR. STIVER: This is the issue of
11 Type M uranium --

12 MEMBER ZIEMER: Which finding is
13 it?

14 CHAIR MUNN: Twenty.

15 MEMBER ZIEMER: Twenty --

16 CHAIR MUNN: On 1 and 2 both.

17 MEMBER ZIEMER: One and 2 both.

18 CHAIR MUNN: We had those classes,
19 and there was one value for uranium,
20 converting data, inhalation and ingestion. We
21 were questioning whether it was necessary to
22 do that work, in light of the fact of the

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1 probability that there were ever going to be
2 claimants that would even raise this question
3 was remote. We were just going to check to
4 make sure that that was true before we closed
5 it out.

6 We will carry that one over,
7 right?

8 MR. HINNEFELD: Yes, it is going
9 to take me a minute to find that.

10 CHAIR MUNN: So, all three of
11 these carryover.

12 MR. KATZ: Folks on the phone,
13 except when you are speaking, would you please
14 mute your phones? There is some static coming
15 back that is giving the transcriber a hard
16 time.

17 CHAIR MUNN: Now we will move on
18 to our other carryover items that we had, the
19 first one being TIB-10.

20 NIOSH was going to review Bob
21 Anigstein's report and have a position on that
22 for us.

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1 MEMBER ZIEMER: TIB-10 is the
2 overestimating approach?

3 CHAIR MUNN: Yes, it is best
4 estimate, external dose reconstruction
5 for glove box --

6 MEMBER ZIEMER: Oh, I have got the
7 wrong one.

8 DR. ULSH: This is OTIB-10 or
9 OCAS-TIB-10?

10 MR. MARSCHKE: It is OCAS-TIB-10.

11 DR. ULSH: Okay. I retract my
12 answer then.

13 MEMBER ZIEMER: OCAS-TIB-10.

14 DR. ULSH: Okay. If you can't
15 find it there, Paul, it might be it had been
16 changed to DCAS.

17 CHAIR MUNN: It is DCAS-TIB-10.

18 DR. ULSH: Right. The story there
19 is that it was originally issued as
20 OCAS-TIB-10. We changed our Division name and
21 we revised this document. It has been changed
22 to DCAS-TIB-10.

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1 MEMBER ZIEMER: How are the DCAS
2 things sorted under here? I mean, I'm under
3 TIBs.

4 DR. ULSH: I don't know, but I --

5 MEMBER ZIEMER: No DCASes.

6 CHAIR MUNN: Go back up. Just try
7 it up there under the Search box.

8 MR. MARSCHKE: Yes, if you do a
9 search on TIB-10, TIB-0010, it will -- the
10 only problem is it showing these as all being
11 open issues.

12 DR. ULSH: This is one of those
13 bugs that we talked about. Let me give you
14 the status on this, and then I will tell you
15 why the database appears the way it does.

16 Basically, this is one where we
17 have been going back and forth on this one for
18 a long time. It is my summary that the
19 substantive issues have been addressed, but
20 there were some examples that we provided in
21 response to some SC&A findings. While the
22 overarching or overlying issues have been

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1 addressed, we are still not in concordance on
2 some of those examples that we provided.

3 So, I initiated a revision of this
4 document to take those examples out. That
5 revision has happened. Those have been
6 removed, those examples.

7 And so, I have findings written up
8 that I have not yet transferred to this
9 Working Group. The reason is we discovered a
10 bug in the database where some of these in
11 this situation where they originated in an
12 OCAS document were changed to a DCAS document,
13 the findings weren't ported over when we went
14 from Access to here.

15 So, I worked with Tom James, and I
16 think we have got that fixed, with the
17 exception of the status on the findings is not
18 up-to-date.

19 CHAIR MUNN: Okay.

20 DR. ULSH: So, I think the action
21 item here is for us, NIOSH, to go in and put
22 our updated finding into the database and

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1 correct the status on this.

2 MR. MARSCHKE: Would you let me
3 know when you update the status on this?

4 DR. ULSH: Yes. Sure.

5 MR. MARSCHKE: Because some of
6 these, I think, have already been closed when
7 it was part of OCAS.

8 DR. ULSH: Right. Right.

9 MR. STIVER: Only one. I would
10 really recommend closing it.

11 DR. ULSH: Oh, yes, absolutely.
12 Don't trust the finding status on this
13 particular document because all Tom did was,
14 when he added the findings, he put a status of
15 all open. I think Elyse and I can go back and
16 fix the findings.

17 MR. MARSCHKE: Well, yes. I mean,
18 all you have got to do is go back to an older
19 version of the database and call off what the
20 findings were before --

21 DR. ULSH: Right, right.

22 MR. MARSCHKE: -- when it was

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1 still OCAS.

2 DR. ULSH: Yes.

3 MR. MARSCHKE: I don't know what
4 the status was when it was OCAS, but to kind
5 of make DCAS the same.

6 DR. ULSH: Yes, exactly.

7 CHAIR MUNN: Now I am trying to
8 recall if that is the sense of what I had
9 intended when I put this on the agenda.
10 "Anigstein report review", I say, which makes
11 me wonder if we had not had some other
12 discussion about Bob's report. I would have
13 to check the minutes.

14 MR. STIVER: I think the only
15 finding that was still open was Finding 8
16 about the modeling using Attila, the glove
17 box, the film badge, either on the chest or
18 over --

19 DR. ULSH: I am not sure it was
20 just 8. My recollection is that there were a
21 couple of others, but I could be wrong on
22 that.

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1 MR. STIVER: I am basing this off
2 of Bob's most recent response here.

3 DR. ULSH: Yes, Finding 8, I think
4 the original finding was the use of the Attila
5 software package is questioned. In response
6 to that, we added some material to the TIB
7 that was some MCNPX runs. And then, those
8 examples became a whole issue in and of
9 themselves that generated a lot of back-and-
10 forth.

11 MR. MARSCHKE: I believe, yes, at
12 one point we made some -- Bob, are you on the
13 phone? -- we made some MCNP runs, and I think
14 NIOSH requested --

15 DR. ANIGSTEIN: Yes, I am. I had
16 my phone on mute.

17 MR. MARSCHKE: You requested our
18 input files, and I think that is kind of the
19 report that is being referred to there. Have
20 you looked at Bob's MCNP input files and
21 determined whether or not you can duplicate
22 his results with those input files?

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1 DR. ULSH: Well, like I said, I
2 think if the MCNP examples that we provided
3 are taken out, which they have been, then I
4 think this issue becomes a moot issue. But
5 the next step is for me to put those findings
6 into the database, and you guys to respond to
7 them.

8 MR. MARSCHKE: Okay.

9 DR. ANIGSTEIN: This is Bob.

10 There are two things, without
11 belaboring which issue is which. One, we had
12 a problem with the use of Attila. That was
13 more of a procedural, technical issue.

14 But the substantive issue was we
15 disagree with the correction factors. I mean,
16 that doesn't go away. Whether you use MCNP or
17 Attila, that does not go away.

18 We found maybe something like -- I
19 am quoting from memory now -- but we came up
20 with something on the order of 3.3 and NIOSH
21 had something on the order of 2.1, 2.2,
22 something like that. So, we are about 50

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1 percent higher in the correction factor.

2 And it is not because we use MCNP
3 instead of Attila. It is the way the Attila
4 was applied. It wasn't applied to a single
5 location. They use Attila because it is
6 convenient, more convenient than MCNP in
7 getting a lot of tally results in that mode.

8 And then, they essentially did a
9 statistical sampling of those tallies. Our
10 objection was, when an individual comes up for
11 a dose reconstruction, he has a cancer of a
12 certain organ, not a range of organs that you
13 can say, well, statistically, we evaluate all
14 the organs.

15 So, in a nutshell, that is the
16 basis of our objection or our findings.

17 DR. ULSH: Right, and I have a
18 response from the document author. I just
19 haven't put it into the database yet. It
20 addresses that issue.

21 MR. MARSCHKE: So, basically, when
22 we get your response, Bob, you will respond to

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1 it.

2 DR. ANIGSTEIN: Okay.

3 MR. MARSCHKE: And if we are still
4 unsatisfied with it, we will let them know.

5 DR. ULSH: We will have another
6 round.

7 MR. MARSCHKE: We will have
8 another round, yes.

9 CHAIR MUNN: All right. So, what
10 we need to have for next time is -- it is
11 still in NIOSH's court.

12 DR. ULSH: Right.

13 CHAIR MUNN: We might want to go
14 back and check. I was making an effort to get
15 back to our transcript. We had quite a
16 discussion on it.

17 MEMBER ZIEMER: On this item?

18 MR. STIVER: Especially on TIB-10,
19 in September TIB-10 was just briefly mentioned
20 and it was deferred until after these changes
21 had been reviewed. It is on page 150 in the
22 transcript.

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1 CHAIR MUNN: Yes. "Greg had given
2 some draft responses, but NIOSH wasn't ready
3 to send it out. Brant said he would have it
4 for the next meeting."

5 DR. ULSH: Right. I have those
6 responses. We just did a revision to the TIB.
7 I just haven't loaded the responses into the
8 database yet.

9 CHAIR MUNN: Okay.

10 DR. ULSH: But I will get that in
11 by next meeting.

12 CHAIR MUNN: Very good. And then,
13 we will see what we can do with that.

14 TIB-13, the status.

15 MR. MARSCHKE: So, there are no
16 changes to -- I am not going to change,
17 because NIOSH has to clean up the status of
18 all the issues under TIB-10, I am not going to
19 try to do anything.

20 MEMBER ZIEMER: Nothing is changed
21 today.

22 CHAIR MUNN: No. No, we have gone

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1 from TIB-10 for now.

2 MR. MARSCHKE: Okay.

3 CHAIR MUNN: We said we are done
4 with that at the moment here, and we have gone
5 on to TIB-13.

6 MEMBER ZIEMER: Is TIB-13 a DCAS
7 TIB now or is it an OTIB?

8 DR. ULSH: So, we are skipping
9 over the ones we covered earlier, the 21
10 and --

11 CHAIR MUNN: We have already
12 covered those, I do believe.

13 DR. ULSH: All right. Yes.

14 CHAIR MUNN: We have agreed that
15 21-04, 51-01, 47-02, and OTIB-19 are all taken
16 care of because the data linkage is now
17 complete and they are workable. At least that
18 is what I think we agreed to earlier this
19 morning.

20 And now, we are searching for
21 TIB-13.

22 MR. MARSCHKE: There is no TIB-13.

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1 MEMBER ZIEMER: Is this an OTIB?

2 MR. HINNEFELD: No, it is an OCAS
3 TIB.

4 CHAIR MUNN: It is an OCAS TIB.

5 MEMBER ZIEMER: It is OCAS?

6 MR. MARSCHKE: It is not OTIB; it
7 is just T-I-B.

8 MR. MARSCHKE: There it is. Don't
9 search for 0013; search for 13, TIB-13.

10 CHAIR MUNN: Refresh my memory.
11 Have we ever sorted out the business of how
12 many zeroes?

13 DR. ULSH: Yes, I thought we had.

14 CHAIR MUNN: I thought we talked
15 about it at great length last time.

16 DR. ULSH: It is a fix that we
17 made supposedly.

18 MR. MARSCHKE: Well, again, the
19 problem here, if you want to take a note, this
20 is another one of the beta version bugs.
21 There are two versions of OCAS, of this
22 TIB-13. There is an OCAS version, which is

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1 013, and then there is a DCAS version, which
2 is 0013.

3 The OCAS version is specific to
4 Mallinckrodt. The DCAS version is more
5 generic. The OCAS version has the SC&A, it is
6 the version that SC&A commented on. It has
7 the SC&A comments and the comment history in
8 the database in the OCAS version. In the DCAS
9 version it does not. It has nothing.

10 DR. ANIGSTEIN: Excuse me.

11 I submitted comments on the DCAS
12 version.

13 MEMBER ZIEMER: Which one are we
14 looking at now?

15 MR. MARSCHKE: Who did you submit
16 them to, Bob?

17 DR. ANIGSTEIN: You.

18 CHAIR MUNN: I thought that we
19 were looking at Mallinckrodt.

20 MR. KATZ: And at the last
21 meeting, I thought we discussed this fact,
22 that this evolved from an OCAS version to a

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1 DCAS more generic version. We discussed it at
2 the last meeting, I believe, because I think I
3 read that in the transcript.

4 CHAIR MUNN: We had a lot of
5 discussion about this.

6 DR. ANIGSTEIN: Basically, let me
7 clarify what I just said. I updated the
8 findings and responded to picking up the
9 findings from the earlier version and then
10 commented on to the extent to which the later
11 version addressed the original comments. So,
12 they are both taken into account in a single
13 -- it is not a separate review.

14 MR. MARSCHKE: Okay. That is what
15 we were trying to say, Bob. Basically, the
16 database doesn't have any comments on DCAS
17 TIB-13.

18 DR. ANIGSTEIN: Okay. Yes.

19 MR. MARSCHKE: Somehow we have to
20 import the OCAS-TIB-13 comments over into
21 DCAS-TIB-13. And I don't know if you want to
22 remove OCAS-TIB-13. Do we want to close out

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1 those comments? I don't know procedurally how
2 you want to handle, I don't know how, yes, how
3 do we want to go forward on this.

4 MEMBER ZIEMER: I see only one
5 item open in --

6 MR. MARSCHKE: There is only one
7 item open, which is --

8 MEMBER ZIEMER: Right, Finding 4,
9 right.

10 DR. ANIGSTEIN: It is issue 6 that
11 was folded into issue 4.

12 MR. MARSCHKE: Exactly.

13 MR. KATZ: Right.

14 MR. MARSCHKE: Yes.

15 CHAIR MUNN: Essentially, they are
16 all correction factors to be applied. And it
17 was my understanding that NIOSH was going to
18 take another look at the reviews that had
19 already been made and make some suggestion as
20 to whether or not this was going to go to the
21 Science Issues group as an overarching issue
22 or whether it was going to be a site-

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1 applicable item. That was, I believe, my
2 understanding, the upshot of the discussion.

