

UNITED STATES OF AMERICA
CENTERS FOR DISEASE CONTROL

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NATIONAL INSTITUTE FOR OCCUPATIONAL
SAFETY AND HEALTH

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ADVISORY BOARD ON RADIATION AND WORKER HEALTH

+ + + + +

106th MEETING

+ + + + +

THURSDAY, JULY 23, 2015

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The meeting convened at 8:30 a.m.,
Mountain Time, in the Residence Inn by
Marriott, 635 West Broadway, Idaho Falls,
Idaho, James M. Melius, Chairman,
presiding. PRESENT:

- JAMES M. MELIUS, Chairman
- HENRY ANDERSON, Member
- JOSIE BEACH, Member
- BRADLEY P. CLAWSON, Member
- R. WILLIAM FIELD, Member
- DAVID KOTELCHUCK, Member*
- RICHARD LEMEN, Member
- JAMES E. LOCKEY, Member*
- WANDA I. MUNN, Member*
- JOHN W. POSTON, SR., Member*
- GENEVIEVE S. ROESSLER, Member
- PHILLIP SCHOFIELD, Member
- LORETTA R. VALERIO, Member
- PAUL L. ZIEMER, Member
- TED KATZ, Designated Federal Official

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C-O-N-T-E-N-T-S

Call to Order	6
James Melius, Chairman	
Opening Remarks	9
James Melius, Chairman	
NIOSH Program Update	10
Stuart Hinnefeld, NIOSH	
DOL Program Update	30
Chris Crawford, DOL	
DOE Program Update	39
Greg Lewis, DOE	
Coworker Dose Modeling Guidelines	53
James Neton, NIOSH	
Dose Reconstruction Reviews	66
James Melius, Chair	
Dose Reconstruction Review	
Methods Work Group	
Carborundum Company	100
(Niagara Falls, New York)	
SEC Petition: 19431976	
Tom Tomes, NIOSH.....	101
KIFER, ROBERT.....	145
Petitioner	
KNAPP, JANICE.....	147
Petitioner	
Subcommittee Reports	
David Kotelchuck.....	150
Dose Reconstruction Subcommittee	
Wanda Munn.....	164
Procedures Subcommittee	
SEC Petitions Status Update	167

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LaVon Rutherford, NIOSH

Board Work Session 173

Work Group Reports

Santa Susana	191
Brookhaven	192
Fernald	194
Grand Junction	195
Hanford	196
Gaseous Diffusion Plants	197
Kansas City	198
LANL	200
Mound	201
Nevada Test Site	203
Oak Ridge National Laboratory	204
Pacific Proving Ground	206
Pantex	207
Rocky Flats	209
Sandia	215
Pinellas	217
TBD-6000	217
SEC Issues	218
TBD-6001	221
Lawrence Berkeley	222
Weldon Spring	223
Worker Outreach	224
Savannah River	225
Science Issues	230

Idaho National Laboratory
(Scoville, Idaho)

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SEC Petition: 1949 to 1970)

Phil Schofield..... 231
 Tim Taulbee, DCAS..... 233
 Robert Barton, SC&A..... 262

ZINK, BRIAN..... 290
 Authorized Representative for
 Gerald Wolz

WOLZ, GERALD..... 298
 Petitioner

Board Discussion 301

Public Comment 309

Adjourn

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
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17
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P-R-O-C-E-E-D-I-N-G-S

8:29 a.m.

CHAIRMAN MELIUS: Welcome to the 106th meeting of the Advisory Board on Radiation and Worker Health.

To get us started, I will turn it over to Ted.

MR. KATZ: Right. Welcome, everybody in the room and on the line.

For people on the line, let me just tell you materials for this meeting -- well, the meeting, for one, is on Live Meeting as well. So, if you want to follow along with the presentations and you can get on Live Meeting, you can do that. The code and all for Live Meeting and the agenda for the meeting are on the NIOSH website under the Board section, Schedule of Meetings, Today's Date. You go there, and you will find the agenda and you will also find all the written materials, the presentations.

MR. HINNEFELD: Did you see the

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1 message?

2 MR. KATZ: I did not. Sorry. The
3 message is?

4 MR. HINNEFELD: It says, the server
5 is being placed in maintenance and we would
6 appreciate it if you would log off and start a
7 new session. So, it will take me a minute
8 here.

9 MR. KATZ: Okay. So, we are getting
10 Live Meeting back up and running, but that's
11 okay; we've got a few minutes here.

12 Anyhow, that agenda, the materials,
13 the presentations, if you can't deal with Live
14 Meeting, the presentations are still on the
15 website. So, you can follow along at your own
16 pace with those as well as the background
17 reading materials.

18 There is a public comment session
19 this evening beginning at 5:30. And so, for
20 people -- I don't see any souls in the room at
21 this time -- but there is signup for people in
22 the room. People on the phone, we will go

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1 through comments from people here in the room
2 first, and then, we will get to people on the
3 phone. And there is no signup for people who
4 are on the phone.

5 MEMBER POSTON: Ted?

6 MR. KATZ: Yes?

7 MEMBER POSTON: John Poston.

8 I've got my volume turned all the
9 way up and I can hardly hear you.

10 MR. KATZ: Okay. Okay, well, we'll
11 get the sound working correctly.

12 MEMBER KOTELCHUCK: And this is Dave
13 Kotelchuck. The same problem.

14 MR. KATZ: Right. I understand.
15 So, I will keep talking and give us feedback
16 when the volume is correct.

17 Let's get to roll call now for Board
18 Members, and we'll just go down the list
19 alphabetically. Then, there is not much
20 related to conflict of interest. I'll address
21 it when we get to it.

22 (Roll call.)

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1 MR. KATZ: And there's only one
2 Board Member with any conflict. That is Mr.
3 Clawson for the INL session. No other
4 conflicts.

5 Okay. I think that covers for me,
6 other than to say, for everybody who is on the
7 line, please mute your phone except when you
8 have a speaking part. To mute your phone, if
9 you don't have a mute button, press *6. That
10 will mute your phone for this call. And press
11 *6 again to take yourself off of mute. And
12 please no one put this call on hold, but hang
13 up and dial back in if you have to leave the
14 call for a while.

15 Someone online just let me know, am
16 I audible now? Or is it still a problem?

17 MEMBER MUNN: Much better, Ted.

18 MR. KATZ: Okay. Thanks, Wanda.

19 And, Dr. Melius, it is your agenda.

20 CHAIRMAN MELIUS: Okay. Thank you.
21 Thank you, Ted, and welcome, everybody.

22 We apologize, the agenda did get

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1 shortened this time from a day-and-a-half to a
2 day, but we had two sites that we originally
3 were planning on talking about at this meeting,
4 Rocky Flats and Kansas City, but there are
5 still issues that need to be addressed before
6 we could really make time to put them on the
7 Board agenda. So, I think you can expect those
8 possibly for the November meeting. And so, we
9 felt it really made more sense to have just a
10 one-day meeting this time.

11 Also, I want to add a very important
12 point that I want everyone to recognize and be
13 aware of. If he is acting a little bit nervous
14 and out of sorts today, it is Dr. Lemen's
15 birthday.

16 (Laughter.)

17 So, some sympathy and kindness.

18 MEMBER KOTELCHUCK: Hello. Dave
19 Kotelchuck.

20 I'm still having trouble hearing.
21 The volume needs to go up. Thank you.

22 CHAIRMAN MELIUS: Okay. They will

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1 be trying to make those adjustments.

2 So, let me get going with our
3 program. We will start with Stu Hinnefeld.

4 MR. HINNEFELD: Yes, I am working on
5 it. I tried restarting Live Meeting and, then,
6 got another message saying the server was going
7 to reboot in five minutes. And so, I figured
8 it wasn't a Live Meeting issue; it was Citgo
9 that was the issue. So, I got all the way out
10 of Citgo, and now I am trying to get back in.

11 CHAIRMAN MELIUS: Oh, okay. Why
12 don't we give it a couple of minutes then?

13 MR. HINNEFELD: Yes.

14 (Whereupon, the above-entitled
15 matter went off the record at 8:35 a.m. and
16 resumed at 8:38 a.m.)

17 MR. KATZ: Good, it looks like we're
18 in business.

19 MR. HINNEFELD: Okay. So, assuming
20 I don't get thrown off here by some server
21 action, let's see what happens.

22 MR. KATZ: So, Stu, why don't you

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1 say something briefly, so we can figure out
2 whether the volume is okay for the people on
3 the phone.

4 MR. HINNEFELD: Okay. I'm speaking
5 now and seeing if the people on the phone can
6 hear me.

7 MEMBER MUNN: I can hear you very
8 good.

9 MR. HINNEFELD: Okay. Good.

10 Well, I am here to give my normal
11 program update. Notice the new slide fonts
12 that we have used. We got tired of the older
13 ones. So, this is another NIOSH-approved font
14 that we used for our slides this time.

15 (Laughter.)

16 It is working great so far. There
17 it is. Okay.

18 This is where I give a little bit of
19 news update about what has been going on in the
20 program since last meeting. We have had a
21 number of outreach activities that we have
22 participated in.

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1 Last month we were out here with
2 ATL, our outreach contractor, to put on a one-
3 day workshop on dose reconstruction and the SEC
4 process. This is a trimmed-down version of the
5 workshop we do in Cincinnati once a year, and
6 we take it on the road a couple of times a
7 year, when we find sites that we think it might
8 be helpful.

9 The idea is to provide members of
10 the claimant community with information about
11 the program, so they can assist other claimants
12 in the area in working their way through the
13 program and answering some questions about the
14 program.

15 JOTG is Joint Outreach Task Group.
16 That is a joint effort among us, DOE, DOL and
17 the Ombudsman's Office to us and to DOL. They
18 did do an outreach meeting in St. Louis last
19 month. Additionally, this month, just
20 yesterday we had kind of an open town hall
21 outreach meeting. Again, ATL facilitated that
22 and we attended.

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1 Then, going on concurrent with this
2 meeting here is a Joint Outreach Task Group
3 meeting in Amarillo. So, we have a staff
4 member down there participating in that. So, a
5 busy couple of months here from the outreach
6 front from our point of view.

7 Coming up in September we will do
8 our annual two-day workshop, Dose
9 Reconstruction and SEC Workshop, where we will
10 invite people from around the country who are
11 involved in the program, whether advocates or -
12 - we get usually a lot of officials from local
13 unions to come to that, with the idea that they
14 will, then, be resources for the membership and
15 for the workers at their sites.

16 In October, the Joint Outreach Task
17 Group is planning outreach meetings in the West
18 Valley and Ashtabula areas. They are driving
19 distance apart, so you can probably cover those
20 on one trip. They will probably be on
21 successive days, and we will have a staff
22 member at that meeting as well or at those

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1 meetings.

2 In September, we have arranged a
3 class. It is all set now. The date is picked.
4 I think it is September 9th. We are going to
5 have a professor who has written books about
6 technical writing, plain language for technical
7 writing. It is going to be a one-day course in
8 Cincinnati. Several of our staff are going to
9 go and probably some contractor staff will go
10 as well.

11 The idea being that we want to
12 communicate clearly to all the audiences that
13 we deal with. Certain things we write, we
14 write for this audience, for the Advisory Board
15 and the Advisory Board's contractor. Those
16 will continue to be technically written, but
17 you can write technically and you can write
18 clearly at the same time. And so, that is kind
19 of the point of this.

20 We make all our products available
21 to broad audiences, but we will continue to
22 write for the audience that the document is

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1 intended for. Some things we write are
2 intended for the public, and those will be
3 written somewhat different, but in all cases
4 you want to use plain language in your
5 communication. So, that is coming up in
6 September.

7 Let's see, last month Dr. Howard and
8 I were asked to provide a briefing to a
9 Congressman who represents the Pinellas plant
10 in Florida. We went and briefed him about
11 that. He was mainly interested in the SEC
12 process and how it worked, and we explained to
13 him that it was statutorily defined, the SEC
14 process, and the reasons why SEC are added are
15 described in the statute.

16 He was sort of interested in
17 investigating avenues, like number of claims.
18 Maybe just the sheer number of claims from a
19 site should qualify it for an SEC. But we
20 said, well, the statute is written; there is
21 one way to do it. That is kind of the nature
22 of the conversation there.

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1 And then, personnel moves. One
2 thing I will mention -- I think most of you may
3 know by now; some of you may not have heard, or
4 you have probably noticed Jim Neton is not at
5 the meeting today. Jim [identifying
6 information redacted].

7 And so, he has got some travel
8 restrictions for a little bit. He was in the
9 office Monday and Tuesday and I assume
10 Wednesday. I wasn't in the office Wednesday.
11 I think he is going to be on the phone for at
12 least a portion of the meeting today.

13 So, he is feeling good. [Identifying
14 information redacted].

15 He has got some medical restrictions
16 that we thought it would be better if he not
17 travel this week, but he is working this week.
18 He is back in the office working. So, I
19 mention that.

20 Also, the reason I put this on the
21 slide was that J.J. Johnson, who doesn't deal
22 with the Board in general very much but does

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1 deal with the Worker Outreach Work Group. He
2 did a lot of work with the Worker Outreach Work
3 Group. He has also been sort of our point
4 person in consolidating public comments from
5 these meetings. ATL actually collects them,
6 but, then they work with J.J. and our staff to
7 get sensitive responses to the comment.

8 J.J. is retiring at the end of this
9 month. And so, he won't be doing that role
10 anymore. Josh will probably be taking on the
11 role of contact person with ATL for the
12 answering of comments from the meeting.

13 So, those are the personnel moves
14 that are relevant that I know of today.

15 Okay. Getting to the claim
16 information, I will go through this relatively
17 quickly since it is routine. The numbers click
18 up a little bit each month. If you have any
19 questions about these, you can let me know.

20 Our active cases, this number has
21 remained pretty constant. We are into a
22 steady-state situation for the most part where

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1 we get out pretty much what we get in.
2 Maintaining this level, we are not making any
3 particular efforts to decrease this backlog
4 because we are getting answers to people in a
5 pretty timely fashion. We are using our
6 efforts to try to do site research and move
7 those actions along, rather than put additional
8 effort on releasing this backlog any farther
9 since we seem to be pretty timely in our
10 responses, in our actions on complaints up
11 until now.

12 Probability of causation in terms of
13 what kind of a success rate we do have on dose
14 reconstruction, that still comes out about 28
15 percent. I think it has kind of been at that
16 number for a number of reports now. Right
17 around 28 percent are successful through dose
18 reconstruction.

19 And then, summaries of the first
20 5,000, anything that is down there in the
21 initial -- we don't have any initials -- any
22 things that are with us are either

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1 administratively closed or they are relatively
2 recent DOL returns, cases that were done once
3 before and have come back. The same thing for
4 the 10,000, for the first 10,000.

5 This is an interesting slide to me.
6 If you will see, this is how many requests for
7 exposure we have from the Department of Energy.
8 If you can see, there are only two requests out
9 more than 60 days. That number is much, much
10 smaller than I think it has ever been. Give
11 credit to our DOE colleagues in terms of their
12 response.

13 I think the SERT system, which they
14 installed, which is a Secure Electronic Records
15 Transfer -- I think that is what it stands for
16 -- has allowed sharing of electronic
17 information readily. It also has its own
18 tracking system for requests. So, everybody
19 knows what requests they have in front of them
20 and things like that. That has really moved
21 that system and that process along really well.

22 Our submittals versus production

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1 draft, which is looking much the same as it has
2 for a while, we didn't have to do any chopping
3 off at the end here because it is reporting as
4 of the end of June, which is the end of a
5 quarter. So, the number is nice and flat, and
6 you don't have any drop on the last incomplete
7 reporting period.

8 You can see that we are really not
9 at 200 a month. I used the term 200 a month as
10 a safe guess kind of a number, but we are more
11 down like the 500 a quarter. So, it is a
12 little less than 200 a month. But, again, if
13 it is declining, it is declining very slowing.
14 We seem to have a claim rate that is probably
15 going to continue for the foreseeable future.

16 And I believe that is all I have
17 included on my slides. Between stalling with
18 technical difficulties, I think I have managed
19 to stay on schedule.

20 So, are there any questions, though?

21 CHAIRMAN MELIUS: Any Board Member
22 questions for Stu?

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1 (No response.)

2 I have one comment which actually
3 applies to both NIOSH and to our contractor,
4 SC&A. We have had two recent Work Group
5 meetings where Idaho and Rocky Flats, where the
6 reports from either DCAS or SC&A have come in
7 very late, I mean like a day or two before the
8 Work Group is scheduled. I know it is hard to
9 estimate when things will get done. I know it
10 is well-intentioned to try to get the
11 information out there.

12 But it is really not feasible or
13 fair for either the Work Group members, Board
14 Members, or to the petitioners and other
15 interested parties to get, as we did here
16 -- what? -- a 250-page document the day before
17 our meeting. We were getting data on Idaho the
18 night before the Work Group call. It is really
19 not possible to sort of process that, review
20 that, be able to ask questions.

21 So, for both the Board Members and
22 the petitioners, we've really become sort of

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1 passive listeners. All we can do is hear the
2 slides, and so forth, not having had time to
3 review the reports or get enough background to
4 be able to ask questions. And then, what tends
5 to happen is, we move on to another issue and
6 things don't really get dealt with properly.

7 So, I really think we need,
8 particularly for the Work Group meetings where
9 we get a lot of these issues dealt with, I
10 think we need both SC&A and NIOSH/DCAS to do
11 better at that. And I am going to ask Ted to
12 sort of try to monitor this and check a few
13 weeks before the Board meetings, the Work Group
14 meetings, that reports that are supposed to be
15 out are out, or what is the schedule going to
16 be.

17 Frankly, it may be hard to hold a
18 Work Group meeting and reschedule, and so
19 forth, but I think it is really a waste of time
20 in many ways to do it if there is really not
21 time to review the documents. And so, we just
22 postponed, and I think that is appropriate.

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1 Again, I am not sure it is the
2 production of the reports, or whatever, that is
3 the problem. It just takes time. You can't
4 predict ahead of time when data is going to be
5 available. There is a review process that
6 reports have to go through that can be somewhat
7 unpredictable. I am sure it tends to be longer
8 the closer we get to a meeting just by luck or
9 whatever. So, I think everyone really needs to
10 do a better job of addressing that.

11 MR. HINNEFELD: Yes, you have
12 captured the issues. We are a victim of
13 optimistic scheduling, I believe.

14 CHAIRMAN MELIUS: Yes.

15 MR. HINNEFELD: Bomber's hair didn't
16 used to be as gray, and my hair didn't used to
17 be as gray. And that is one of the issues. In
18 fact, I saw [identifying information redacted]
19 at the Health Physics Society meeting lunch. I
20 just ran into her at lunch, and her first
21 comment, oh, your voice sounds the same, but
22 you're a lot grayer than you used to be.

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1 (Laughter.)

2 It's only been a few years, you
3 know, three or four years since I have seen
4 her. Or I don't know, it may not have been
5 that long.

6 So, you're right, and everything you
7 said is right on in terms of some of the
8 difficulties. And I think we will try that,
9 keep Ted abreast, because there are key points
10 in the schedule that are getting kind of -- it
11 will be kind of toward the end, you know, the
12 last two weeks to a month, when we may have
13 indications it is going to be an issue and it
14 is going to be a late delivery, where we could
15 probably say, hey, this date may not work. So,
16 we might be able to do that.

17 We will see what we can't work out.
18 We do schedule; we do have a project plan and a
19 task list. So, we know what has to get done
20 and we know what the timeframes are for those.
21 So, yes.

22 Thank you.

1 CHAIRMAN MELIUS: Yes, and I think
2 we understand. Like in the review process, if
3 you or John and people, Stiver and the people
4 he has reviewing aren't satisfied with what is
5 in the report or --

6 MR. HINNEFELD: Sure.

7 CHAIRMAN MELIUS: -- or wants to
8 recheck something --

9 MR. HINNEFELD: Sure.

10 CHAIRMAN MELIUS: -- that's fine. I
11 would rather have everyone confident in what is
12 in a report and have to delay a Work Group
13 meeting than saying, well, we really didn't
14 mean that or we really weren't sure about that,
15 or whatever.

16 MR. HINNEFELD: Right.

17 CHAIRMAN MELIUS: We didn't have
18 time to check that out, but, you know --

19 MR. HINNEFELD: Right.

20 CHAIRMAN MELIUS: Again, everything
21 is well-intentioned.

22 MR. HINNEFELD: Yes.

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1 CHAIRMAN MELIUS: I don't think
2 anybody is delaying things purposely by any
3 means, but it is just the way it works.

4 MR. HINNEFELD: Yes. I hear you.

5 CHAIRMAN MELIUS: When I was at
6 NIOSH, it was not effective in preventing the
7 graying of hair, but every time someone gave me
8 an estimate for when their project would be
9 done, particularly epidemiologists, I would
10 always add two years to the project.

11 (Laughter.)

12 MR. HINNEFELD: Okay. Yes.

13 CHAIRMAN MELIUS: And that was still
14 another year beyond that.

15 MR. HINNEFELD: Yes, yes. We'll try
16 not to go with the two-year route, but --

17 CHAIRMAN MELIUS: Yes. Well, don't
18 --

19 MR. HINNEFELD: -- I might start
20 adding --

21 CHAIRMAN MELIUS: It's epidemiology.

22 MR. HINNEFELD: We might start

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1 adding time to the schedule.

2 CHAIRMAN MELIUS: Though some of us
3 wonder sometimes.

4 MR. HINNEFELD: Yes. Yes, well,
5 somebody could have made a snide comment about
6 that.

7 CHAIRMAN MELIUS: Yes.

8 (Laughter.)

9 Any other comments or followup on
10 that?

11 Okay, Paul? I'm sorry.

12 MEMBER ZIEMER: Well,
13 parenthetically, Stu, [identifying information
14 redacted] says that to me also quite a bit,
15 your hair looks gray, but your voice sounds the
16 same.

17 (Laughter.)

18 I just wanted to affirm what our
19 Chairman has said. I think for Work Group
20 meetings, particularly a lot of which are now
21 done by teleconference, it is probably fairly
22 easy to reschedule. I am more concerned about

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1 meetings like this where things change sort of
2 toward the last minute.

3 I mean, here we shortened, but it
4 could be the other way as well where we get a
5 bunch of documents that we can't handle, as you
6 described.

7 I am wondering, normally, we have a
8 phone conference roughly a month before, four
9 to six weeks before this meeting. We probably
10 ought to -- and I think you sort of are
11 suggesting this -- assure ourselves at that
12 point that we are on schedule; we are really on
13 schedule with things that are due.

14 I know it is much harder to change
15 this meeting. Travel plans are set or
16 contracts are written with hotels, and so on.
17 But I think what you say, Jim, is very
18 pertinent and we should do our best to achieve
19 that goal.

20 CHAIRMAN MELIUS: I think both for
21 sort of the two-week time, but also at the six-
22 week time, at least have an update on what

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1 progress is being made, so people can
2 reconsider the timing of the Work Group
3 meetings, and so forth.

4 I mean, again, we will get to pick
5 on Tim a little bit later. But we are getting
6 on INL. We have had -- I think we are on our
7 third Class Definition now. One we got in the
8 last few days really, the most recent one.
9 Lots of information coming out. And again, it
10 is well-intentioned, trying to address an issue
11 in a very complicated site with lots of other
12 work going on. But it makes it very hard for
13 us to sort of digest it all and, then, feel
14 confident in terms of making a recommendation
15 based on a report we have barely had time to go
16 through. So, I think we can all try harder and
17 work with the Chairs as well as Ted and John
18 Stiver and DCAS.

19 Any other comments or questions?
20 Any Board Members on the phone have questions
21 for Stu?

22 MEMBER MUNN: I don't believe so.

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1 CHAIRMAN MELIUS: Okay. I don't
2 want to forget you all. Good.

3 MEMBER MUNN: We won't let you.
4 (Laughter.)

5 CHAIRMAN MELIUS: I know; I figured
6 I wouldn't have that opportunity.

7 MEMBER MUNN: Correct.
8 (Laughter.)

9 CHAIRMAN MELIUS: Okay. We will
10 move on to the Department of Labor.

11 MR. CRAWFORD: Good morning.

12 My name is Chris Crawford. I'm
13 representing the Department of Labor today.

14 And this is a little high for me.
15 There we go.

16 I am going to try to keep this
17 relatively brief. I think the more interesting
18 parts are probably the outreach meeting. Stu
19 has scooped me on both the number of claims
20 processed and the outreach meetings. So, let's
21 launch into it.

22 This is vaguely interesting. We

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1 have put out over \$11 billion total
2 compensation to date with 179,760 cases filed.
3 So, we are affecting lots of people.

4 MR. KATZ: Hey, Chris, can you try
5 speaking closer to the microphone or bring the
6 microphone closer to you? Yes. Thanks.

7 MR. CRAWFORD: Will do.

8 I notice our numbers differ from
9 Stu's by about 1,000, but that is always true.
10 And I am not sure why, but there is probably
11 slight differences in processing time, is my
12 guess. So, we show 2,000 cases at NIOSH, and
13 NIOSH shows 1,000 cases, roughly.

14 Here we are in basic agreement. We
15 show a few more approvals with the DR cases and
16 final decisions. Of course, the keyword final
17 decision; there are a lot more cases still in
18 the process. So, we show 35 percent of DR
19 cases are approvals; 65 percent denials.

20 You can also see here, one of the
21 interesting things for me is that 26 percent of
22 the cases involve SECs, some of which go to

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1 NIOSH, mainly for medical compensation, and
2 some don't.

3 Also, the other category, quite
4 large, but that is chronic beryllium disease,
5 silicosis and some of the oddments of the
6 program.

7 RECA is a part, but I don't see that
8 much personally, but it is 9 percent of claims.

9 And here, these cases include SECs
10 plus DR approvals. We see now we are almost
11 50/50, 52 percent approvals as opposed to 35
12 percent in the DR process.

13 This, of course, is all on the
14 website. So, I am not going to keep the slides
15 up for very long.

16 This material, also on the website.
17 I don't think we need to go through it piece by
18 piece.

19 The SEC cases we see, again, are a
20 very substantial portion of the Part B cases,
21 22,000, almost 23,000, to 9,000, for instance,
22 for DR-type cases.

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1 No surprises here. Our top four
2 sites don't change very much, and for Y12,
3 Savannah River, and Los Alamos. This also we
4 are showing AWEs trailing off, as expected,
5 since most of those sites were shut down long
6 ago.

7 And today's discussions -- this is a
8 little bit more interesting -- INL I know will
9 be a big interest at this site. So, we have
10 about 5300 claims, and we have some 2300 final
11 decisions and 600 approvals, Part B approvals,
12 912 Part E approvals, which I believe overlap
13 with these 600 Part B approvals.

14 And then, we have the cases for
15 Kansas City, Carborundum, and Rocky Flats up as
16 well. Carborundum, as you will see, is a
17 relatively small site.

18 And to talk about our outreach
19 meetings, which, again, Stu has already
20 discussed to some extent, I don't have much to
21 add, but perhaps a little bit.

22 So, there's quite a few outreach

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1 meetings taking place already this year. As we
2 see, two in Wyoming a day apart. I assume
3 those are RECA cases. Westminster, Colorado,
4 also in March. Newport News in April. Moab,
5 which must be a RECA site, in June. And we
6 have Grand Junction, more RECA cases plus the
7 Operations Center, and then, Bridgeton,
8 Missouri in June.

9 The New Kensington site, I am not
10 actually sure what workers are affected by
11 that, but that was just yesterday. There is a
12 meeting in Amarillo today.

13 I am not showing the INL meeting
14 that Stu referred to in June.

15 And that concludes my presentation.
16 There is some of our usual material which may
17 be useful to claimants because it will be
18 displayed on the worksite, but it won't be
19 useful to the Board.

20 Any questions?

21 CHAIRMAN MELIUS: Loretta?

22 MEMBER VALERIO: Can you hear me all

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1 right?

2 CHAIRMAN MELIUS: Well, bring the
3 microphone closer, please. Yes.

4 MEMBER VALERIO: Is that better?
5 Can you hear me now?

6 CHAIRMAN MELIUS: Yes.

7 MEMBER VALERIO: So, my question is,
8 I was looking at the OCAS forms that NIOSH is
9 awaiting back. If a claimant passes away
10 during the dose reconstruction process and DOL
11 is notified, does DOL automatically notify
12 NIOSH of that?