3 Am I thinking of something else?

4 MR. STIVER: No, Wanda, that is
5 what I have for the notes from the September
6 transcript, the idea of angular dependence
7 versus geometry --

8 CHAIR MUNN: Right.

9 MR. STIVER: -- in the film
10 badges. That was to go with the overarching
11 category.

12 CHAIR MUNN: Whether it was going
13 to go to them or whether --

14 MR. STIVER: I believe this was
15 going to be considered. I don't think a
16 decision had been made at that point.

17 CHAIR MUNN: No.

18 MR. MARSCHKE: My recollection is
19 that we discussed about it, and then I think
20 NIOSH -- I don't want to speak for you, but my
21 recollection is that you wanted to go back and
22 re-examine SC&A's comments. Before we took

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1 the action to assign this over to the Science
2 Committee, you kind of wanted to take one last
3 look at the comments that were being made.
4 That is what we have in the database.

5 MEMBER ZIEMER: Yes, the September
6 meeting, it says that NIOSH is going to re-
7 examine.

8 MR. KATZ: Well, you may want to,
9 on that last note about sending it over to the
10 Science Committee, the Science Committee at
11 this point has only committed to dealing with
12 risk-model-related work. So, at the time that
13 they met, I provided to everyone on the
14 Science Committee both the risk model
15 material, but also the dose reconstruction
16 overarching issues. There are a slew of them,
17 actually.

18 But the Science Committee did not
19 bite on the dose reconstruction issues. So,
20 it doesn't have an agenda for that at this
21 point.

22 MEMBER ZIEMER: Well, keep in mind

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1 that that Committee is looking at what you
2 might call longer-term issues, and they
3 prioritized and said these are the ones that
4 need the attention first.

5 MR. KATZ: Right.

6 MEMBER ZIEMER: So, it is not that
7 they are not interested in that, but --

8 MR. KATZ: No, no, just to be
9 clear, what I am saying is I have in my notes
10 as to what they agreed to in the relative
11 near-term. And I have seven issues, and they
12 are all risk-model-related.

13 MEMBER ZIEMER: Right.

14 MR. KATZ: And I didn't even get a
15 prioritization for the dose reconstruction
16 overarching issues from that meeting. They
17 have only met once in a real substantive way,
18 except for the special meeting with the
19 Science Committee.

20 MEMBER ZIEMER: Yes, but one thing
21 on overarching issues, they can go into that
22 overarching category, and that doesn't mean

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1 that that Work Group has to deal with them
2 because it has to do with, if there is a
3 generic OTIB, or whatever it is, that you
4 would put it all together. I don't think it
5 necessarily has to go through that Work Group.

6 It is just that we are not going to solve
7 this issue 20 times at a bunch of sites. It
8 can move to --

9 MR. HINNEFELD: If I am not
10 mistaken, we talked about the overarching
11 issues rather than counting on the Science
12 group.

13 MEMBER ZIEMER: Yes.

14 MR. HINNEFELD: To say we are
15 going to build a dummy committee, a
16 subcommittee, on this application, and just
17 call it "overarching issues".

18 MEMBER ZIEMER: Yes, whether it is
19 resuspension factor or --

20 MR. HINNEFELD: And then, all
21 these overarching issues get assigned into
22 that, so you can pull up, once any particular

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1 group decides something is an overarching
2 issue, then you have in this a population of
3 overarching issues.

4 MEMBER ZIEMER: Right. And once
5 you guys develop an approach, then somebody
6 reviews it.

7 MR. HINNEFELD: Right.

8 CHAIR MUNN: But, on this specific
9 topic, on this one only, my question is, am I
10 incorrect that NIOSH was going to take a look
11 at, they were going to re-review the material
12 here and make a recommendation as to whether
13 or not this is an overarching issue or it is
14 site-applicable? That is what I had in my
15 mind at the time I wrote what I did on the
16 agenda. Am I incorrect in that?

17 MR. MARSCHKE: I believe you are
18 correct.

19 MEMBER ZIEMER: Before a final
20 decision is made --

21 CHAIR MUNN: Correct.

22 MEMBER ZIEMER: -- as to whether

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1 it is generic or not.

2 CHAIR MUNN: Yes. All right. So,
3 this is a carryover.

4 MEMBER ZIEMER: Was the DCAS-013 a
5 generic version of this? Is that what was
6 being said?

7 CHAIR MUNN: I don't think so.

8 MR. HINNEFELD: DCAS-013, yes, I
9 think that is right. OCAS-13 was
10 Mallinckrodt-specific. DCAS-13 addressed the
11 fact, well, these same geometries could exist
12 other places besides Mallinckrodt. Why don't
13 we write a more general --

14 MEMBER ZIEMER: Yes, so that
15 becomes the overarching document.

16 MR. HINNEFELD: Right.

17 MEMBER ZIEMER: But you are going
18 to determine whether you solve this
19 immediately for Mallinckrodt or whether it
20 gets solved in the other document then. Well,
21 something like that.

22 MR. HINNEFELD: Yes.

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1 MR. STIVER: It would have to
2 migrate to the DCAS document.

3 MEMBER ZIEMER: Well, unless it is
4 sufficiently Mallinckrodt-specific --

5 MR. HINNEFELD: Yes, but I don't
6 think --

7 MR. STIVER: It doesn't sound like
8 this would be. This is the kind of thing that
9 would be kind of overarching.

10 CHAIR MUNN: The ball is still in
11 the NIOSH court.

12 DR. ULSH: Yes.

13 CHAIR MUNN: And it is a
14 carryover.

15 DR. MAURO: This is John.

16 One other thing that just came out
17 of this conversation that I felt was something
18 I was not aware of is the segregation between
19 the science activities and what we would call
20 the overarching issues. The science
21 activities, I guess it is a higher-level
22 issue. There is another category that really

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1 falls into more of a generic issue that lies,
2 I guess, amongst us and NIOSH, but it is not
3 part of the Science group. So, there are
4 these two collections, so to speak, of generic
5 issues that I did not make that distinction in
6 my mind. Am I correct that there is that
7 distinction?

8 CHAIR MUNN: It looks like that is
9 the way it is going to be, John. I didn't
10 make that distinction personally, either. In
11 my mind, the issues that are before us are
12 many and either fall into the kind of issues
13 that we deal with here in this Subcommittee or
14 they fall into a broader, general category. I
15 don't know whether to call them overarching or
16 not, but in my mind I have always thought of
17 them as overarching issues. They are, also,
18 in my mind all science issues.

19 But there has, clearly, in recent
20 months been a distinction made between those.

21 And there was some discussion of that here in
22 our September meeting.

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1 MR. STIVER: In my mind, I have
2 kind of an agreement with Wanda. I mean they
3 are really just two sides of the same coin
4 here. Although this idea of setting up an
5 overarching virtual Work Group, if you will,
6 to parse them out to various committees would
7 kind of indicate that you may have certain
8 situations where it is not really an
9 overarching science issue, but may apply to
10 several different types of facilities or
11 several facilities within a given type.

12 Like, say, AWEs may have certain
13 commonalities that need to be addressed in
14 kind of an overarching way, but it wouldn't
15 necessarily be a scientific issue that is kind
16 of programmatic-wide. It is kind of a sub-
17 element of --

18 CHAIR MUNN: It is kind of what we
19 had in mind originally with 6001.

20 MEMBER ZIEMER: Well, keep in
21 mind, the science issue that they are looking
22 at seems like the CLL, the chronic lymphocytic

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1 leukemia. That doesn't show up as an issue
2 in, let's say, the Rocky Flats Work Group.

3 MR. STIVER: Right, in any given
4 particular Work Group.

5 MEMBER ZIEMER: Right, and it is
6 sort of like programmatic overall.

7 And there are some other issues
8 like that. Whereas, the resuspension thing is
9 more of an application of the science --

10 MR. STIVER: Yes.

11 MEMBER ZIEMER: -- that is already
12 there.

13 MR. STIVER: It is an application
14 that may span more than one --

15 MEMBER ZIEMER: Yes. The IREP
16 model is a little different again. All the
17 Work Groups are saying, yes, the IREP model is
18 there. So, you are not getting findings that
19 -- well, you might. You have raised some
20 issues on the IREP model, but that is
21 partially an overarching science.

22 MR. STIVER: Yes, it really is,

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1 and the other may be kind of subcategories of
2 that, but, yes, it can be addressed within the
3 purview of types of sciences as opposed to
4 programmatic-wide.

5 MEMBER ZIEMER: Right.

6 MR. KATZ: And clearly, this
7 Subcommittee deals with programwide dose
8 reconstruction matters. So, they don't need
9 to be all punted to another Science Work
10 Group, particularly when they are sort of
11 dose-reconstruction-specific. I think, just
12 as with OTIB-70, they can be addressed here.

13 CHAIR MUNN: The ball is in the
14 NIOSH court.

15 The next item that we have is
16 OTIB-52 Rev. 1 response.

17 DR. ULSH: And we are prepared on
18 that one, I believe. So, Elyse and Matt
19 Smith, do you want to discuss that one?

20 MR. SMITH: Sure. This is Matt.

21 For reference, I don't know if you
22 can bring it up in the room, but OTIB-52, Rev.

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1 1, for the first item, which is -12, the page
2 of interest would be page 30 of 40.

3 CHAIR MUNN: Now hold on just a
4 moment.

5 MR. HINNEFELD: That is of the TIB
6 itself.

7 MEMBER ZIEMER: Oh, of the TIB
8 itself?

9 MR. SMITH: Yes, that is of the
10 TIB itself.

11 These items are issues that were
12 brought up previously and addressed in Rev. 1
13 of the TIB and are kind of based on a
14 discussion that took place way back in October
15 of 2008.

16 And just to add to the
17 documentation, I sent Elyse a copy of meeting
18 notes from Bob Morris, who is the OTIB-52
19 author, to Elyse. I don't know if that is
20 linkable yet or not.

21 MS. THOMAS: Yes, those did get
22 linked.

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1 MR. SMITH: Okay.

2 MS. THOMAS: You are looking at
3 Finding 12. So, if the Subcommittee wants to
4 look those up in the database, you can. Matt
5 is starting with OTIB-52, Finding 12, and
6 there are new responses that were uploaded, as
7 well as a link to those meeting notes that he
8 is referring to.

9 MEMBER ZIEMER: Right.

10 MR. SMITH: So, it is kind of
11 three things being juggled here. Let me try
12 to summarize on item 12.

13 The issue here was the use of the
14 REMS database as opposed to the site-specific
15 REX database at Hanford. There were several
16 reasons the authors used the REMS data. It
17 was for the early years the only way to
18 separate out construction trade workers from
19 all monitored workers. And then, even into
20 the modern era, it just proved to be a very
21 reliable way for them to do that same
22 separation of those involved in construction

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1 trades versus the all monitored workers.

2 So, as far as the pedigree
3 response to this, if you take a look at the
4 linked meeting notes that Bob Morris took in
5 2008, within that document he has got it
6 highlighted as item 3.

7 DR. ULSH: Just to briefly
8 interrupt, John, you had asked earlier whether
9 you could link different document types.

10 MR. STIVER: Yes, here you go.

11 DR. ULSH: Yes, this answers the
12 question, I think.

13 MR. SMITH: Let me pause. Is that
14 linking working there?

15 CHAIR MUNN: It is working.
16 Item 3.

17 MR. SMITH: That's great.

18 CHAIR MUNN: Good. Yes, it is
19 great.

20 MEMBER ZIEMER: What kind of
21 document is this?

22 CHAIR MUNN: It is a Word

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1 document.

2 MEMBER ZIEMER: Oh, it came up and
3 I just didn't see it. There it is.

4 CHAIR MUNN: Item 3.

5 MR. KATZ: Just to be clear for
6 the record, for this one, since we are dealing
7 with Hanford, this is Dr. Ziemer, Paul and
8 Dick will have to deal with this.

9 CHAIR MUNN: They will.

10 MEMBER ZIEMER: Not a conflict.

11 MR. KATZ: Not conflicted, right.

12 MR. SMITH: Let me bring that up
13 as well. I am also conflicted with Hanford.
14 Sorry. Does that prohibit me from speaking
15 further?

16 MR. KATZ: Yes. So, who has done
17 the work on this, is the question.

18 MR. SMITH: The person who has
19 done the work on it is Bob Morris.

20 MR. KATZ: I see. Who is not
21 here. And you are just being his voice?

22 MR. SMITH: Well, I am listed as

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1 the document owner. The author, though, of
2 the really the original and also Rev. 1 is Bob
3 Morris. And also, he directly collaborated on
4 the responses that we are talking about, even
5 the current responses.

6 MR. HINNEFELD: Well, the document
7 is construction workers.

8 MR. KATZ: Right. I understand.

9 MR. HINNEFELD: The document
10 relates to construction workers across the
11 conflict.

12 MR. KATZ: Right.

13 MR. HINNEFELD: And so, the
14 conflict doesn't apply to a generic thing like
15 this.

16 MR. KATZ: No, I understand.

17 MR. HINNEFELD: This specific
18 issue we are talking about now is a finding
19 about something that was at Hanford.

20 MR. KATZ: Right.

21 MR. HINNEFELD: That was used in
22 support of this generic document. I think we

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1 are kind of in the clear.

2 MR. KATZ: Yes, I mean, I think he
3 can present. It is not even his work he is
4 presenting.

5 Go ahead.

6 MR. SMITH: Okay. In any event,
7 you can see this item was discussed, again,
8 back in 2008. The bottom line you can see on
9 the final page of Bob's draft meeting notes,
10 and that is the response that we have also
11 listed currently, which is to add a statement.

12 I guess in this case it would be
13 adding a statement to Rev. 1 that is on the
14 street now that says, "Electronic access to
15 the REX database was not available when this
16 bulletin drafted. However, the data in REMS
17 was derived from the data in REX and is judged
18 to adequately represent the ratio of
19 construction trade workers and all monitored
20 worker doses."

21 So, that was the final outcome of
22 the 2008 meeting. That particular language

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1 doesn't look like it landed on page 30 of Rev.
2 1 of OTIB-52. There are several annotations
3 there that address response to this item, this
4 -12 item, but this particular language didn't
5 end up in the document. So, the response is
6 that this language would be added.

7 In terms of where would it be
8 added, if you are looking at page 30 of the
9 OTIB, probably about midway or actually almost
10 the second-to-last paragraph you will see
11 Annotation No. 9. That looks like that would
12 be the best place to add this language that I
13 just described.

14 MEMBER ZIEMER: Did SC&A already
15 see this response?

16 MR. MARSCHKE: No.

17 MR. STIVER: No, we haven't.

18 MR. MARSCHKE: No, we didn't the
19 response. It has been in the database, I
20 guess it has been in the database, but we --

21 CHAIR MUNN: Will our action in
22 this case be SC&A will review this response

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1 here?