13 MR. CRAWFORD: I would think so.
14 Now that is a District Office function, when
15 they get the word that the -- I assume the last
16 eligible claimant is what we're talking about?
17 That should stop the process because, I mean,
18 by definition, there is no one left who is
19 eligible to receive the award, if it is made.

20 Stu may have experience with this.
21 I work only on the health physics side, so I
22 don't actually see --

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1 MR. HINNEFELD: What was the
2 question again? I didn't quite understand what
3 you said.

4 MEMBER VALERIO: My question was, if
5 a claimant's claim is in the dose
6 reconstruction process and they pass away
7 during that process, is Department of Labor
8 notified, one, that the person has passed away,
9 and are they forwarding that information to
10 NIOSH? And is that in any way part of the
11 backlog? Or are these numbers of the OCAS
12 forms that you're awaiting back?

13 MR. HINNEFELD: Well, I think, if I
14 understand, if the claimant passes away while
15 it is in the dose reconstruction process, I
16 mean, there is no automatic way for us to hear
17 about it. Typically, we might learn of it when
18 we finish a draft dose reconstruction and try
19 to do the closeout interview. We might learn
20 of it at that point. And then, we would make
21 sure DOL knew about it.

22 DOL would probably try to develop

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1 the survivor claimants at that point. If there
2 were no eligible survivors, then that case
3 would be administratively closed by us. And
4 so, any claim that -- you know, on my slide I
5 did list the number of administratively closed
6 claims. Those are technically still at our
7 place, but we don't expect them to go anywhere.
8 Because, unless DOL redeveloped -- I mean,
9 sometimes they will develop a survivor claimant
10 much later, in which case we would restart the
11 claim.

12 CHAIRMAN MELIUS: Paul?

13 MEMBER ZIEMER: Just one question to
14 clarify, and I don't have your slide numbers
15 but it is a slide entitled Part B Cases with
16 Final Decision to Accept.

17 MR. CRAWFORD: This slide?

18 MEMBER ZIEMER: Yes, that is the
19 slide.

20 So, just maybe I missed this when
21 you talked about it, but on the third bullet,
22 cases based on SEC status and PoC, are these

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1 cases where the person had a non-SEC cancer and
2 therefore had to undergo dose reconstruction?
3 Or what is that category?

4 MR. CRAWFORD: Probably that is it.
5 In other words, they qualify under the SEC for
6 an SEC cancer, but they have other cancers that
7 are non-SEC cancers. They are sent to NIOSH
8 for dose reconstruction. These 788 cases
9 represent people who both an SEC cancer and
10 have had an approved non-SEC cancer.

11 MEMBER ZIEMER: So, they are going
12 back just for medical coverage then?

13 MR. CRAWFORD: That is correct.

14 MEMBER ZIEMER: Because they already
15 have their claim?

16 MR. CRAWFORD: That's correct. The
17 basic award is paid by the SEC.

18 MEMBER ZIEMER: Okay. Thank you.

19 CHAIRMAN MELIUS: Any additional
20 questions for the Department of Labor?

21 (No response.)

22 Any Board Members on the phone with

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1 questions?

2 MEMBER MUNN: No.

3 CHAIRMAN MELIUS: Thank you.

4 Okay. Thank you.

5 MR. CRAWFORD: Thank you.

6 CHAIRMAN MELIUS: Last, but not
7 least, from the federal agencies, right?

8 I didn't recognize him.

9 MR. LEWIS: All right. Good
10 morning, everyone.

11 I am Greg Lewis with the Department
12 of Energy. I am going to talk about our
13 support to the program.

14 Before I get started, I just wanted
15 to let everyone know that, actually, Pat
16 Worthington was going to be attending to
17 present today, but earlier this week her mother
18 was ill and got admitted to the hospital. So,
19 Pat had to go down there to be with her mother.
20 Her mother is out and everything is good, but
21 Pat wasn't able to attend. So, she sends her
22 regrets.

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1 Because Pat was going to give the
2 presentation, this is the last minute me giving
3 it. But, I had known a little bit ahead of
4 time, I might have snuck in a couple of photos
5 of my beautiful three-month-old baby boy. So,
6 I will spare you of that, luckily.

7 (Laughter.)

8 Again, our core mandate at the
9 Department of Energy is to work on behalf of
10 program claimants to ensure that all available
11 worker or facility records are provided to the
12 Department of Labor, NIOSH and the Advisory
13 Board. So, essentially, we provide records.
14 That is our role.

15 We do that in primarily three ways.
16 We respond to individual requests for claimant
17 information from both DOL and NIOSH. We
18 provide large-scale site characterization-type
19 data like for the Special Exposure Cohort at
20 Idaho, for example, and we work with DOL and
21 NIOSH to conduct research on covered
22 facilities.

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1 And I always mention our site points
2 of contact. Out at Idaho it is Julie Finup and
3 Craig Walker. These folks throughout the
4 complex are instrumental in providing these
5 records. My office at Headquarters funds and
6 coordinates this effort, but at each site it is
7 the site point of contact that really makes
8 everything go. They know the site. They know
9 the people, the departments. They understand
10 where to go to find the records that you all
11 are interested in. So, they are really the
12 backbone of the program.

13 For individual records, we do about
14 16,000 a year. You know, this is employment
15 verification, our requests and NIOSH requests
16 combined. And they can be hundreds or
17 thousands of pages long, particularly for
18 employees that worked, you know, had a 30-year
19 career, might have worked at multiple sites,
20 multiple divisions within a site, or have been
21 a contractor, came back as a fed, and then
22 worked as a subcontractor after that. So, we

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1 could have to go 20 to 30 different locations
2 for a single worker, depending on the length of
3 employment and the complexity.

4 Before I go any further, I would
5 also like to point out Ms. Lokie Harmond in the
6 back. She is brand-new with my office, well,
7 about six months. Her role is to do a lot of
8 the metrics, reporting, following up with sites
9 on late claims, tracking the money.

10 And so, as Stu pointed out,
11 currently, there is around 200 requests out to
12 DOE, and I think only two of those were over 60
13 days. A lot of that has to do with the SERT,
14 which allows us to see exactly where things are
15 and when things are late. But it is also, you
16 know, Lokie and the folks in my office, their
17 hard work to take that and follow up on it, and
18 aggressively work with the sites to resolve
19 those. That is why we are able to have so few
20 lates.

21 The second function that we do is
22 the large-scale records research efforts, the

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1 Special Exposure Cohorts, the Site Exposure
2 Matrix work with the Department of Labor,
3 things like that. These projects can take
4 years and cost us quite a bit of money. We are
5 always trying to make sure that we have the
6 right resources in the right places to
7 accommodate these requests.

8 Currently, we are supporting work at
9 a number of sites, and I may not have captured
10 all of them there, but these are some of the
11 bigger ones. And I will follow up on two in
12 particular, I think, that were the subject of
13 discussion at the last Board meeting, which I
14 missed, but there were a few questions for Pat,
15 one of which is the Savannah River Site. There
16 were some concerns over the length of time it
17 was taking to review documents. I think,
18 actually, Tim Taulbee is the Savannah River
19 contact, so he can feel free to correct me if I
20 am wrong.

21 But I think what had happened is
22 there was a request for a large number of

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1 documents. Due to the length of some of these
2 documents and the time it was going to take to
3 do a classification review, we had worked out
4 an arrangement with Tim which we're very
5 appreciative of to have much of these documents
6 sent to the Oak Ridge area, where he has a
7 contractor with classified space that can
8 review those there.

9 The problem with that is that the
10 Board and the Board's contractor weren't able
11 to get there and review the documents there.
12 We hadn't originally realized that. And so,
13 once we realized it, they were kind of only
14 available to NIOSH.

15 This May, after the last Board
16 meeting, we had Savannah River send, it was
17 about 10 cubic feet of documents. Now these
18 are electronic, so I use cubic feet as the
19 measurement for size, but I can't really give
20 you a page number or terabytes or whatever.
21 But we sent quite a few documents
22 electronically up to Germantown. I don't know;

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1 it is thousands of pages of information got
2 sent up to Germantown.

3 We gave access to an SC&A staff
4 member, gave him an account on our classified
5 system, so he is able to review those. And
6 certainly, if other Members of the Board or
7 SC&A or anyone else would like to come in and
8 review those, you know, as long as they have
9 the right clearance, we would be happy to
10 support that as well.

11 I think we have gotten the issues
12 with the Savannah River Site documents
13 resolved. But, if there are any other
14 concerns, please let me know and we will do
15 what we can to help fix it.

16 And then, Los Alamos is the second
17 issue. I know there were concerns. There was
18 quite a bit back and forth between Los Alamos
19 and NIOSH in terms of trying to get the answers
20 to some very specific questions. It seemed as
21 if there was confusion on the NIOSH side in
22 terms of what Los Alamos was answering, and Los

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1 Alamos seemed to be confused about what NIOSH
2 was asking. It seemed to be communication had
3 been difficult.

4 So, I think after much discussion,
5 we identified a path forward where NIOSH was
6 going to make a general request for the types
7 of documents that they thought would help
8 answer their questions, and that NIOSH was
9 willing to actually go down there and review
10 these documents instead of having the site
11 review and attempt to answer the questions.
12 So, we think that will be a more efficient way
13 to get it done and will help actually answer
14 the questions.

15 So, there was a formal request from
16 NIOSH a few weeks ago, a few weeks to a month
17 ago, to Los Alamos. And now, we are working
18 back and forth to make sure that Los Alamos
19 understands what documents are being requested,
20 and they are going to make them available. And
21 we are trying to set up a site visit. So, I
22 think we are hoping to set that site visit up

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1 for some time in August and September, but we
2 are still working towards some specific dates.

3 I was going to say, I knew I skipped
4 a slide in there somewhere.

5 There were also some questions for
6 Pat about identifying a date at which Los
7 Alamos came into compliance with 10 CFR 835, or
8 the implementation of 10 CFR 835. Pat had her
9 health and safety folks review a number of
10 documents and talk with Los Alamos to look at
11 different oversight and enforcement reports.

12 The reports definitely identified
13 some weaknesses in implementation, but it
14 wasn't a pass/fail report that clearly
15 identified before such-and-such a date they
16 were not in compliance and after such-and-such
17 a date they were in compliance. So, we would
18 be happy to make this information available to
19 NIOSH. We would be happy to work with you to
20 provide this information, but I don't know that
21 we are able to provide a specific, you know,
22 this date is the clear cutoff, which I'm sure,

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1 based on your experience at other sites, I
2 think that is pretty representative of how
3 things work.

4 But, again, we have some
5 information. We would be happy to share it.
6 We would be happy to have more detailed
7 discussions, but I did want to give you an
8 update that we were following up on the issue.

9 Document reviews, I have talked
10 about this a number of times, but we do have to
11 review documents to make sure that they're
12 ready for public release or released to NIOSH.
13 So, we review for classification. We review
14 for official-use-only type information.

15 At Headquarters, the typical release
16 time is about eight working days. I know in
17 the field it is not always eight working days.
18 It can be significantly longer. We do our best
19 to try to accommodate the request. When
20 needed, we try to identify some creative
21 solutions, like I discussed with Savannah River
22 Site, where we were able to kind of get around

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1 reviewing that large amount of documents. But
2 we do do our best to try to get the information
3 to NIOSH and the Advisory Board in a timely
4 manner.

5 And then, the third responsibility
6 that we have is facility research. We work
7 with DOL and NIOSH to make sure that the
8 covered time periods are correct, the
9 descriptions are correct in our covered
10 facility database.

11 Outreach, I know both Stu and Chris
12 have talked about outreach. We participate in
13 the JOTG meetings. There is someone from my
14 office down in Pantex today. I was out in St.
15 Louis. So, we are very active in that effort,
16 and it is very important to get the word out to
17 claimants, potential claimants.

18 And then, I always mention at the
19 end our Former Worker Medical Screening
20 Program. That is the other program that is run
21 under my office and under Pat. We provide free
22 medical screenings to all former workers from

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1 all DOE sites. We have a number of independent
2 programs that provide these screenings. They
3 cover nationwide any site and can get folks
4 screenings typically very close to their home.
5 Even when they are in rural areas, we have
6 contracts with different clinics and things
7 like that. So, I think it is a wonderful
8 program and we encourage former workers to take
9 advantage of this.

10 And the Former Worker Programs for
11 the Idaho National Lab are the Worker Health
12 Protection Program for production workers and
13 prime contractor workers, and the Building
14 Trades National Medical Screening Program for
15 the trades workers and construction worker
16 subcontractors.

17 So, with that, any questions?

18 CHAIRMAN MELIUS: Questions for
19 Greg?

20 (No response.)

21 I have a question for Joe
22 Fitzgerald. Savannah River, have you got

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1 access now?

2 MR. FITZGERALD: Yes. Actually --

3 CHAIRMAN MELIUS: We want you on the
4 record.

5 MR. FITZGERALD: How's that? Is
6 that better?

7 Yes. No, it is a very good system.
8 I think it is something we can use, as I
9 understand it, for a number of different sites.
10 So, in terms of classified records, I think
11 this is a good pathway.

12 MR. LEWIS: When that is something
13 you're interested in or a faster way to get you
14 access to records, I think it is easier for us
15 to do that. So, we would always be willing to
16 do that.

17 CHAIRMAN MELIUS: Good.

18 Another question, I guess our
19 biggest strain now is on the site here, INL, in
20 terms of records requests, and so forth? Or is
21 that -- there's just a lot of activity, I know.

22 MR. LEWIS: Yes, I know there has

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1 been a lot going on.

2 CHAIRMAN MELIUS: Yes.

3 MR. LEWIS: I haven't heard of any
4 particular requests that are long outstanding.
5 But, certainly, if there are things that we
6 need to work on, you know, I am more than
7 willing to try to get that moving.

8 CHAIRMAN MELIUS: I think it has
9 been more trying to stage things, if I remember
10 from what Tim has told us, yes.

11 DR. TAULBEE: That's correct, Dr.
12 Melius.

13 We have been out here conducting a
14 lot of data captures for the Argonne National
15 Laboratory West SEC. But I have really got to
16 congratulate the site out here. From our three
17 data captures that we did in March and April,
18 we have now received all of the documents that
19 we requested. That was five weeks ago.

20 (Telephonic interference.)

21 MR. KATZ: I am sorry, there's
22 someone on the phone line who doesn't have

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1 their phone muted.

2 DR. TAULBEE: And so, the site has
3 done a tremendous job and they have released
4 approximately 100,000 pages to us. So, they
5 have done a great job.

6 CHAIRMAN MELIUS: We appreciate
7 that. And we also appreciate you continuing
8 your support and the money and everything going
9 down there to help them. Good.

10 Any other questions?

11 (No response.)

12 Okay.

13 MR. LEWIS: Thank you.

14 CHAIRMAN MELIUS: Thanks a lot,
15 Greg.

16 Stu, next is the coworker --

17 MR. HINNEFELD: I believe Jim Neton
18 is probably on the phone.

19 Jim, are you there?

20 DR. NETON: Yes, I am.

21 CHAIRMAN MELIUS: Okay.

22 DR. NETON: Can you hear me all

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1 right?

2 CHAIRMAN MELIUS: Yes. Yes.

3 Welcome, Jim.

4 DR. NETON: Thank you.

5 So, do you want me to --

6 CHAIRMAN MELIUS: Did you have any
7 slides?

8 MR. KATZ: No slides.

9 CHAIRMAN MELIUS: No slides.

10 DR. NETON: I don't have any slides,
11 but I am prepared to say a few things, if that
12 is all right.

13 CHAIRMAN MELIUS: Yes, go ahead.

14 DR. NETON: There is some feedback
15 from the other end. I keep hearing myself echo
16 here.

17 MEMBER MUNN: This is Wanda.

18 We are getting feedback.

19 DR. NETON: I am not sure how to
20 take care of that. But, as long as you can
21 hear me, I guess I have got a few things to
22 say.

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1 MR. KATZ: Jim, are you using a
2 speaker phone?

3 DR. NETON: Yes, I am. Maybe that
4 --

5 MR. KATZ: That is probably the
6 trouble.

7 DR. NETON: Yes. Hello.

8 MR. KATZ: Much better.

9 DR. NETON: Is that better?

10 MR. KATZ: Yes.

11 CHAIRMAN MELIUS: Yes.

12 DR. NETON: Okay. Okay, I can still
13 hear myself, but as long as you can hear me,
14 that's fine.

15 At the Advisory Board meeting in --
16 boy, this is annoying. I can't --

17 CHAIRMAN MELIUS: Do you want to try
18 dialing back in?

19 DR. NETON: Well, no. Something is
20 feeding back into my telephone while I am
21 talking.

22 CHAIRMAN MELIUS: Can we turn the

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1 volume down? Turn the volume down, and we
2 won't get the feedback possibly.

3 DR. NETON: It is going through the
4 microphones I think at the table maybe.

5 Hello?

6 MR. KATZ: Yes, keep talking, Jim,
7 and let's see if we can't get this calibrated
8 better.

9 DR. NETON: Yes, but it is hard for
10 me to talk because I am getting a one-second
11 delay on everything I am saying. That makes it
12 very difficult.

13 MEMBER MUNN: So am I.

14 DR. NETON: It is probably coming
15 through the telephone for everyone. I'm not
16 sure what technically can be done to fix that.

17 MEMBER MUNN: I don't know, but it
18 is pretty bad.

19 DR. NETON: That's better. I don't
20 know what happened, but that took care of it.

21 MR. KATZ: Okay.

22 DR. NETON: Can everybody hear me

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1 still?

2 MEMBER MUNN: Much better, Jim.

3 Much better.

4 DR. NETON: Okay. All right, thank
5 you.

6 At the March Board meeting in
7 Richland, NIOSH, we provided a Coworker Model
8 Implementation Guide draft 4.1. At that time
9 we went over the basics of it and asked for
10 comments on that document. We didn't receive
11 any comments from the Board at that time, but
12 we did receive comments from Knut Ringen from
13 the Center for Construction Research and
14 Training, the Science Advisor there. He
15 provided some fairly significant comments,
16 about five pages of comments.

17 We reviewed those comments and
18 provided responses to Dr. Ringen in early July,
19 around the 7th. At that time or shortly
20 thereafter, we provided the Board our comments,
21 our response to those comments as well.

22 At the same time, we did incorporate

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1 some of Dr. Ringen's comments into Version 4.1
2 and issued a new version, 4.1.1, that did
3 incorporate some of those comments.

4 In reviewing Dr. Ringen's comments,
5 there were a couple of general areas of concern
6 that he raised. One was just -- not just --
7 but it was requesting clarification of terms
8 and asking for more specificity in the
9 document. We did respond to some of those
10 clarifications for terms and incorporated them
11 into the new revision.

12 In regards to specificity, we had
13 talked about this before at various Board
14 meetings and Work Groups. It is difficult to
15 get very specific in such a higher-level
16 document such as this Implementation Guide.
17 So, we didn't make any changes regarding
18 specificity.

19 Some of the comments on the
20 individual sections dealt with differences
21 between construction trade workers and
22 production workers, and we acknowledged that

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1 there are differences. In our mind, as
2 indicated in the Implementation Guide, it
3 really comes down to the types of monitoring
4 data that are available, that is incident
5 versus routine. We felt that that was fairly
6 well covered in the document.

7 Some of the other comments were
8 related to this issue of using 30 samples as a
9 minimum for doing coworker models. You know,
10 Dr. Ringen questioned the basis for that, but,
11 really, it is not 30 samples automatically.
12 You have to go through the entire document and
13 pass all those other tests that occur before
14 you get to 30 as the minimum, you know, such as
15 the representativeness of the data, the quality
16 of the data, the completeness, et cetera.

17 That being said, I think that once
18 all of those are being satisfied, then the 30
19 really applies to a minimum number that are
20 available, those data points that would be
21 available for some sort of statistical
22 analysis.

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1 To sum up, we've reviewed the
2 document. We did incorporate some of the
3 comments into the revision, which I believe
4 everyone on the Board should have.

5 And I guess I would be happy to
6 address any questions or hear any comments that
7 the Board may have on this most recent draft
8 version.

9 CHAIRMAN MELIUS: Okay. Thank you,
10 Jim.

11 Dr. Lemen has a question.

12 MEMBER LEMEN: My question is, have
13 you ever considered that one document may not
14 fit all and you may need to put together
15 protocols for, like, separate for construction
16 versus production workers? OSHA has done this
17 on standards before and addressed them
18 separately, which might address some of the
19 comments that Dr. Ringen had. I don't know
20 what your thoughts are on that or not.

21 DR. NETON: We haven't thought about
22 that. I think that the document does address

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1 both concerns. In reality, it really comes
2 down, as I said earlier, to the types of
3 monitoring programs that are applied.

4 We are very well aware of the fact
5 that construction trade workers are often not
6 routinely monitored. They are either on an
7 incident or project -- monitored on a project-
8 specific basis. But that really is where the
9 difference in the ability to use those data
10 points comes into play.

11 I don't know that breaking them into
12 two separate documents would really help
13 address that issue myself. I can't think of
14 any more specific issues that we would put into
15 the split document that only dealt with
16 construction trade workers.

17 But my thinking here is that this
18 document, I would like to be able to issue this
19 document as it is. And we are committed to
20 implementing this on a pilot basis at both the
21 Savannah River and the Idaho sites that are
22 currently under investigation.

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1 Certainly all of our documents are
2 subject to change. If, in the pilot testing or
3 pilot evaluation, we find issues that arise, we
4 could certainly modify the document to
5 accommodate any such things that might come up.

6 CHAIRMAN MELIUS: I would just add,
7 to concur with what Jim Neton said, that this
8 is -- I mean, every site is different and work
9 forces are organized differently. There are
10 construction workers that come in and do
11 different -- some do routine maintenance
12 activities; others are doing actual
13 construction activities. And even in
14 production workers, there are changes based on
15 the site and how the materials are used and
16 what activities they do.

17 I think trying to set a very strict
18 criteria or set some criteria, it is just not
19 really going to be very helpful. I think it is
20 application of some guidelines and, then, it is
21 going to be what happens at an individual site.
22 And I think we found that as part of the SEC

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1 process as we have gone through it and
2 reviewing different sites.

3 So, I don't think we can try to be
4 overly specific in terms of these. It is going
5 to be really application of a set of guidelines
6 in terms of how we review and what we taken
7 into account in the review, rather than
8 specific criteria for what is appropriate for a
9 coworker model and what is not.

10 Josie?

11 MEMBER BEACH: I had some discussion
12 last week at our Kansas City meeting on this
13 document. It may be an early look at a smaller
14 site also than Savannah River and Idaho. I
15 know we were waiting for this document to be
16 implemented to finish some of the work on the
17 coworker models for Kansas City. So, just
18 keeping that in mind.

19 CHAIRMAN MELIUS: Thank you.

20 Paul?

21 MEMBER ZIEMER: Yes, I think we will
22 soon be -- and maybe we are at -- the point

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1 where we need to adopt this as a guideline and
2 use, as Jim has suggested, on a pilot basis.
3 Maybe Kansas City would be a good one.

4 But I think the Work Group was
5 almost to the point where we were close to
6 adoption, as I recall, except wanting this last
7 set of comments. Process-wise, does the Work
8 Group need to take a final look at this and
9 make a recommendation or are we ready at this
10 point to actually take action?

11 CHAIRMAN MELIUS: I think where we
12 left it was we were going to use the pilot
13 studies as a way of sort of a final review of
14 the document, and then, come back and get
15 essentially signoff from the Board Members,
16 based on that experience.

17 MEMBER ZIEMER: It would continue to
18 be called a draft document?

19 CHAIRMAN MELIUS: Called a draft,
20 yes. But it would be used.

21 MEMBER ZIEMER: Yes, yes.

22 CHAIRMAN MELIUS: Yes.

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1 Any other Board Member questions?

2 MEMBER MUNN: No, not a question,
3 but, Dr. Melius, this is Wanda. I certainly
4 feel that it is time for us to move forward
5 with it. The document has obviously been given
6 a significant amount of attention from all
7 parties involved.

8 From my perspective, NIOSH has done
9 an admirable job of incorporating the concerns
10 of all of the individuals that were party to
11 this, especially in light of the constraints
12 that we have to operate under. I personally am
13 ready to move that we adopt this on a trial
14 basis.

15 CHAIRMAN MELIUS: Yes, my
16 recollection, Wanda, is that is what we decided
17 at our last meeting to do --

18 MEMBER MUNN: I thought we would --

19 CHAIRMAN MELIUS: -- and go ahead.
20 What the delay has been -- and I don't really
21 mean to call it a delay -- but NIOSH has been
22 identifying what the examples will be where

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1 they would sort of pilot this. Savannah River
2 and INL were like -- well, we will hear later
3 about Savannah River, but INL, we are just not
4 quite at the point where I think we are quite
5 ready to do that. But we will get an update on
6 that later also.

7 MEMBER KOTELCHUCK: Dave Kotelchuck.

8 Well, let's go ahead with it on a
9 pilot basis and look to adopting it soon. So,
10 it seems to me we don't need to take action,
11 further action, today. Okay.

12 CHAIRMAN MELIUS: Correct. I think
13 that is my understanding also.

14 Anybody else with comments?

15 (No response.)

16 I would just add, though, that if
17 people have comments on the guidelines, Board
18 Members want to look at it again, have things
19 that come up based on your experience recently
20 or just because you might not have had time
21 before, go ahead. And I think Jim is willing
22 to accept comments. Until it is finalized, it

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1 is still in draft. So, we would appreciate the
2 comments, constructive and otherwise.

3 Okay. Thank you, Jim.

4 DR. NETON: Yes, thank you.

5 CHAIRMAN MELIUS: Yes.

6 I think I am up next. Stu, do you
7 want to get the --

8 (Pause.)

9 MR. KATZ: Folks on the phone, we
10 are just trying to bring this presentation up
11 on Live Meeting.

12 That's fine. It should be on the
13 NIOSH website anyway. So, they should be able
14 to follow along from there, if you can bring it
15 up there.

16 If you are not finding it there, it
17 is all text anyway. There are no graphics.
18 Well, I mean, the slides are all text, is what
19 I am saying. So, we can talk through it if
20 they have not posted it.

21 Yes, there it is.

22 CHAIRMAN MELIUS: I will give a

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1 brief update on the Dose Reconstruction Review
2 Methods Work Group. For the use of the people
3 doing the transcribing, we have a similarly-
4 named, a Subcommittee and a Work Group.

5 But we have been operating. We have
6 had one meeting so far of the Work Group. We
7 have been basically collecting information,
8 sort of interacting with the Dose
9 Reconstruction Review Subcommittee and have
10 been through that. I think the plan, what I am
11 going to do is sort of present an overview of
12 some of the issues that have come up, we've
13 discussed, and try to get some information,
14 some understanding, how do we go forward now
15 with methods that we would use or how we would
16 approach our mandate to do dose reconstruction
17 reviews.

18 This is a section from the Act that
19 speaks most specifically to that, which is that
20 we should have an independent review process to
21 do two things. One is to review the
22 methodology and, secondly, verify a reasonable

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1 sample of the dose reconstructions. That is
2 what some years ago many of us who are here
3 implemented.

4 Initially, the methods review was
5 really reviewing the regulations that NIOSH put
6 out and the approach that they were going to
7 use for doing dose reconstruction. Obviously,
8 it later evolved into a lot of the other Site
9 Profile Reviews and other work that we do on an
10 ongoing basis. And then, we set up early on an
11 approach for doing dose reconstruction reviews,
12 brought on our contractor SC&A to do that.

13 I think it is important to know
14 that, when we set this up, there were
15 essentially certain limitations that were
16 placed on us, mainly I think on sort of a legal
17 basis in terms of what we could do. One was,
18 essentially, that the dose reconstructions had
19 to be finalized and really beyond the appeal
20 period before we could do the actual reviews.
21 So, that is why there has always been sort of a
22 built-in delay in terms of the cases, the dose

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1 reconstructions we have been looking at.