2 MR. MARSCHKE: Well, I think the
3 comment was, if I recall the original
4 comment -- and, basically, I was one who did
5 the critique of 052 -- there was confusion as
6 to what was actually used. When we initially
7 brought up why was REX used as opposed to
8 REMS, I think one of the initial responses we
9 got was that REX was used. And based upon
10 that, we said, okay. But that is not
11 reflected in the document.

12 And now I think when NIOSH has
13 gone back and said, well, no, REX wasn't used,
14 we were confused and we wanted to get
15 clarification. When we looked at Rev. 1, we
16 made our report on Rev. 1, we said, well,
17 basically, what is it; was REX used; what not
18 REX used? Or was REMS used?

19 Now with this clarification that
20 REMS was used and REMS is basically the same
21 as REX, I don't have any problems with just
22 making that clear in the document. If you

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1 have this two sentences that they indicate
2 here, I would be happy with the NIOSH
3 response.

4 CHAIR MUNN: So, is the action
5 here that SC&A accepts NIOSH response?

6 MR. MARSCHKE: SC&A accepts NIOSH
7 response, that is what I am saying at this
8 point, yes.

9 MEMBER ZIEMER: And it would be in
10 abeyance until --

11 MR. MARSCHKE: And it would be in
12 abeyance until these two sentences are
13 inserted into the document, with probably a
14 page change or something like that.

15 CHAIR MUNN: Dick, if you are
16 still on the line, are you in agreement?

17 MEMBER LEMEN: Yes.

18 CHAIR MUNN: Very good. It is in
19 abeyance.

20 MR. MARSCHKE: Just a procedure
21 thing for Ted, can I make this change in
22 Wanda's name or what should I do?

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1 MR. KATZ: No, why don't you go
2 ahead and make it in --

3 MR. MARSCHKE: Paul's name?

4 MR. KATZ: -- Paul's name. Thank
5 you. Just to keep in the paperwork in order.
6 Thank you.

7 CHAIR MUNN: Is that the last item
8 we have on OTIB-52?

9 MEMBER ZIEMER: What about the
10 next, 13?

11 MR. STIVER: We have 13 I believe
12 and 14 as well.

13 MR. KATZ: Okay. Do you want to
14 proceed with Finding 13?

15 CHAIR MUNN: Please do.

16 MR. SMITH: All right. Thirteen
17 and 14 are linked, both in terms of when they
18 were discussed earlier in 2008 and, also, in
19 the response that ended up in the revision of
20 the OTIB itself.

21 So, in the OTIB-52 document, the
22 Rev. 1 document, let me send you all the way

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1 back to page 9 of 40. The section of interest
2 is Section 4. And then, also for reference
3 is, again, the 2008 meeting notes, and the
4 item listed as item No. 2 is addressing, as
5 you can see there in the title, it is
6 addressing Findings 13 and 14.

7 The language that was added to the
8 OTIB you can see right in basically the center
9 of Section 4. It ends with Annotation No. 2.

10 And the issue here was the
11 treatment among the different sites, and then,
12 also, there was a file on issue regarding the
13 factor, I guess you would call it the
14 threshold factor is the best way to describe
15 it.

16 So, for item No. 13, the response,
17 the current response dated 12/7, the methods
18 were always the same when a certain site was
19 evaluated. I will just go ahead and read the
20 response from 12/7.

21 "Regardless of comparison method,
22 the outcome would be favorable to construction

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1 trade workers because the correction is
2 typically applied to doses in a site-specific
3 coworker model which is based on data for all
4 monitored workers. When construction trade
5 workers are removed from the comparison
6 population, the ratio favors construction
7 trades if the construction trade doses are, in
8 fact, elevated."

9 In addition, regarding the 20
10 percent threshold criteria, that threshold
11 criteria falls inside the margin of
12 uncertainty for dosimetry, which roughly in
13 the film era is 30 percent. And also, for
14 dosimetry programs, the modern era that would
15 be covered by DOELAP, you typically see a 30
16 percent criteria that you need to conform to
17 to pass DOELAP.

18 MR. STIVER: Yes, this is John
19 Stiver.

20 We are having a similar problem or
21 a similar issue we are dealing with at
22 Fernald, very close to this. That is the

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1 issue of do you lump construction trade
2 workers with all workers for the comparison?
3 And clearly, when you do that, you are
4 diluting out the effect. In our case, in the
5 all monitored workers category when you give
6 the ratio of construction trade workers to all
7 monitored workers, I think we ended up with
8 about, NIOSH came up with an adjustment factor
9 of about two or so. But when you pull them
10 out of that denominator, you would see that
11 the effects -- of course, it was dependent on
12 various years -- it could have been up to a
13 factor of four or more.

14 And so, this is something that is
15 still being debated in the Fernald Work Group.

16 We have put together a White Paper on that,
17 which we are going to prepare.

18 But I am not familiar with how
19 this was handled in OTIB-52. I know Steve did
20 the review of that.

21 So, maybe, Steve, you can speak to
22 that situation.

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1 MR. MARSCHKE: Well, sometimes it
2 was compared to, the construction workers were
3 compared to all monitored workers and
4 sometimes they were compared to non-
5 construction work monitored workers. So,
6 there is a little bit difference in the ratio.
7 So, when you come up to what is an acceptable
8 ratio, you get a slightly different value.

9 When we did talk about it last
10 time, I mean we did discuss, again, like the
11 20 percent, where did the 20 percent come? If
12 this is like a cutoff for acceptability, what
13 is the basis for it?

14 Now I think in what Matt had just
15 said, he has presented what the basis for it a
16 little bit is, which I think, to my
17 recollection, that is kind of new information,
18 that it is based on the accuracy of the
19 readings.

20 And I think that is really what we
21 were asking for, what is the cutoff and what
22 is the basis for the cutoff? And you are

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1 saying that between the two methods, you know,
2 construction workers to all monitored workers
3 or construction workers to non-construction
4 monitored workers, the difference is going to
5 be less than 20 percent. And that is an
6 acceptable difference based upon the accuracy
7 of the readings. That is really the
8 information that I think we were looking for.

9 MR. SMITH: Okay. And kind of
10 back to the big picture, that paragraph in the
11 middle of Section 4 you can see is basically
12 verbatim from the meeting notes from 2008.
13 You can see the language there listed under
14 item 2 in those meeting notes, as well as a
15 summary of the discussion regarding that
16 language.

17 MR. MARSCHKE: I do have a concern
18 about I know that there was a meeting, there
19 was a number of meetings on OTIB-52.

20 MR. SMITH: Right.

21 MR. MARSCHKE: And you keep
22 referring back to the 2008 meeting. I am not

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1 sure that there weren't a number of meetings
2 after the 2008 meeting. So, I am not 100
3 percent sure that that is the definitive
4 meeting and should be referred to as the
5 definitive meeting.

6 Because I think -- and I have to
7 go back and I am desperately looking for my
8 report, and I can't find where I have it on my
9 flash drive. But I think we continued to talk
10 about some of these findings after the 2008
11 meeting.

12 MR. SMITH: The main reason I am
13 using this summary or these minutes is that I
14 can see -- you know, at that time I was not
15 document owner, but, historically, looking
16 back, I can see, like we are speaking of this
17 item, exactly where the language in Rev. 1
18 that is now on the street came from.

19 MR. MARSCHKE: Well, that was one
20 of my problems when I looked at Rev. 1, was
21 that the language came out of a meeting.

22 MR. SMITH: Okay.

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1 MR. MARSCHKE: And then, we
2 continued to discuss the issues after that
3 particular meeting.

4 DR. ULSH: It sounds like you
5 might want to take some time and review this
6 response before we make any kind of a status
7 change. Is that --

8 MR. STIVER: I would recommend
9 keeping this in progress because there are
10 still some issues about how that ratio is
11 determined. So, yes.

12 MR. MARSCHKE: I think what we
13 should do maybe, I see now that Matt's
14 responses are in the database. To be honest
15 with you, they have been in there for a while.

16 I wasn't aware that they were in the
17 database, and I should have looked at these
18 before the meeting. I would have liked to
19 have looked at these before the meeting and
20 prepared SC&A's position on these responses.

21 So, I think what I would like to
22 do on OTIB-52, if it is okay with the

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1 Subcommittee, is I would like SC&A to take an
2 action item to go through and review the
3 latest replies from NIOSH and see where we
4 agree and if we disagree on some of the
5 issues.

6 MR. KATZ: Can I ask a process
7 question? I mean, I know often we get notices
8 from you, Brant, saying we have just responded
9 to "X". Did that not happen with this?

10 DR. ULSH: I don't know. I would
11 have to go back and look at my email.

12 MR. KATZ: Okay.

13 MR. STIVER: I was not notified.

14 MR. KATZ: Going forward, anyway,
15 we need to make certain that we get
16 notifications out when someone makes an
17 addition --

18 MR. MARSCHKE: Yes. I know we did
19 it on --

20 MR. KATZ: -- responses or
21 reviews, either way.

22 MR. MARSCHKE: Right.

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1 MR. KATZ: Because, I mean, then,
2 you don't need to be tasked; you know when you
3 get notification that there is a response.

4 MR. MARSCHKE: That is what we did
5 on OTIB-6.

6 MR. KATZ: Right. No, I
7 understand.

8 MR. MARSCHKE: And so, yes, this
9 one must have just --

10 DR. ULSH: Yes, it is always my
11 intention, when we load something into the
12 database, to let you guys know.

13 MR. KATZ: Right.

14 DR. ULSH: I would have to go back
15 and look at my emails.

16 MR. KATZ: Yes, we don't need to.
17 It is water under the bridge. I just mean,
18 going forward, let's --

19 MR. STIVER: Yes, certainly,
20 everybody needs to stay abreast of the changes
21 made.

22 MR. KATZ: Notifications, yes.

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1 CHAIR MUNN: That process has
2 worked for us in the past, but, obviously, it
3 is not impossible to simply be overlooked.

4 Our action item for the next
5 meeting will be an issue for SC&A on the
6 current status of OTIB-52. Specifically, item
7 13 or broader than that?

8 MR. MARSCHKE: I would say it is
9 broader than that, Wanda.

10 CHAIR MUNN: All right.

11 MR. MARSCHKE: All the ones --

12 CHAIR MUNN: We will just say 52.

13 DR. ULSH: We talked about Finding
14 12, 13, and 14. I thought 12 we agreed to
15 change to in abeyance or --

16 MR. MARSCHKE: Right. So,
17 basically, it is 13 and 14.

18 MEMBER ZIEMER: I have one
19 question on 13. It might apply to 14 also,
20 I'm not sure. But I noticed we have the
21 current response, Matt Smith's response,
22 right, December 16th? The previous comment is

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1 2008, a NIOSH response, 2008, that SC&A
2 should review, and so on. Then, there is this
3 big gap here and then this new response from
4 Matt Smith. Are there some missing things
5 here? It says that SC&A is going to respond
6 in September 2008. I don't see that.

7 MR. MARSCHKE: What happened was
8 -- yes, Paul -- what happened was NIOSH issued
9 Revision 1 to OTIB-52, and we did a review of
10 Revision 1 to OTIB-52 and issued a document.
11 Like I say, I was desperately trying to find
12 that document on my O: drive, or not on my O:
13 drive, but on my flash drive. And I haven't
14 been able to locate it yet.

15 So, I guess you could say there
16 are a few steps missing in this history, one
17 step being that Revision 1 has been issued.
18 Another step being that SC&A has issued a
19 document reviewing Revision 1.

20 So, what we probably should do is
21 take our critiques or whatever critiques that
22 we had from the document and put them into the

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1 database.

2 MEMBER ZIEMER: Yes. I think
3 something to transition between these two
4 would help.

5 MR. MARSCHKE: I just don't know
6 whether, I don't know if I can make it in
7 chronological order. It may be out of
8 chronological order.

9 MEMBER ZIEMER: Right.

10 MR. MARSCHKE: But I will make
11 sure --

12 MEMBER ZIEMER: I think what you
13 do is you review this and fill in those gaps
14 maybe.

15 MR. MARSCHKE: Make sure that it
16 gets in there.

17 CHAIR MUNN: Notation of a link,
18 if nothing else.

19 MEMBER ZIEMER: Yes.

20 CHAIR MUNN: A date and a link,
21 now that we have links.

22 MR. KATZ: Very good.

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1 CHAIR MUNN: All right. We have
2 one more item, but it is after 12:00, and I
3 don't believe OTIB-6 is going to take us that
4 long. I suggest that we break for lunch and
5 that we be back at 1:30. Is that amenable
6 with all?

7 MR. KATZ: How about 1:15, an
8 hour?

9 CHAIR MUNN: 1:15 will be fine.

10 MEMBER LEMEN: I will try to be
11 back with you.

12 CHAIR MUNN: Thank you, Dick.

13 MR. KATZ: Thank you, Dick.

14 MEMBER LEMEN: All right.

15 MR. KATZ: Thank you, everyone
16 else on the line. We will speak to you again
17 at 1:15.

18 (Whereupon, the foregoing matter
19 went off the record at 12:11 p.m. and resumed
20 at 1:17 p.m.)

21

22

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1 response to OTIB-6 and that we would cover it
2 at this time.

3 Steve, are you up on this one?

4 MR. MARSCHKE: Yes. As you see on
5 the screen, what we have is the two pieces of
6 information that have developed on OTIB-6,
7 Finding No. 3, since last time we met.

8 Essentially, what it says is that
9 NIOSH has issued Revision 4 to OTIB-6, and
10 SC&A has reviewed Revision 4 to OTIB-6 and
11 found that NIOSH has effectively incorporated
12 the agreed-upon resolutions to Finding 3. And
13 we recommend that Finding 3 be closed at this
14 point.

15 CHAIR MUNN: Any objection to
16 closing Finding 3?

17 MEMBER ZIEMER: Is this 0006?
18 Yes.

19 CHAIR MUNN: Yes.

20 MEMBER ZIEMER: Finding 3, 4, and
21 5, are they the same? I am looking at the
22 thing you sent out, which is the overview. Or

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1 did you send that out?

2 CHAIR MUNN: No.

3 MR. MARSCHKE: There is only
4 Finding 3 and 4.

5 MEMBER ZIEMER: Oh, I'm sorry.
6 Okay. There was a summary thing --

7 CHAIR MUNN: Yes, yes, there was a
8 summary thing, yes.

9 MEMBER ZIEMER: -- that came from
10 SC&A. I opened the wrong thing here. I need
11 to be in the database then?

12 CHAIR MUNN: I think you need to
13 be, yes, the database is probably the best
14 thing.

15 MR. MARSCHKE: I mean, Brant sent
16 an email, I guess it was probably before
17 Christmas, indicating that Revision 4 had been
18 issued. We took and ran with that, and we
19 sent out an email right around Christmastime,
20 I think it was --

21 CHAIR MUNN: Yes.

22 MR. MARSCHKE: -- indicating that

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1 we agreed with NIOSH on these two issues. And
2 subsequently, I have updated the database to
3 reflect that SC&A does agree.

4 CHAIR MUNN: Yes, 3 and 4 were the
5 only two outstanding findings that we had on
6 OTIB-6.

7 MR. MARSCHKE: That is correct.
8 And they were both in abeyance. So, I mean,
9 what it was was that everybody had come to
10 agreement what the resolution should be. It
11 was just a matter of updating OTIB-6 and
12 incorporating those agreements and changes.

13 CHAIR MUNN: Making sure the
14 procedure was itself done, and they have done
15 that. SC&A has reviewed the revisions and
16 agrees that the contents have been covered for
17 the new revisions.

18 Closed.

19 MEMBER ZIEMER: Closed.

20 CHAIR MUNN: Agreed, Dick?

21 (No response.)

22 I take that to be assent.

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1 And 4 is essentially the same as
2 12, correct?

3 So, should now be off our list.

4 MR. KATZ: Closed.

5 CHAIR MUNN: And because I was so
6 happy that they were closed, I left them off
7 the original agenda. My apologies.

8 The next item that we have is a
9 report on the Sciences Issues Work Group and
10 overarching issues status. We have touched on
11 that briefly this morning, but I don't know
12 whether everyone is aware of the items that we
13 discussed that the Science Issues Work Group
14 agreed to take and the statuses of the other
15 overarching issues.

16 Do you want to give us a brief
17 rundown, Ted?

18 MR. KATZ: Sure. So, the Science
19 Subcommittee met back in, I believe, October
20 and made a priority list, as Paul mentioned
21 earlier. It had seven items of priority that
22 all fall under risk model issues. As I said

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1 earlier, none of them really relates to the
2 dose reconstruction overarching issues.

3 The first priority is dose and
4 dose rate effectiveness factor. SENES has
5 written a major paper on this, and Dr.
6 Richardson is reviewing that paper with a
7 proposal that he would write a sort of
8 summary, a manageable summary, and whatever
9 thoughts there might be related to that
10 summary in terms of the Board's views that he
11 would produce for the Work Group to consider.

12 So, that is on his plate. He
13 hasn't delivered that summary yet. I don't
14 know what the status of that is, but it was a
15 big chunk of work that he was going to have to
16 comprehend to get to that point. So, I am not
17 surprised I haven't seen it yet.

18 The other items in the priority
19 list were RBE, relative biological
20 effectiveness. Other factors sort of like
21 other workplace exposure factors, and so on,
22 was three. Age-at-exposure analysis for

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1 incorporation of nuclear worker epistudies.
2 The IREP models is five. Grouping of rare
3 miscellaneous cancers was six on their list of
4 priorities. And seven was discussion of in-
5 house data and what could be made of that
6 analytically going forward, I guess, for epi-
7 models, and what have you.

8 So, those seven items are their
9 priorities at this point. Anything more you
10 want to know about it?

11 CHAIR MUNN: I am wondering how to
12 approach the issues that we were discussing
13 this morning, such as placement of badges, the
14 kind of, as you said, operational activities
15 that affect not necessarily every site, but a
16 great many, and are science issues in
17 themselves, but not in the same sense that
18 these are.

19 Perhaps we should have a
20 discussion with Dr. Richardson and get views
21 of his Work Group on issues of that type.

22 MR. KATZ: I think that is

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1 certainly one thing you could do. You and
2 Paul are both on that Work Group as well, and
3 so is Dick. So, you certainly can have that
4 discussion next time that Work Group meets,
5 about these DR overarching issues.

6 MEMBER ZIEMER: I think the
7 overarching ones tend to show up in other
8 contexts where they get sort of identified by
9 a particular Work Group or by NIOSH or by SC&A
10 that says this is a reoccurring thing; it
11 occurred here, here, and here.

12 CHAIR MUNN: Yes, it keeps showing
13 up.

14 MEMBER ZIEMER: It becomes
15 overarching, and then NIOSH usually has picked
16 that up. They will say, for example, well, we
17 are developing a White Paper or a position on
18 this. And then, that leads to a review.

19 But my question is, are there any
20 such issues that have been identified that are
21 already sort of in the pipeline?

22 CHAIR MUNN: In the pipeline

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1 where?

2 MEMBER ZIEMER: Are most of those
3 overarching ones like resuspension factors?
4 That is being addressed. Construction
5 workers, that was a generic thing and
6 addressed.

7 MR. STIVER: That is a generic.

8 MEMBER ZIEMER: But what else is
9 on that --

10 MR. KATZ: I will tell you what
11 was on that list: oral/nasal breathing.

12 MEMBER ZIEMER: And that is in
13 process, right?

14 MR. KATZ: That is in process, I
15 think.

16 Workplace ingestion, doses from
17 hot particles, NTOA rehashed, non-standard
18 external exposures, thoriated welding rods,
19 interpretation of unworn badges, material
20 tracking, and internal dose from the Super S
21 Pu.

22 MEMBER ZIEMER: Super S has been

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1 addressed, I think. I mean, that was an
2 overarching one that has been addressed.

3 MR. KATZ: Okay. Well, I mean,
4 back in August it wasn't done, because this
5 came from Jim's list originally, which he
6 presented in August.

7 CHAIR MUNN: And you see this,
8 what we were just discussing earlier, the
9 issue of badge geometry is one of those things
10 that shows up on multiple sites.

11 MR. STIVER: The list that Ted
12 just put forth are science issues, but they
13 may have limited applicability. The things we
14 are looking at here, like say with the film
15 badge placement and modeling, it is almost
16 more of a mechanistic approach. How do you
17 address this problem? It is almost like a
18 method that is common to a lot of different
19 sites that have these types of --

20 MEMBER ZIEMER: Well, that is for
21 overarching issues.

22 MR. STIVER: Yes, yes. I know,

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1 but it is almost like there is a subtle
2 distinction between like, say, hot particles
3 being an issue in itself. But, then, it is
4 like we have these methods that we have
5 developed. Sometimes they have kind of sprung
6 up in different disparate Work Groups, but
7 they are all looking at the same kind of
8 issues. It is more like, now that we have it,
9 what types of approaches are we going to take
10 and agree upon to incorporate that into the DR
11 framework?

12 Another one would be these DWEs,
13 the daily weighted exposures, and how those
14 are addressed, the uncertainty factors and how
15 that is applied in dose reconstruction at
16 Fernald and Weldon Spring and some other sites
17 as well.

18 The approaches that have been
19 taken are quite different in some cases. And
20 so, there is some communication among the
21 different Work Groups to determine how best to
22 arrive at a final conclusion on that.

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1 CHAIR MUNN: Whether the ones that
2 have been used in the past are, in fact, okay,
3 which I think in many cases they probably are.

4 MR. STIVER: For example, at
5 Fernald and the DWEs, we came up with a
6 methodology. It is kind of an overarching
7 method. It wasn't, probably because we just
8 didn't have the mechanism in place to kick
9 that up to this overarching category and then
10 disseminate that among the different Work
11 Groups, Weldon is kind of operating in their
12 little universe. It has kind of suffered from
13 what we were doing. They came up with a
14 slightly different approach.

15 And so, it was kind of a matter of
16 how do you kind of integrate all this
17 together. I think this idea of having this
18 virtual Work Group where you can kind of put
19 all these different things in and then sort
20 them out, and then disseminate them to the
21 different Work Groups that have that common
22 interest, I think it is great. It is just a

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1 matter of how do you go about building the
2 tool to do that.

3 CHAIR MUNN: It sounds cumbersome
4 to me.

5 MEMBER ZIEMER: Well, part of this
6 grew out of what you guys did originally when
7 you said, you know, we have certain findings;
8 we want to see how consistent we are and how
9 we address the findings, "we", SC&A.

10 MR. STIVER: Oh, yes, as it is
11 internalized, yes.

12 MEMBER ZIEMER: Because you would
13 have different people working these things. I
14 think NIOSH has done some of this where they
15 have asked themselves, are we consistent in
16 how we are responding to a finding at this
17 site that is basically the same finding as
18 another site?

19 MR. MARSCHKE: That is what NIOSH
20 had us do. A couple of years ago, we went
21 back and looked at a whole series of
22 procedures. Most of them were these coworker

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1 dose procedures.

2 MEMBER ZIEMER: Right, to see
3 how --

4 MR. MARSCHKE: To see how
5 consistent they were.

6 CHAIR MUNN: Yes.

7 MR. MARSCHKE: So, there is a
8 document out there somewhere that has
9 enshrined that analysis. I don't know whether
10 or not --

11 MEMBER ZIEMER: Some of these grew
12 out of that, I think. I suppose the question
13 is, are there some others now that there are
14 some additional issues that either you have
15 seen in your reviews or NIOSH has seen in
16 their procedures?

17 MR. KATZ: I think this all boils
18 down, though, when you talk about
19 dissemination, I mean really dissemination
20 between the Work Groups, or whatever, I don't
21 think that is the way that things should be
22 driven. Really, at the end of the day, what

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1 have these issues identified, whether it is in
2 one Work Group or it has come up in two Work
3 Groups, or what have you. And it is seen that
4 it has broad applicability. At the end of the
5 day, I think it all gets boiled down with DCAS
6 producing a procedure related to that first,
7 right?

8 MEMBER ZIEMER: Once it is
9 identified.

10 MR. STIVER: Sure. Once it is
11 identified, then it comes back --

12 MR. KATZ: And then, it comes
13 here. If there needs to be involvement of
14 other groups, it can, but this is sort of the
15 central repository for dealing with generic
16 procedures that cut across sites, and so on.
17 So, it seems to me it is all of these. At the
18 end of the day, if there is agreement that
19 there is an issue there that needs to be
20 worked out, the working out needs to be,
21 ultimately, a DCAS procedure for handling that
22 consistently.

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1 MR. STIVER: I guess we just all
2 need to be cognizant of how these things come
3 up and elevate them.

4 MR. KATZ: And I am just trying to
5 distinguish between that and this sort of idea
6 of a virtual Work Group. There is not really
7 a virtual Work Group you need. You just
8 need --

9 MR. STIVER: Maybe that is the
10 wrong word.

11 MR. KATZ: Yes.

12 MR. STIVER: It is sort of --

13 MR. KATZ: No, no, you didn't coin
14 it. I am just saying it is really that
15 concept of the Board sort of minding it.
16 Really, the Board doesn't need to mind it
17 until DCAS creates a sort of original
18 approach.

19 MR. HINNEFELD: To my way of
20 thinking, I think I am in the virtual Work
21 Group.

22 (Laughter.)

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1 So, I am guilty of that.

2 But, to my way of thinking,
3 though, it is a way to essentially keep them
4 concisely in a record, in a place where we
5 have got them all down, as opposed to a list
6 on Jim's computer.

7 And then, also, to me, they seem
8 to come up in DR reviews fairly often.

9 CHAIR MUNN: Yes, they do.

10 MR. HINNEFELD: You know, that is
11 where they pop up.

12 CHAIR MUNN: Yes.

13 MR. HINNEFELD: And so, catching
14 them there and getting them someplace, and
15 probably they would come, I would guess
16 logically, to this group, but after DCAS
17 opines on how we are going to deal with that.

18 MR. KATZ: Yes.

19 MR. HINNEFELD: And so, it takes
20 the discussion out of a specific DR discussion
21 in acting --

22 MR. KATZ: Right.

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1 MR. HINNEFELD: -- and gets it
2 into this broader discussion. And then, once
3 you have a resolution, then you have a broad
4 resolution and, ultimately, a finalized
5 procedure that is then utilized when that
6 situation comes up.

7 MR. KATZ: Yes, I agree. So, I
8 think it is sort of a DCAS to-do list. And
9 then, I mean, where DCAS wants to air things
10 while you are developing the solution, where
11 you want to air them here, this is probably
12 the natural default repository for airing
13 them. But, of course, some of these you might
14 work out because a Work Group is heavily
15 engaged in that, and you may work it out with
16 that Work Group as opposed to this one, this
17 Subcommittee.

18 MR. HINNEFELD: Right.

19 MR. MARSCHKE: I believe it wasn't
20 a virtual Work Group; it was a virtual
21 document in the database where we were going
22 to put all these different issues into a

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1 virtual document.

2 CHAIR MUNN: We discussed that.

3 MR. MARSCHKE: We discussed that.

4 CHAIR MUNN: Yes.

5 MR. MARSCHKE: And I don't think
6 we wanted to do that.

7 CHAIR MUNN: No.

8 MR. MARSCHKE: I don't know.

9 CHAIR MUNN: As I said, it seemed
10 cumbersome at the time.

11 MR. MARSCHKE: It seemed
12 cumbersome, but it may be the best way to do
13 it.

14 CHAIR MUNN: It may be --

15 MR. HINNEFELD: Well, my thought
16 was this: now this is a little offbase,
17 although I think we may have identified -- I
18 don't know if you identified anything or not
19 from this Subcommittee. But in dose
20 reconstruction, if you have a finding that is
21 overarching, you say, well, we are going to
22 transfer that to the overarching issues. And

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1 then, it would show up as a finding in this
2 system under the virtual Overarching Issues
3 Work Group. Then, you have a place to track
4 the conversation of the issue the way we track
5 the conversation of these issues. That was my
6 thought.

7 You see, what strikes me about
8 this is, in terms of re-creation of the record
9 of the discussion, we are in a little bit of a
10 dicey situation in most of the Work Groups
11 because it is kept on notes and matrices that
12 are published. And trying to make sure
13 everybody is working from the same one and
14 that changes are made to the correct, most
15 recent master is really hard to do.

16 MR. KATZ: Yes.

17 MR. HINNEFELD: This takes care of
18 that. Now that is why we try to make our
19 records electronic at our place, so that your
20 record is maintained by your system, and this
21 is the record.

22 And so, instead of having these

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1 matrices being sent around and shipped around
2 and confused, this provides the mechanism for
3 doing that and establishes a record. That was
4 the advantage of the virtual Work Group, was
5 to do that.

6 MR. KATZ: Yes. So, in effect, it
7 is not necessarily an SC&A finding, but it is
8 finding, whether it is from a Work Group or a
9 Subcommittee, the Dose Reconstruction
10 Subcommittee, or whatever. It is a finding
11 that, then, needs to get resolved.