2 And then, there is also, going back
3 in time, quite a controversy in terms of
4 disagreement with NIOSH on to what extent we
5 would have contact with the claimants in terms
6 of reviewing the information that they had
7 provided or directly talking to them and
8 reviewing that information. We sort of had an
9 impasse on that and decided we would go forward
10 without including that as part of dose
11 reconstruction and review, with the idea that,
12 if that was ever needed, we would revisit that
13 issue. Jenny, that was about 10 lawyers ago,
14 but, again, sort of historically something.

15 Basically, I think we originally --
16 and, Paul, you may remember better than I do --
17 but we had three tiers that we were planning to
18 do of dose reconstruction, sort of simple, you
19 know, a medium involvement and, then, the so-
20 called blind reviews. But we essentially sort
21 of combined the first two when we ended going
22 forward with that.

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1 Basically, the primary views are the
2 ones that we have done in the greatest volume,
3 and those were basically essentially verifying
4 dose calculations based on the records we had
5 in doing that and the methods that were in use
6 at the time of that dose reconstruction, which,
7 again, may have changed over time.

8 And we set up the process which we
9 are all familiar with where our contractor does
10 the dose reconstruction reviews. We, then,
11 individual Members of the Board then review
12 those with the contractor, and all Members of
13 the Board participate in that process.

14 Then, it goes to NIOSH and that, and
15 then, there is this resolution process, which
16 is the Dose Reconstruction Review Subcommittee,
17 which Dave Kotelchuck now heads. That is the
18 process of trying to sort of mediate and
19 resolve any issues that have come up, any
20 findings that are made in those primary
21 reviews.

22 The way we have selected cases has

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1 changed over time based on Probability of
2 Causation, based on site, time period, type of
3 cancer. Various other issues have come up.
4 So, there has not been a consistent way of
5 taking samples over time, but trying to be
6 selective and focusing on what we thought were
7 the sort of most important issues or issues
8 that really weren't addressed in the samples
9 that were being drawn earlier in that process.

10 It has taken, I think, a lot longer
11 to complete than we ever imagined at the
12 beginning of that. So, we are as guilty as
13 everybody else in terms of not meeting our
14 targets in terms of getting these completed.
15 And particularly, the resolution process has
16 taken time. I think, as we all know, there is
17 a significant backlog in doing that. That
18 backlog has been building up, despite efforts
19 in trying to shorten it. Basically, it is just
20 a lot of material to go through in a limited
21 time and resources and some extent to be able
22 to do that.

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1 I think that, as a general
2 statement, we can say that the results of the
3 methods being used and the application of those
4 methods by DCAS have been improving. So, I
5 think the Dose Reconstruction Review
6 Subcommittee is currently doing their second
7 report. But I think if you look at the overall
8 outcome, I think certainly, in general, it has
9 been improved in terms of the application
10 methods, the consistency and so forth. I don't
11 think we want to lose sight of that in terms of
12 what we do going forward.

13 We also had the other tier of method
14 for doing dose reconstruction reviews, which
15 was the so-called blind reviews, where
16 basically people would, SC&A would essentially
17 try to recreate the calculations that were
18 being done based on essentially primary
19 documentation, and so forth. That we have done
20 a limited number of. That was delayed in
21 getting started, and it takes, obviously,
22 longer to do and longer to review. I don't

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1 think we really completely understand the value
2 of doing that and how to sort of sort through
3 in what conclusions we can reach because I
4 don't think we have done enough of them to this
5 point in time, though I think I would add that
6 certainly the results of some of those blind
7 reviews I think are helpful in understanding
8 the process that goes on in some of the areas
9 that need to be focused on in terms of the
10 methodology and interpretation of information
11 in there.

12 I think it is also important that we
13 have, parallel to the dose reconstruction
14 reviews, we have an almost entirely independent
15 system that is looking at documents. Those are
16 SEC reviews. These are Site Profile Reviews.
17 These are the various technical documents that
18 are used in dose reconstruction, a large volume
19 of them. Those are not always directly
20 connected to the individual dose reconstruction
21 reviews. As I said earlier, and I think we all
22 know, often by the time the dose reconstruction

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1 review is done and then resolved, the
2 methodology may have been changed; the case may
3 have ended up in the Special Exposure Cohort
4 and various other things have gone on.

5 And it is also the whole system is
6 very dynamic. NIOSH and the Department of
7 Labor essentially have a policy that if there
8 is new information that becomes available and
9 the methodology changes or, obviously, an SEC
10 is awarded, that they go back and review
11 previous claimants, and we will change those if
12 it leads to a better outcome for the claimant.
13 And so, the fact that it is so dynamic sort of
14 makes our review process a little bit more
15 complicated.

16 So, the question is, what do we do
17 right now? These are not the conclusions of
18 the Work Group. These are sort of ideas that I
19 will throw out there just to get us sort of
20 talking, thinking about what we need to do
21 going forward on that.

22 I think if you look at our original

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1 legislative mandate, and given what we have
2 done so far, that at least to some extent we
3 need to continue the primary reviews. We need
4 to decide how many we do. We may want to look
5 at how we conduct those or how we resolve
6 those, the findings from those. But,
7 essentially, it is a feasible way and helpful
8 way to essentially verify that what is being
9 done is correct.

10 I mean, it is important. I think
11 that the original legislation did sort of see
12 it as partly a QA/QC process. It is not just
13 sort of an abstract, well, make sure they
14 review it. It is reviewing a sample, verifying
15 a sample of the dose reconstructions.

16 And so, I think we have to do that.
17 That is how we originally planned it. I think
18 our goal in terms of the percentage that we
19 review, the amount of the sample, was maybe a
20 little bit of optimistic, given the resources
21 we had. But it is still, I think, an important
22 part of what we do, and do that.

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1 Again, some examples that we have
2 talked about, I think we talked about in the
3 Board meetings about what we could do. Do we
4 really need to review every part of the dose
5 reconstruction? If something is being done
6 perfectly every time, why do we spend time
7 going back and reviewing it for every dose
8 reconstruction? That doesn't make sense.

9 Do we want to focus on application
10 just for new methodologies being used. A Site
11 Profile, a TIB, or something has been updated.
12 Really, should that be more of a focus? I
13 think there are issues with identifying those
14 dose reconstructions, but I think it could be
15 done, but it might be more helpful in terms of
16 making sure that we are fulfilling our mandate
17 and that dose reconstructions are being
18 properly done.

19 Another possibility that would help
20 to sort of speed the process and probably
21 improve the productivity was limiting the
22 Subcommittee review to only where there has

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1 been a positive finding in the initial dose
2 reconstruction review by SC&A. I believe there
3 is a proposal or a writeup of a suggestion from
4 SC&A that had come up about suggesting that
5 sort of approach. I think that was just in the
6 last week or so circulated to all of the Board
7 Members. That could be done.

8 There are variations of that where,
9 on certain ones, that you use a subcommittee of
10 the subcommittee or a work group of the
11 subcommittee to handle part of that. It could
12 be done when the individual Board Members
13 participate in the dose reconstruction review,
14 where they would review everything, but the
15 full Subcommittee would only look at positive
16 findings. So, we need to think through if that
17 makes sense.

18 There's also in terms of blind
19 reviews, I think we need to figure out how
20 productive they are, how useful they are to the
21 process. Do we want to increase the numbers
22 that we do there, the proportion of those that

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1 are blind reviews? Do we want to modify the
2 procedures that are used for blind reviews?
3 Again, it may be too early to conclude anything
4 on that, but I think we need to look at that.

5 And I think one of the other ways, I
6 think, is we can think of other approaches that
7 might be used. One that has occurred to me in
8 terms of processing, looking at some of the
9 blind reviews, is that there are a number of
10 undocumented or limited documentation on
11 methods that are used in actually doing the
12 dose reconstructions.

13 It keeps coming up in the blind
14 reviews where SC&A, and I think NIOSH has had
15 the same experience, they go to do the blind
16 review, recreate the dose reconstruction. They
17 are off by a large margin. Well, it turns out
18 that there was, either in the calculation or a
19 methodology that had been developed within ORAU
20 for doing those, that the dose reconstructor
21 knew about and ORAU knew about, but nobody else
22 seemed to be aware of, that had a large effect

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1 on that dose reconstruction.

2 At the same time, I think we have to
3 recognize that we can't review every individual
4 methodology that is being used. We have to
5 recognize that the dose reconstructors, there
6 is a certain amount of judgment involved in
7 what they are doing and what they can make --
8 you know, the information they have is often
9 limited. They have to reach judgments on how
10 to do that. Some of these dose reconstructions
11 are very complicated. So, we are never going
12 to have a full documentation on that, a full
13 methodology, and one that is going to have been
14 reviewed by the Advisory Board or maybe even
15 NIOSH, for that matter.

16 But, selectively, I think we need to
17 develop some way of looking at that and making
18 sure that at least those methodologies are
19 sound and, secondly, that they are being
20 applied consistently. Because I think one of
21 the other things that we want to be sure of in
22 looking at the dose reconstruction outcomes is

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1 that there is consistency; that a person,
2 people, two claimants in the same situation
3 would, in terms of their exposure, would end up
4 with the same estimate of their dose or
5 something close to the same estimate of their
6 dose.

7 In the absence of sort of
8 documentation or a methodology that is readily
9 straightforward to check, it is certainly
10 possible that there may not be consistency.
11 There is turnover in personnel, lots of reasons
12 that that is being done.

13 And again, this is not to say that
14 ORAU is doing a bad job. I think they do a
15 very good job and have really thought through a
16 lot of these procedures, and so forth. But I
17 think it does behoove us to make sure that
18 there is some consistency in terms of how these
19 methods are being applied.

20 And it came up in a recent Work
21 Group meeting -- I forget which one -- no, it
22 was actually a dose reconstruction review, the

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1 blind reviews where something, a set of
2 methodologies or documentation that we weren't
3 aware of or weren't completely aware of, I
4 think is a better way of saying it, were being
5 used for that.

6 This may be more a historical note,
7 but I recalled -- and actually Paul I think
8 recalled, and I believe, Wanda, you were on
9 this Work Group also -- way back when, way back
10 before we actually had public work group
11 meetings, before we had transcripts of work
12 group meetings, we had a Work Group on Quality
13 Assurance and Quality Control for the Dose
14 Reconstruction Program. Dr. Andrade chaired
15 it.

16 I recall there was some sort of
17 report. I can't find it. Ted couldn't find
18 it. It may be buried someplace in somebody's
19 computer somewhere. It was basically just a
20 set of recommendations to NIOSH in terms of
21 implementing a QA/QC program, which they were
22 sort of in the process of just starting to do

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1 at the time, do that.

2 I mean, I will add, since then, the
3 Dose Reconstruction Review Committee has I
4 won't say formally reviewed the QA/QC program,
5 but certainly were briefed on it by ORAU.
6 There is a document that the Work Group has
7 that sort of outlines that and a transcript
8 from, I think, 2012 where that was discussed.

9 But, again, that is another approach
10 to sort of looking at what is being done in
11 terms of the consistency and the methodologies
12 used, and particularly more likely the
13 consistency in terms of the dose reconstruction
14 reviews that could be looked at. I am not sure
15 who should do that, but it is something to
16 think about.

17 So, what happens next? The Work
18 Group will be meeting again. We are planning
19 to have a recommendation to the Board at our
20 next meeting because I think we need to be able
21 to start moving on with this. We may try to
22 look at working with the Dose Reconstruction

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1 Subcommittee, the Review Subcommittee, look at
2 some different methodologies, sort of pilot
3 some of the methodologies to be used, to try to
4 understand what the impact might be in terms of
5 resources and outcomes from different
6 approaches.

7 At the same time the Subcommittee is
8 doing a report to try to catch up and get a
9 summary report to the Secretary on the dose
10 reconstruction reviews up through -- what? --
11 the 13th set, I believe, and do that.

12 And we will be coming back to you.
13 I think certainly it is an important part of
14 what the Board does.

15 The other thing I would sort of ask
16 you to think about, because I think with all
17 the SEC work we have done, and so forth, we
18 have sort of spent limited time hearing from
19 and sort of being involved in what the
20 Subcommittee has done. I think they have done
21 a fine job, but I think a lot of us are not
22 always aware of what is going on, and so forth.

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1 Given how this is really an
2 important mandate for the Board, I think we, as
3 a Board, also need to spend more time on this.
4 So, I think going forward, we are going to be
5 asking the Subcommittee to be reporting on a
6 more formal basis to us in terms of issues and
7 progress that is being made, because I think
8 that is really the best way to keep everybody
9 involved in what is going on.

10 So, let me stop there. I will be
11 glad to answer questions. Comments?
12 Complaints?

13 Go ahead.

14 MEMBER KOTELCHUCK: This is Dave
15 Kotelchuck.

16 CHAIRMAN MELIUS: Yes.

17 MEMBER KOTELCHUCK: Several things
18 with respect to the DR Subcommittee. First, I
19 am quite pleased -- and I will talk about that
20 in my report later -- about the agreement
21 between NIOSH, ORAU, and SC&A with regard to
22 the blind cases. At the last meeting we

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1 reviewed and had agreement in nine cases, and I
2 will report on them a little bit later.

3 It wasn't that there weren't
4 disagreements, but in the disagreements it was
5 found that the issue was that, in general, the
6 SC&A people were not aware of some of the
7 conditions on the ground in the plant, in the
8 facility, which the NIOSH people made them
9 aware of, and then, they agreed that the NIOSH
10 and ORAU had done the right thing, if you will.
11 So, I do think that in the blind reviews at
12 least there is a high level of agreement and
13 very satisfying.

14 I was also significantly -- let me
15 just express my own personal agreement with the
16 approach that Ms. Behling suggested in her memo
17 of July 15th about, essentially, talking about
18 two types of reviews, one where SC&A and ORAU
19 and NIOSH agree pretty well. Rather than going
20 over that and having it explained to us, and
21 where and why they agreed, we just simply look
22 at it a week before, check that it is okay, and

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1 then discuss the areas where there remains
2 disagreement or controversy.

3 So, that seems to me a useful
4 approach in terms of our dose reconstruction,
5 and I would be willing to try it on a pilot
6 basis. Obviously, we have not spoken as a
7 Committee, as a Subcommittee, about that. But,
8 at least as one person on the Committee, I do
9 think that is a good approach and I am going to
10 suggest it on a pilot basis, if people agree.
11 I think Board folks should input on that, not
12 just Subcommittee members.

13 CHAIRMAN MELIUS: Okay. Thanks,
14 Dave.

15 On one hand, I think we can take
16 comfort that there is good agreement, which
17 means a good job is being done. At the same
18 time, I think it is our job as a Board to be
19 skeptical of that and making sure that what we
20 are doing, the methods that we are doing as
21 part of our review are not missing something
22 when we do that.

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1 It is tricky because, again, I think
2 we all think that ORAU and NIOSH in terms of
3 doing the dose reconstructions are doing a good
4 job and that it has improved over time, as the
5 program has matured and people got experience.
6 At the same time, we have to sort of maintain
7 our independence and be skeptical of that and
8 do that.

9 Paul?

10 MEMBER ZIEMER: In parallel with
11 Kathy Behling's suggestions, which have an
12 efficiency to them and I think maybe make
13 better use of discussion time, I was thinking
14 about something similar for the individual
15 Board groups who do the initial reviews. In
16 fact, Loretta and I tried this earlier this
17 week because we were reviewing our cases.

18 In the past when we reviewed those
19 individual cases, the contractor, SC&A, who has
20 already done a lot of work on each case, and
21 the cases are presented usually by the
22 individual who does the review. Of course,

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1 they like to go over it in great detail and
2 discuss in great detail what the Board Members
3 have already read in the report.

4 (Laughter.)

5 So, what we tried this time -- maybe
6 others have done this -- was to say, look,
7 let's focus just on those findings and the
8 other -- what's the other level, comments?
9 -- observations, findings and observations.
10 And unless the Board Team Members have
11 questions on the rest of it, we will just focus
12 on that.

13 And we tried that. I thought it
14 worked pretty well, and it cut our review time
15 by more than half of what it usually takes. I
16 just thought I would throw that into the mix
17 here, as we are considering the whole review
18 process, because other Board Members might have
19 some pro or con comments on that approach.

20 We obviously don't want to miss
21 something, but if we have read the reports and
22 there are no findings, unless the Board Members

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1 have issues to raise, it seems to me we use up
2 a lot of additional contractor and Board time.

3 CHAIRMAN MELIUS: Yes.

4 Oh, Josie? Sorry, go ahead.

5 MEMBER BEACH: Thanks.

6 So, we had four interesting cases
7 ourselves, and two of them were pretty easy to
8 go through. However, we had two that were
9 really interesting and brought up some issues
10 that have been identified, and you have
11 discussed them.

12 One that wasn't really identified
13 was some of the inefficiencies in the blind
14 reviews. SC&A doesn't always get the
15 information on how they were done. And so, it
16 makes it inefficient for them to do their work
17 and it takes a lot longer. So, that is
18 something that needs to be addressed.

19 CHAIRMAN MELIUS: Yes. Yes, and I
20 think that has been brought up. I think there
21 are attempts to try. At least we got a list of
22 the missing technical documents, or whatever

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1 you want to call it, or methods for those.

2 MEMBER BEACH: Yes, I know the
3 templates were one, but there were other
4 inefficiencies that were identified also.

5 CHAIRMAN MELIUS: Yes, yes. No, I
6 know.

7 MEMBER BEACH: Okay. Thank you.

8 MEMBER KOTELCHUCK: This is Dave
9 Kotelchuck.

10 But the concern is that, if the
11 NIOSH people feed too much information back to
12 SC&A, then the SC&A is not really doing a blind
13 review. If they do a blind review, they are
14 always not going to know quite what is
15 happening on the ground, and that gets cleared
16 up in the Subcommittee. But I don't see any
17 way of feeding the information to SC&A without
18 eliminating what should be a blindness.

19 CHAIRMAN MELIUS: Yes, but the other
20 side of that, though, is that we are obligated
21 also to review methodology. And so, if we
22 don't have it and don't know about it, then it

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1 is a little hard to review it, do that.

2 I mean, back to Dr. Ziemer's, which
3 I don't agree with, having sat through long
4 recitations of a report in great detail, maybe
5 far beyond what I am interested in, especially
6 when it has got lots of calculations in it, but
7 at the same time, if the people at the Dose
8 Reconstruction Subcommittee level aren't going
9 to be looking at those negative findings, it
10 means none of the Board Members are going to be
11 sort of evaluating those negative findings at
12 all or questioning them in some way. So, it
13 would behoove us, for the Board Members who are
14 doing the review of the four cases, whatever
15 the number is, to be very vigilant about the
16 negative findings.

17 MEMBER ZIEMER: Exactly. That's
18 what I'm suggesting.

19 CHAIRMAN MELIUS: They have to
20 understand that and raise questions if they are
21 not --

22 MEMBER ZIEMER: Right. That's

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1 exactly what I was suggesting.

2 CHAIRMAN MELIUS: Yes, yes.

3 MEMBER ZIEMER: Focus on those.

4 CHAIRMAN MELIUS: So, at least that
5 gets, again, more time on the positive
6 findings, but that sort of the negative
7 findings at least get --

8 MEMBER ZIEMER: Well, which are you
9 calling the negative?

10 CHAIRMAN MELIUS: Well --

11 MEMBER ZIEMER: The no findings?

12 CHAIRMAN MELIUS: The no findings.

13 MEMBER ZIEMER: Oh, the no findings?

14 CHAIRMAN MELIUS: See, the no
15 findings, I think we have some obligation to
16 make sure that the no findings are no findings.
17 All right? Because SC&A could make a mistake
18 and miss something.

19 MEMBER ZIEMER: Yes. Right. But,
20 if they say it's no findings and we have read
21 the report and we have a question, we still
22 have the obligation to raise it.

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1 CHAIRMAN MELIUS: Yes, but I am
2 saying it puts the onus on the individual Board
3 Members to --

4 MEMBER ZIEMER: Right.

5 CHAIRMAN MELIUS: -- make sure they
6 do that as opposed to -- rather than saying,
7 "Well, I'm not sure I completely understand
8 that procedure," or whatever. "I will leave it
9 up to the Subcommittee because they know this
10 better." Yes.

11 Any other comments?

12 MEMBER MUNN: Dr. Melius?

13 CHAIRMAN MELIUS: Wanda?

14 MEMBER MUNN: Yes, this is Wanda.

15 CHAIRMAN MELIUS: Go ahead.

16 MEMBER MUNN: I have a couple of
17 comments and one little sidebar.

18 The first comment has to do with a
19 question about the QA/QC group. Yes, you are
20 correct, we did, in fact, have a Work Group
21 which met quite extensively for a period of
22 months. And we did have a product. My memory

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1 is the only artifact of that that may have
2 carried over was the recommendation that we
3 include on our checklist a definition of a
4 QA/QC difficulty when each case was being
5 reviewed. And that has, in fact, as you know,
6 occurred. We still do have a checklist
7 category --

8 CHAIRMAN MELIUS: Yes.

9 MEMBER MUNN: -- of this finding
10 being a QA/QC concern.

11 Now which takes it out of the
12 purview of technical findings, which are quite
13 a different thing. But I will check my records
14 to see if I have any information about that
15 product, but you are correct, it was done at
16 such a time that, even if I had an indication
17 of accessing the document, I suspect that it
18 may have been on a platform which I can no
19 longer read.

20 CHAIRMAN MELIUS: Yes.

21 MEMBER MUNN: I don't think I have
22 readable data prior to 2007.

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1 CHAIRMAN MELIUS: Yes.

2 MEMBER MUNN: And I do think that
3 this document preceded that date, but I'll take
4 a look at it.

5 CHAIRMAN MELIUS: Yes. I was going
6 to say, just to interrupt that, no, I checked
7 with NIOSH, too, and I'm like three servers ago
8 in terms of my documentation, which probably in
9 that time has disappeared.

10 There are references to the Work
11 Group in the transcripts.

12 MEMBER MUNN: Yes. Yes, you are
13 correct. We were alive and well.

14 CHAIRMAN MELIUS: Right, right.
15 Yes, I was getting worried when I couldn't find
16 it elsewhere.

17 MEMBER MUNN: Yes, well, we were
18 there.

19 CHAIRMAN MELIUS: Yes.

20 MEMBER MUNN: The other comment had
21 to do with the amount of time that has been
22 spent on the dose reconstruction effort in the

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1 Subcommittee. I think sometimes it is not
2 fully appreciated by all those involved that
3 one of the things that has occurred as our
4 process has moved forward probably wasn't
5 anticipated by any of us at the time we put our
6 process together. And that is the fact that
7 many of our most sticky global technical issues
8 actually end up being resolved in the Dose
9 Reconstruction Subcommittee.

10 I think we had all sort of thought
11 of them as being resolved in a Work Group
12 setting. Indeed, a significant number of them
13 are. But, when they are being resolved in Work
14 Group meetings, they are also at the same time
15 being held in abeyance often in the Dose
16 Reconstruction Committee because they have
17 accepted one or more of the cases that are
18 being looked at there.

19 So, I think it behooves us to
20 remember that one of our delays has been the
21 matter of resolution of these major global
22 technical questions which apply not to just a

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1 single site or to a single case, but involve a
2 wide variety of cases, and they end up being
3 resolved there in that venue.

4 The last little comment that is my
5 sidebar is that, when we are concerning
6 ourselves with how much time we spend doing
7 these things, early on we made the finding for
8 ourselves that observations were to be
9 exactly that; that our contractor would call to
10 our attention things, either good or bad, but
11 not of major consequence to the outcome of the
12 case and would list those as observations.

13 But, then, there was a period of
14 time where it was decided in the Subcommittee
15 that observations might be of additional
16 consequence and, therefore, needed to be
17 treated in the same manner as findings. So,
18 there was a period of time where a great deal
19 of effort was -- I shouldn't say "a great deal"
20 -- but some effort was devoted to reworking the
21 entire thinking behind observations, when to
22 all intents and purposes I believe that it has

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1 been the intent of the subcontractor to follow
2 our original direction, which was if there is
3 something you want to comment about, but that
4 we don't need to address, then call it an
5 observation.

6 I think we have gone back to more of
7 our original thinking. But at least a small
8 portion of our time away was sidetracked for a
9 while with, my point of view, unnecessary
10 attention to observations.

11 CHAIRMAN MELIUS: Okay. Thank you,
12 Wanda.

13 Henry, you had a comment?

14 MEMBER ANDERSON: Yes, just a quick
15 comment. In going through the reviews, there
16 seems to me -- and I think I have been very
17 pleased with the lack of kind of individual
18 calculation-type errors, which would be almost
19 typo kind of things that occasionally are
20 found, but really it is the quality control and
21 the check on those is very good.

22 What I think our last review found

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1 is it is more the systematic things. In ours,
2 our one case which would have switched from one
3 conclusion to the other, then, was used for
4 another 50 cases in exactly the same way
5 because the basis document was problematic.
6 And I think those are the ones we really need
7 to pay attention to, rather than, yes, it is
8 unfortunate if there is a slight change, but
9 most of those, then, don't change the actual
10 outcome calculation by a factor of two or
11 anything like that.

12 So, I think if there any way we
13 could focus on more on those and discuss those,
14 I don't think we found that many of them, but I
15 think the template issue is one that we need to
16 look into more.

17 CHAIRMAN MELIUS: Yes, yes. As I
18 said, one of the things that had been mentioned
19 in our Work Group --

20 MEMBER ANDERSON: Yes.

21 CHAIRMAN MELIUS: -- was sort of
22 going at it from the opposite end.

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1 MEMBER ANDERSON: Yes.

2 CHAIRMAN MELIUS: Is there a new
3 methodology out there that --

4 MEMBER ANDERSON: That we're not
5 aware of.

6 CHAIRMAN MELIUS: Yes, yes. And
7 that's good.

8 I will add one final suggestion we
9 did just mainly, I think -- Grady Calhoun, to
10 make him apoplectic. I did suggest that the
11 other way of dealing with our backlog, or
12 whatever you want to call it, is that we could
13 have two Dose Review Subcommittees.

14 (Laughter.)

15 And more work, and so forth. I
16 think Grady thought trying to keep up with one
17 was enough at the time. So, we'll see.

18 Anyway, we will be back to you. We
19 will talk. We will update everyone at the
20 call, the Advisory Board call, whenever that
21 is, in a couple of months, and then, again, in
22 our November meeting we will be talking about

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1 this at great length and, hopefully, get at
2 least part of this finalized, though I think
3 some of the changes we make, we should really
4 consider doing incrementally. Let's try not to
5 do everything at once, but get things in place
6 and change it as we go along, as we feel
7 comfortable and have evaluated that what we are
8 doing is worthwhile.

9 So, anyway, thank you. If you have
10 thoughts or suggestions, let us know and we
11 will go from there.

12 We have a Board Member that has made
13 a motion that we have a break now. So, we will
14 follow him along. So, we will break now.
15 Please be back here promptly at 11 o'clock. We
16 have an SEC evaluation update, and petitioners
17 we expect may very well be on the line. So, we
18 want to start promptly at 11 o'clock. If you
19 are not here, we will send somebody out to find
20 you.

21 (Whereupon, the above-entitled
22 matter went off the record at 10:22 a.m. and

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1 resumed at 11:01 a.m.)

2 CHAIRMAN MELIUS: Thank you, and
3 welcome back. The next item on our agenda is
4 the Carborundum Company, Niagara Falls, New
5 York.

6 Tom? Your slides are here. I
7 didn't see you yet.

8 MR. KATZ: While I am at it -- sorry
9 to delay any longer -- but can I just check and
10 see if the SEC petitioners -- one of them was
11 having trouble getting onto the phone. Have
12 you had success?

13 MR. KIFER: Yes.

14 MR. KATZ: Oh, very good. Okay.
15 Thank you.

16 MR. TOMES: Hello. My name is Tom
17 Tomes, and I am here to discuss the Carborundum
18 Company and the SEC petition evaluation.

19 Carborundum Company is in Niagara
20 Falls, New York. It is listed as an AWE from
21 1943 to 1944 and again from 1959 to 1967. The
22 residual period is from 1945 through 1958 and

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1 then, again, from 1968 to 1992. And I will
2 have some more information on the covered
3 period here in a few minutes.