12 So, we need to load those up?

13 MR. HINNEFELD: I would propose we
14 do that.

15 MR. KATZ: Yes.

16 MR. HINNEFELD: I think that is on
17 our priority list somewhere, but I am sure it
18 wasn't a top priority on top.

19 MR. STIVER: So, I guess the
20 starting point would be to take Jim's list and
21 then populate this virtual grouping with that.

22 Then, as new ones arise --

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1 MEMBER ZIEMER: Well, some of
2 them, there are already procedures.

3 MR. STIVER: Yes. Yes, they would
4 already be in there.

5 CHAIR MUNN: Yes.

6 MEMBER ZIEMER: So, they are in
7 there.

8 MR. STIVER: As new ones come
9 up --

10 MEMBER ZIEMER: Yes.

11 MR. STIVER: -- then at least that
12 would provide us with a central repository.

13 DR. ULSH: So, I am looking at the
14 first page in the Board review system. There
15 is a filter, a Work Group filter. If you
16 click on that -- it is a dropdown -- there is
17 all the different site-specific Working
18 Groups. I think what we are talking about,
19 then, is Work Group on Overarching Issues, or
20 something like that, that would appear in this
21 dropdown list, that we could transfer findings
22 to when we deemed it was appropriate, right?

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1 MR. HINNEFELD: That is what I en
2 visioned.

3 MR. KATZ: Yes. And my only
4 question is I don't know why this Procedures
5 Subcommittee wouldn't be the Work -- why
6 wouldn't it be the default, instead of having
7 a virtual Work Group?

8 MEMBER ZIEMER: It is a place to
9 put the things in the document --

10 MR. KATZ: Yes.

11 MEMBER ZIEMER: -- but we could be
12 the owners.

13 DR. ULSH: Because there is a time
14 period before -- the issue is identified, and
15 then, at some later point in time, NIOSH picks
16 it up and issues a procedure. But, in the
17 interim, we need to make sure that we have a
18 place to put them, so they don't fall off the
19 radar.

20 MR. KATZ: I know, but why not put
21 them under Procedures, is what I am saying.
22 Because these are findings, we have findings,

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1 and we have this Subcommittee. Why not put
2 them here?

3 MR. HINNEFELD: Well, all the
4 findings currently are tagged to specific
5 documents.

6 MR. KATZ: I know, this is
7 different.

8 MR. HINNEFELD: Well, I mean, the
9 structure of the application is such that you
10 have a document and you have these findings
11 under that document.

12 CHAIR MUNN: So, we need a title
13 for the pulldown that will indicate for us
14 that this is a corral that we are holding
15 things in to assure all involved that they
16 will be addressed in the appropriate manner,
17 things we don't want to lose, regardless of
18 where they came from. And we may need to give
19 a little thought to exactly what our
20 terminology needs to be because we don't want
21 to be misleading on this.

22 But if we are going to gather

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1 things, we have need of a place to gather
2 them. And certainly, our database that we
3 have worked so assiduously on seems to be the
4 logical place. I still believe it could be
5 cumbersome, but it seems to be the most
6 logical place to do it.

7 And Ted's position that Procedures
8 is the de facto spot to look at them is well-
9 taken.

10 MEMBER ZIEMER: So, let me ask a
11 question of Stu. Could NIOSH think, or DCAS,
12 could you conceivably have almost virtual
13 documents that don't actually exist, except
14 maybe in title?

15 For example, let's suppose that an
16 overarching issue was how do you evaluate hot
17 particles on Asians.

18 (Laughter.)

19 I don't know. Or, you know, it is
20 some issue where we say that it could apply to
21 many sites. Could you have a collection of
22 documents that don't actually exist, but are

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1 identified by title --

2 MR. STIVER: It is basically
3 topics.

4 MEMBER ZIEMER: They are topical,
5 you know, "proposed procedure on...." that we
6 could dump a finding in, if it related to that
7 topic under this virtual thing that you are
8 talking about.

9 MR. HINNEFELD: Yes.

10 MEMBER ZIEMER: In other words, a
11 document hasn't been developed, but we know it
12 has to be, and we already have some findings
13 to go in it, originally start to populate the
14 document that doesn't exist with some
15 findings --

16 MR. HINNEFELD: Yes.

17 MEMBER ZIEMER: -- that the
18 document is going to have to address?

19 MR. HINNEFELD: That seems
20 eminently doable to me.

21 MEMBER ZIEMER: I mean, you might
22 need to think about what that would look like.

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1 Defining on something that doesn't exist is
2 kind of weird, but --

3 MR. HINNEFELD: We may have a
4 position where we -- I was just trying to
5 think about how this could work. Because the
6 structure right now, you know, it is hinged on
7 there is a document, there is a technical
8 document, and then there is a list of
9 findings. That is the way the structure is
10 now.

11 So, in order to now start
12 collecting overarching issues, which maybe we
13 don't know what kind of a document they go
14 with, we have to do one of two things. You
15 invent a document for that specific issue --

16 MEMBER ZIEMER: Right.

17 MR. HINNEFELD: -- and say such-
18 and-such, and then it has one finding under
19 it.

20 MEMBER ZIEMER: But, I mean,
21 suppose there was no document on --

22 MR. HINNEFELD: Yes.

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1 MEMBER ZIEMER: -- resuspension
2 factors.

3 MR. HINNEFELD: Right.

4 MEMBER ZIEMER: What would you do
5 with these findings?

6 MR. HINNEFELD: And then, the
7 other way would be you could say there might
8 be occasion in terms of this angular
9 sensitivity where there might be more than one
10 thing that goes in there.

11 So, I think that, as a going in,
12 what we should plan to do is to say that the
13 referral, once we decide there is an
14 overarching issue, we will generate, as you
15 say, sort of a make-believe document, just a
16 title. We could probably invent some
17 numbering system.

18 MR. KATZ: You can code it "FD",
19 future document.

20 (Laughter.)

21 MR. HINNEFELD: And why not?

22 CHAIR MUNN: How about just "PD",

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1 potential document.

2 MR. KATZ: Potential, right,
3 whatever.

4 MR. HINNEFELD: Yes, exactly. And
5 you put it in there, and then you would write
6 the one finding.

7 MR. KATZ: Right.

8 MR. HINNEFELD: You maybe have to
9 do it every time. Every time you have an
10 overarching issue, write "Potential Document"
11 such-and-such, give it a title, write the one
12 finding. And so, you have got all these
13 documents in one finding.

14 I mean, to me, that is the way to
15 start.

16 MR. KATZ: Yes.

17 MR. HINNEFELD: You may decide
18 later on that there is some other way to do
19 it. Chances are you can modify it.

20 MR. KATZ: And actually, I mean,
21 in some of these topics, you actually have a
22 lot of discussion already which you could put

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1 in that system. You could put the links in
2 there --

3 MR. HINNEFELD: Yes.

4 MR. KATZ: -- for the discussion.

5 MR. HINNEFELD: Yes.

6 MR. KATZ: Because some of these
7 are well-discussed --

8 MR. HINNEFELD: Yes.

9 MR. KATZ: -- although they are
10 not solved.

11 MR. MARSCHKE: What you do have
12 the capability in the database right now is
13 you could do a filter on anything that has
14 been transferred or anything that is
15 "addressed in."

16 MR. KATZ: Right.

17 MR. HINNEFELD: All the
18 transferred ones you can pull up.

19 MR. MARSCHKE: You can pull up and
20 you kind of walk through these. I was looking
21 for one that basically transferred to an
22 overarching issues, but I can't seem to find

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1 an example of that.

2 MEMBER ZIEMER: TBD-6000, we have
3 the resuspension factor finding that got
4 transferred.

5 MR. MARSCHKE: Everything in
6 TBD-6000 was transferred out of this group
7 into your group.

8 MEMBER ZIEMER: No, but some of
9 the TBD findings got transferred to
10 overarching --

11 MR. MARSCHKE: Right.

12 MEMBER ZIEMER: -- if you want to
13 pull one up.

14 MR. MARSCHKE: But we haven't been
15 tracking them. They were just transferred to
16 your group. In this database tracking --

17 MEMBER ZIEMER: Well, where does
18 our group transfer them to?

19 MR. MARSCHKE: That's --

20 MR. HINNEFELD: Well, no other
21 group is keeping their work on the system.
22 So, your transfer would not be reflected.

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1 MEMBER ZIEMER: But, in principle,
2 where would it go?

3 MR. HINNEFELD: Well, in
4 principle, you would have --

5 MEMBER ZIEMER: In principle, that
6 one you would pull out and say that is going
7 to go this other group instead TBD-6000
8 because it is overarching.

9 MR. HINNEFELD: Yes.

10 MEMBER ZIEMER: The finding on --

11 MR. HINNEFELD: Yes, yes. Yes, I
12 understand.

13 MEMBER ZIEMER: That is all I am
14 saying.

15 MR. HINNEFELD: Yes.

16 MEMBER ZIEMER: Right now, it is
17 in the Work Group, but if you had this other
18 mechanism, you would pull it out. So, these
19 five are going to the Work Group and this one
20 is overarching; it is going over here.

21 MR. HINNEFELD: Yes.

22 CHAIR MUNN: Well, for the time

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1 being, can we just simply add to our list of
2 Work Groups one more thing that says,
3 "Procedures Subcommittee Potential Document
4 Topic?" Just have a heading for that and put
5 our "PD" --

6 MR. HINNEFELD: Can we keep the
7 term "overarching issue"? I mean, we have
8 called these overarching issues for so long.

9 MEMBER ZIEMER: Yes.

10 MR. HINNEFELD: Can we just keep
11 the term "overarching issue?"

12 MR. KATZ: You can code it
13 whatever is easiest.

14 CHAIR MUNN: Potential overarching
15 topic.

16 MR. HINNEFELD: And then, we will
17 have to design with our TST guys, you know,
18 sit down with them and give them the answers
19 on what kind of analogs to use for each of the
20 things that are proceeding from the database.

21 And then, we will just design a set of rules
22 for that. Then, I think we can do most of the

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1 design.

2 Steve, we might get you on the
3 phone, if you want.

4 MR. MARSCHKE: Okay.

5 MR. HINNEFELD: And we will see
6 what we can do with the TST guys. And then,
7 we will try to load Jim's overarching issues
8 and whatever other ones we identify. We will
9 include the TBD-6000 overarching issues.

10 CHAIR MUNN: All right. Would it
11 be helpful for us to consider having our
12 telephone call sometime between now and our
13 next meeting to brainstorm a little bit what
14 some of the beginning topics are going to be,
15 a very short phone call, an hour or so?

16 MR. HINNEFELD: About which of the
17 overarching issues you want to take up first?

18 CHAIR MUNN: Right. Well, no,
19 ideas about what needs to go on the list to
20 begin with. Or would you prefer to build the
21 first scaffold yourselves?

22 MR. HINNEFELD: I would propose

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1 that we should build the first part ourselves.

2 CHAIR MUNN: Very good.

3 MR. HINNEFELD: Because we have
4 got Jim's list.

5 CHAIR MUNN: Yes.

6 MR. HINNEFELD: We know Paul said
7 the TBD-6000 Work Group has transferred a
8 number of the ones that were transferred from
9 here to them.

10 MEMBER ZIEMER: But there are only
11 some that are on that list.

12 MR. HINNEFELD: Okay. Then, we
13 can comb through DR reports, you know,
14 reviews, as we can, and look for overarching
15 issue kind of solutions, comments on the
16 matrices.

17 CHAIR MUNN: We have already
18 discussed badge geometry here.

19 MR. HINNEFELD: We can try to move
20 those over there. So, yes, I mean, we can try
21 to build the list first.

22 MR. KATZ: Yes, and you can give

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1 John a ring to see that your list includes
2 what SC&A thinks have been identified as
3 overarching issues.

4 MR. STIVER: Coordinating this
5 with the Dose Reconstruction Subcommittee
6 would be very important, too, because part of
7 those are going, you know, discussions and
8 some may already be captured.

9 MR. KATZ: Yes. So, you can
10 check, but --

11 CHAIR MUNN: I am thinking of how
12 many matrices you are going to go through.
13 Good luck with that.

14 (Laughter.)

15 But very good. At least we will
16 have a kickoff next time. We don't anticipate
17 a lot of good meat to begin with.

18 DR. ULSH: Well, just to make sure
19 that I have got these things appropriately
20 prioritized, I have got in my notes right now,
21 anyway, that the highest priority is the
22 "Wanda summary list".

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1 CHAIR MUNN: Yes.

2 DR. ULSH: And also high priority
3 is fix the Total Active Findings column. I
4 don't think that will be difficult.

5 I mean, the summary list will be
6 significant.

7 CHAIR MUNN: Yes.

8 DR. ULSH: But the other one
9 shouldn't be. If we can get those done, then
10 next on the list would be the overarching
11 issues capacity or --

12 CHAIR MUNN: I believe so.

13 Comment, Steve?

14 MR. MARSCHKE: Just a point. I
15 noticed, happened to notice that, when we
16 updated OTIB-6, the Active Findings column
17 basically was updated. When we updated
18 OTIB-70, it was not updated.

19 So, I was kind of thinking that
20 you made a phone call and turned somebody on,
21 but it looked like the OTIB-6 updates, if you
22 look at OTIB-6 here now, if I can find it

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1 quickly, OTIB-6 is now showing me we have
2 total findings four, active findings none.
3 So, that is reflects what is going on.

4 But if we go back and look at --
5 you remember we closed out 70.

6 MR. KATZ: Right.

7 MR. MARSCHKE: If we go back and
8 look at 70, and you go back and here's
9 OTIB-70, it still has all the findings as
10 being active. So, I don't know what it is
11 doing.

12 MR. KATZ: But that is a good
13 example, actually, to provide to the computer
14 folks because that will help them figure out
15 what is going on.

16 MR. STIVER: It is some good
17 diagnostic information they can use.

18 MR. KATZ: Yes, right. Because
19 they have the date when we changed it, and now
20 they know exactly what should have happened.

21 MEMBER ZIEMER: Has it been
22 refreshed? Did one get refreshed and the

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1 other didn't?

2 MR. MARSCHKE: Well, we changed 6
3 after we changed OTIB-70.

4 MR. KATZ: Yes. Hypothesis 1.
5 (Laughter.)

6 CHAIR MUNN: Oh, well.

7 MR. MARSCHKE: I mean, I was
8 thinking we did 6 after lunch and 70 before
9 lunch. And I was thinking maybe, if Brant had
10 contacted them, maybe they got right on the
11 ball and did something.

12 DR. ULSH: Sadly, no.
13 (Laughter.)

14 That's not what happened.

15 CHAIR MUNN: But it is baffling
16 because one wonders whether there was some
17 mechanism of which we were unaware that was
18 different in the way those --

19 MR. MARSCHKE: They were updated.

20 CHAIR MUNN: -- changes were made.

21 MR. KATZ: That is for the
22 computer folks to puzzle through. There is no

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1 point in us trying to ponder the thing.

2 MEMBER ZIEMER: Because, remember,
3 my thing pulled up some old information. Who
4 knows where that came from.

5 CHAIR MUNN: Well, we will let
6 them work on that, and everybody knows what
7 they are going to do with that, which is a lot
8 of work, but, hopefully, it will turn out to
9 be not as difficult as expected.

10 We are going to move on to status
11 of the two-pagers. We are moving very slowly,
12 but we are moving.

13 I am assuming that all of you
14 received the markups that Dr. Ziemer provided
15 for us last week. Well, he provided them to
16 me before that. But I have not added my
17 markups to those.

18 But you have a good starting
19 point. Do you have any concerns about any of
20 those that he has identified?

21 I actually rewrote the four PROCs
22 that you saw, mostly rewrote them, not

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1 entirely. But I had intended those to be
2 pretty much as final as possible because I
3 hadn't had any feedback from anybody about any
4 of them.

5 I don't know whether, Paul, have
6 you had an opportunity to read the ones that I
7 redid or not?

8 MEMBER ZIEMER: I read the first
9 one, but I realized I needed to put it side-
10 by-side with the others, and I hadn't done
11 that. So, basically, the answer is, no, I
12 didn't really go through them.

13 CHAIR MUNN: Has anyone had an
14 opportunity to go through any of them?

15 MEMBER ZIEMER: Are these
16 different ones?

17 CHAIR MUNN: Those four are the
18 first four on the full list that was sent out
19 by Ted. He sent the whole list of --

20 MEMBER ZIEMER: OTIB-0006. Yes,
21 what I was saying, that I didn't put yours
22 side-by-side with mine to see whether we were

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1 thinking in the same terms or not.

2 CHAIR MUNN: Well, I didn't see
3 that you had those four PROCs on your list.

4 MEMBER ZIEMER: Yes, they're
5 there.

6 MR. MARSCHKE: No, it is PROCs,
7 not OTIBs, Paul.

8 MEMBER ZIEMER: Oh, well, I took
9 Ted's and I thought I did every one. I did
10 30-some different ones.

11 CHAIR MUNN: I think I only got
12 about 20.

13 MEMBER ZIEMER: Here's PROC-0006
14 that I did.

15 CHAIR MUNN: Oh, you did?

16 MEMBER ZIEMER: That is 0060 or 6?

17 CHAIR MUNN: No, it is 0006. And
18 then, there's 0060. There's No. 6 and there's
19 No. 60. There's 31.

20 MEMBER ZIEMER: Well, I thought I
21 did every one that Ted had sent. Yes, here's
22 0006. So, that's OTIB. Yours is PROC. Well,

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1 I don't know. How did I miss that? I don't
2 know.

3 CHAIR MUNN: I don't know, but
4 maybe we need to have some phone calls or some
5 email exchanges about this.

6 Does anyone have anything to say
7 about anything that they see with respect to
8 these two pagers so far?

9 Dick, have you had an opportunity
10 to look at any of these? Dick, are you still
11 with us?

12 (No response.)

13 He said he might not be able to
14 stay the whole time.

15 Here's what I propose, since I
16 don't think anyone has had an opportunity to
17 really do anything with these: I am going to
18 continue doing what I have done so far.

19 But the first thing I am going to
20 do is spend some time with what Paul has
21 already done and make any discussions with him
22 about my concerns and what changes I feel

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1 might be made to shorten -- my primary concern
2 is shortening them for the most part.

3 But these were pretty brief to
4 begin with. My primary concern with what is
5 there is the continued use of acronyms and
6 several other things I would like to take out.

7 But we can avoid that; that is easy enough.
8 But it is what I have tried to do with the
9 four that I have done.

10 And that will give you an
11 opportunity to read the four that I did to see
12 if you have any grief with it, Paul.

13 And we will try to seek especially
14 Dr. Lemen, who has been active with us when we
15 went through this. We will make sure that he
16 is in the loop with what we are doing here.

17 Hopefully, we will be able to
18 bring a proposal to you at our next meeting
19 that incorporates all of the two-pagers that
20 have already been drafted, which will
21 eliminate the things that we have agreed we
22 are going to eliminate and try to smooth them

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1 out a little.

2 MEMBER LEMEN: Hello, this is
3 Dick. Can you hear me?

4 CHAIR MUNN: Oh, yes, Dick. Now
5 we can hear you.

6 MEMBER LEMEN: I had to hang up
7 and call back because I couldn't get the
8 stupid thing off of mute.

9 CHAIR MUNN: Oh, I'm sorry about
10 that.

11 MEMBER LEMEN: So, anyhow, my
12 comments, if you still want them, are that I
13 would like to have a little bit more time on
14 those two-pagers. I have started on them, but
15 I haven't finished all of them.

16 But I think we have made some good
17 progress, and I really appreciated Paul's
18 comments. I thought that his comments on them
19 helped me a lot.

20 CHAIR MUNN: Yes, they are
21 helpful. There's no question about it. As I
22 said, the only additions that I am likely to

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1 make, from what I have seen of Paul's work so
2 far, is just to eliminate some of the acronyms
3 and one or two of the other simplifying things
4 that we have agreed on.

5 I appreciate that, Dick. Did you
6 hear me say that it is our hope that we can
7 incorporate you into the loop that Paul and I
8 have been working on here to move these
9 forward a little? Are you going to be able to
10 do that?

11 MEMBER LEMEN: So, yes, I will.

12 MR. KATZ: Dick, just trying to be
13 concrete, how much time do you need to get
14 through them yourself, do you think?

15 MEMBER LEMEN: Well, I would like
16 a couple more weeks at least.

17 CHAIR MUNN: That is generally my
18 thought. I am going to try to get my thoughts
19 on Paul's work out within that period of time,
20 and I will get them to both you and Paul. If
21 you have any additional or feel that we are
22 being too sparse or too broad in cases, just

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1 please feel free to let me know.

2 MR. KATZ: So, let me just say I
3 think, if the three of you want to conclude
4 that work, you don't have to wait until next
5 Subcommittee meeting to get these done and
6 posted. You can just, once you have concluded
7 and the three of you are happy with the
8 product --

9 MEMBER ZIEMER: I was going to
10 suggest that if Dick Lemen and I give our
11 comments to Wanda, I am happy if she just
12 makes the final editorial decision, and then
13 that is the copy we will post.

14 And just for comment, a lot of
15 mine are trying to eliminate acronyms --

16 CHAIR MUNN: Yes.

17 MEMBER ZIEMER: -- and then, also,
18 to use different terms. I am just looking at
19 one right now, for example, where we say
20 "computer methodology," just call it "computer
21 calculations."

22 CHAIR MUNN: Or even "computer

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1 methods."

2 MEMBER ZIEMER: Or "computer
3 methods."

4 CHAIR MUNN: Yes.

5 MEMBER ZIEMER: And where it says
6 "the prostate gland could be modeled by the
7 testes," I don't know if people know what
8 "modeled" means.

9 CHAIR MUNN: No, no.

10 MEMBER ZIEMER: You know, are you
11 modeling?

12 CHAIR MUNN: Yes. No, we have
13 discussed --

14 MEMBER ZIEMER: Wanda, I see I
15 spelled "represented by" here wrong,
16 "represented-ed-ed."

17 CHAIR MUNN: Yes. Those are the
18 kinds of things.

19 MEMBER ZIEMER: But get some
20 simpler words, a few cases where I eliminated
21 dangling participles in some of these --

22 CHAIR MUNN: Yes, yes.

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1 MEMBER ZIEMER: -- which tend to
2 be used over and over by scientific writers.

3 CHAIR MUNN: Yes, they do, and
4 they also have a tendency to use the same
5 terminology sentence after sentence after
6 sentence.

7 As just a passing point of
8 interest, and as a point of record of how
9 difficult some of these things are, one of the
10 summaries of the PROCs that I sent you had to
11 do with, its title even included the word
12 "ambient."

13 MEMBER ZIEMER: Right.

14 CHAIR MUNN: Well, "ambient" is a
15 word that means something to every single
16 person here. But my thought was there are a
17 great many people for whom the word "ambient"
18 may not be clear.

19 I am concerned about the fact that
20 in the draft that had been sent they used,
21 said in parentheses, "environmental." And I
22 thought, well, "ambient" is not actually

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1 environmental. It is something different than
2 that.

3 So, I whipped up through my
4 electronic thesaurus. And would you believe
5 that there is no synonym given for "ambient?"

6 MEMBER ZIEMER: Well, I think that
7 is one that I had spent some time on, too.
8 The ones particularly where it is in the
9 title, you can't change that.

10 CHAIR MUNN: Yes. No, you can't.

11 MEMBER ZIEMER: But you can
12 explain it.

13 CHAIR MUNN: Yes.

14 MEMBER ZIEMER: And there were a
15 couple of them that the explanations that were
16 in there were very complex.

17 CHAIR MUNN: Yes.

18 MEMBER ZIEMER: Partially,
19 sentences just had to be broken into little
20 pieces.

21 CHAIR MUNN: Very good. There
22 isn't any other way you can get around that.

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1 MEMBER ZIEMER: And so, it can be
2 done. I am satisfied to have you make the
3 final decision this.

4 CHAIR MUNN: Well, I came to the
5 conclusion in that particular case that
6 probably "environmental" conveys as much of
7 the context that was intended in that case as
8 any other word could be. So, I left it as
9 well.

10 MEMBER LEMEN: I would concur with
11 Paul. I will make my comments and just send
12 them to Paul and Wanda. And I agree to let
13 Wanda make the final decision on it.

14 MR. KATZ: Okay. And so, Wanda,
15 if you will, just at the end of that process,
16 if you will send me the finals, I will get
17 them to DCAS to get posted.

18 CHAIR MUNN: Very good. All
19 right. That is what we will do.

20 The only other item that I have
21 left on the agenda -- oh, no, there are two.
22 We had asked for some time to make a couple of

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1 comments about PER use.

2 MR. STIVER: Actually, there are a
3 couple of different things we might look at.
4 Given the fact that we are probably about 85
5 percent complete on addressing the findings of
6 the original 500, it kind of brings up the
7 issue, well, where do we go from here?

8 And I contacted Brant in search
9 for an updated listing of the current active
10 documents as well as prospective documents.
11 The last version we had was from January of
12 2009.

13 Steve went through and just looked
14 at the TIBs and looked at the revisions and
15 whether they appeared to be substantive
16 changes that might warrant potential follow-on
17 reviews, and I believe came up with about 11
18 of them that were possible candidates.

19 And so, that is something we want
20 to look into. We are charged with monitoring
21 these to determine when a substantive change
22 comes along that may warrant this type of

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1 review, that we bring it to the attention of
2 the group.

3 Another thing is that, because we
4 don't have the glitch fixed in the Board
5 review system, we are identifying completely
6 closed-out findings to put together a list of
7 OTIBs that may require two-pagers. At this
8 point, we have to go through it basically by
9 hand and sort through those. We can certainly
10 do that, but I think that is another thing
11 that is kind of on the back burner.

12 I mean, I see this, going forward,
13 we are going to be looking more at PER
14 development and tracking and all the issues
15 that go along with that, as well as wrapping
16 them up with these two-pagers. So, that is
17 kind of where we stand on the OTIBs.

18 As far as the PERs, Kathy
19 Behling --

20 MR. KATZ: So, before we go
21 forward with that, though, the procedures that
22 you have identified that are possible

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1 candidates, are you going to send a document
2 to the Subcommittee, so that they can see?

3 MR. STIVER: Yes, at this point,
4 it is kind of we are waiting for Brant to give
5 us an updated version of that. Some of these
6 documents on here that we had reviewed are no
7 longer there or are not on this list. So,
8 they have been retired.

9 MR. KATZ: Okay.

10 MR. STIVER: So, we would like to
11 get the complete list before we put together
12 any kind of definitive subgrouping on that.

13 MR. KATZ: Okay.

14 MR. STIVER: But that is the
15 ultimate goal.

16 CHAIR MUNN: That would be
17 helpful.

18 MR. MARSCHKE: This is what this
19 document looks like that we put together. You
20 can see some of them are missing a web number.
21 What we did, as John said, we pulled this
22 information off of a NIOSH-approved document

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1 list which was dated January 2009. So, it is
2 dated.

3 OTIB-3 was not on the list. You
4 will see some that don't have any numbers in
5 here, and it is not on the list. And the
6 reason there are no numbers is because that
7 particular OTIB was not in the document from
8 2009.

9 And then, over here you can see
10 basically SC&A -- first, we have a column
11 whether or not we reviewed the document, when
12 we reviewed it, and what revision we would
13 use. Then, the final column we have got is,
14 is it a candidate for re-review or initial
15 review, if we hadn't already reviewed it?

16 And for re-review, what I did,
17 basically, was if there was a full revision
18 number between what we reviewed and what is
19 currently, then I said, yes, that is a
20 candidate. If there was basically Rev. 0 here
21 and we reviewed Rev. 0, then it is no
22 candidate for review.

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1 Some places there was a page
2 change.

3 MR. KATZ: Okay, but just to go
4 back to your first sort of criterion, a full
5 rev. change, but in some cases you will find
6 that, yes, there is a full rev. change, but it
7 is all followup responses that have been
8 derived from this work, and you don't need to
9 review it because it is all followup from --

10 MR. MARSCHKE: That is why this is
11 just an initial cut.

12 MR. KATZ: Yes.

13 MR. MARSCHKE: This is just a
14 first cut.

15 MEMBER ZIEMER: Some of them, we
16 are awaiting confirmation that the change is
17 in the document, right?

18 MR. KATZ: Right.

19 CHAIR MUNN: Correct.

20 MEMBER ZIEMER: And that would
21 verify that.

22 MR. KATZ: Yes.

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1 MR. MARSCHKE: We would already do
2 that. If it was just the changes that we had
3 already requested, that should already be done
4 as part of the closeout of those findings.
5 So, that is what we did.