4 In 1943 and 1944, the Carborundum
5 Company at Buffalo Avenue and Gload Point was
6 engaged in various phases of work for the MED
7 and listed as having worked on uranium rods and
8 a forming, coating and canning of rods. I will
9 have some more update on this description also
10 in a few minutes, when I get into the specifics
11 of the work that was done.

12 In 1959 through 1967, the company
13 manufactured uranium and plutonium carbide
14 pellets for an AEC research program which was
15 involved in research for fuel reactors, fuels.

16 In between the two AWE periods,
17 Carborundum had some work, radiological work
18 that was not covered under this program.

19 NIOSH received a petition on
20 November 19, 2014. The petition requested that
21 we review all employees who worked in the area
22 of the Carborundum facility on Buffalo Avenue

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1 from January 1st, 1943 through December 31st,
2 1976. So, this period covers both the AWE
3 periods and a great deal of the residual
4 period.

5 NIOSH qualified the petition on
6 February 2nd, 2015 and was qualified based on
7 that there was exposures not monitored. And
8 NIOSH evaluated the Class of all employees at
9 the facility from 1943 through 1976, and we
10 completed our Evaluation Report on May 26th of
11 this year. We also issued a revision to that
12 to correct a couple of typographical errors
13 that were made in the first revision. And we
14 are recommending that no Class be added based
15 on our evaluation.

16 For previous dose reconstructions,
17 we have received 120 claims from the Department
18 of Labor; 106 of those had employment in the
19 period that we evaluated. We have completed
20 90, and none of those places had monitoring
21 records, individual monitoring records.

22 We have examined various sources of

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1 information in our research. Our Research
2 Database has 220 documents. We have also
3 evaluated information from Battelle TBD-6000.
4 We have used Technical Information Bulletins
5 for residual contamination, and we have also
6 made efforts to interview former workers. For
7 the evaluation, we interviewed seven former
8 workers. However, we were not able to identify
9 any former workers for that first period from
10 1943 to 1944. And we also used the usual DCAS
11 and ORAU information bulletins that we
12 typically do in evaluating dose.

13 The facility listed two locations.
14 The description included two locations. One
15 was the Buffalo Avenue facility, but they also
16 had a facility called the Global Plant, which
17 is several miles away, that was not part of the
18 petition. But the work that is described in
19 the facility description did take place at the
20 Buffalo Avenue facility.

21 I would like to give you a brief
22 description of the Carborundum Company. It was

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1 founded by Edward Acheson in 1891. He was
2 attempting to synthesize diamonds, and he
3 produced a hard substance that he noticed would
4 scratch glass, not knowing he had developed a
5 method for silicon carbide. He eventually
6 found that he had a customer for that and
7 formed a company in 1891 which moved to Niagara
8 Falls in 1895. It became a very large company
9 internationally, diversified into different
10 abrasives and other products, and estimated to
11 have 67,000 employees in the forties.

12 Here is a graphic of the facility on
13 Buffalo Avenue. I haven't been able to
14 identify the actual buildings that you see
15 here, but it shows you the size of the plant, a
16 very large place.

17 For the first AWE period in 1943, we
18 have not found any information that tells us
19 what that building that work was done in. As
20 just mentioned, it was done by Carborundum, and
21 the reference we have does not say the
22 location.

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1 However, in 1953 they built at that
2 time a state-of-the-art research and
3 development facility. It opened in 1953, and
4 that was the location of the work that was done
5 during the second AWE period, which was the
6 manufacturing of uranium refractory compounds
7 and the uranium-plutonium carbide pellets.

8 Building 1 was a four-story building
9 that had over 60,000 square feet.

10 Now I would like to just go through
11 the scope of work. The description that you
12 saw on the first couple of slides mentioned
13 that they had performed various aspects of work
14 regarding metal, different phases of it. But
15 our research that we have done exhaustively on
16 the 1943-to-'44 listing indicates that their
17 work was limited to centerless grinding.

18 And the centerless grinding was
19 experimental in nature and it was a short-term
20 job. As a result of our research, we have
21 contacted, we have talked with the Department
22 of Energy and the Department of Labor, and they

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1 are actually making a change to the listing.
2 So, the listing you see in the Evaluation
3 Report and in this presentation is being
4 changed. The first AWE period is being changed
5 to June through September 1943 only, and the
6 description is going to be similar to what you
7 see here but with experimental centerless
8 grinding, the uranium rods.

9 I was told I need to talk slower.
10 They are trouble online. I need to slow down a
11 little bit here.

12 The purpose of that work was to
13 determine an abrasive that would actually work
14 to grind uranium slugs. The AWE had a program
15 to manufacture the uranium metal slugs for the
16 World War II effort and there was various
17 companies that were doing machining of these.
18 They were using lathes to do the rough grinding
19 and using lathes to do the finish grinding, and
20 there was a bottleneck in the production
21 operations on doing the finish grinding.

22 One of the proposals was to try

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1 centerless grinding, and as a result, a
2 contract was let out to Carborundum, who was
3 the world leader in abrasives, to do testing to
4 see if they could find an abrasive that work.
5 According to the records we have, there was no
6 purchase order issued and no medical
7 supervision considered necessary.

8 And this is information from DuPont.
9 DuPont had a contract through the University of
10 Chicago to coordinate all the subcontractors
11 with the metals program in 1943 to '44. This
12 is where this information, most of this
13 information we have came from DuPont records.

14 Work limits to the centerless
15 grinding, pilot production grinding was not
16 performed at Carborundum. The pilot production
17 grinding was actually performed at Joslyn the
18 next year I believe.

19 The total quantity of uranium slugs
20 in Carborundum in the 1943 work was 10 pounds
21 -- excuse me -- 30 pounds. It was 10 slugs of
22 uranium that weighed 30 pounds total. And our

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1 records, we have shipping and receiving records
2 from the various operations of the uranium
3 metal work from 1943 and 1944. And those
4 records indicate that Carborundum received
5 those 30 pounds of uranium on June 1st of that
6 year and return shipped them on September 27th.
7 Based on these records is the -- they are
8 pretty definitive records. They are very
9 precise. That is the basis for, that and other
10 supporting information in the reports by DuPont
11 is the basis for the proposed change, the
12 change being made to the covered period.

13 The work that was done at
14 Carborundum was actually done in June of that
15 year. The report was issued on July 2nd. They
16 received the slugs on June 1st, and they tried
17 four different abrasives. They tried different
18 speeds, different angles. I'm not an expert on
19 a centerless grinder, but the report does
20 describe they tried different angles, different
21 speeds, the machine settings. They determined
22 that the silicon carbide would grind it and

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1 they determined the speed that would work.

2 And after they determined some of
3 the other abrasives would not work, they went
4 back to the silicon carbide wheel, and then,
5 they tried repetitive runs on I think seven
6 slugs after that.

7 These results that I just
8 summarized, they came from a report that was
9 written at DuPont on July 2nd of that year.
10 The shipping records indicate the reports were
11 not actually returned until September 27th of
12 that year.

13 As far as exposures during the first
14 AWE period, there would be internal exposures
15 from centerless grinding of uranium metal. I
16 think our surrogate data from other sites
17 indicates in TBD-6000 that centerless grinding
18 produces large significant amounts of airborne
19 uranium. There would be an external dose from
20 handling the uranium metal. And we know of no
21 monitoring records that are available for this
22 work. We assume that they were exposed to

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1 centerless grinding activities for the entire
2 period that the metal was onsite, and that is
3 to cover any other work they would have done,
4 even though we believe the centerless grinding
5 was limited to June.

6 The metal was still onsite, and we
7 believe that the centerless grinding exposures
8 would be bound to all the other work that they
9 were exposed to. And that work I am assuming
10 would be some cleanup effort because DuPont at
11 that time we have no information what they
12 required of Carborundum, but at that time the
13 other contractors that worked on that metal,
14 they typically required them to return all
15 sweepings or grindings, or any visible
16 contamination were required to be cleaned and
17 returned.

18 For the intakes during the first AWE
19 period, as I mentioned, we are going to assume
20 the TBD-6000 inhalation intake values. These
21 are the highest intake values in that TBD.
22 When you look at all the different phases of

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1 uranium metal work and other uranium
2 operations, the centerless grinding is the
3 highest results. And those results are based
4 on grinding being done without ventilation. We
5 also will estimate ingestion based on derived
6 contamination levels.

7 The TBD-6000 intakes are from
8 facilities that were operating a few years
9 later -- whereas Carborundum was, I would say,
10 would be the initial place for the centerless
11 grinding that was done on uranium, the work
12 that was done for TBD-6000 was a few years
13 later in the fifties. But we do believe that
14 those are applicable to the work done at
15 Carborundum for a few reasons.

16 The source term at Carborundum was
17 very low. As I mentioned, there was 30 pounds
18 of uranium, 10 slugs. As far as the slug size,
19 it is not specified, but what they shipped was
20 what they called the Clinton slugs. And the
21 typical Clinton slug finish size was 1.1 inch
22 in diameter by 4 inches long. So, basically,

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1 they were small slugs. They received the rough
2 sizes. They would be slightly larger than
3 that. And so, the total amount of material was
4 30 pounds.

5 We do believe that we create a
6 significant airborne hazard because the
7 grinding, they would be starting and stopping
8 operations, and some of these, there would be
9 chatter. They even mentioned there was chatter
10 on some of the abrasives they used. So, they
11 were generating dust. We just don't have any
12 data for the amount. So, that is the reason we
13 are using TBD-6000.

14 We believe that the air
15 concentrations for grinding without ventilation
16 was also applicable to Carborundum. One of the
17 other reasons that we believe that this would
18 be bounding is because Carborundum, even though
19 they may have had very high concentrations of
20 air for some of this grinding work, at other
21 times it was downtime for changing the braces.
22 They mentioned they frequently stopped to

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1 address the grinding wheels. It was all
2 experimental, and prior to this time they
3 didn't even know which wheels would work. So,
4 they were actually trying grinding wheels; it
5 was not effective at all.

6 We are using the values from
7 TBD-6000 for the pre-1951 era, which takes into
8 consideration the longer workweek. And we also
9 propose that the values be signed the way
10 TBD-6000 does based on operator dose and other
11 workers who were exposed that significantly.

12 For the first residual period, which
13 starts after the end of the operations in 1943,
14 we are using the air concentrations from
15 TBD-6000. We are assuming they settled at a
16 given rate and time. These methods are
17 specified in TBD-6000, and we are proposing
18 that we use those methods which we have used in
19 other sites and continue to use.

20 Once we have determined
21 contamination levels by those methods, we refer
22 to OTIB-70 which specifies methods for

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1 resuspension and source term depletion. We use
2 the source term depletion default values in
3 OTIB-70. And finally, for the external dose
4 from residual contamination, we use those same
5 contamination levels combined with dose rate
6 factors for external dose.

7 The second AWE period started in
8 1959. Carborundum had several contracts. Two
9 of these were with the AEC and five of those
10 contracts were subcontracts with United
11 Nuclear; involved reactor fuel development.
12 Some of this was simply experimental in nature,
13 and some it was actually producing pellets.
14 All those contracts were very similar. They
15 were the Power Fuel Development Program for the
16 AEC, and some of it was done in conjunction
17 with AEC's work with Uratom for finding fuels
18 for fast fuel reactors.

19 The two AEC contracts, the first one
20 which occurred in 1959, this one did not
21 involve plutonium. It was the second period we
22 worked it here. The 1959 work was uranium

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1 compounds, uranium nitride and carbide, uranium
2 silicate. They were studying these three
3 alternatives for reactor fuels. The objective
4 of this was to come up with a method to make
5 the materials and then to see if there would be
6 an alternative fuel for pellets for reactors.

7 The subcontracts with United Nuclear
8 were related. They also involved synthesizing
9 uranium compounds and in this case plutonium
10 compounds. It was for fuel development. This
11 was a little broader-scope work. It involved
12 actually streamline work and production work.
13 They were developing mixed uranium monocarbide
14 fuels.

15 United Nuclear was the prime
16 contractor with the AEC. They were responsible
17 for designing the program and fuel irradiation
18 and evaluation. Carborundum was responsible
19 for developing the methods to fabricate the
20 fuel pellets.

21 For this work in 1959 through 1967,
22 I believe there were seven contracts. Building

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1 1, this was the research and development
2 building I mentioned earlier which opened in
3 1953. It had experimental furnaces, an
4 electron microscope, an x-ray installation. It
5 was equipped with glove boxes and various other
6 equipment.

7 We do not know the precise layout of
8 the uranium work. We do know that glove boxes
9 were employed. The first work in 1959 was
10 actually in a separate location. It was on the
11 same floor, but it was not in the same work as
12 the later work for plutonium.

13 The plutonium facility contract
14 actually was signed in 1959 to construct to a
15 plutonium facility. It became operational in
16 1961. It was located on the fourth floor. It
17 was 15-feet wide by 48-feet long. It included
18 a separate changeout room. There's quite
19 specific details available on how a design was
20 fully contained with six glove boxes. The work
21 areas were ventilated.

22 There were inert atmospheres in the

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1 glove boxes. There were six glove boxes total.
2 Three of them had the helium atmospheres, three
3 with air atmospheres; constructed with
4 aluminum. One of the boxes had a method, a
5 door where they could get materials out and,
6 also, used it by a bag-out procedure.

7 This was a floor plan of the
8 plutonium facility. It shows the glove boxes,
9 and on the left end of that is the changeout
10 room. I don't have a picture of it here, but
11 one of the references we had has a picture of
12 the room, and when you get all this equipment
13 in the room, it was a fairly small work area.
14 It was, I would say, maybe no more than two
15 people could have worked in there. In one of
16 the interviews that we did, the guy said he was
17 the one that worked in there. He said he
18 worked in there alone.

19 I probably got a little ahead of
20 myself on some of these bullets here. But I am
21 just going to reiterate this here. I'm going
22 through the process they actually did on the

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1 work.

2 They were developing synthesized
3 uranium nitride and the carbide and the silicon
4 compounds. They fabricated that into small
5 bodies for testing. Then, they would actually
6 analyze the physical properties of the pellets.

7 The process involved uranium being
8 reacted with carbon, nitrogen, and silicon
9 compounds. They actually experimented with
10 different compounds and different ways of doing
11 this. The procedure was pretty much a standard
12 procedure, but as far as the exact compounds
13 and times and things like that, they varied
14 that during the research to determine what
15 would work best.

16 They typically would mix compounds
17 together, dry-ball mill it for, I believe some
18 of the references say 48 hours. I believe that
19 may have varied with this experiment they were
20 doing pressing the pellets.

21 Their experiments also include cold
22 pressing, hot pressing, and they used sintering

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1 methods also, which the idea here I believe was
2 for them to get as dense a pellet as they
3 could. I believe they had near theoretical
4 density on some of these pellets. Their
5 experiments also included different furnaces
6 tied to atmospheres.

7 After they fabricated the materials,
8 they did different tests on the materials,
9 including thermal expansion and density
10 measurements, connectivity. X-ray fluorescence
11 is mentioned as being used. And they also
12 reported just other various properties. This
13 information is available in progress reports,
14 AEC progress reports, and in final reports of
15 the contract.

16 As far as the amount of material,
17 we do have a firm handle on the total
18 quantities produced, but we do have information
19 at different small amounts and different times.
20 They produced many batches of uranium
21 monocarbide ranging from 30 grams total to 6
22 grams total per batch. I believe they produced

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1 less of the silicon and nitrogen compounds
2 because just their reports seem to be focusing
3 more on the uranium carbide.

4 We have no specific information on
5 the controls that were used. However, we do
6 know that they had shut down operations for a
7 couple of months because they had to replace a
8 glove box. This is consistent with some of the
9 descriptions of how they contained work.

10 The work in the plutonium, the
11 plutonium first arrived onsite in 1960. So,
12 the contract with the plutonium actually was
13 signed in 1959, but, as I mentioned, the first
14 part of that work was actually constructing a
15 facility to do the work in.

16 The specific compound they were
17 going to produce was uranium-plutonium
18 monocarbide. The pellets were to substitute in
19 the core of the fast fuel reactor. Other
20 people, not Carborundum, would test the
21 characteristics of the fuel.

22 And one of the primary goals of this

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1 program from the AEC was the reduced fuel cost.
2 So, there is quite a bit of information on fuel
3 cost in the records.

4 The work was performed in the new
5 facility, as I mentioned. The facility was
6 first tested with uranium only before they
7 introduced the plutonium. The plutonium
8 arrived in 1960. The first shipment from
9 Hanford I believe was 500 grams. I think the
10 total plan through the 1963 period was 3
11 kilograms total of plutonium.

12 Once they proved the system was
13 effective, that it was an operational facility,
14 Pu was introduced in March 1961. These pellets
15 were a mixed UPu carbide, and most of those
16 were 95 percent uranium and 5 percent plutonium
17 ratio, but they also had some campaigns in
18 there where they used up to 20 percent
19 plutonium.

20 The process was performed in glove
21 boxes, and they had restrictions on mass per
22 batch and total mass in operation. They would

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1 mix the uranium and oxide powders with carbon.
2 They would ball-mill those together. I believe
3 that occurred over a couple of days, I think 48
4 hours in ones that I remember reading about.

5 After they got the compounds
6 thoroughly mixed, they would heat it to form a
7 clinker. Then, they would crush that clinker
8 to a fine powder and, then, cold press it and
9 sinter it to form a dense pellet. Once the
10 pellet was formed, they would grind the pellets
11 and inspect and ship. That is the basic
12 description of the process available in the
13 report on the program.

14 Besides the basic process, they had
15 to the fuel, they had to test the pellets,
16 examine the physical properties, and do x-ray
17 fraction analysis.

18 There was also work, I noticed in
19 the record it mentioned there was five
20 particular subcontracts. The first two were
21 associated with fabricating the facility and
22 producing the pellets for the test for the

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1 reactor, but there were also additional smaller
2 contracts that were just basically examining
3 different methods to fabricate and synthesize
4 the pellets.

5 After the work with the plutonium-
6 uranium fuel fabrication project in 1965, they
7 also had a contract with AEC in 1966 to study
8 an alternate method to synthesize uranium-
9 plutonium carbide, which involved co-
10 precipitating the compound with a mixture of
11 nitrates. Whereas, the previous work had been
12 done mostly with mixing oxides.

13 And that work in six months, that
14 last contract work, I believe started -- I
15 don't remember the exact month, but it was a
16 six-month period total that overlapped between
17 1966 and 1967.

18 For monitoring data, the people we
19 interviewed mentioned that they had bioassay
20 samples. However, we have not located any, nor
21 have we located any contamination surveys. We
22 have air sample results available from uranium

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1 work in 1959 and 1961, and we have air samples
2 from plutonium work in 1961 also. And the
3 plutonium air samples, I believe they are from
4 the month after the operation started and,
5 then, again a few months later.

6 We have not identified any external
7 dosimetry data or dosimetry records for
8 individuals.

9 The uranium general air dust samples
10 were taken in November 1959 and April 1961.
11 Some of the results are illegible in the
12 records, but we have nine legible results. All
13 nine of those results have positive values
14 recorded.

15 The highest result was 60 dpm per
16 cubic meter from the furnace room, and these
17 descriptions included the furnace room, just
18 basically a general description of where the
19 sample was taken and what was being done.

20 This is a fairly low result, but we
21 believe that it is attributable to the controls
22 that were in place in the facility. They

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1 worked in glove boxes. It was controlled
2 atmospheres in much of the work. It was a
3 fairly well-contained operation, according to
4 the records we have.

5 For the plutonium work, we have 16
6 air samples from in June and April of 1961.
7 Six were breathing zone samples. Three of
8 those were positive. The highest was .76 dpm
9 per sample. We also have 10 general area
10 samples. The highest was 22 dpm per sample.
11 These air sample results are from HASL, Health
12 and Safety Laboratory, reports. Some of these
13 results were reported, between the uranium and
14 plutonium, some of the results reported dpm per
15 cubic meter and others reported in dpm per
16 sample. The ones that reported per sample, we
17 also have the flow rate of air sampler as well
18 as the time. So, we easily can convert that to
19 dpm per cubic meter for concentration.

20 We analyzed that to use it to
21 estimate intakes to workers from the uranium
22 work and plutonium work. For the uranium work,

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1 we have general area samples only and we have
2 analyzed that data, and we are assuming that
3 the 95th percentile of that data represents the
4 air exposed to by support workers. And for an
5 operator, we would double that value. This is
6 consistent with ratios provided in TBD-6000.

7 For the plutonium work, the air
8 samples were categorized as both general area
9 and breathing zone. Actually, if we combine
10 those all together, we have a distribution that
11 is favorable. That was a small plutonium area,
12 and some of those general air samples are
13 actually higher than the BZ samples. I believe
14 that could be attributed to the fact that it
15 was a smaller area and some of those samples
16 indicate they were placed in locations that
17 would be similar to a person's breathing zone.
18 And it is more favorable to consider all data
19 together in this case.

20 For the external dose, TBD-6000 is
21 assumed to bound the dose from uranium. We
22 used a graded approach for the different worker

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1 categories, similar to what we have in other
2 sites.

3 We do not believe neutron doses are
4 applicable to the uranium carbide, nitrogen,
5 and silicon compounds being worked, but we do
6 take the photon and electron doses from
7 TBD-6000.

8 This area of work is consistent with
9 the same timeframes of TBD-6000 work. As
10 further justification, we do believe that these
11 doses would be bounding because the work at
12 Carborundum did not involve large amounts of
13 material. Compared to the large production
14 facilities, it was a smaller source term.

15 We also estimate dose from residual
16 contamination after the end of the work. The
17 uranium workers, their concentrations that we
18 have derived from their sample data, as used in
19 methods in TBD-6000, as I mentioned earlier,
20 from the first period, we used the methods
21 specified in that document for settling and the
22 subsequent resuspension per the OTIB-70 methods

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1 and default factors. As well, the external
2 doses from contamination is estimated from that
3 containment level as well.

4 That summarizes the methods. I
5 would like to mention that we did not get
6 example dose reconstructions to the Board prior
7 to this presentation. We had some changes to
8 make from previous methods we had used in dose
9 reconstructions. Our research has indicated
10 that we had some more information available,
11 and we have also had comments from the Dose
12 Reconstruction Subcommittee on a Carborundum
13 dose reconstruction which identified the -- I
14 think my slide may be missing something.

15 The external doses from the
16 plutonium and uranium work, we have modeled
17 from -- I mentioned we used the uranium
18 TBD-6000 doses for that work. The plutonium
19 work, the external doses from that comes from
20 MCNPX modeling. We had modeled this
21 previously, and SC&A had reviewed our methods
22 for that MCNPX model for the external doses for

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1 plutonium work. And they had some comments on
2 that. ORAU has been working on that model, and
3 they revised those calculations, taking more
4 information into consideration. And so, we
5 have been working on that.

6 We also had some other changes due
7 to the information in the earlier period that I
8 discussed that is different from what was
9 originally listed. And so, our methods have
10 been revised. I had some comments on the first
11 draft of those that we got a week or so ago,
12 and I believe ORAU has got those addressed and
13 they just transferred them to us today or
14 yesterday. I believe Bomber has asked those to
15 be transferred to those Board's folder. And I
16 am sorry we don't have those available, but we
17 are trying to get the MCNPX work revision
18 incorporated into those.

19 Are there any questions?

20 The last slide is that we believe we
21 can reconstruct both internal and external
22 doses.

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1 CHAIRMAN MELIUS: Two things I want
2 to say. One is, for those of you that are on
3 the line -- I believe the petitioners are --
4 but our procedure is the Board Members will ask
5 questions to Tom and NIOSH, about the report.
6 And then, we will, after that period is over,
7 then we will give the petitioners an
8 opportunity to make comments, if they wish to.

9 I just want to understand this
10 correctly. This report is incomplete or about
11 to undergo revision?

12 MR. TOMES: No, the report is
13 complete. What we did not get to you is the
14 example DRs, the sample DRs.

15 CHAIRMAN MELIUS: Because the method
16 is being changed, is what I heard you say?

17 MR. TOMES: No, the methods
18 specified in the ER are the methods I presented
19 here. However, to take those methods and to
20 convert those into a dose reconstruction
21 required some work.

22 CHAIRMAN MELIUS: Okay. So, it is

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1 being changed.

2 But No. 2 is the covered period is
3 being changed also?

4 MR. TOMES: Yes.

5 CHAIRMAN MELIUS: And do we have a
6 timetable on that?

7 MR. TOMES: The change, we have
8 received a notice from both the Department of
9 Energy and the Department of Labor on that
10 change, and it is effective -- I don't know; it
11 has not gone out in the Register, but we have
12 received it. That change is being made now.

13 MR. HINNEFELD: We have received
14 letters from both DOE and DOL that concur with
15 our proposed cover period, which is -- what? --
16 June to September of 1943. And the listing,
17 DOE who has the database, the defined
18 facilities database, that will be updated very
19 shortly. I am not exactly sure of the date,
20 but it will be.

21 CHAIRMAN MELIUS: Oh, okay.

22 MR. HINNEFELD: So, in our mind, the

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1 change is effective. They both have concurred
2 with it.

3 CHAIRMAN MELIUS: But the
4 definition, what you reviewed or --

5 MR. HINNEFELD: Well, we reviewed
6 what was proposed, what was petitioned, and
7 what the description was when we prepared the
8 Evaluation Report. The change in covered
9 period to 1943 occurred this week. We got the
10 correspondence this week.

11 MR. TOMES: I would note that we did
12 not contact DOE or DOL about our results. We
13 actually through the process of going through
14 all of the records and obtaining information.
15 And our report reflects the records we have.
16 After review by DOE -- they reviewed our
17 records and provided no additional records to
18 support the 1944 work.

19 CHAIRMAN MELIUS: I just wanted to
20 try to understand what we were reviewing here
21 and what we have received in the last 48 hours
22 that we weren't told about. But that's okay.

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1 Questions? Paul, I believe you were
2 first. Or, Josie, okay.

3 MEMBER BEACH: I really have more of
4 a comment than a question. It just so happens
5 one of our blind reviews was for this site.
6 The review was for the full time period. There
7 were six actual findings, which is a little
8 unusual because it is the highest amount of
9 findings in one of our reviews that I have come
10 across. Four of them were high. One of them
11 takes into account the surrogate data, which
12 there is a question on.

13 So, this is an interesting site. We
14 don't generally have two periods with two
15 residual periods. So, I would recommend that
16 this be looked at further with a Work Group.

17 I also believe there is no Site
18 Profile with this.

19 So, anyway, those are just some of
20 my comments.

21 CHAIRMAN MELIUS: Paul?

22 MEMBER ZIEMER: My first question

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1 has to do with the first residual period. If I
2 understood correctly, there was not any cleanup
3 after that initial work or was there?

4 MR. TOMES: We have no information
5 at all on that.

6 MEMBER ZIEMER: So, you're assuming
7 no cleanup?

8 MR. TOMES: Yes. Yes.

9 MEMBER ZIEMER: I was looking for
10 the actual value used for the depletion rate or
11 the change in air concentrations. We are using
12 the ten to the minus fifth?

13 MR. TOMES: We did, yes.

14 MEMBER ZIEMER: Yes. Okay. Thank
15 you.

16 My second question had to do with
17 x-ray defraction. I think in the paper you
18 talked about using some methodology developed
19 by Lubenau because x-ray defraction units in
20 this time period were typically not well-
21 shielded or they were shielded on an ad hoc
22 basis, I believe.

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1 Has the methodology was used been
2 reviewed at all? Has SC&A reviewed that as
3 well?

4 MR. TOMES: I don't know if SC&A has
5 or not. This was based, I believe, on some
6 work done for Sandia.

7 MEMBER ZIEMER: Mm-hmm. Well, I
8 just know from experience the early defraction
9 units were problematic in terms of exposures.
10 And none of these folks had finger badges or
11 anything, right, as far as we know?

12 MR. TOMES: Well, according to some
13 records we have, one reference indicated
14 that -- one of the AEC reviews I read
15 recommended that they maybe should finger
16 badges on them, but that is the only reference
17 I have seen to that.

18 MEMBER ZIEMER: Okay. Well, my main
19 issue was simply if we have any sort of review
20 of Lubenau's -- I think it was Lubenau that --

21 MR. TOMES: I can't recall the name.
22 Sorry.

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1 MEMBER ZIEMER: -- that had done
2 some studies on that type of X-ray looking at
3 scatter, and so on. I just wondered if it had
4 been reviewed independently to see how well it
5 might apply here.