6 And the other thing was document
7 OTIB-9, which basically was revised, we had
8 not reviewed it. I did not make it as a
9 candidate because it is a site-specific OTIB.

10 And so, I felt that that was more appropriate
11 for -- anything that was site-specific would
12 be more appropriate for a Work Group than it
13 would be for this group.

14 MR. KATZ: Right.

15 MR. MARSCHKE: So, we can forward
16 you this.

17 MR. KATZ: Well, it is not ready
18 yet. So, you don't need to --

19 MR. MARSCHKE: But this is kind of
20 like the approach that we are taking.

21 MR. STIVER: This is just to make
22 you aware of what we are planning here. I

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1 assume that within about a week or two we will
2 have that. Brant indicated, when he gets back
3 from Savannah River, he can go ahead and put
4 together an updated document.

5 MR. KATZ: That sounds good.

6 MR. STIVER: Yes.

7 CHAIR MUNN: Good. All right.
8 That will be very helpful information to have.

9 MR. HINNEFELD: You are talking
10 about the list of documents that are out
11 there, right?

12 MR. MARSCHKE: Yes.

13 MR. HINNEFELD: Did Brant say
14 anything about the utility of the existing
15 applications? Because we were trying to set
16 it up, so when a new document got published,
17 it would appear in the application under the
18 to-be-assigned queue. What's that called?

19 MR. MARSCHKE: Unassigned.

20 MR. HINNEFELD: Unassigned queue.

21 MR. MARSCHKE: Unassigned queue.

22 MR. HINNEFELD: Yes.

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1 CHAIR MUNN: I don't hear anything
2 about that.

3 MR. HINNEFELD: Well, no. No.
4 This is Brant and me talking to each other,
5 okay?

6 CHAIR MUNN: Okay.

7 MR. HINNEFELD: I don't think you
8 would have heard that.

9 CHAIR MUNN: I wouldn't have.

10 MR. HINNEFELD: And I am not sure
11 -- now if you look there now, you will see a
12 long list of procedures or documents, and the
13 reason they are in this is because the last
14 time we met all the documents, the application
15 grab that that -- the application knew about
16 were under these documents that are Board
17 reviewed.

18 We have split them up. I did this
19 partially for the numbers I presented at the
20 last Board meeting. We split them up into
21 unassigned and under Board review, but the
22 only way we could do that easily and without

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1 actually looking at each one was to put any
2 document that had zero findings in the
3 unassigned queue.

4 So, if there were any documents
5 that SC&A reviewed but had zero findings on
6 them -- it seems like there were one or two
7 -- they would be in this list incorrect
8 because the Board has actually reviewed those.

9 CHAIR MUNN: Yes.

10 MR. HINNEFELD: And then, all the
11 documents with findings are in the documents
12 under Board review list, when you pull that
13 list up.

14 My intention was that when a new
15 document gets published, when a document is
16 final and published, we have a specific place
17 on our K: drive where that gets put. I want
18 that document, then, to load into the
19 unassigned queue in this application.

20 So, at anytime SC&A users can be
21 able to look at the entire population of
22 procedures that have not been reviewed and

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1 decide, or the Board, the Work Group, are
2 there things here that warrant review?

3 So, today, if you look at that, if
4 there is anything in there that you think that
5 warrants review, that might be a place to
6 start in terms of looking for additional
7 things for review.

8 I don't know that it is 100
9 percent up-to-date. I believe it is up-to-
10 date within a couple of months, but I don't
11 know that it is 100 percent up-to-date. So, I
12 will check with Brant and Tom and see if that
13 is.

14 Because that would be my view, is
15 whenever we publish something, it pops up in
16 here in the assigned queue, or in the
17 unassigned queue, and it doesn't mean it has
18 to be assigned. It just means it is
19 available.

20 MR. KATZ: Right, but that is
21 good.

22 So, you got that, Steve?

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1 MR. MARSCHKE: I got that, yes.
2 When we made this list, I wasn't aware that
3 this "unassigned to" had been populated. I
4 think back in September it wasn't populated.

5 MR. HINNEFELD: It wasn't then.
6 We populated this before the December Board
7 meeting.

8 MR. MARSCHKE: So, now that it is
9 populated, we may be able to get rid of that
10 matrix that I was doing or maybe I can just --

11 MR. STIVER: You can certainly can
12 compare whatever Brant puts together.

13 MR. MARSCHKE: Yes.

14 MR. STIVER: If there is anything
15 new that has come out in a few-month interim,
16 or there may be a few others in here that
17 have zero findings as well, but it certainly
18 gets us a real leg up on getting started.

19 CHAIR MUNN: Yes, that should be
20 very helpful. Good.

21 Now I have been both dreading and
22 expecting today that we were going to have to

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1 face this, what else is out there. It is good
2 to know that it is working.

3 MR. STIVER: And that kind of
4 segues nicely into the PERs.

5 CHAIR MUNN: Into the PERs.

6 MR. STIVER: Because in looking
7 through this unassigned queue, I discovered
8 that all of the --

9 MEMBER LEMEN: This is Dick.
10 Before you get started --

11 MR. KATZ: Sure, go ahead, Dick.

12 MEMBER LEMEN: I have to cut off
13 now. I told Wanda I might have to cut off
14 early, and I do.

15 So, Wanda or Ted, could you send
16 me the date for the next meeting? And I will
17 make sure I can get it on my calendar.

18 CHAIR MUNN: We will make sure to
19 do that soon.

20 MR. KATZ: Yes.

21 MEMBER LEMEN: And if there is
22 anything that comes up that you need my vote

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1 on it before the end of this meeting, just
2 send me a note and I will try to make my mind
3 up on it.

4 MR. KATZ: Okay.

5 CHAIR MUNN: We have no votes
6 scheduled.

7 MEMBER LEMEN: Okay.

8 CHAIR MUNN: We will be in touch
9 with respect to the two-pagers.

10 MEMBER LEMEN: Okay. Happy new
11 year all, and I am sorry I can't stay the next
12 half-hour with you.

13 CHAIR MUNN: The same to you.

14 MR. KATZ: Thanks, Dick.

15 CHAIR MUNN: Bye-bye.

16 MEMBER LEMEN: Bye.

17 MR. KATZ: Bye-bye.

18 Sorry. Go ahead.

19 MR. STIVER: Yes, the other issue
20 of what is out there are these PERs. Remember
21 back before the St. Louis meeting Kathy
22 Behling had put together this nice, little

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1 summary that had a few different tables, table
2 one being the PERs that had already been
3 assigned, I believe of which there are 14.
4 Eleven of those have been started, and they
5 are in various stages of completion. Three
6 have not been started yet.

7 And there was also an additional
8 18 that she identified that had not yet been
9 assigned. She went through a couple of days
10 ago and updated that list and discovered there
11 were two more PERs which she added to this
12 list.

13 And looking last night, looking at
14 this unassigned order of these documents, I
15 found that essentially all of them are in that
16 unassigned queue. So, the system you put
17 together seems to be working.

18 However, there are two that --

19 MR. HINNEFELD: Aren't there
20 probably?

21 MR. STIVER: -- that we didn't
22 have findings.

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1 MR. HINNEFELD: Are they there?

2 MR. STIVER: They showed up in
3 there, too.

4 MR. HINNEFELD: Oh.

5 MR. STIVER: At least the
6 algorithm is working correctly.

7 CHAIR MUNN: That's wonderful.

8 MR. HINNEFELD: At least it was
9 up-to-date when those two were --

10 CHAIR MUNN: Yes.

11 MR. STIVER: So, Kathy, we
12 probably could have saved her a day's work by
13 having her look at this.

14 CHAIR MUNN: That is marvelous to
15 hear that they are so current.

16 MR. STIVER: Yes. And so, we have
17 gone through and kind of summarized where we
18 were on the 14. Eleven of them are in stages
19 of development. Seven of them are awaiting
20 action by NIOSH. And then, beyond that, they
21 will have to go to the Board for discussion.

22 But, of these other 20 that are

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1 remaining, Kathy, if you have seen them, and
2 take a look at the list there, this is the
3 table two. She has them grouped, first, by
4 the number of claimants. There is a kind of
5 binary assignment by classification, if you
6 will. One is the number of potentially
7 affected claimants, and the other is the
8 difficulty of the science that was involved in
9 developing the change. Of course, this is
10 reflected in the cost estimate for reviewing
11 these things.

12 So, before we go on further than
13 that, I want to go to this next -- there's
14 four different subtests that we look at in
15 doing these PER reviews. The last one is
16 really, again, that set of representative dose
17 reconstructions that have been done under the
18 revised procedure and really doing the
19 evaluation representation, were the agreed-
20 upon changes actually followed in any dose
21 reconstructions.

22 As I understand it, there's only

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1 the PER 12 cases assigned or 10 cases. They
2 hit various aspects of the selection process.

3 As of September, those cases have not yet
4 been posted. And I was wondering if that was
5 on the way to being posted?

6 MR. HINNEFELD: Meaning the
7 identity of the 10?

8 MR. STIVER: Just basically taking
9 the administrative case files and putting them
10 out there.

11 MR. KATZ: We talked about this at
12 the Dose Reconstruction Subcommittee meeting.

13 I mean, because I had assumed you had already
14 gotten started on that at that point, and you
15 folks made the comment that they had been
16 posted.

17 We talked at that meeting about --
18 I mean, if there is something you need to get
19 from Brant to go forward, you need to, but you
20 were going to do that based on --

21 MR. STIVER: Yes, I just wanted to
22 make a reminder that we have not yet -- they

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1 are still not out there.

2 MR. KATZ: Okay. So, you just
3 need to get on the line with Brant and get
4 that solved, whatever that is.

5 MR. STIVER: Yes.

6 MR. KATZ: It doesn't need to
7 await any action by any Subcommittee or Work
8 Group.

9 MR. STIVER: Okay.

10 MR. KATZ: I don't understand why
11 it has taken all this time to pick up the
12 cases and work them.

13 CHAIR MUNN: An easy connection,
14 yes. We don't need to be an obstacle here --

15 MR. STIVER: Absolutely not.

16 CHAIR MUNN: -- moving forward.

17 MR. STIVER: But the other issue I
18 have been thinking about is -- and we haven't
19 really thought about this too much; maybe
20 this is more of an issue to bring up in the
21 Dose Reconstruction Subcommittee, but how to
22 go about evaluating these cases. In my mind,

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1 it seems that you are really looking at kind
2 of a focused metric here. You are taking a
3 look at how was the case done before the
4 procedure was changed and looking at that.

5 So, you are really just looking
6 not at the broad spectrum of everything that
7 would go into a full dose reconstruction, but
8 really what is the outcome of this particular
9 change in procedure. So, I see them as more
10 focused reviews that could be expedited in
11 comparison with a full dose reconstruction.

12 Because of that, I think they
13 should be tracked separately, either within
14 the Board review system or within a matrix and
15 the Subcommittee. Keep them separate from
16 those other cases and really track them
17 differently.

18 I was a little concerned about the
19 database that we have here. But, after seeing
20 the improvements that have been made, I think
21 we can link PDFs and transfer findings, and I
22 think it is a very good tool.

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1 I am not sure if David Richardson,
2 becoming the new Chair of that Committee, is
3 even aware of what is needed at this point. I
4 know, as Mark has been kind of been pulled
5 more and more into his Chemical Review Board
6 work, he has been less and less involved. And
7 so, I think that is something that maybe SC&A
8 or this group could get together with David
9 and kind of brief him on where we stand on
10 this and what the issues are, and how we feel
11 that should be handled.

12 MR. KATZ: Let me explain
13 something because you may have missed it
14 because John has been in here for this whole
15 evolution, John Mauro.

16 DR. MAURO: I am here and I am
17 listening.

18 MR. KATZ: Okay.

19 DR. MAURO: Keep going, Ted.

20 MR. KATZ: John Stiver hasn't been
21 here for all of it.

22 So, the process is really the DR

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1 Subcommittee, all they do is select the cases.
2 That is their whole involvement in this.
3 They are not involved in the review of the
4 cases after. The cases come back, actually,
5 to this Subcommittee for consideration about
6 the implementation questions. So, really,
7 they have a very small, limited, and sort of
8 mechanical role of doing the selection of the
9 cases once this Subcommittee assigns a PER to
10 have its cases reviewed.

11 MR. STIVER: Okay. Although
12 during the DR Subcommittee meetings we go
13 through those findings.

14 MR. KATZ: But not for PERs. That
15 is what I am saying. The Dose Reconstruction
16 Subcommittee is not going to be evaluating the
17 cases that are PER reviews.

18 MR. STIVER: Okay. Well, see,
19 this is the thing I am not really 100 percent
20 sure on.

21 MR. KATZ: Yes.

22 MR. STIVER: And so, that is the

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1 kind of feedback I am interested in getting.

2 CHAIR MUNN: Yes.

3 MR. KATZ: Yes.

4 DR. MAURO: This is John.

5 Ted, yes, one of the things I
6 didn't do is get into this level of detail on
7 this particular matter with John.

8 MR. KATZ: Sure.

9 DR. MAURO: You're right. I
10 think, John, you came to the same place I did,
11 but we didn't really have a chance to talk
12 about it. I think these cases and each PER,
13 not only the PER, the one, two, three steps,
14 the first three steps that we completed be
15 tracked as part of the Procedures
16 Subcommittee, but also the findings related
17 to, once we do do a review of the cases
18 associated and track them here.

19 But the very important point that
20 you just brought out is all we do is track
21 that aspect of that DR that pertains to the
22 PER issue at play. And so, you're right, it

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1 would be a focused review.

2 Because, very often, a lot of
3 these redone cases under a PER may very well
4 reflect many different adjustments made to the
5 dose reconstruction. My understanding from
6 the last time we talked about it is this
7 Subcommittee would only track those issues
8 that are related to the PER itself.

9 MR. STIVER: Yes, that is exactly
10 how I see it unfolding as well.

11 DR. MAURO: Yes. Okay.

12 MR. KATZ: What I have been
13 assuming all along is at the end of that
14 process where you have reviewed the 10 cases,
15 for example, of PER-12, you will have reviewed
16 those 10 cases. At the end of that review
17 that you do, as opposed to the way you do DR
18 reviews where you report out each DR case and
19 you have a couple of Board Members with you
20 and that whole process, you will have reviewed
21 10 cases and you will produce one report that
22 will basically explain here's what you found

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1 about implementation. Yes, I mean, there will
2 be, of course, details that may be of
3 relevance in individual cases, but it will be
4 a report on the whole.

5 MR. STIVER: And that is exactly
6 how I envision the whole thing taking place.

7 MR. KATZ: Yes.

8 MR. MARSCHKE: Well, what we can
9 do is, for example, if you look at PER-12,
10 right now we have one finding in PER-12.
11 After you do your case review, we may have a
12 half dozen more findings. We can just go in
13 and add those findings to this PER and
14 basically use this database. The way it is
15 set up now, I think it should be relatively
16 easy to use this to do that.

17 MR. KATZ: Yes.

18 MR. MARSCHKE: So, in a sense,
19 this Subcommittee is the one that is going to
20 be looking at it. We are already familiar
21 with the database. So, it should flow
22 naturally.

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1 MR. STIVER: We need to keep in
2 mind here that there is a subtle difference.
3 I mean, if a finding was uncovered during the
4 review of the procedure, it doesn't
5 necessarily reflect how well that procedure
6 was implemented. They are really going to be
7 kind of separate.

8 MR. MARSCHKE: It is going to be a
9 finding. Now you will have, instead of having
10 one finding, you will have several findings,
11 but they will still be --

12 MR. STIVER: We need to make sure
13 that everybody understands that there is a
14 differential between those. Maybe there
15 should be --

16 MR. KATZ: Code them as
17 implementation findings or whatever, but --

18 MR. STIVER: They just need to be
19 tracked.

20 MEMBER ZIEMER: Well, for example,
21 take high-fired plutonium as an issue, and
22 there was a finding that drove that. Now when

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1 NIOSH goes back and does the PER process, Stu,
2 on a given dose reconstruction, do they simply
3 take the previous one and recalculate with the
4 new solubility value in the system? Or is the
5 dose fully reconstructed from start to finish?

6 Do you know what I am asking?

7 MR. HINNEFELD: Yes. The dose is
8 completely recalculated with current
9 techniques. For instance, if a case had been
10 done with TIB-2 -- that is not a good example.

11 MEMBER ZIEMER: Okay. Yes, some
12 other thing that changed. But these guys are
13 only going to see, did they plug in the high-
14 fired plutonium --

15 MR. HINNEFELD: That's right.

16 MEMBER ZIEMER: -- solubility,
17 right?

18 MR. STIVER: Already I can see a
19 problem here.

20 MEMBER ZIEMER: Well, that is why
21 I am asking the question.

22 MR. STIVER: Yes.

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1 MEMBER ZIEMER: Because they may
2 have a different workbook or something that
3 they are using --

4 MR. STIVER: Yes.

5 MEMBER ZIEMER: -- for the other
6 parts of it.

7 MR. STIVER: Yes.

8 MEMBER ZIEMER: But you have
9 already addressed that in a different way?

10 MR. STIVER: Yes. These cases
11 have already been through our review cycle in
12 a reasonable period of time.

13 MEMBER ZIEMER: Right. But when
14 they redo it, they may be doing it differently
15 than it was the first time around.

16 MR. STIVER: So, that may confound
17 our ability to do this in a very expedited --

18 MEMBER ZIEMER: I mean, what would
19 you look at -- say it was high-fired plutonium
20 -- because the changing critical item there is
21 that solubility factor?

22 MR. STIVER: Well, you could look

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1 at that particular component. Say it was done
2 under maybe IREP, or whatever --

3 MEMBER ZIEMER: Right.

4 MR. STIVER: -- that subcategory
5 of --

6 MEMBER ZIEMER: Here's what the
7 old IREP gave and --

8 MR. STIVER: Yes, we just look at
9 that and we look at the new method of how that
10 was done, just compare the two.

11 MEMBER ZIEMER: And the thing you
12 won't know is whether or not, whatever the
13 bottom line was, the change in the PoC was due
14 entirely to that factor --

15 MR. STIVER: Rarely would you have
16 that luxury of being able to just --

17 MEMBER ZIEMER: Because there are
18 some other things that might have changed that
19 you aren't going to be looking at.

20 MR. KATZ: But it doesn't matter
21 really because that is not the bulk of the
22 review.

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1 MEMBER ZIEMER: What are they
2 trying to report? What is it you are trying
3 to achieve here?

4 MR. STIVER: We are going to be
5 able to see, what are the methods and the
6 corrective actions that have been implemented
7 or recommended and put into the document?
8 Were they actually implemented in the tail-end
9 of the dose reconstruction process.

10 MR. KATZ: Right.

11 MR. STIVER: And that is really
12 what we are concerned with. So, if we can
13 identify how that aspect with high-fired
14 plutonium, the task was done, and just compare
15 it to the new way.

16 MR. KATZ: Right.

17 MR. STIVER: And then, we have got
18 the differential. We have got that increment.
19 Then, we can identify that.

20 MEMBER ZIEMER: But what are you
21 going to report on the 10 cases, for example,
22 that they were all done correctly on that

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1 item?

2 MR. STIVER: If we find findings
3 that they weren't done correctly, then we
4 would certainly list those.

5 MEMBER ZIEMER: Right.

6 MR. STIVER: But it would be, yes,
7 in this particular case I think there were
8 five different exposure pathways or aspects of
9 the scenario that could have given rise to a
10 high-fired plutonium intake. So, we look at
11 each of those and how well they were actually
12 implemented in the process.

13 CHAIR MUNN: You reviewed the work
14 and it was done --

15 MR. STIVER: We are not going to
16 go into every aspect of whether a dosimeter is
17 .015 or .013 rem for whatever reason.

18 MEMBER ZIEMER: No.

19 MR. STIVER: That is not really --
20 we are not going to look at the total universe
21 of potential findings, only those that are
22 pertinent to the change in procedure.

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1 MEMBER ZIEMER: But, then, you
2 would take all the cases, the 10 cases, 20
3 cases, whatever it is, and then you would say,
4 for example, 19 of these seem to be done
5 correctly, but this other one doesn't --

6 MR. STIVER: Yes, it would be one
7 overarching report that would look at kind of
8 the entire package of those cases. We
9 wouldn't look at each one separately.

10 MEMBER ZIEMER: This may be a case
11 where you sort of have to develop the
12 methodology. I mean, we did this in some of
13 the other stuff.

14 MR. STIVER: Yes.

15 (Simultaneous speakers.)

16 MEMBER ZIEMER: When you get into
17 it, you say --

18 MR. STIVER: We also have to go
19 through -- and this is going to be a nice test
20 case. This is how we are going to work out
21 all the kinks. Think of it as the beta
22 version, I guess. Things are going to come up

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1 that we didn't anticipate, and we will have to
2 come up with --

3 CHAIR MUNN: Yet another work-in-
4 progress.

5 MEMBER ZIEMER: Yes.

6 MR. STIVER: Yes, another work-in-
7 progress.

8 DR. MAURO: And this is John.

9 What is good is that this PER-12,
10 which is the high-fired plutonium, I believe,
11 is poised to be done. I think we were hoping
12 to have all those 10 cases in folders. But
13 that is going to be a very nice pilot. We
14 will do it, and we will put our report
15 together. And it will take form, and everyone
16 will have a chance to say, okay, yes, this is
17 the way we would like to see the product.

18 So, the reality is, until you
19 actually do one and see how it unfolds -- and
20 this is a good one because it is somewhat
21 complicated. It will reveal to everyone and
22 the Subcommittee what the product is and how

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1 useful it is to the process.

2 My sense is that this is in a
3 funny sort of way where we are all headed to.

4 In the end, the whole mission of the Board is
5 SECs and DRs. And here's the end result of
6 the DR review process. All of the Site
7 Profile Reviews, all the SEC petition reviews,
8 and all the procedure reviews, eventually, the
9 reason we are doing most of this is to see, is
10 there a process in place where the corrections
11 are made when they need to be made? This is
12 sort of like the end of the line.

13 So, I think this is going to be
14 important. This outcome of the review of the
15 PERs is going to be like the final step in the
16 review process that triggered the need to make
17 these changes in the procedures and the degree
18 to which they were, in fact, implemented.

19 CHAIR MUNN: I think you're right,
20 John.

21 MR. STIVER: That is a good
22 summary, John.

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1 CHAIR MUNN: Good.

2 MR. STIVER: It ties it all
3 together.

4 CHAIR MUNN: Thank you for the
5 information, both on the struggles you have
6 been going through and where we are.

7 MR. STIVER: I guess at the tail-
8 end of that we would want to produce a two-
9 pager when we are completely finished up. I
10 saw there is already in that list of the two-
11 pagers there is a couple of PERs in there that
12 require no followup action.

13 CHAIR MUNN: Yes. We have done
14 one, two.

15 MR. STIVER: There were two of
16 them.

17 CHAIR MUNN: Yes, I think we have
18 done two that we have already gone through the
19 process.

20 All right.

21 MR. KATZ: Very good.

22 CHAIR MUNN: The only

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1 administrative item that I have is our next
2 meeting. Does anyone else have any other
3 administrative items that we need to address?

4 DR. MAURO: This is John.

5 I had to step away for about 20
6 minutes. I know that Ted mentioned a two-
7 pager for OTIB-70.

8 MR. KATZ: Yes.

9 DR. MAURO: Did you folks talk
10 about any other two-pagers? Did I miss any?
11 Did you discuss the possibility of having
12 another round of two-pagers?

13 CHAIR MUNN: Oh, we took care of
14 all of them and cleaned them all up, John.

15 (Laughter.)

16 DR. MAURO: Okay. Thank you very
17 much.

18 MR. KATZ: No, no, John, Wanda is
19 teasing you.

20 DR. MAURO: Oh, she's teasing me?

21 MR. KATZ: But you can't see her
22 to tell that, although you could assume it

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1 always.

2 (Laughter.)

3 CHAIR MUNN: How unusual.

4 MR. KATZ: But that is the only
5 new assignment of a two-pager so far that we
6 have discussed.

7 MR. STIVER: Yes, we talked about
8 that while you were out.

9 DR. MAURO: Yes.

10 MR. STIVER: It was how could we
11 identify those, either by just brute force
12 going through and looking at all the ones that
13 have closed-down findings. And I guess we
14 will have to do that until such time as the
15 review system can correctly handle tallying
16 the closed findings.

17 So, I think at this point we don't
18 know how many other potential candidates are
19 out there for two-pagers.

20 CHAIR MUNN: But I think we have
21 our plate full in any case, John.

22 DR. MAURO: Okay.

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1 MR. KATZ: Are we looking at
2 dates?

3 CHAIR MUNN: We are looking at
4 dates. And as usual, the key factor is how
5 long will it take us to get many of the things
6 done that we want to get done. I hate to put
7 us too far out there, but I don't know about
8 other people's calendars. Obviously, February
9 is out of the question. That's too soon.

10 (Laughter.)

11 And my March calendar is starting
12 to look pretty cluttered. But I could do the
13 -- no, not the week before Oakland.

14 MR. KATZ: No, we won't get enough
15 work done to have a meeting before -- we have
16 to be looking at April I think, well into
17 April, before we would have productive work.

18 CHAIR MUNN: Okay. So, you don't
19 think the third week in March is even
20 feasible?

21 MR. KATZ: I don't think it is
22 sensible in terms of how much gets done.

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1 CHAIR MUNN: What about the first
2 week in April? Is the first week in April
3 possible?

4 MR. HINNEFELD: I don't see
5 anything that would preclude it on our side
6 right now.

7 MR. KATZ: Who has a good sense
8 for what is on people's plates and timing?

9 MR. MARSCHKE: Again, I think most
10 of the balls are in NIOSH's court because we
11 have made our findings and we don't have
12 anything under active review at this point.

13 MR. KATZ: Well, you have some
14 things, responses you are going to review that
15 we have talked about today.

16 MR. MARSCHKE: Right.

17 MR. KATZ: But not any new
18 material.

19 MR. MARSCHKE: No. Right.

20 MEMBER ZIEMER: Well, they should
21 be getting some TBD-6000 stuff this week, I
22 think.

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1 MR. KATZ: Well, yes.

2 MEMBER ZIEMER: I mean, it was due
3 out last week from NIOSH, a White Paper.

4 MR. MARSCHKE: But that has been
5 transferred out of this Subcommittee.

6 MEMBER ZIEMER: Oh, you are just
7 talking about this Subcommittee? No, but I
8 thought you said SC&A --

9 MR. MARSCHKE: Well, SC&A for this
10 Subcommittee.

11 MR. KATZ: What sort of timeframe
12 are we thinking about with respect to the dose
13 reconstruction review for PER-12? How many
14 months is that effort? Ten cases.

15 MR. STIVER: Ten cases.

16 MR. KATZ: And it is a narrow
17 dimension that you are looking at.

18 MR. STIVER: It is a narrow
19 dimension. I could say probably by mid- to
20 late April we should be able to have
21 something. That is my best sense for it.

22 CHAIR MUNN: So, if we aimed for

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1 Tuesday, the 3rd, would that be feasible?

2 MR. KATZ: John was just saying
3 mid- to late April would be for the PER-12
4 cases.

5 So, Stu, what are your thoughts
6 about it since you have deliverables?

7 MR. HINNEFELD: That should be a
8 straightforward issue. You just want them
9 written somewhere on the O: drive?

10 MR. STIVER: Just to post the
11 administrative files.

12 MR. KATZ: No, I am not talking
13 about the PER-12. I am just talking about in
14 terms of deliverables for the Subcommittee for
15 the next meeting.

16 MR. HINNEFELD: Mid-April is what,
17 three months away? Let's just make a point of
18 having some things ready.

19 MR. KATZ: Okay.

20 CHAIR MUNN: Mid-week?

21 MR. STIVER: Mid-week works for
22 me.

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1 MR. KATZ: Mid-week of what week?

2 CHAIR MUNN: The 11th.

3 MR. KATZ: Sorry. Okay, the 11th?

4 CHAIR MUNN: Would April 11 be
5 feasible?

6 MR. KATZ: It is open on my
7 calendar right now.

8 CHAIR MUNN: April 11th?

9 MR. KATZ: Okay.

10 CHAIR MUNN: 9:00 a.m.

11 Okay. Good.

12 Is there anything else that we
13 need to have on our plate that we have not yet
14 covered?

15 (No response.)

16 If not, then we are adjourned.
17 Thank you all very much. I do appreciate your
18 effort more than I can say, and you will be
19 hearing from us with a bunch of two-pagers.

20 MR. KATZ: Everyone else on the
21 line, thank you.

22 (Whereupon, at 2:39 p.m., the

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1 meeting was adjourned.)

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