6 I think I agree with Josie, we need
7 to have this looked at.

8 CHAIRMAN MELIUS: Henry?

9 MEMBER ANDERSON: Yes, our case
10 review was kind of serendipitous to have it
11 come out at the same time and, then, have
12 different issues raised. I think it would be
13 worthwhile reviewing those comments and that
14 specific case review at the same time as going
15 over this.

16 But my question to you is on the
17 actual measurements used versus the TBD-6000.
18 I think there was some mention in Subpart R,
19 and I don't recall it. Have you ever looked at
20 that? Okay. So, there's other parts of 6000
21 that seem to have been involved here.

22 But my real question to you is

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1 you're saying it is of the same time period.
2 But usually when we use a surrogate, it is the
3 same time period, but it is at the time we are
4 attributing or the surrogate data we are using
5 is for subsequent rather than pre-time. It
6 seems here this is really startup. Yes, they
7 tried all sorts of different or several
8 different grinding materials. We don't know.
9 Did it just grind it down to -- did it not
10 grind it at all and create more fume than it
11 did dust?

12 So, there are lots of kind of
13 startup issues. I am not sure that TBD-6000,
14 where you are using data that you've got an
15 operation, it is running, and they are doing
16 measurements. So, it is somewhat of a steady-
17 state, where here it could have been somewhat
18 different. I am just curious as, do you have
19 any information to suggest that, in fact, it
20 was truly comparable to the subsequent 6000
21 data we are using?

22 MR. TOMES: Well, we have no air

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1 samples to compare. So, from that respect, no.
2 But it is based on the fact that the centerless
3 grinding in TBD-6000, I believe it is 5480 dpm
4 per cubic meter is the value in TBD-6000, a
5 pretty high air concentration. And that is
6 based on grinding. We know that that produces
7 a very high air concentration at other sites.
8 We assume they had no ventilation at
9 Carborundum.

10 And you make a point that we don't
11 know precisely what the differences could be.
12 Because, like you mentioned, some of these did
13 not ground, just made dust. We also know that
14 they have said that some of these abrasives
15 just would not grind.

16 But we do have a little bit of
17 details on the grinding work. Once they
18 determined what would work, they mentioned they
19 did so many passes and taking off like .002
20 inches per patch or something.

21 MEMBER ANDERSON: Yes. I'm just
22 concerned. As you say, the grinding was a

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1 process that created relatively-high exposure.
2 My concern is, might this operation, when they
3 were kind of experimenting and going on,
4 resulted in even higher values that we are not
5 really accounting for here?

6 MR. TOMES: I think --

7 MEMBER ANDERSON: And you're
8 confident that your bounding is high rather
9 than --

10 MR. TOMES: I think, from my
11 personal point of view, it is I think
12 instantaneously you could have had higher
13 concentrations there or any site because your
14 air sample result is an average over the time
15 the sample ran out. And so, I say, yes, you
16 could have an instantaneous concentration
17 higher than what we are using. But I do
18 believe that it should be bounding on average
19 concentration for the work they did.

20 MEMBER ANDERSON: Okay.

21 CHAIRMAN MELIUS: Any other Board
22 Members? Phil? And then, Bill. Phil was

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1 first. Yes, sorry.

2 MEMBER SCHOFIELD: Using TBD-6000,
3 do you have another facility? I assume this is
4 natural uranium they were working with?

5 MR. TOMES: Yes.

6 MEMBER SCHOFIELD: And centerless
7 grinding is a common procedure in any metal
8 industry. Did they ever take any kind of
9 measurements as far as breathing zones or
10 anything that you are aware of?

11 MR. TOMES: Carborundum?

12 MEMBER SCHOFIELD: Yes.

13 MR. TOMES: Not that I'm aware of,
14 no.

15 MEMBER SCHOFIELD: Okay.

16 CHAIRMAN MELIUS: Now Bill. Sorry.

17 MEMBER FIELD: On your page it talks
18 about previous dose reconstructions, up toward
19 the top. You have cases submitted, 106 that
20 met the criteria for the evaluation period. Do
21 you know how many of those were from the first
22 period versus the second? I'm just curious.

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1 MR. TOMES: No, I don't. I do
2 believe I had looked at that, but I don't
3 recall.

4 MEMBER FIELD: And it sounds like
5 you don't really have any idea how many people
6 were potentially exposed for either period?

7 MR. TOMES: Well, the total number
8 of people, no. We do know that most of the
9 work was plutonium work. One of the
10 interviewees said that he worked in there by
11 himself doing the work.

12 MEMBER FIELD: Yes, that's what I am
13 trying to figure out, the 106.

14 MR. TOMES: Well, I don't believe
15 that means that they all worked on that
16 material.

17 MEMBER FIELD: Yes. Right.

18 MR. TOMES: It was just --

19 MEMBER FIELD: It just seems like it
20 needs further investigation.

21 MR. TOMES: I was looking.

22 CHAIRMAN MELIUS: Yes, yes, yes.

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1 Board Members on the call, do you
2 have any questions for Tom?

3 MEMBER KOTELCHUCK: Yes, I do.
4 Dave.

5 CHAIRMAN MELIUS: Okay, Dave, go
6 ahead.

7 MEMBER KOTELCHUCK: I have a lot of
8 concerns about the second AWE period. It
9 appears that you are using, you said you are
10 using the TBD-6000 for the machining. But what
11 you describe of the work in the second period
12 seems to me to go far beyond.

13 First, there was a lot of glove box
14 work. They were mixing powders and ball
15 milling in the plutonium. With the uranium,
16 they were cold pressed. It just doesn't sound
17 like machining was the central part of what
18 they were doing. This is for the second part.
19 I, therefore, find the use of TBD-6000 for
20 machining doesn't seem appropriate to me for
21 the kind of work that was being done, which is
22 experimental and much more mixed. That

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1 concerns me.

2 Tom?

3 MR. TOMES: Yes?

4 MEMBER KOTELCHUCK: What is your
5 thought?

6 MR. TOMES: I understand. I
7 understand your question. I asked the same
8 question myself. And there is no clear answer
9 to that. I anticipated there would be some
10 debate on this.

11 MR. HINNEFELD: This is Stu
12 Hinnefeld, if I can offer something.

13 The TBD-6000 proposal is for the
14 uranium work --

15 MR. TOMES: Yes.

16 MR. HINNEFELD: -- in the forties.
17 We have a certain amount of air-sampling data.
18 For the uranium-plutonium work, we have a
19 certain amount of air-sampling data. So, it is
20 just the external dose issue that we might be
21 using TBD-6000 for in the later years, right?

22 MR. TOMES: Well, the first two

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1 years in the second period were uranium work
2 only, and we are referring to TBD-6000 for
3 those external doses.

4 MR. HINNEFELD: Okay.

5 MEMBER KOTELCHUCK: If I may say
6 that the dust samples, the air samples with the
7 dust certainly make it a reasonable judgment on
8 the internal exposure. I am worried about the
9 external exposure. There were lots of
10 different kinds of things being done. And you
11 just say, well, machining. And the uranium and
12 plutonium appear to me to have been done
13 simultaneously, in many cases the UPu carbide.

14 So, I am worried that the external
15 exposure in the second period is just not well-
16 characterized. It is not well-described by
17 TBD-6000.

18 And I have to say I have a sense
19 that this was done in a restricted facility,
20 building 1 on one or two floors. If the
21 TBD-6000 is not appropriate, then is there some
22 reasonable thought about saying people who work

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1 just in that part of the facility we cannot
2 adequately describe the exposure, particularly
3 with respect to external?

4 MR. TOMES: Well, I would like to
5 refer back to what Stu just mentioned. We did,
6 for all the plutonium work which involved the
7 mixture of plutonium and uranium, we are not
8 using TBD-6000 for any of those doses. The
9 external doses for that work is being modeled
10 by MCNPX, which we --

11 MEMBER KOTELCHUCK: Excuse me. That
12 last thing, I didn't hear you.

13 MR. TOMES: We used MCNPX to model
14 external doses in the glove box work for the
15 plutonium-uranium mixture. And that we are
16 assuming for 1961 through 1967. Those were
17 some of the doses that was commented on in the
18 dose reconstruction review that we have been
19 looking at. We modeled that exposure for
20 photons, electrons, and neutrons.

21 MEMBER KOTELCHUCK: Okay. I would
22 like to look at that again. We will probably

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1 have a chance to look a little bit more at
2 this. I would like to look at that then.

3 MR. TOMES: Okay.

4 MEMBER KOTELCHUCK: Thank you.

5 CHAIRMAN MELIUS: Okay. Thank you,
6 Dave.

7 Any other Board Members have
8 questions? I mean, I think everybody has lots
9 of them, but that they feel they need to ask
10 now.

11 (No response.)

12 Okay. Let's give the petitioners,
13 if they wish to make comments, you are welcome
14 to do so. You need to identify yourself if you
15 are going to make comments.

16 MR. KIFER: Yes. I am Robert Kifer.

17 CHAIRMAN MELIUS: Okay.

18 MR. KIFER: I would like to make a
19 comment --

20 CHAIRMAN MELIUS: Yes.

21 MR. KIFER: -- and ask some
22 questions.

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1 CHAIRMAN MELIUS: All right. Well,
2 we are taking comments. I don't think
3 questions, we are not going to go back and
4 forth on a series of questions. But you are
5 welcome to make comments.

6 MR. KIFER: Okay, I'll make
7 comments.

8 I would like to know, in these
9 papers we got, when it says that my dad was
10 calculated at 41.59 percent of -- he had lung
11 cancer. He was exposed to radiation. Now I'm
12 not satisfied with NIOSH's, you know, how they
13 found the dose. It sounds to me like nobody
14 knows; they're not sure. They think it's, you
15 know, not finalized or anything.

16 And one thing I want to say, too,
17 that he had the three top cancers. He had
18 lung, bone, and liver, and that was the three
19 top ones for that type of work.

20 Actually, he worked there, he
21 started there in '35. So, he worked for quite
22 a few years there. To me, there don't seem

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1 like there's any proof that it should be put
2 into SEC.

3 CHAIRMAN MELIUS: Well, okay. Thank
4 you.

5 Is there another petitioner that
6 would like to make comments?

7 (No response.)

8 If not --

9 MR. KIFER: She's not on?

10 CHAIRMAN MELIUS: I don't hear
11 anybody.

12 MR. KIFER: Okay, my sister --

13 MS. KNAPP: Now can you hear me?
14 Can you hear me now?

15 CHAIRMAN MELIUS: Yes, not well, but
16 try to speak up.

17 MS. KNAPP: Okay. All right.

18 CHAIRMAN MELIUS: That's better,
19 yes.

20 MS. KNAPP: Okay. Yes, I just have
21 the same things to kind of say that my brother
22 said, but, also, like when my father would come

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1 home, he would have a terrible odor and his
2 clothes would have to be taken off and my mom
3 washed them all the time. And she also
4 contracted cancer. We don't know if that has
5 anything to do with it.

6 So, right now, it sounds like you
7 still have a lot of things to go over with
8 Carborundum Company, correct?

9 CHAIRMAN MELIUS: Correct.

10 MS. KNAPP: Okay.

11 CHAIRMAN MELIUS: And that may
12 change, could change the dose reconstruction
13 and the outcome of that.

14 MS. KNAPP: Right. Okay.

15 CHAIRMAN MELIUS: Okay. Thank you.

16 MS. KNAPP: Okay. Thank you.

17 CHAIRMAN MELIUS: Yes.

18 Board Members, do we have a
19 recommendation?

20 MEMBER BEACH: Yes, I will make a
21 recommendation that we move this to a Work
22 Group for review -- Paul.

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1 (Laughter.)

2 MEMBER ZIEMER: Yes. Is there an
3 appendix for this at all? I don't recall for
4 Carborundum. And it is not 100 percent
5 TBD-6000, is it? Is it more than 50 percent
6 TBD-6000?

7 (Laughter.)

8 MEMBER ANDERSON: All of the uranium
9 estimates are TBD-6000, I think. Even in the
10 second period, the estimates, the external
11 estimates are all using 6000 for uranium, not
12 the plutonium.

13 CHAIRMAN MELIUS: To be fair to Paul
14 and his Work Group, I think it is a question of
15 does it make sense in terms of workload, and so
16 forth, to take this on.

17 MEMBER ZIEMER: Currently, we have
18 GSI issues we are still dealing with, also
19 Joslyn, and there is a third one.

20 CHAIRMAN MELIUS: But, I mean, I
21 would be open to a separate Work Group. We
22 might want to overlap a little bit with

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1 TBD-6000 Work Group to get some continuity on
2 that, but I am not sure that is even necessary.

3 What we could do is we could task
4 SC&A to review, but let's set up a separate
5 Work Group. There were lots of volunteers the
6 last time we sort of redid some of our Work
7 Groups a couple of months ago. We only had to
8 break a few arms to get people involved.

9 So, if everyone will think about
10 that, we will do that. We will set up the Work
11 Group. We will get that appointed. And sort
12 of in parallel, we will have SC&A doing their
13 review.

14 Okay. I don't think we need a
15 formal motion to do that.

16 MEMBER KOTELCHUCK: That sounds
17 good.

18 MEMBER ANDERSON: Some from TBD-6000
19 ought to be on it just so we don't get
20 conflicting uses.

21 CHAIRMAN MELIUS: Absolutely. Yes.
22 No, I agree.

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1 Yes, for the petitioners online,
2 what we are doing is we are deferring any
3 action on this Evaluation Report. We are going
4 to set up, essentially, it is a Subcommittee,
5 what we call a Work Group of the Board. They
6 will do their review. You will be informed of
7 those Work Group meetings and what's going on
8 there and all the documents that are developed,
9 and so forth.

10 We also have a contractor that is
11 independent of NIOSH that will be reviewing the
12 entire report and reporting back to the Work
13 Group and, then, to the Board.

14 But you will be kept involved to the
15 extent that you want to and certainly informed
16 on what's going on with that effort.

17 MS. KNAPP: Okay.

18 CHAIRMAN MELIUS: Yes. I would add
19 -- this is for NIOSH -- I really found this
20 report to be extremely hard to follow when it
21 got to the end in terms of exactly what was
22 being done. Maybe it was the issue on the

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1 individual dose reconstruction, you know, the
2 sample dose reconstruction.

3 But there are also surrogate data
4 issues here. Although Tom addressed some of
5 them in passing, they really weren't addressed
6 very coherently or formally in the report or
7 presentation. I think that would have helped
8 to sort through this. I am not sure it would
9 change what action we took today, but certainly
10 in terms of understanding a report, and so
11 forth. I confess I read this twice on my way
12 out here on the airplane and, then, gave up and
13 watched the movie instead.

14 (Laughter.)

15 MEMBER ANDERSON: It was hard
16 because there are two periods and different
17 processes.

18 CHAIRMAN MELIUS: Yes, and then, it
19 kept referring back to other procedures. So,
20 you never could get a handle on exactly what
21 was being done.

22 MEMBER ANDERSON: In all fairness,

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1 it wasn't as simple --

2 CHAIRMAN MELIUS: It was not a
3 simple, yes --

4 MEMBER ANDERSON: -- as it first
5 appeared.

6 CHAIRMAN MELIUS: Right, right.
7 Yes. Exactly.

8 But, again, just for future
9 reference, it would have been helpful. Good.

10 We have time going forward that we
11 are scheduled for our lunch break at 12:30.
12 So, I was going to suggest we try to get a few
13 of the Work Group reports out of the way,
14 updates. And then, we will break by 12:30. We
15 have an hour-and-a-half for lunch. Come back
16 at 2:00.

17 I would advise you to get back early
18 because, whenever LaVon gives a presentation,
19 there is usually large crowd that comes in and
20 seats may be tight to come in, you know. So,
21 we will be aware of that.

22 But let's try to do a few of the

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1 reports.

2 I would also, again, remind
3 everybody we will do this after lunch, after
4 LaVon's, we have the public comments, which you
5 received, we will go over. And we also have
6 some dates for future meetings or time periods
7 for future meetings. And so, if you can look
8 at your calendar, or whatever you need to do,
9 and that goes for the people on the phone also
10 when we address that, which we will probably do
11 right after LaVon's presentation. So, a little
12 after 2:15 or so, then we are ready to get that
13 issue addressed and try to schedule a meeting.

14 So, why don't we start with the
15 Subcommittees since we usually leave them until
16 the end, for a change? Dave Kotelchuck, can
17 you give a report on your Subcommittee?

18 MEMBER KOTELCHUCK: Sure. Let me
19 give a report on the Dose Reconstruction
20 Subcommittee.

21 As I mentioned earlier -- well, let
22 me first give background. As of our April

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1 meeting, the SC&A has been assigned 14 blind
2 cases. Two of them were in the first contract
3 period. At that point, they did not do a PoC.
4 That has since changed, at our request from our
5 latest meeting, our June meeting.

6 But, following that, we looked --
7 they got six blinds -- can you hear me okay?

8 MR. KATZ: Yes, Dave, you're very
9 clear.

10 MEMBER KOTELCHUCK: Okay. They have
11 six blinds from Set 17 and six blinds assigned
12 from Set 20. At our June 24th meeting, we went
13 through all six of Set 17. We actually started
14 with the Allied Chemical Phosphate Plant in
15 Florida, which was a case where there was a
16 disagreement that one was above 50 percent and
17 the other was below. And so, there was a
18 disagreement in outcome, potential outcome, and
19 we spent a lot of time on that.

20 Eventually, what we came to agree on
21 was that the NIOSH/ORAU folks had followed the
22 existing rules at that time and their results

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1 were correct. And so, although there was
2 initially a disagreement, in fact, the NIOSH
3 one was appropriate, and the SC&A folks agreed
4 on that. So, that was the only one where there
5 was potential disagreement -- hold it just one
6 second, please -- potential disagreement.

7 All the others, the SC&A and NIOSH
8 had similar PoCs; that is to say, above or
9 below 50 percent. We did Rocky Flats. There
10 was a Rocky Flats one. There was a difference
11 in the extent of the PoC, even though they were
12 both below 50 percent. And when we looked at
13 the difference, again NIOSH was correct in that
14 the NIOSH people knew of, I think, if I'm not
15 mistaken, it was occupational medical dose that
16 was at issue, and the NIOSH people had data
17 that showed that they assessed that correctly.
18 So, there was agreement in the end, and the
19 agreement was that the original dose
20 reconstruction was the correct one.

21 Three through six, the remaining
22 ones for Hanford and Grand Junction, X-10, SRS,

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1 and Fernald, the remaining four -- excuse me --
2 there was good agreement. All of them, the
3 Subcommittee agreed were remarkably close and
4 very good.

5 And then, at the latter part of the
6 meeting, we went through the first three blind
7 cases of Set 20. There was agreement on all
8 three of those by both groups and the
9 Subcommittee, the NCS, Y-12, and Brookhaven.

10 So, we reviewed nine cases, and
11 there was agreement in all of the cases in
12 terms of the PoCs being close together. And
13 the two where there were differences, the NIOSH
14 people had followed the proper procedures, when
15 the conditions in the field were explained to
16 the SC&A folks.

17 So now, since then -- well, we will
18 have another meeting soon to discuss the other
19 three in Set 20 -- but, in addition, we tasked
20 SC&A to take a look at the first two blind
21 cases they looked at during their first
22 contract period. We received a review of that.

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1 One of the two, there is clearly a
2 disagreement between SC&A and NIOSH, and we
3 will resolve that or talk about that at our
4 next meeting. And one was in agreement.

5 I don't know the Subcommittee
6 members received the review of the 14 blind
7 cases as of this moment on the internet. I
8 don't know if all of the members received it.
9 I don't believe they did. It's possible we
10 could show it.

11 But, basically, we are coming along
12 and we are really focused on the blind dose
13 reconstructions, and we are quite satisfied
14 with the level of agreement there. And this is
15 hopeful.

16 So, that is my report.

17 CHAIRMAN MELIUS: Questions for Dave
18 on his report?

19 I have one question. Where are we
20 with our report to the Secretary?

21 MEMBER KOTELCHUCK: I don't know.
22 The Committee has not discussed that as a

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1 Committee. However, Ted has been discussing
2 with some of the SC&A people and requesting
3 different data, and we have got a number of
4 tables that they printed out for us, a large
5 number of tables which will be useful for that.

6 So, let me retract saying I don't
7 know and say that it is in a preliminary state.
8 The data is being collected for that. The
9 Subcommittee has not looked at that as a group,
10 and we will be able to look at it, I believe,
11 after we finish the last three blinds or last
12 four blinds at our next meeting.

13 MR. KATZ: Right. Just to clarify,
14 I guess, for what you just said, Dr.
15 Kotelchuck. So, yes, SC&A was tasked with
16 producing data needed for that report. The
17 Subcommittee hasn't had a chance to review
18 that.

19 Just to clarify what my role was,
20 when I saw that, I just thought about some
21 other things that I thought might be useful
22 analyses related to ones they had already done

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1 to supplement what SC&A has already delivered.
2 And I think they are probably working on that.
3 Those are very quick. They are not hard to do
4 these tabulations in effect.

5 MEMBER KOTELCHUCK: Right.

6 MR. KATZ: And I think the
7 Subcommittee also decided sort of a general
8 scheme for how they would start writing this
9 report, too, right, Dr. Kotelchuck?

10 MEMBER KOTELCHUCK: Right.

11 MR. KATZ: Yes. Okay.

12 CHAIRMAN MELIUS: Okay. Because I
13 think it is important that we make progress on
14 that and that we keep this -- and after
15 chastising NIOSH and SC&A for not getting
16 reports done on time, I think we ought to keep
17 our own report moving along also, if we can.

18 MEMBER KOTELCHUCK: Right.

19 CHAIRMAN MELIUS: So, at the next
20 meeting --

21 MEMBER KOTELCHUCK: Let me ask you,
22 as Chair, I don't have a sense of what date you

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1 expect or would like to have completion. And
2 please don't tell me yesterday.

3 (Laughter.)

4 CHAIRMAN MELIUS: Tomorrow.

5 MEMBER KOTELCHUCK: Right.
6 Tomorrow, okay.

7 (Laughter.)

8 We thought that the blind reviews
9 were a central part of the reporting back. And
10 so, we are going to complete this.

11 CHAIRMAN MELIUS: Yes, I would think
12 for your next meeting to have a pretty good
13 outline together, and presuming you finish up
14 the blind reviews, that you would be ready to
15 go and report back, and that at least we have a
16 pretty good outline of the report for our next
17 Board meeting --

18 MEMBER KOTELCHUCK: Sounds good.

19 CHAIRMAN MELIUS: -- if not sooner,
20 and be able to do that.

21 Given our previous experience, it
22 took us a while -- and I think it was several

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1 meetings -- to get the Board to agree on a
2 report. Now that was the first one, and maybe
3 we are sort of starting from scratch. This one
4 has sort of the benefit of the last one, but I
5 think it is important. It should be a
6 priority.

7 MEMBER KOTELCHUCK: Yes.

8 CHAIRMAN MELIUS: And so, being
9 ready for some good discussion --

10 MEMBER KOTELCHUCK: Right, and we
11 will be active on it.

12 CHAIRMAN MELIUS: Okay. Thank you.

13 MEMBER KOTELCHUCK: Thanks.

14 CHAIRMAN MELIUS: Paul?

15 MEMBER ZIEMER: I can't help but add
16 a comment. Most of you know this is one of the
17 bugs in my bonnet. We have had one report of
18 this type to the Secretary in what is now close
19 to 15 years on what is one of our two primary
20 tasks of this Board.

21 I actually have been giving some
22 thought to accelerating not just this next

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1 report. I firmly believe that we owe the
2 Secretary an annual report on this. We may be
3 making too much of sort of how conclusive each
4 report has to be.

5 It seems to me, once we get this
6 second report in, maybe in a year, maybe it is
7 biennial -- I don't know -- but it is certainly
8 more than twice in 15 years that we tell the
9 Secretary what has happened since the last
10 report. If nothing has changed, we tell her
11 that. If there are issues that have arisen, we
12 let her know that.

13 It seems to me we owe more than
14 these very, very occasional reports. I know
15 the Secretary is not screaming for them, but,
16 you know, it seems to me we have an obligation
17 to do more. I just would like us to give some
18 thought. I am not proposing it, but why not do
19 an annual report just to let her know that we
20 are still paying attention to this? That is
21 almost rhetorical, but think about it.

22 MEMBER ANDERSON: I nominate Paul.

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1 (Laughter.)

2 MEMBER ZIEMER: Well, I will be glad
3 to do that at some point if --

4 MEMBER ANDERSON: Refer it to
5 TBD-6000.

6 (Laughter.)

7 MEMBER ZIEMER: No, I think we can
8 tell what we have done since the previous year.
9 Let her know that the Subcommittee is meeting
10 and the issues that they are addressing. It
11 can be a one- or two-pager, but just to report.
12 Think about it.

13 CHAIRMAN MELIUS: We definitely
14 should think about it, and we will definitely
15 do that, consider that as part of our
16 completion tasks for the second report. I am
17 hoping we don't issue too many annual reports
18 before we issue the second report.

19 (Laughter.)

20 Now we are giving away everything
21 after complaining about reports from NIOSH and
22 SC&A.

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1 Wanda, the Procedures Subcommittee.

2 MEMBER MUNN: This one is really
3 easy. I don't think anyone will argue about
4 it. There has been no change. We met last in
5 April, at which time we cleared a remarkable
6 number of items from our agenda and were very
7 pleased with ourselves at the time, but now
8 realize that, because of the kind of effort
9 that we have just been discussing here earlier
10 with respect to workload of all of the parties
11 involved, we really did not have the materials
12 ready for our next planned meeting, which is
13 coming up in just a few weeks.

14 We have decided to postpone that for
15 at least a month, and we probably will not meet
16 again until sometime in September. We have not
17 identified a date. We are waiting to see how
18 some of the material that we need to look at is
19 progressing along the way. But my current
20 expectation is late September for our next
21 meeting.

22 For those of you who have reviewed

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1 fully all of the material that we received for
2 this particular Board session, you will have
3 seen in the SC&A report any activity that has
4 occurred that you need to be aware of with
5 respect to what is happening with the
6 Procedures Subcommittee.

7 Very specifically, the wrap-up of
8 our total statistics put us back in the
9 approximately -- we have completed 84.2 percent
10 of the 713 individual findings that we have
11 addressed over the period of our activities.
12 We have less than 8 percent of that number that
13 has not been specifically addressed by the
14 Subcommittee. If you incorporate the 4.2
15 percent of that which is currently under
16 discussion and in operation in our thinking
17 right now, there's 11.8 percent of the total
18 number still for us to clean up right now.

19 Of course, as you realize, given our
20 efforts with the PERs, we will have additional
21 findings that will be added to that 713 number.
22 But we will be doing those at, we hope,

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1 approximately the same rate.

2 At this time, no new information
3 from the last report, and we anticipate a
4 meeting in late September.

5 MR. KATZ: Right. And specifically,
6 just to add to what you just said, Wanda, we
7 have asked NIOSH and SC&A to work up agendas
8 for whittling down what is remaining of the
9 findings as well as any PERs that need to be
10 added to it, so that we have a proper agenda
11 for the next meeting and a schedule for that
12 that makes sense.

13 CHAIRMAN MELIUS: Okay. Thank you.

14 MEMBER MUNN: Thanks, Ted.

15 CHAIRMAN MELIUS: Thank you, Wanda.

16 MEMBER MUNN: Mm-hmm.

17 CHAIRMAN MELIUS: Why don't we break
18 for lunch? Back here for two o'clock for the
19 big presentation, and we will see everybody
20 then, I hope, and hear from everybody then,
21 too.

22 (Whereupon, the above-entitled

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1 matter went off the record at 12:26 p.m. and
2 resumed at 2:03 p.m.)

3 CHAIRMAN MELIUS: Welcome. Ted, you
4 have to do --

5 MR. KATZ: Yes, let me check and see
6 about Board Members online.

7 (Roll call.)

8 CHAIRMAN MELIUS: Now the moment we
9 have all been waiting for, LaVon Rutherford.

10 We don't say much about you in the
11 agenda here.

12 MR. RUTHERFORD: That's good. I
13 like it when --

14 CHAIRMAN MELIUS: It just says LaVon
15 Rutherford, NIOSH.

16 MR. RUTHERFORD: Yes. Well, I am
17 going to give the SEC update that I normally
18 give. My SEC update, it covers the SEC
19 summary. We go into what petitions are in a
20 qualification phase, petitions that are
21 currently under evaluation, and petitions that
22 are with the Advisory Board for review. We

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1 also talk about potential 8314s that could be
2 coming up.

3 As you can tell, my presentation, as
4 Stu's, has changed considerably with the new
5 format. And I noticed, after I looked at the
6 new format and after I looked at my
7 presentation, there is one error in here. And
8 this is going to be a test to make sure you
9 guys are listening. I'm going to come back to
10 this to see if you can tell me where the error
11 is.

12 (Laughter.)

13 No, actually, it says, in the
14 qualification process there's two -- there is
15 actually only one -- petition that is in the
16 qualification process right now.

17 So, we received 227 petitions; 139
18 of those qualified. We have three evaluations
19 in progress, 136 Class evaluations completed,
20 and we had nine petitions that are with the
21 Advisory Board in some phase. And I will get
22 into that in a minute.

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1 In the qualification phase, we do
2 have one petition, Rocky Flats' petition, that
3 petitioned for the 1984-to-2004 period. We
4 have issued a proposed finding on that.
5 However, we are waiting until that finalizes
6 before we move this from its current position.

7 Petitions under evaluation:

8 Lawrence Livermore National Lab, I
9 have an expected completion date of November
10 2015. This one, we have done three data
11 captures and it has been a slow process getting
12 documents out of the facility. So, right now,
13 we have a completion date of November, and I
14 hoping at least, you know, maybe part of that
15 we might be able to get through, but we haven't
16 received many of those documents to date. As
17 you can expect with Lawrence Livermore, there
18 is a lot of classified material to go through.
19 Some of that stuff, we just won't get out of
20 the facility. We will have to review it there.

21 Argonne National Lab West, we were
22 here yesterday doing interviews. There has

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1 been a lot of work going on with that. Dr.
2 Taulbee has been working a number of data
3 captures. Right now, we expect our completion
4 date of November 2015.

5 And then, we are back on Blockson
6 Chemical. This is a site that we had added in
7 SEC some time ago. We have qualified this
8 petition. This is for the residual period.
9 And we have an expected completion date of
10 October. So, we would be presenting that one
11 at the November meeting as well.

12 Currently under Board review, these
13 are three petition evaluations that have not
14 had an initial action by the Board at this
15 time. The Kansas City Plant, which we had
16 hoped might make it to this meeting, but,
17 apparently, it is going to move to the next
18 meeting, hopefully; Idaho National Lab, and
19 Carborundum, which was presented today.

20 And sites remaining with evaluation
21 periods awaiting action, these are sites that
22 the Board has taken action on these sites.

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1 However, there is a portion of the site that is
2 still or a portion of the petition period that
3 still needs to be acted on by the Board. And
4 these are in various phases. The Fernald site,
5 Los Alamos National Lab, Rocky Flats, Sandia,
6 Santa Susana, and Savannah River. I think a
7 lot of these will get some Work Group updates
8 later on today. So, I am not going to get into
9 much detail on where they stand, unless asked,
10 of course. That is potential 8314s.

11 Sandia National Lab, Albuquerque, I
12 don't expect this one will ever move forward
13 because right now the Department of Labor,
14 those claims that come in for that period, they
15 are including them with Los Alamos National
16 Lab. So, they are covered under that SEC.
17 However, if one does come forward, we will move
18 forward with that 8314.

19 Dayton Project Monsanto, this is a
20 site that they changed the facility designation
21 to a Department of Energy site. It is already
22 an SEC. However, there was an added nine-month

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1 period of operations when they were being
2 shifted from the Dayton Project to Mound. We
3 still have not received a claim that would fit
4 into that period that we could make that
5 modification, but when we do, we will move
6 forward.

7 Battelle King Avenue, this is a site
8 that we added a period up through sometime in
9 the early fifties. I can't remember the exact
10 date offhand. We have continued to do a lot of
11 work, data captures, requested additional
12 information from the site. And, ultimately, we
13 have come to the conclusion we are going to
14 have to add another Class for Battelle King
15 Avenue. So, this is an 8314 that we are moving
16 forward with, and we do expect to have it
17 completed for the November meeting.

18 And that's it. Questions?

19 CHAIRMAN MELIUS: That's it for
20 questions?

21 (Laughter.)

22 MR. RUTHERFORD: I gave you two

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1 seconds. There you go.

2 CHAIRMAN MELIUS: Board Members,
3 questions?

4 He's thorough, yes, brief; doesn't
5 throw out much room for questions.

6 (Laughter.)

7 Refers it all to the Work Groups.

8 MR. RUTHERFORD: I'll just be back
9 up to the microphone then.

10 CHAIRMAN MELIUS: That's right.
11 Anything you want to tell us now or you've said
12 it all?

13 MR. RUTHERFORD: I've said it all at
14 this point.

15 CHAIRMAN MELIUS: Any Board Members
16 on the phone have questions for LaVon?

17 MEMBER MUNN: None here.

18 MR. RUTHERFORD: All right, going
19 once, going twice --

20 CHAIRMAN MELIUS: Okay. It sort of
21 balances out some of the longer presentations.

22 Okay. The first thing we want to

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1 cover are the dates that Ted sent out to
2 everybody for a teleconference.

3 Ted, can you remind us of when --
4 the meeting is November when?

5 MR. KATZ: One second.

6 CHAIRMAN MELIUS: Why don't you
7 start with our next conference call?

8 MR. KATZ: Yes. Let me find that.
9 I've got these all listed somewhere.

10 CHAIRMAN MELIUS: I have September
11 22nd.

12 MR. KATZ: Okay, right. So,
13 September 22nd we have a teleconference.

14 And then, November 18th through 19th
15 we need to settle on a location, but that is a
16 full Board meeting.

17 CHAIRMAN MELIUS: Uh-hum.

18 MR. KATZ: November 18 through 19,
19 yes.

20 CHAIRMAN MELIUS: And I think our
21 guess at this time, that is probably a day-and-
22 a-half at least.

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1 MR. KATZ: Yes. Yes, it sounds it

2 --

3 CHAIRMAN MELIUS: Yes.

4 MR. KATZ: -- because we have a
5 couple of Work Groups that will be ripe by then

6 --

7 CHAIRMAN MELIUS: Yes.

8 MR. KATZ: -- for SECs.

9 CHAIRMAN MELIUS: And I expect that
10 Tim will be back, too.

11 MR. KATZ: Tim will always be with
12 us.

13 (Laughter.)

14 CHAIRMAN MELIUS: Be back, yes.

15 MR. KATZ: January 20th, we have a
16 teleconference.

17 And then, March 23rd through 25th --

18 MEMBER KOTELCHUCK: Could you speak
19 a little louder, please?

20 MR. KATZ: I'm sorry, what's the
21 question? Speak louder? Okay, sorry.

22 January 20th, a teleconference.

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1 And then, the next is March 23rd
2 through 25th, face-to-face, some portion of
3 that period. So, that takes us through March
4 of next year.

5 So, we can either talk about place
6 or dates first, whichever.

7 CHAIRMAN MELIUS: Let's do dates
8 first.

9 MR. KATZ: Yes. So, the next sort
10 of right time for a teleconference is the end
11 of May or early June. May 22nd or 29th
12 possibilities, weeks. We could push into June
13 otherwise.

14 MEMBER MUNN: I prefer the 22nd.

15 MR. KATZ: Say that again, Wanda?

16 MEMBER MUNN: I said I prefer the
17 22nd, that week.

18 MR. KATZ: Oh, the 29th you're
19 saying? You would prefer the 29th. Oh, the
20 22nd?

21 MEMBER MUNN: Yes, I said I would
22 prefer the 22nd, that week.

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1 MR. KATZ: Yes, it is the week of
2 the 22nd.

3 MEMBER MUNN: Yes, correct.

4 MR. KATZ: It is whatever day might
5 work that week.

6 CHAIRMAN MELIUS: Anybody have
7 conflicts or preferences, strong preferences?

8 MR. KATZ: So, for example, the
9 25th, if we want to stick to Wednesdays --
10 we've done a lot of Wednesday teleconferences
11 -- that would be the 25th, right? The 25th,
12 does that work for everybody?

13 MEMBER LOCKEY: What date was that
14 again, Ted?

15 MR. KATZ: I'm sorry. So, May 25th,
16 does that work for you?

17 Is that Jim Lockey?

18 MEMBER LOCKEY: Yes, it works for
19 me.

20 MR. KATZ: Okay. How about you,
21 John Poston?

22 MEMBER POSTON: It should.

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1 MR. KATZ: And everybody here is
2 good with that?

3 Okay, so let's say that, May 25th.
4 Okay?

5 And then, for face-to-face, the
6 right timing is around the week of July 18th or
7 July 25th.

8 MEMBER MUNN: I won't be available
9 the week of the 18th.

10 MEMBER POSTON: I'm supposed to be
11 somewhere at that time period, too.

12 MR. KATZ: How about the week of
13 July 25th?

14 MEMBER MUNN: Fine here.

15 MR. KATZ: Is it good all around the
16 room?

17 MEMBER POSTON: Ted, I don't know.
18 The Health Physics Society will be sometime in
19 July.

20 MR. KATZ: Sometime in July, is that
21 what he said?

22 MEMBER BEACH: We're in 2016, aren't

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1 we?

2 MEMBER POSTON: Yes. I'm trying to

3 --

4 MEMBER ROESSLER: Yes, the meeting,
5 the Health Physics meeting is the 17th through
6 the 21st of July.

7 MR. KATZ: Okay. So, that would be
8 the week before, John.

9 MEMBER POSTON: Okay.

10 MEMBER BEACH: Right.

11 MEMBER POSTON: That's fine.

12 MR. KATZ: So, do we want to pick
13 actual dates during that week? Do we like it
14 in the middle of the week? So, that would be,
15 say, the 27th through the 28th, maybe the 29th
16 if it were a big agenda. Is that okay?

17 MEMBER MUNN: Sure.

18 MR. KATZ: Okay. So, July 27th,
19 28th.

20 MEMBER LOCKEY: That's a Wednesday
21 and Thursday.

22 MR. KATZ: Exactly.

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1 MEMBER MUNN: Right.

2 MR. KATZ: Is that good for you,
3 Jim?

4 MEMBER LOCKEY: Sounds good.

5 MR. KATZ: Okay.

6 CHAIRMAN MELIUS: Okay. Let's go
7 back to location for the November meeting. Ted
8 has done some work on this with help from
9 LaVon.

10 MR. KATZ: Right. As LaVon
11 mentioned in his SEC update, there may be a
12 portion of Lawrence Livermore that they have
13 prepared, but they still have work ongoing at
14 Lawrence Livermore. I think Dr. Melius likes,
15 we all like to focus these on places where we
16 can also collect information that is still
17 needed for ongoing work.

18 MEMBER KOTELCHUCK: This is Dave.

19 Rocky Flats I will expect will have
20 a recommendation for November 18th-19th.

21 MR. KATZ: Right. Well, there's two
22 Work Groups that should be reporting out in

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1 November, Kansas City and Rocky Flats. We
2 expect both of those to be reporting out then.
3 So, there is that consideration. There you
4 really don't have more information to collect
5 at that point. But, indeed, that gives you an
6 audience for your presentations and actions.

7 Anyway, so Lawrence Livermore is one
8 possibility. Another possibility that LaVon
9 had suggested is Pinellas I believe should be
10 ripe for a new report. Is that correct?

11 MR. RUTHERFORD: We don't have an
12 SEC report, but we should be closing out the
13 TBD --

14 MR. KATZ: Right.

15 MR. RUTHERFORD: -- issues before
16 then. So, yes.

17 MR. KATZ: Right. Which is a big
18 issue --

19 MR. RUTHERFORD: Yes.

20 MR. KATZ: -- because they have been
21 working on it and they have had a hard issue to
22 deal with there for quite a long time. So,

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1 there is that as well.

2 CHAIRMAN MELIUS: My preference
3 recently is to use these meetings to try to get
4 more interest and more information that
5 clarifies certain issues that come up either
6 when we are about to take action or when we are
7 still working on trying to understand something
8 about a site, and so forth.

9 So, my personal preference would be
10 Livermore to do. I think we have been to
11 Denver a lot. The Work Group has done outreach
12 there. The same with Kansas City, the Work
13 Group has made the efforts to do outreach and
14 has done a lot for that site.

15 Pinellas is hard, we've gotten more
16 interest the last time we were down there. I
17 wish I believed, had confidence that we were
18 close. I'm just not quite sure what it would
19 help by doing it there, but let's keep it in
20 mind as we are going along here.

21 MR. KATZ: Other Board Members have
22 any thoughts, preferences?

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1 MEMBER ZIEMER: Are you talking
2 about actually meeting in Livermore,
3 logistically not an easy place to get to?

4 MR. KATZ: No, it wouldn't be in
5 Livermore, but it would be nearby. There's
6 actually Livermore and there's another site.
7 The California Dow site also, we would have a
8 report ready there or where would we be with
9 that?

10 MR. HINNEFELD: No. This is Stu.

11 If you will recall at the meeting
12 where we added the Dow California site, the
13 petitioner spoke and said that, up until that
14 time, it had been Dow Walnut Creek, when the
15 plant was actually in Pittsburg. And he said
16 perhaps you only have my one claim because
17 people hear about Walnut Creek, and it is a
18 completely different city than Pittsburg and
19 they don't associate to Pittsburg, the Dow
20 plant in Pittsburg with this work. And so, he
21 suggested some effort in that area. It is in
22 the same general facility. It is not like from

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1 my hometown to John Mellencamp's hometown.

2 (Laughter.)

3 But it is the same general -- they
4 were only 10 miles apart -- but it is the same
5 general facility in the Bay Area.

6 MR. KATZ: In the vicinity, you're
7 saying, anyway?

8 MR. HINNEFELD: It is in the Bay
9 Area vicinity. It is on the eastern side of
10 the Bay.

11 MR. KATZ: So, we could find a
12 location. We have done a meeting out there
13 before that was sort of a relatively-convenient
14 area many years ago.

15 CHAIRMAN MELIUS: But we have taken
16 action on Dow. So, Dow is really an outreach
17 effort.

18 MR. KATZ: Yes.

19 CHAIRMAN MELIUS: And maybe we can
20 do an outreach effort in conjunction with the
21 Board meeting.

22 MR. HINNEFELD: We can try that.

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1 CHAIRMAN MELIUS: Yes.

2 MR. HINNEFELD: We will be working
3 with our outreach contractor if we are in the
4 area --

5 CHAIRMAN MELIUS: Yes.

6 MR. HINNEFELD: -- and we can try to
7 work something up that way.

8 CHAIRMAN MELIUS: Err on the side of
9 -- so, the Livermore --

10 MR. KATZ: Right, right, in terms of
11 convenience, location.

12 CHAIRMAN MELIUS: Location. Who
13 knows where people live, too? I mean, it
14 really is determined by where people are
15 living, not where they work necessarily.

16 MR. HINNEFELD: And it is a general
17 area and it is a big general area.

18 CHAIRMAN MELIUS: Yes, yes.

19 MR. HINNEFELD: So, Livermore is --
20 what? -- an hour east of Los Angeles almost?

21 MR. KATZ: San Francisco.

22 CHAIRMAN MELIUS: San Francisco.

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1 MR. HINNEFELD: They're all the same
2 to me.

3 MEMBER POSTON: Oh, you are a long
4 way off.

5 (Laughter.)

6 CHAIRMAN MELIUS: Okay.

7 MR. KATZ: Okay.

8 CHAIRMAN MELIUS: We will let Ted
9 and company figure out the logistics.

10 MR. KATZ: Sure. So, if we can work
11 that out, we will set on that because it takes
12 a long time to get those logistics secured for
13 a place, particularly in an unusual place.

14 MEMBER POSTON: Just remember it is
15 a terrible place to get to, to get to Lawrence
16 Livermore Lab.

17 MR. KATZ: Right. We won't be in
18 Livermore, right. We won't be there. We would
19 just be somewhere where we hope we capture
20 where a lot of employees or retirees still
21 remain.

22 MEMBER ANDERSON: Go to Niagara

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1 Falls.

2 (Laughter.)

3 MR. KATZ: Yes, exactly.

4 MEMBER ANDERSON: Carborundum.

5 CHAIRMAN MELIUS: Or down to LA,
6 like Stu suggested.

7 Okay. Let's move on. I will go
8 through these. This is the public comments
9 from the last meeting that we had. So, you
10 should have a spreadsheet that has all of these
11 listed, and then, there is a separate document
12 that Ted sent out that has the transcripts
13 where, if you have questions or concerns about
14 this --

15 So, the first one, Mr. Vance spoke
16 with regard to Hanford and the 250-day
17 requirement. I think Stu did our traditional
18 explanation on that one. So, followup.

19 And we have Dr. Ringen, who made
20 some comments, one about the balance between
21 health -- that we give too much weight to
22 health physics as opposed to the construction

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1 workers. The second, that in his opinion the
2 1990 end date for the SEC Class may have to
3 change. That has been responded to.
4 Evaluation continues there.

5 And the length of time that the
6 Savannah River petition has been going on, and
7 I think we have our usual explanation there.
8 We will be talking more about that with the
9 Work Group report.

10 Another comment on Hanford, that the
11 SEC process should be faster. I think we all
12 know that. It is difficult.

13 Another comment, No. 6, on
14 [identifying information redacted] and Hanford,
15 reporting out his experience in terms of
16 badging at Hanford.

17 [Identifying information redacted]
18 at Hanford, about the Class Definition. Again,
19 that has been, essentially, responded to.

20 Another one on the general Kansas
21 City -- these are [identifying information
22 redacted], responses to him, starting with No.

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1 8, complaining about NIOSH and trying to
2 discredit him. Again, I think a pretty
3 straightforward response on that.

4 And then, a comment whether
5 sufficient accuracy is a testable measurement
6 or not. I think we have discussed that at
7 length here. The response looks appropriate.

8 [Identifying information redacted],
9 No. 1, about the length of time it has taken to
10 revise Appendix BB, about the delays in the
11 independent review, his request for an
12 independent review, how long that has taken;
13 that his FOI request has taken over a year, and
14 then, a complaint that DOL's refusal to notify
15 number of claimants he is also concerned about.

16 No. 14, [identifying information
17 redacted], one was the issue about ICD-8 codes
18 and the use of that. I think we all know,
19 though Congress may hold it up again, we may be
20 changing ICD-8 codes.

21 Henry, do you know the latest on
22 that? I think there is another amendment in to

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1 hold that up.

2 Stu?

3 MR. HINNEFELD: I don't know the
4 exact status of whether it is going to be
5 delayed again or not, but we have made
6 preparations for the ICD-9.

7 CHAIRMAN MELIUS: Yes, yes.

8 MR. KATZ: Ten.

9 CHAIRMAN MELIUS: Ten, 9 to 10. But
10 Congress keeps holding it up. I understand
11 there is a new effort to do that amendment in
12 the budget bills. I guess we will know in
13 September, if the government stays open, right,
14 whether that is happening?

15 We had comments regarding Dow
16 Pittsburg. Really, one was really a thank you;
17 the other was providing some historical context
18 on the site. So, really no response there.

19 A person, Mr. Zink, related to INL,
20 concerned about the proposed Class Definition
21 there and how difficult it is to prove
22 employment, again, something we have discussed

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1 and the definition has changed and appears to
2 continue to change.

3 And then, another comment from an
4 INL person who went through his work history,
5 and so forth, for that.

6 And then, there are followup emails
7 from [identifying information redacted]
8 regarding Dow Madison that he submitted to
9 supplement his earlier comments. And again, I
10 think it is more information and has been duly
11 forwarded, and so forth, to people directly
12 involved there.

13 So, I think that covers it. No,
14 there is another page here. Oh, it is actually
15 just a continuation of an earlier comment on
16 Hanford, and I think, again, pretty
17 straightforward, about Class Definition.

18 So, no comments or questions on
19 those?

20 (No response.)

21 In my view, the responses were
22 appropriate and things are being followed up.

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1 So, that is the key; it is helpful for that.

2 Okay. I don't think we have any
3 correspondence. So, we will do Work Group
4 reports, and I will need to get my list up here
5 in a second. But, while I get my list up, we
6 can start. For some reason, the head of the
7 alphabet in the NIOSH website is Santa Susana.
8 Don't ask me.

9 (Laughter.)

10 Area 4. So, Bill?

11 MEMBER SCHOFIELD: At this point
12 there is still nothing new to report. A number
13 of the petitioners are still trying to get the
14 entire site area included in it. And there is
15 some indication that there is material and
16 hotspots in other areas besides just Area 4. I
17 understand that is in the Department of Labor's
18 ball court right now.

19 CHAIRMAN MELIUS: Stu or LaVon, do
20 you have any update on that?

21 MR. HINNEFELD: Yes. There is a
22 coworkers' program, or coworker approaches have

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1 been developed for Santa Susana, but they have
2 not been run against the new coworker use
3 policy. So, I think today's meeting is
4 probably, you know, use it as a draft and
5 proceed, sort of instruction from today's
6 meeting. And so, I think that is where we are
7 going to go. I believe the issue was -- okay.

8 MR. RUTHERFORD: Yes, that is one
9 item. The other thing is we are working on a
10 White Paper for the feasibility for dose
11 reconstruction for 1965. That was the one
12 remaining year of the petition. That is kind
13 of tied in with this coworker issue as well,
14 but I would expect, as Stu said, we can move
15 forward with that now.

16 CHAIRMAN MELIUS: Okay. Any idea on
17 a timetable on the coworker?

18 (Laughter.)

19 MR. HINNEFELD: Not today.

20 CHAIRMAN MELIUS: Okay.

21 MR. HINNEFELD: Not today.

22 CHAIRMAN MELIUS: We weren't

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1 expecting the coworker -- no.

2 Brookhaven, Josie?

3 MEMBER BEACH: Okay. So, I don't
4 have any further updates, other than we are
5 waiting for the Site Profile Review, which I
6 believe was expected this month at some point.
7 So, we are getting close to that.

8 CHAIRMAN MELIUS: LaVon, do you want
9 to add anything?

10 MR. RUTHERFORD: Yes. I am sure it
11 is on my spreadsheet here. I'm trying to find
12 it.

13 MEMBER BEACH: It says July 2015.
14 So, you've still got time.

15 (Laughter.)

16 CHAIRMAN MELIUS: Josie is always
17 correct.

18 MR. RUTHERFORD: I knew I had a note
19 here. We actually moved that because of
20 priority changes. It actually shifted down
21 until December of this year.

22 MEMBER BEACH: Is that on your

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1 worksheet?

2 MR. RUTHERFORD: Yes, it is on the
3 worksheet.

4 MEMBER BEACH: Where at? I didn't
5 see it. That's good, though.

6 MR. RUTHERFORD: Yes.

7 CHAIRMAN MELIUS: It's not good.
8 It's a delay.

9 MR. RUTHERFORD: It's not good, but
10 --

11 CHAIRMAN MELIUS: We will see what
12 has moved. We want to see what has moved up
13 now.

14 (Laughter.)

15 Dose Reconstruction Review Methods
16 Work Group, you have heard from.

17 Fernald, do you have anything?

18 MEMBER CLAWSON: We have not met on
19 Fernald. We have basically come to an end, but
20 NIOSH is redoing the internal dose coworker
21 model based on the time-weighted average. And
22 I don't think we have seen anything as of yet.

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1 MR. HINNEFELD: No, we want to
2 provide several things to the Work Group and
3 SC&A in order to try to wrap up where we are.
4 We have had a number of discussions. I think
5 we have pretty close to agreement on most
6 issues, so we are writing a Site Profile which
7 incorporates those things, the coworker model.
8 And so, we will present those and, then, see
9 have we hit the mark, and we will have those
10 discussions then.

11 So, it is going to be, our schedule
12 calls for toward the end of this year to have
13 it all ready.

14 MEMBER CLAWSON: Okay.

15 CHAIRMAN MELIUS: Grand Junction?

16 MEMBER FIELD: We haven't met yet.
17 I guess I sort of need an update.

18 CHAIRMAN MELIUS: We are waiting on
19 an SC&A evaluation? I'm trying to --

20 MR. STIVER: This is John Stiver.

21 We are working on that at this
22 present time, but there are issues that are

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1 kind of common to both PER-47, the first
2 revision of the SEC that came out. Hans and
3 Kathy Behling are looking at that to see
4 whether there's any issues in the addendum.
5 And if there aren't, then we are going to go
6 ahead and finish it up and deliver it.

7 CHAIRMAN MELIUS: Okay. I
8 understand now. Good. Okay. You're right,
9 Bill. Yes.

10 Hanford, there is nothing new to
11 report. They are still working on it. There
12 is a rumor circulating that some treasure trove
13 of missing bioassays, secret bioassays, has
14 been found, but no one has informed the Work
15 Group Chair officially. So, I will just have
16 to wait on that one.

17 MEMBER CLAWSON: Jim, I did get to
18 the bottom of that. It is badging.

19 CHAIRMAN MELIUS: Ah.

20 MEMBER CLAWSON: This won't help us
21 as a group, but it will help DOL to be able to
22 prove people there. It was something like

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1 400,000 hits. So, that is going to help the
2 other side, but it won't help us.

3 CHAIRMAN MELIUS: Got that, LaVon?

4 MR. RUTHERFORD: Got it.

5 CHAIRMAN MELIUS: Yes? Confirm it.

6 MR. LEWIS: Brad is right. We have
7 found quite a bit of information out of
8 Hanford. We are working. We have got a team
9 of 20 temporary people working two shifts
10 trying to index it and get it into form, so we
11 can use it. I think it will be key for any SEC
12 Class, for the current one and any future
13 Classes, and helpful for putting people onsite
14 in terms of employment, just not dosimetry.

15 CHAIRMAN MELIUS: Yes. We
16 appreciate that, and I think we always have to
17 be ready for lots of new information to be
18 found.

19 Idaho we will hear from.

20 Gaseous Diffusion Plants.

21 MEMBER SCHOFIELD: Nothing new on
22 there. We still have that whole tritium issue

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1 hanging over us. That seems to be a permanent
2 issue.

3 CHAIRMAN MELIUS: Comments? Stu or
4 LaVon?

5 MR. HINNEFELD: I remember a neutron
6 issue at the diffusion --

7 MEMBER SCHOFIELD: Yes, it was a
8 neutron/photon issue.

9 MR. HINNEFELD: Yes.

10 MEMBER SCHOFIELD: And then, I
11 thought we still had an outstanding question
12 about exactly how we are going to deal with the
13 tritium.

14 MR. HINNEFELD: That's Pinellas.
15 Pinellas is the tritium issue.

16 MEMBER SCHOFIELD: Oh, sorry.

17 MR. HINNEFELD: Yes.

18 MEMBER SCHOFIELD: My brain is
19 having a malfunction. You're correct.

20 CHAIRMAN MELIUS: Kansas City?

21 MEMBER BEACH: Okay. So, we met
22 last week. We had a day-and-a-half meeting.

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1 The first, we outlined that day for petitioners
2 to bring forth their issues.

3 If you remember when I reported in
4 March, we didn't have time to get to the full
5 petitioners because of a shortened meeting in
6 January. So, we made progress. We closed out
7 four items.

8 The four items left are mag-thorium,
9 tritium, waste-handlers, and D&D workers. We
10 are waiting on dose reconstruction and samples
11 from NIOSH, and I'm pretty sure we don't have
12 any dates on that. I know one of the things
13 they were waiting for was how the coworker
14 model came out from this meeting, the draft.
15 So, I am sure we will hear or that will make --
16 we are looking at the November time period. I
17 believe, when I talked to Peter, he thought we
18 could have some of those samples within a
19 month. So, we'll see.

20 CHAIRMAN MELIUS: LaVon, you're
21 shaking your head yes?

22 MR. RUTHERFORD: In agreement.

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1 CHAIRMAN MELIUS: Okay. And the
2 coworker model part?

3 MR. RUTHERFORD: I'm not sure about
4 that one. I think the whole coworker thing has
5 been kind of we were waiting to see how things
6 went today, which it went fine. And so, I
7 don't have a real good date on -- I am not
8 going to say a month. I don't know how it is
9 going to go with Kansas City. But, obviously,
10 we are working towards the November meeting as
11 well. So, there you go.

12 MEMBER BEACH: And I imagine we will
13 have to have a Work Group meeting prior to
14 that.

15 CHAIRMAN MELIUS: Yes. Okay.

16 Josie, LANL?

17 MEMBER BEACH: Okay. So, the last
18 meeting in March we talked about needing to
19 validate the end date. We asked DOL or DOE for
20 help. It looks like we have gotten some help
21 there.

22 And I asked Greg this morning to

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1 keep me in the loop for that site visit. If,
2 in fact, NIOSH does go for a site visit, I
3 think the Work Group, any Members that would
4 like to go and SC&A, we should make that a
5 joint endeavor, so that we can all see the same
6 thing at the same time. And that should keep
7 the site from having to host us twice. So, we
8 will look to see some information in the next
9 couple of weeks.

10 And thank you, Greg, for that.

11 CHAIRMAN MELIUS: Great.

12 We're on a roll. Mound?

13 MEMBER BEACH: You know, I should
14 say Pat, too, because I know Pat was working
15 this. The only reason Greg sort of stepped
16 in -- I know she worked it for several weeks,
17 but couldn't come to this meeting.

18 CHAIRMAN MELIUS: We know that Pat
19 does all the work.

20 (Laughter.)

21 MEMBER BEACH: I'm not saying that.

22 She was pushing it.

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1 Mound, I have no updates. We are
2 waiting on Site Profile Reviews. The last date
3 that I saw was October. I actually think some
4 have come out, but we haven't been assigned to
5 look at them. I think we are a little
6 backlogged on some of those reviews, aren't we,
7 on the Site Profiles? It seems like a few
8 months ago there were some.

9 MR. RUTHERFORD: Yes, I think all
10 the TBDs, with the exception of the external.
11 We have a completion date right now of October
12 for that one.

13 MEMBER BEACH: Yes. We had four on
14 the list that we needed to review, but I don't
15 know if they have been tasked out to SC&A. And
16 then, the last one we are waiting for.

17 CHAIRMAN MELIUS: The Work Group
18 should be the one doing the tasking. I mean,
19 yes, if they're -- I'm not sure our
20 notification process makes that --

21 MEMBER BEACH: Yes, I know that it
22 came up a couple of meetings ago, but there was

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1 a backlog in work. John might be able to help
2 with that.

3 MR. STIVER: Yes, my recollection,
4 such as it is -- and take that with a grain of
5 salt -- is that we were going to wait until the
6 last TBD came out and, then --

7 MEMBER BEACH: Do all four?

8 MR. RUTHERFORD: -- do it all at
9 once.

10 MEMBER BEACH: Okay. I didn't get
11 that. Okay. Thanks.

12 MR. KATZ: I think some of these
13 reviews are sort of confirmatory, right, of
14 changes that are agreed upon?

15 MR. RUTHERFORD: Yes.

16 MR. KATZ: Yes.

17 CHAIRMAN MELIUS: Okay. That's
18 fine. Okay.

19 MEMBER BEACH: That makes sense.

20 CHAIRMAN MELIUS: Yes.

21 Nevada Test Site?

22 MEMBER CLAWSON: The last time we

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1 met was on December 3rd, 2014. We still have a
2 couple of outstanding issues. One of them is
3 the neutron/photon ratio, which is still open,
4 and we are still waiting on a paper for that.
5 That looks like SC&A was going to do a report.
6 It was supposed to be an internal review. Have
7 we ever completed that?

8 MR. STIVER: Yes, this is John
9 again.

10 Yes, it was delivered a couple of
11 days ago. So, you guys should have it.

12 MEMBER CLAWSON: What about, are we
13 any closer on this neutron/photon? That is
14 kind of an overarching issue, I thought. At
15 one time we were going to have one whole site,
16 and then, I think we divided it. It looks like
17 we are going to divide it up.

18 MR. HINNEFELD: Well, Jim was
19 working it. I'm drawing a blank on
20 neutron/photon at NTS. I don't have anything
21 to add.

22 CHAIRMAN MELIUS: Oak Ridge National

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1 Laboratory, Gen?

2 MEMBER ROESSLER: I'm going to need
3 an update from NIOSH. Tim, do you have
4 anything?

5 DR. TAULBEE: We are currently
6 looking at the bioassay data that was in NOCTS
7 and comparing it with the bioassay that we
8 received from the site. It has been a slow
9 process in order to reconcile those two
10 databases together. They have reviewed and
11 gotten matches of about 20,000 bioassay
12 results. We are down to about 500 that we are
13 trying to reconcile right now, and it is a slow
14 process of health physicists going through one
15 by one.

16 We also made a request of the site
17 for all of the bioassay cards for several
18 years, with a specific look at subcontractors
19 workers or construction trades to make sure
20 that they are part of that bioassay database
21 that we currently have. And so, that is a
22 response we are waiting on from the Department

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1 of Energy from that particular point. So, that
2 is where we are at with the current Oak Ridge.

3 MR. KATZ: Can I just go back to NTS
4 for a second?

5 CHAIRMAN MELIUS: Yes.

6 MR. KATZ: Stu, I wonder if you
7 could -- you just did receive a fairly
8 substantial SC&A report, "Environmental Doses
9 at NTS". I just wonder if someone could look
10 at that and give us a sense of when, because
11 that would be enough meat for a Work Group
12 meeting, once you folks have had a chance to
13 review those comments.

14 MR. HINNEFELD: Okay. So, then, you
15 are asking us to go through that, give you a
16 sense of when we can be ready to discuss that?

17 MR. KATZ: Yes, just skim it to the
18 extent you need to, to have a sense of -- of
19 course, you have to figure out whether it could
20 be tasked and all that.

21 MR. HINNEFELD: Okay.

22 MR. KATZ: But just a sense of --

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1 MR. HINNEFELD: Okay.

2 MR. KATZ: -- when that might be
3 ready. Because that would be enough material
4 for a Work Group meeting, even without whatever
5 this neutron --

6 MR. HINNEFELD: You're not asking me
7 to do that today?

8 (Laughter.)

9 MR. KATZ: No, no.

10 MR. HINNEFELD: Okay.

11 MR. KATZ: No, no. Just when you
12 can get to it.

13 CHAIRMAN MELIUS: No, by nine
14 o'clock tonight, though, we'll expect it.

15 (Laughter.)

16 MR. HINNEFELD: Great.

17 CHAIRMAN MELIUS: Pacific Proving
18 Ground, Jim Lockey?

19 MEMBER LOCKEY: Yes. I think, Ted,
20 if I am not wrong, everything was held in
21 abeyance on that. I am not sure we have
22 anything else left to do on that. We resolved

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1 the 24-hour workday to everybody's
2 satisfaction.

3 CHAIRMAN MELIUS: Our NIOSH friends
4 are quickly searching.

5 Henry keeps asking me when the Work
6 Group is going to meet out there, but --

7 MEMBER LOCKEY: I would love to meet
8 out there, but I don't think we have to
9 anymore, Jim.

10 (Laughter.)

11 MR. RUTHERFORD: Yes, I don't have
12 an update on that right now.

13 CHAIRMAN MELIUS: Okay. We'll get
14 an update and bring that out. Thanks.

15 Pantex?

16 MEMBER CLAWSON: Yes, we still have
17 the outstanding. We had a meeting on September
18 4th on Pantex. All remaining open Site Profile
19 items were closed except those pertaining to
20 the TBD changes and resolution of the neutron
21 and reconstruction approach. And we are still
22 waiting on that.

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1 But, also, too, on this, by the way,
2 I found this really helpful to re-jog my
3 memory. But in January of 2014 NIOSH released
4 three revised TBDs for Pantex, medical,
5 environmental. And has SC&A had a chance to
6 review those? Okay, we need to get those
7 reviewed. Okay.

8 MR. RUTHERFORD: I just want to note
9 all the other TBD revisions are due out in
10 September.

11 CHAIRMAN MELIUS: So, you want to
12 wait until September, then, and do them all at
13 once or -- I'm not sure how extensive these
14 changes are.

15 MR. RUTHERFORD: I think for the
16 most part it is an SEC up through -- I can't
17 remember the date. So, a lot of it was
18 incorporating the SEC. And then, the other
19 portion is some of the later changes that we
20 made in the neutron dose and a couple of other
21 external items. So, I don't think it will be
22 that difficult of a review.

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1 MR. KATZ: It is another kind of
2 confirmatory.

3 MR. RUTHERFORD: Yes.

4 MR. KATZ: We have commented on this
5 and how did it get implemented.

6 CHAIRMAN MELIUS: So, September?

7 MR. RUTHERFORD: Yes, yes, I mean,
8 that's when I'm --

9 MR. KATZ: So, when the last come
10 out, you can do them as a package.

11 CHAIRMAN MELIUS: Yes. Okay.

12 Dave Kotelchuck, Rocky Flats?

13 MEMBER KOTELCHUCK: Rocky Flats.

14 CHAIRMAN MELIUS: Did I skip you,
15 Henry?

16 MEMBER KOTELCHUCK: We met on July
17 14th and tried to cover what seemed to be the
18 four remaining issues regarding extension of
19 the existing SEC from 1983 through 2005.

20 The first issue -- can you hear me
21 okay?

22 MR. KATZ: Yes.

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1 CHAIRMAN MELIUS: Yes.

2 MEMBER KOTELCHUCK: The first issue
3 we dealt with, which was a big one and had been
4 hanging for a very long time, was the data
5 falsification report from the FBI, which was
6 released to us. LaVon and NIOSH folks reviewed
7 it, and so did SC&A.

8 Generally, the report was about
9 investigation about environmental issues,
10 falsifying environmental records. And so, as
11 we went through it point by point, it had very
12 little impact on our assessment of worker dose
13 reconstruction. So, it turned out not to be a
14 major issue for us, with one exception.

15 It was raised that environmental
16 issues, environmental exposure, of course,
17 would be impact on workers and occupational
18 exposure. So, there needs to be some -- can you
19 folks hear me?

20 MR. KATZ: Yes, we can hear you,
21 Dave.

22 CHAIRMAN MELIUS: We can still hear

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1 you.

2 MEMBER KOTELCHUCK: Okay.

3 CHAIRMAN MELIUS: We will tell you
4 if we can't.

5 MEMBER KOTELCHUCK: Okay. I am just
6 getting backfeed, yes.

7 The TBD-4 needs revision to deal
8 with how to put in the impact of the
9 environmental exposures on the claimants,
10 basically, the people working in the plant.
11 So, we consider this almost closed except for
12 that one TBD-4 revision.

13 The second issue we dealt with was
14 the critical mass laboratory. That involved a
15 quite extensive discussion. Basically, a lot
16 of new information was gathered about the
17 critical mass lab and, in particular, work that
18 was done there post-'83. There was work done.
19 It is clearly well-documented.

20 And generally, SC&A and NIOSH
21 agreed, and the Board agreed, tentatively that
22 we could do dose reconstruction there.

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1 However, on the phone was Dr. Rothe, who is the
2 sole surviving leader of that project. He said
3 that he believed there were many errors in the
4 SC&A and NIOSH reports and gave us, I think it
5 was seven points that he thought we were
6 incorrect on. These are criticality
7 experiments that were done in the CM lab.

8 What we finally agreed to -- this
9 was new information. And I must say, also,
10 that the claimants' representatives there, Ms.
11 Barrie and [identifying information redacted],
12 felt that he had very important information to
13 give to us.

14 So, we asked him to give us a
15 written report of the items that he said we
16 were in error, and those will be reviewed by
17 LaVon. And then, we will decide how to
18 proceed. So, that is an issue.

19 LaVon -- I may put words in your
20 mouth, LaVon, and you can correct them --
21 thought that probably the issues that we have
22 been raising have been dealt with

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1 appropriately, but that, of course, he and we
2 have to investigate. So, we have to talk about
3 this in another meeting before we close it, if
4 we are going to close it.

5 And finally, the last two points on
6 tritium and neptunium, their feeling was that
7 we had enough good data now on both that we
8 could do a dose reconstruction.

9 So, we are left with we are almost
10 completed with the exception of Dr. Rothe's
11 report and its implications, and the revision
12 of TBD-4. And I would hope that we can get
13 those finished and make a final recommendation
14 by our November meeting.

15 That's it.

16 CHAIRMAN MELIUS: Okay.

17 MEMBER KOTELCHUCK: Questions?

18 CHAIRMAN MELIUS: Well, I want to
19 see if -- LaVon?

20 Since he is in the room, Dave, and
21 you were putting words in his mouth, I wanted
22 to --

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1 MEMBER KOTELCHUCK: Right. No, I
2 know that.

3 CHAIRMAN MELIUS: We thought we
4 could hear directly.

5 MEMBER KOTELCHUCK: I expect he is
6 here.

7 MR. RUTHERFORD: I agree with that.
8 I know that Terrie had indicated that she had
9 some additional information she was going to
10 provide. I expect we are going to get that
11 tonight. And then, she also provided me Dr.
12 Rothe's written comments. And so, I have
13 those, and we are scheduling an interview with
14 Dr. Rothe to kind of go back through some of
15 these things.

16 So, I anticipate we will be ready
17 for November. So, yes.

18 CHAIRMAN MELIUS: Okay.

19 MEMBER KOTELCHUCK: Very good.

20 Any questions?

21 CHAIRMAN MELIUS: Anybody have
22 questions for Dave?

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1 MEMBER MUNN: None here.

2 CHAIRMAN MELIUS: Okay. Thanks.
3 Thank you, everybody, on that one. Thank you,
4 Dave.

5 Sandia?

6 MEMBER LEMEN: There is nothing new
7 on it.

8 (Laughter.)

9 CHAIRMAN MELIUS: Nothing new?
10 Where are we?

11 MEMBER LEMEN: Waiting on NIOSH.

12 CHAIRMAN MELIUS: LaVon ran for it.
13 He is still trying to hide behind Terrie Barrie
14 back there.

15 (Laughter.)

16 MR. HINNEFELD: Yes, my recollection
17 of Sandia is that we are trying to verify the
18 end date of the current Class and that it is a
19 good date. And so, it is a matter of getting
20 information to support, you know, evidence to
21 support that the end date is a good end date,
22 and getting it out of the site is a little

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1 problematic.

2 CHAIRMAN MELIUS: Yes.

3 MR. HINNEFELD: Frankly, we are
4 distracted on other sites as well. So, we
5 haven't really pushed it that hard.

6 CHAIRMAN MELIUS: Has Greg been
7 helping you?

8 MR. HINNEFELD: Yes, Greg is helpful
9 whenever we ask. I'm not even sure this has
10 made it to the top of our "ask list" yet. So,
11 I am not exactly -- Sam Glover is the lead guy
12 on it, and he is not here today. I'm just not
13 clear exactly. I know that we intend to go
14 back to Sandia for both Sandia and Sandia
15 Livermore, and they are sort of a package deal
16 because the records tended to be held together
17 for both those sites.

18 MR. RUTHERFORD: And I don't know if
19 Stu mentioned this or not, but it was kind of
20 priorities kind of shifted, too. And so, with
21 priorities the way they were, we kind of pushed
22 that back a little bit, and we are starting to

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1 move forward more with that one.

2 CHAIRMAN MELIUS: It is just one of
3 those sites that has sort of been on hold for a
4 while.

5 Did I skip you, Phil, on Pinellas?

6 MEMBER SCHOFIELD: Pinellas, we need
7 to see if we can close that out. We still had
8 some possible issues with some of the tritium
9 questions. And then, there is always what has
10 been raised by some of the people there about
11 the uranium beds. And we need to basically get
12 together and close those things out, if we can.
13 I think we are about ready to close them out.

14 CHAIRMAN MELIUS: NIOSH sounds like
15 they were getting close.

16 MEMBER SCHOFIELD: Yes, we are very,
17 very close.

18 Swipe data, that was the other thing
19 that we still are having to look into on
20 Pinellas.

21 CHAIRMAN MELIUS: The SEC Issues
22 Work Group is really the coworker issue. I

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1 think you have heard about that.

2 TBD-6000 minus Carborundum? We will
3 have to put an asterisk by it now.

4 (Laughter.)

5 MEMBER ZIEMER: Two parts to the
6 TBD-6000 report today. First, I will report on
7 General Steel Industries. On July 10th, NIOSH
8 issued a paper called "Discussion of Remaining
9 Issues to SC&A Review of Battelle TBD-6000."
10 These were some issues that weren't fully
11 closed.

12 In the meantime, the PER is in place
13 and underway. So, dose reconstructions are
14 being done under that current PER under Rev 1.
15 But we now have the paper from NIOSH. And
16 earlier -- let's see, what's today? -- I guess
17 it was earlier this week we tasked SC&A to
18 review this document. So, as soon as that
19 review is complete, we will schedule a Work
20 Group meeting with the objective of trying to
21 close out these remaining issues on General
22 Steel, which, presumably, would lead to a Rev 2

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1 on Appendix BB and possibly another PER.

2 The other part of TBD-6000 is Joslyn
3 Manufacturing. Now you may recall the SEC for
4 Joslyn has been issued, but we do not have a
5 Site Profile. It is really Appendix J of
6 TBD-6000. That has been reviewed by SC&A. We
7 now have an issues matrix. As soon as we get
8 NIOSH's response to the issues matrix, we will
9 be able to address those remaining issues for
10 Joslyn.

11 CHAIRMAN MELIUS: Okay. Questions
12 for Paul?

13 MEMBER ZIEMER: Or could I add one
14 other comment?

15 CHAIRMAN MELIUS: Yes.

16 MEMBER ZIEMER: Not on Joslyn, but I
17 assume everybody -- there's two documents that
18 we had in our packet of stuff this time. One
19 of them is the SC&A -- what did they call it?
20 -- Coordinating Memo, or something like that,
21 which has a good review of everything they are
22 doing on I think all of these areas that have

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1 been reported. And we have another document
2 from NIOSH which is NIOSH Coordinating Work
3 Group Document.

4 I was impressed. I think both of
5 those documents are very good descriptions of
6 what the Work Groups are doing and what remains
7 to be done by both NIOSH and by SC&A on all of
8 these Work Groups. So, I found it very
9 helpful.

10 CHAIRMAN MELIUS: I concur with
11 that.

12 I would add one more thing I had
13 left out of the SEC Issues Work Group. We did
14 have a meeting where we had discussed Dow
15 Madison, essentially, Site Profile issues. We
16 closed, essentially closed those out. There
17 were a few questions that were left open that I
18 think Jim Neton circulated, after he had sort
19 of answered, circulated to the Work Group. I
20 haven't caught up with Jim yet to make sure he
21 heard from all of the Work Group members. If
22 not, we will track down the Work Group member

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1 if they didn't respond.

2 But I was expecting to see him here,
3 but, obviously, he couldn't come. So, I will
4 catch up with him when I get back and do that.
5 But we will probably put that on the agenda for
6 the November meeting, to do the Site Profile,
7 just to report back to the Board on those.
8 They are relatively straightforward. So, it
9 should not be a long report.

10 Henry?

11 MEMBER ANDERSON: Do you want AWE?

12 CHAIRMAN MELIUS: Yes, but, no, no,
13 on the website it is still called TBD-6001. It
14 has two listings. You get listed twice.

15 MEMBER ANDERSON: Right. Okay.

16 CHAIRMAN MELIUS: A very important
17 Work Group to have. It is the only one that
18 has two listings. Well, no, Phil has got you
19 beat; he's got three.

20 MEMBER ANDERSON: Yes. Okay.

21 So, we have a meeting coming up
22 August 3rd. We have two TBDs we are reviewing.

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1 The first one is NUMEC, which is the
2 Apollo and Parks Township in Pennsylvania site.
3 And then, there is the W.R. Grace, Erwin,
4 Tennessee site that we are also reviewing. So,
5 we are making headway.

6 That's it.

7 CHAIRMAN MELIUS: Okay. Good.

8 I was just checking with Paul. I
9 had skipped over Lawrence Berkeley.

10 MEMBER ZIEMER: Well, the only thing
11 to report on Lawrence Berkeley is that the
12 report is basically the same as at our last
13 meeting. There is additional data capture
14 still going on there, that NIOSH and its
15 contractor are looking at that data. Some of
16 it still needs to be entered into the system
17 and reviewed. And so, there is a pretty
18 detailed description of what remains to be done
19 there before the Work Group meets. But we are
20 now looking at, I think, December of this year
21 before all that information is ready to be
22 reviewed.

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1 NIOSH also has some reviews of
2 earlier documents from SC&A on Lawrence
3 Berkeley that also need responses. So, there's
4 a number of things awaiting us. The Work Group
5 has been standing by for a fair amount of time,
6 but a lot of work going on there in the data
7 capture right now.

8 CHAIRMAN MELIUS: Thank you, Paul.

9 Questions?

10 (No response.)

11 Weldon Spring?

12 MEMBER LEMEN: There is nothing new
13 on Weldon Spring that I'm aware of.

14 CHAIRMAN MELIUS: Okay. Stu or
15 LaVon, anything to add? No? Okay. I think
16 that is sort of a back-burner.

17 MR. RUTHERFORD: I am pretty sure we
18 are done. I think the revisions of the TBD are
19 complete.

20 CHAIRMAN MELIUS: Have they been
21 reviewed?

22 MEMBER LEMEN: That was my

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1 understanding.

2 CHAIRMAN MELIUS: Have they been
3 reviewed by SC&A? I can't remember. Okay.
4 And the Work Group?

5 MEMBER LEMEN: It hasn't been and we
6 haven't received anything from SC&A that I'm
7 aware of.

8 CHAIRMAN MELIUS: I think you
9 probably did or somebody did. They were done.

10 MR. RUTHERFORD: In January of this
11 year.

12 CHAIRMAN MELIUS: Okay.

13 MEMBER LEMEN: I haven't seen it.
14 It didn't come to me that I'm aware of, anyhow,
15 unless I missed it.

16 CHAIRMAN MELIUS: Well, we will
17 figure it out.

18 MR. KATZ: So, we can a Work Group
19 meeting, it sounds like.

20 CHAIRMAN MELIUS: Yes. I don't
21 remember getting them, either, but that doesn't
22 mean anything.

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1 Worker Outreach?

2 MEMBER BEACH: There has been
3 nothing new on Worker Outreach since my
4 presentation a couple of Board meetings ago.
5 At this time, we haven't met; we haven't moved
6 forward on any path forward. So, I guess you
7 would call that a back-burner issue as well.
8 So, nothing more to report there at this time.

9 CHAIRMAN MELIUS: I think that does
10 our Work Group list.

11 MEMBER CLAWSON: Savannah River.

12 CHAIRMAN MELIUS: I'm sorry.

13 MEMBER CLAWSON: No, that's okay.

14 CHAIRMAN MELIUS: I was distracted
15 by something else.

16 We have agreed to discuss it only
17 every other Advisory Board meeting.

18 MEMBER CLAWSON: Yes.

19 CHAIRMAN MELIUS: Go ahead, Brad.
20 I'm sorry.

21 MEMBER CLAWSON: Actually, we did
22 receive a White Paper on neptunium dose

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1 estimates. It was received from NIOSH, and
2 SC&A I believe is reviewing that at this time.
3 But that is all we have.

4 We did get the issue -- as Greg said
5 earlier, our last data capture had been sent to
6 Germantown, and Joe has been able to look
7 through it. And so, that has been able to help
8 us out.

9 CHAIRMAN MELIUS: And? So, do we
10 have an estimate from NIOSH when we are moving
11 forward on this? I'm not even going to give
12 LaVon a chance to say that he is glad that Tim
13 is here.

14 MR. RUTHERFORD: I'm really glad Tim
15 is here.

16 (Laughter.)

17 DR. TAULBEE: Well, of course, our
18 big issue that we are working on right now is
19 coworker, now that we have gotten some clear
20 guidance as to we are going to be working with
21 this Draft Implementation Guide.

22 We have been working with ORAU for

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1 the past month-and-a-half or so with regard to
2 the current guidance, the Implementation
3 Guidance, laying out the steps and the timeline
4 in order to do this. But it is still in the
5 draft phases.

6 We have received their first cut at
7 this, and we need to have some discussions.
8 But I don't have a definitive timeline for you
9 right now.

10 CHAIRMAN MELIUS: I'm not going to
11 hold you to a timeline, but if you could get
12 back to me sometime, so we can sort of figure
13 this. Because we also have to coordinate with
14 the SEC Issues Work Group and the Savannah
15 River Work Group. And I think we need to get
16 at least some of the pilot coworker, whatever
17 we are calling these, or example coworker, sort
18 of done soon.

19 Somehow my sense is that it is going
20 to take longer on INL, but I may be wrong on
21 that, to get ones ready to be reviewed.

22 DR. TAULBEE: I don't have a real

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1 good feel as to which one is going to be
2 longer. Savannah River is farther along.
3 However, it is also much bigger.

4 CHAIRMAN MELIUS: Yes. Okay.

5 DR. TAULBEE: For more complex
6 issues, you get a lot more radionuclides we are
7 looking at at Savannah River. And now, with
8 Implementation Guidance of basically having to
9 do two coworker models, one for construction
10 trades and one for routine operations type of
11 folks, it makes it a lot more complicated.

12 Like I said, we have laid out the
13 steps, and we are looking at how long this is
14 going to take. But we will get back to you on
15 the --

16 CHAIRMAN MELIUS: Yes, I don't want
17 to belabor this, but we have got time. It
18 would seem to me that sort of the first step
19 would be, okay, which you have already taken,
20 is, then, do you separate out construction
21 versus production workers, you know, some
22 breakdown like that, which ought to be a

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1 relatively-straightforward determination.

2 I'm assuming the construction
3 workers have a slightly smaller dataset. I
4 don't want to say they are less complicated,
5 but one that is a little harder to separate out
6 people. You don't have production areas, and
7 so forth, and you can make a determination that
8 way, which I would think would carry over into
9 the other parts of the coworker, you know,
10 other coworker models, so to speak, for that
11 site. That would be the first for it, and you
12 may have already dealt with that.

13 DR. TAULBEE: We have, from the
14 standpoint of separating. The problem comes
15 into our OTIB-81, which was our coworker model
16 for Savannah River that we put out that got a
17 lot of comments on and prompted the SEC Work
18 Group and the Implementation Guidance.

19 It was based upon NOCTS data. And
20 so, when you start separating out construction
21 trades from operations, the dataset gets quite
22 small. But we do have the bioassay data for

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1 many more construction trade workers that we
2 haven't coded that we have in-house. And so,
3 that is where it is causing some of the
4 timeline issues right now.

5 CHAIRMAN MELIUS: I guess it would
6 sort of facilitate this if you can sort of
7 narrow that down, what gets coded, whatever.
8 Because if you decide that it is going to be an
9 SEC, the coding becomes less urgent for that
10 entire dataset.

11 DR. TAULBEE: That is what we are
12 looking at right now.

13 CHAIRMAN MELIUS: Oh, okay. Okay.
14 Well, if I can follow up with you and Stu and
15 get a timetable, it would be helpful.

16 But I want to say I am pleased that
17 you are going ahead. I was getting a little
18 bit worried that everybody was waiting until
19 this meeting to start doing anything, which is
20 the impression I was getting earlier. So, that
21 is good.

22 DR. TAULBEE: We have initiated the

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1 process.

2 CHAIRMAN MELIUS: Okay. Great.

3 Okay. I think that is it for Work
4 Groups. Did I skip anybody else? Ted, did we
5 have any other business?

6 MR. KATZ: Oh, we don't have Dr.
7 Richardson for Science Issues, but nothing has
8 gone forward there.

9 CHAIRMAN MELIUS: Yes, yes. Okay.
10 We will now take a break, then, and come back
11 promptly at four o'clock. We will have the
12 update on Idaho and, then, go into the public
13 comment period.

14 (Whereupon, the above-entitled
15 matter went off the record at 3:15 p.m. and
16 resumed at 4:04 p.m.)

17 MR. KATZ: Now we have some more
18 people in the room locally. There is a public
19 comment session that begins at 5:30, I believe.
20 If you would like to make comments, please sign
21 up at the table out there. There is a sign-up
22 book, and you can sign up for your public

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1 comments. Please do that at some point before
2 then. Thanks.

3 CHAIRMAN MELIUS: Yes, and I would
4 just add that, if we finish up the
5 presentations early before 5:30 and there are
6 people here in the room that wish to make
7 public comments, we will start the public
8 comments then, whenever we finish. So, you
9 don't have to wait around longer.

10 Anyway, we will start. This will be
11 an update on the INL petition site, and I think
12 we are starting with Tim.

13 Or, Phil, do you want to stay a few
14 words first?

15 MEMBER SCHOFIELD: Yes, there is
16 just one thing I would like to point out. This
17 is not something that is available, I don't
18 believe, anywhere for the claimant.

19 It is the covered sites, the
20 demographics by state, and I thought people at
21 INL might be interested. This is the 20th of
22 this month. INL, you have total claims, 1,679.

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1 You have 1,626 in the initial dose
2 reconstruction; 1,549 dose reconstructions have
3 been sent to the Department of Labor. There
4 are 561 reworks; 43 have been pulled for SEC.
5 Those people, obviously, have worked at some
6 other facility. And then, there are 311 with a
7 PoC of greater than 50 percent. And you have
8 1,308 with a PoC of less than 50 percent.

9 It's all yours, Tim.

10 Thanks.

11 DR. TAULBEE: Thank you, Phil and
12 Members of the Board.

13 This presentation is going to give
14 an update on the SEC Class Definition and the
15 research that we have done since the last time
16 I spoke with you all in March in Richland.

17 I am going to start with a little
18 bit of background about the dosimetry at the
19 Idaho National Laboratory, and then, talk about
20 the additional research that we have done in
21 the past months, and then, attempt to clarify
22 and address some of the questions that were

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1 raised at the end of my last presentation back
2 in March. And so, we are going to talk about a
3 review of the NOCTS claims that discuss some of
4 the data gaps, a review of those, and then,
5 comparisons of monthly reports, dosimetry
6 reports, and then, our review of the dosimetry
7 procedures. And then, I will get into the
8 recommended adjustment to the SEC Class
9 Definition and why we think this is necessary.
10 And then, finish up with the timeline that Dr.
11 Melius requested at the end of the INL Work
12 Group.

13 CHAIRMAN MELIUS: Surprise.

14 (Laughter.)

15 DR. TAULBEE: To start with the
16 background on the dosimetry at INL, if you
17 recall, when I was talking before, INL has this
18 one-badge/one-area type of methodology where,
19 if you worked in one area, you went in and you
20 picked up your dosimeter badge at that area.
21 You went in at the security gate. You went in,
22 you worked at that particular area. When you

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1 left, you left your dosimeter there at the
2 exit.

3 If you worked in another facility or
4 you went to another facility, you picked up a
5 new badge. You got a new badge at that
6 facility. And this is how we decided we could
7 identify the Class, based upon this one-
8 badge/one-area methodology.

9 So, the example I have given here
10 is, if a worker routinely worked at the
11 materials test reactor, he went, then, to the
12 Chemical Processing Plant. When he left MTR,
13 he would leave his badge at the security
14 checkpoint and pick up a temporary badge at the
15 Chemical Processing Plant. Visitors coming in
16 would be picking up their badges, and these
17 were called temporary badges and they would get
18 these at the entrance of the Chemical
19 Processing Plant.

20 Well, the dosimetry records at INL
21 really comprise three main sources. There is
22 what I am going to call the Chemical Processing

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1 Plant, or CPP, main badge reports. And these
2 are identified based upon the area codes of 5,
3 53, and 55. These changed over time. And
4 then, the CPP temporary badge reports and the
5 CPP construction badge reports, or the CX
6 areas, as it was called. MTR construction was
7 actually MX area. So, they separated the
8 construction based upon this additional area,
9 but it was really physically the same location.
10 So, these three badge reports comprise the
11 Class of Chemical Processing Plant.

12 The first example that I want to
13 show you of the dosimeter badge report, here in
14 the lefthand column you will see where I have
15 contractor codes listed. By the way, the black
16 regions there are individual names of workers
17 at the Chemical Processing Plant.

18 The area code is that second column
19 where I have got green highlights going on.
20 And then, you will see in red, off to the
21 right, I have got, corresponding, what the
22 contractor code means. So, for an individual

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1 worker, we can identify -- in this case the
2 first line is an individual who worked at the
3 Chemical Processing Plant, but he worked for FC
4 Torkelson.

5 The second one is an individual who
6 worked at the Chemical Processing Plant, and he
7 worked for the Atomic Energy Commission.

8 The next one I've got highlighted
9 there is an individual who worked for Phillips
10 Petroleum, which in this particular time period
11 was the main contractor for CPP.

12 And if you go all the way down to
13 the bottom, you will also see people who worked
14 for Westinghouse or the Naval Reactor facility.
15 When they would come into CPP, they were
16 identified as well as being badged there at
17 CPP.

18 One of the questions that was posed
19 to me back in March was with regard to who all
20 was monitored and how sure we were that
21 everybody coming into the site was monitored.
22 And more importantly, did we have access to

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1 those records? Could we identify these people
2 and could we pull these records together?

3 And so, we went back to the site and
4 we requested these temporary badge reports.
5 So, these would be considered kind of visitors
6 in some cases.

7 In the first case, you have got a
8 news reporter. Somebody from Blackfoot News
9 came into the site and they were badged.

10 The next one I have got highlighted
11 is a Phillips employee. This would be somebody
12 who worked in another area coming into CPP.
13 And so, here they show up on the temporary
14 dosimetry report. They likely worked at Test
15 Area North or Central Facilities or one of the
16 other sites. But, when they came in, they
17 picked up this temporary badge.

18 Also, you have got AEC personnel.
19 Not everybody that worked for AEC routinely
20 went to CPP. If they routinely went, they were
21 on that main report. If they went
22 infrequently, they would show up on the

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1 temporary dosimetry badge reports.

2 If you recall, the initial Class
3 that we are proposing was at least one badge.
4 So, it only took one badge and 250 days of
5 employment to be considered part of the Class.

6 Following down here, some of the
7 construction trades workers show up on these
8 temporary badge reports. In this case, H.S.
9 Wright and FC Torkelson. And even vendors, in
10 this case, the Coca-Cola guy who came and
11 delivered Coke there to CPP, he was badged as
12 well when he came in.

13 Now the third set of reports is the
14 CPP construction. And so, these were
15 individuals coming in, building trades, and so
16 forth, to do their work. They had a different
17 area code, but it is still physical location of
18 the Chemical Processing Plant.

19 In the first set of dosimeter
20 reports I showed you, the vast majority of them
21 are Phillips employees, that 002 code. In this
22 case, on this CPP construction, the vast

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1 majority of them are H.K. Ferguson. That was
2 the prime construction contractor for the area.

3 However, others show up. Here you
4 will see some more H.S. Wright, and then, even
5 a code for miscellaneous construction. People
6 who were a small shop type of thing would come
7 in. They were badged as well.

8 So, there are multiple types of
9 workers coming into CPP, and they were all
10 badged when they came into the Chemical
11 Processing Plant. However, a worker's
12 dosimetry could appear on any one of these
13 several reports or all of them at different
14 time periods, depending upon their work career,
15 how long it was, how often they were in the
16 facility, or did they go and work in another
17 area.

18 We do see a lot of moving amongst
19 construction trade workers working at MTR
20 construction or MX code and, then, CX code, and
21 within the same month going back and forth.

22 So, this is what comprises the

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1 entirety of the CPP dosimetry that we are
2 proposing to use to define the Class.

3 Now onto the research that we have
4 done since we last talked. By our count, we
5 have 1,753 INL claims as of April 2015. Those
6 numbers differ a little bit from Phil's because
7 he was looking at more of what has been
8 completely processed; whereas, we are looking
9 at how many claims do we have. And many of
10 these dose reconstructions we are working on
11 currently there at the site. I believe there
12 is about 200 or so that are currently
13 undergoing dose reconstruction.

14 When we looked at these 1700 claims
15 and determined who had employment during our
16 proposed SEC time period and Class, it came
17 down to 881 of the claimants have employment
18 during the SEC period.

19 We went through those claims, and
20 Mitch Findley and Lara Hughes did the lion's
21 share of this work, and reviewed the computer-
22 assisted telephone interviews, the dose

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1 reconstruction reports, and the DOE files, to
2 determine whether these people worked at CPP.

3 Of these claims, 320 were positively
4 identified as having worked at the Chemical
5 Processing Plant during the SEC time period and
6 had an identifiable CPP dosimeter badge,
7 whether it was a regular badge, a temporary
8 badge, a visitor badge, or a CX on the CX
9 dosimeter report.

10 Five hundred and twenty-nine of the
11 claims had no indication of work at the
12 Chemical Processing Plant. Thirty-two of the
13 claims would need to be followed up to actually
14 determine their status. The reason that I say
15 "need to follow up" here is that many of the
16 claims that we went through and looked at had
17 what we call an annual summary. They didn't
18 have those details that I showed you in those
19 first three slides on those reports. We just
20 had an annual printout of their dosimetry.

21 And the reason for that was early on
22 in dose reconstruction there was an efficiency

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1 measure to try to move claims faster. If
2 somebody had a low-level exposure, less than
3 500 millirem or greater than 50 rem, we felt we
4 could process the claim without getting all of
5 their dosimetry results. And so, it was an
6 efficiency measure as to why some of these
7 people just have an annual summary.

8 The site actually has their full
9 dosimetry records. In some of the cases that
10 we went back and did some followup in the past
11 month, some of them have 1 to 2 hundred pages
12 of dosimetry results that you can go through.

13 So, we didn't request them all early
14 on. The problem with the annual summaries is
15 they don't provide location information. You
16 have to go to those original reports that I
17 showed you to identify where they worked. So,
18 that leaves kind of a gap here, a disconnect.

19 However, when the Department of
20 Labor and the Department of Energy are
21 processing or administering this Class, they
22 would go to those original reports and get the

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1 work location for these individuals.

2 The CPP construction trades or the
3 CX dosimetry printouts are kind of a special
4 case. When we made the original request in
5 April to the site, we requested all the CPP
6 dosimetry. We didn't specify that we wanted
7 CPP dosimetry and the CPP construction
8 dosimetry. So, it was a miscommunication
9 between us and the Department of Energy on
10 that. And so, we didn't get those construction
11 dosimetry reports.

12 Unfortunately, on our review we were
13 going through, and people that we needed to
14 spend more time on, we kind of put them down to
15 the end and we didn't really recognize that
16 this was going to be a big problem for us until
17 about the end of June. At that point is when
18 we started talking to the site about getting
19 these dosimetry reports.

20 I indicate here in the last bullet
21 that NIOSH has since requested these CX
22 reports, and DOE is working to compile them. I

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1 received them yesterday from the site when we
2 were out there conducting the interviews. So,
3 they have given them to me now, and so, we will
4 be getting them into the Site Research
5 Database. So, we have obtained those CX
6 dosimetry reports now.

7 The next item that we committed to
8 do was to look at these dosimetry reports and
9 see, are they complete; are there any data
10 gaps? We identified that there are three
11 months that are currently missing out of the
12 time period of 1963 through 1974, and that is
13 January 1970, December 1970, and December of
14 '71. And we will request these from the site.
15 We just haven't gotten those details out there
16 to the site yet.

17 We went through the temporary badge
18 reports from 1959 through 1976, and none appear
19 to be missing. We went through every month,
20 and there is a temporary badge report for every
21 month between that time period. And so, we
22 feel that the temporary badge reports are

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1 complete.

2 Again, the CX dosimetry reports, at
3 the time I made this presentation last week, we
4 didn't have them. Today we do.

5 The next thing that we wanted to
6 look at was a comparison between the monthly
7 health physics reports and the CPP dosimetry
8 printouts. The reason for this was, how can we
9 be sure that we have all of the results? We
10 have got these large printouts of several
11 hundred pages. How do we know we have got all
12 of the workers listed within these printouts?
13 So, it was a completeness check.

14 Well, each month throughout the
15 history of INL the dosimetry group published a
16 report, and they listed how many badges they
17 processed by area, how many were processed at
18 the Chemical Processing Plant, how many at Test
19 Reactor Area, how many at Test Area North, how
20 many at Central Facilities. And so, it is all
21 tabulated in these monthly reports.

22 And so, we went through and, then,

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1 took those reports and compared the printouts,
2 went through and counted how many people do we
3 have on these printouts, with the idea that, if
4 we have 500 dosimeters being processed in a
5 month, according to the monthly report, and the
6 printout has 500 people on it, we have got the
7 complete set.

8 And so, we reviewed 1963 through
9 March of 1970, and we found very good agreement
10 between these monthly reports and the dosimeter
11 printouts. I went through trying to figure out
12 how to present this to you all in a graphical
13 manner. I went through and tallied all of the
14 months from 1963 up through 1970 and did the
15 comparison of how many we had on the printouts
16 and how many we had in the monthly reports.
17 And you can see very good agreement.

18 It is interesting that there are
19 some years where we have more on the dosimeter
20 printouts than what we have listed in the
21 monthly reports, and that is likely due to
22 reporting cutoff dates that they had to get to

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1 their management in order to produce.

2 You see a big drop in 1967. It is
3 not that there were less people being monitored
4 at that time period, but that was the switch
5 from monthly film badges to some people going
6 to quarterly TLDs. And so, instead of getting
7 over a quarter three film badges, they would,
8 then, get one thermoluminescent dosimeter. So,
9 it is kind of misleading there, but you have to
10 look at both the TLD as well as the monthly
11 film badges.

12 The final thing that we looked at
13 was a review of the INL dosimetry procedures
14 and, again, that one-badge/one-area
15 methodology. We wanted to check to make sure
16 that this didn't change over time. And this
17 was our big surprise. When we went through and
18 looked at this procedure, we found that they
19 did change. And so, we investigated more of
20 why it changed and how it changed, so that we
21 could report it back to you all.

22 In October 1969, the site began to

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1 explore methods to reduce the number of
2 temporary badges that were being assigned.
3 They did this for a cost-savings method.
4 Because so many people were now moving between
5 Test Reactor Area and the Chemical Processing
6 Plant, and vice versa, and Test Area North,
7 they were looking for can a person wear one
8 badge in two multiple areas.

9 Well, they did an evaluation in
10 December of 1969, and it was a really thorough
11 evaluation. I have got the Site Research
12 Database document number listed there. It is
13 actually an impressive report where they
14 tallied the number of temporary badges and
15 regular badges being issued by area and by
16 occupation. So, they tallied it for
17 carpenters, for pipefitters, for chemical
18 operators, for health and safety folks by area,
19 as to how many badges were in the area and how
20 many temporary badges were being issued.

21 They did this in order to make a
22 recommendation to issue a single dosimeter

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1 badge that the employee could wear in all
2 areas, instead of getting a new temporary badge
3 for each area they went into. And so, this
4 kind of instituted a new procedure of one-
5 badge/multiple-area methodology, as I am
6 calling it. This was implemented in March of
7 1970.

8 And here is some of the
9 documentation you will see. Off to the right
10 is an actual printout of the dosimeter changes
11 across time at the site. Specifically, the
12 lower highlighted area there is talking about
13 where at this time ANC, Allied Nuclear
14 Corporation, and the Atomic Energy Commission
15 personnel who worked in the Test Reactor Area
16 or the Chemical Processing Plant or the
17 Technical Support Facility, which is in Test
18 Area North, and the Power Burst Facility could
19 wear their dosimeter that was issued at that
20 facility into the Chemical Processing Plant.

21 This continued until December of
22 1974, when the badging returned to one-

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1 badge/one-area, and that is that bottom
2 highlight right there. So, they deviated from
3 this one-badge/one-area methodology for four
4 years and nine months. Interestingly, this
5 corresponds to, if you recall, the degradation
6 that we saw of the rad controls happening at
7 CPP, resulting in more contamination, resulting
8 in intakes that led us to recommend the Class
9 in the first place. The same thing was
10 happening here where they loosened controls on
11 their dosimetry, and we get back to December of
12 1974 and they re-instituted control on their
13 dosimetry again.

14 So, what are the implications of
15 this one-badge/multiple-area methodology?
16 Well, now we have got any monitored worker at
17 Idaho National Laboratory could physically
18 enter the Chemical Processing Plant and conduct
19 their work without picking up a new dosimeter.
20 So, somebody who was working at MTR could go up
21 to CPP. They would go back to MTR and leave
22 their dosimeter, and it would be read and

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1 processed and there would be no record of them
2 entering the Chemical Processing Plant. So,
3 this change eliminates our ability to actually
4 segregate and identify all the workers just
5 solely based upon their dosimetry records.

6 And so, the change necessitates
7 including all monitored workers at INL in the
8 SEC during this time period, this four-year
9 nine-month time period, due to the potential
10 for any monitored worker onsite to have entered
11 CPP, gone into those corridors, gone into those
12 analytical laboratories, and been exposed to
13 the actinides for which we can't reconstruct
14 the dose.

15 So, the SEC Class Definition is kind
16 of in two time periods here, the January 1963
17 through February of 1970, the one-badge/one-
18 area methodology that we believe still holds.
19 We have demonstrated that there was lots of
20 temporary badges and people were being
21 monitored along those lines.

22 However, from March of 1970 through

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1 December of 1974, there's a one-badge/multiple-
2 area methodology that was employed for four
3 years and nine months. And so, all monitored
4 workers at INL need to be included in the SEC
5 Class due to their potential to enter CPP and
6 be exposed to those actinides in the
7 laboratories and those corridors that we
8 identified are problematic for estimating dose.

9 So, here's our revised Class
10 Definition. And Dr. Melius mentioned earlier
11 today that this is the third definition you
12 saw. This definition is our attempt to try to
13 address some of the INL Work Group's comments
14 back in the beginning of this month.

15 And so, what we have done is we
16 redefined it to try to identify an A period and
17 a B period with connecting them through an "OR"
18 statement. So, if somebody was monitored and
19 meets either of those two criteria, they would
20 be included in the Class.

21 So, let me read this here. "All
22 employees of the Department of Energy, its

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1 predecessor agencies, and their contractors and
2 subcontractors who worked at the Idaho National
3 Laboratory in Scoville, Idaho, and (a) who were
4 monitored for external radiation at the Idaho
5 Chemical Processing Plant (CPP), for example,
6 at least one film badge or TLD dosimeter from
7 CPP, between January 1st, 1963 and February
8 28th, 1970 or (b) who were monitored for
9 external radiation at Idaho National
10 Laboratory, for example, at least one film
11 badge or TLD issued between March 1st, 1970 and
12 December 31st, 1974 for a number of workdays
13 aggregating at least 250 workdays, occurring
14 either solely under this employment or in
15 combination with workdays within the parameters
16 established for one or more other Classes of
17 employees in the Special Exposure Cohort."

18 So, our definition here, the red
19 part here is what we have expanded and changed.
20 We have got it into an earlier time period and
21 a latter time period to adjust for that
22 possibility of somebody being issued a badge at

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1 MTR and, then, going into CPP and being exposed
2 in those corridors and those analytical
3 laboratories to the actinides.

4 Before I go on to the timeline,
5 should I pause here and address any questions
6 or do you want me to just go on with the
7 timeline?

8 CHAIRMAN MELIUS: Go ahead and do
9 the timeline, I think. It's easy.

10 DR. TAULBEE: Okay. Well, what I
11 have tried to do here is summarize all of the
12 activities we currently have going on out here
13 in Idaho. We are currently working on the
14 Argonne National Laboratory West SEC petition.
15 This is scheduled to be delivered to the Board
16 and the petitioners in mid- to late October.
17 We are targeting 30 days before the Board
18 meeting in order to try to give everybody time
19 to look at this and digest it.

20 At that time, when we issue this
21 report, we will begin work on the reserve
22 sections of the INL SEC. If you recall, there

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1 were certain areas at Auxiliary Reactor Area 1,
2 Test Area North, and then, the burial grounds,
3 where we reserved certain sections that we
4 needed to do more follow-up. We will start
5 that in the mid-October timeframe, and we are
6 tentatively planning right now two data
7 captures out here in October, one in October,
8 one at the beginning of November.

9 And we might conduct some
10 interviews, if possible, at that time period.
11 The reason I say "if possible" has a lot to do
12 with these really defined time periods that we
13 need to follow up. We are having difficulties
14 identifying people who worked in specific areas
15 that are willing to talk to us during those
16 time periods right now. So, if we can, we will
17 conduct some interviews, and I will keep the
18 Board and SC&A apprised as we get closer to
19 that.

20 Our anticipation is that the CR
21 addendum will be delivered to the petitioners
22 and to the Board in February of 2016, again,

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1 hoping for a 30-day advance submittal before
2 the March Board meeting, at which time I expect
3 that we should be able to present that to the
4 Advisory Board.

5 Following that meeting is when we
6 will begin work with INL's Work Group and SC&A
7 to resolve findings, issues, and concerns that
8 they have with the current report that we have
9 out there, INL SEC 219; the Argonne National
10 Laboratory report that we hope to present in
11 November, and then, the ER addendum that we are
12 anticipating presenting to you all in March.

13 And then, at the same time, March
14 2016 is when we will begin the research for the
15 Chemical Processing Plant for the post-1974
16 time period. If you recall, we cut it off in
17 December of 1974 due to the publishing and the
18 beginning of the implementation on the Health
19 Physics Upgrade Program at the Chemical
20 Processing Plant. And so, at this time, we
21 don't know if December of 1974 or January of
22 1975 they began to institute enough bioassays

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1 such that we can reconstruct doses. We just
2 haven't evaluated that time period yet. And
3 so, we are proposing to evaluate that once we
4 get these other reports out.

5 And with that, I will be happy to
6 answer any questions. Thank you.

7 CHAIRMAN MELIUS: Okay. Thank you.

8 Board Members with questions?

9 (No response.)

10 If not, I have one question. What
11 is, for this latest set of dose-monitoring
12 records that you just received yesterday, or
13 whatever you told me --

14 DR. TAULBEE: Yesterday.

15 CHAIRMAN MELIUS: -- about how long
16 do you think it will take to process that?

17 DR. TAULBEE: To get them uploaded
18 to the Site Research Database?

19 CHAIRMAN MELIUS: Uploaded, yes.
20 Yes.

21 DR. TAULBEE: Probably within a week
22 or two.

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1 CHAIRMAN MELIUS: Okay.

2 DR. TAULBEE: They will be going
3 back to Cincinnati on Friday and they will be
4 there in the office, but they do have to enter
5 them into the Site Research Database.

6 CHAIRMAN MELIUS: Yes. No, I
7 understand.

8 DR. TAULBEE: I hope they can do it
9 next week, but --

10 CHAIRMAN MELIUS: Yes.

11 DR. TAULBEE: -- but I can't promise
12 that.

13 CHAIRMAN MELIUS: Okay. Good.
14 Because I think that makes some difference in
15 terms of where we go from here.

16 DR. TAULBEE: We did receive about
17 1,000 pages. I did a quick count of the number
18 of pages, and there's about 20 people per page.
19 So, you are looking at about 20,000 dosimeter
20 readings for construction trades workers.

21 CHAIRMAN MELIUS: Uh-hum. Okay.
22 Okay.

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1 Any other Board Members with
2 questions?

3 MEMBER ZIEMER: Tim, could you put
4 the definition slide back up again? There was
5 talk that there were other changes. I just
6 looking to see whether the one I had been
7 looking at is the same. What is the date on
8 this slide? Is this the 21st?

9 DR. TAULBEE: This should be the
10 last one.

11 MEMBER ZIEMER: Is that the one we
12 got with our last package?

13 DR. TAULBEE: Yes, it should be.

14 CHAIRMAN MELIUS: Yes.

15 MEMBER ZIEMER: It hasn't been
16 changed since?

17 DR. TAULBEE: No.

18 CHAIRMAN MELIUS: No. No, no.
19 There was an interim, there was a set of slides
20 that Tim presented to the work group earlier in
21 July. And I actually raised some questions
22 then just to make sure that we had the --

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1 compound Class Definitions are a little bit
2 tricky. And what happens if a person overlaps
3 between the two, which they could do in terms
4 of --

5 DR. TAULBEE: That shouldn't matter
6 because one dosimeter in either of those
7 periods qualifies for entry into the SEC.

8 CHAIRMAN MELIUS: Yes, but if they
9 are -- yes, I think it is okay now. It wasn't
10 as clear in the last --

11 DR. TAULBEE: No, the one at the
12 beginning of the month.

13 CHAIRMAN MELIUS: Yes.

14 DR. TAULBEE: Yes, this is much
15 clearer.

16 CHAIRMAN MELIUS: Yes. And that was
17 the issue I raised. And it would just confuse
18 things if we presented the interim definition
19 now, and so forth.

20 MEMBER ZIEMER: And SC&A was testing
21 that out, were you not, this one --

22 CHAIRMAN MELIUS: I think we are

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1 going to hear more from SC&A.

2 MEMBER ZIEMER: We are going to hear
3 from that, yes, I saw something. Is this going
4 to hold up is my concern.

5 CHAIRMAN MELIUS: Well, I think that
6 is all our concern about that, which is why I
7 was asking Tim about when the brand-new data
8 would be available for evaluation, and so
9 forth, because there is that.

10 I mean, we have had trouble,
11 difficulty using badging as a criteria for
12 inclusion before because not everyone is badged
13 either for an area or even on a site. We have
14 those issues again, and how do we make sure of
15 that? That is hard to evaluate because you are
16 looking for the exception.

17 People that apply don't always --
18 often they have worked for a long time, so they
19 are okay. It is the people with shorter-term
20 exposures or maybe things just got less rigid
21 for a year or two or something. The '74, the
22 four-year nine-month period we didn't realize,

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1 NIOSH didn't realize until they went back again
2 and looked and found out that the practices had
3 changed for that time period. So, the Class
4 Definition in March that we got was different
5 because NIOSH didn't realize. Now, obviously,
6 they have updated it to take that into account.

7 But I think the question I would
8 have -- and we can talk more a little bit later
9 -- is, do we have adequate information now that
10 we feel comfortable going forward with this or
11 even part of this definition now?

12 If there are no other questions
13 right now, Tim won't go far, and I think we
14 have a presentation from SC&A. Two? Okay.

15 MR. HINNEFELD: Okay. For anyone
16 who is on Live Meeting, we have gone off Live
17 Meeting because we didn't have this in the
18 content. We are going to show this from our
19 website. So, it is the version that is on our
20 website.

21 MR. BARTON: Okay. Thank you.

22 A lot of what I am going to say sort

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1 of overlaps some of the information that Tim
2 just presented. But, basically, we are going
3 to talk about what SC&A did to sort of try to
4 evaluate this Class Definition, particularly
5 with the fact that it requires a dosimeter.

6 As Tim said, that has sort of been
7 modified a little bit since we first started
8 this work. Originally, it was just a CPP
9 dosimeter for all periods. Now there is the
10 period in the 1970s where it is just an INL
11 dosimeter that is required.

12 Oh, I'm sorry, I am Bob Barton. I
13 am with Sanford Cohen & Associates.

14 So, SC&A's investigative approach,
15 basically, is twofold. One was the assessment
16 of worker interviews that had already taken
17 place to this point. The second one, which is
18 really the focus of this report, was to be able
19 to evaluate claimant records to sort of put it
20 to the test to see if this definition would
21 hold up and not potentially miss any claimants
22 that otherwise should have been included.

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1 So, just a quick slide about the
2 worker interviews. Basically, 50 sets of
3 interview summaries had been available when we
4 put this together. Those interviews were
5 conducted by the Board, NIOSH, and SC&A from
6 June to November of 2014.

7 Not all the worker interview
8 summaries had been finalized at this point.
9 But the ones we did have pretty much affirm the
10 universal badging of personnel who were
11 entering a radiological area at CPP. So, based
12 on that, we just have two recommendations
13 really.

14 And that is to continue the line of
15 inquiry with future interviews and focus on
16 those badging policies, so that we can try to
17 convince ourselves that that is, in fact, the
18 case for all relevant workers.

19 Also, obviously, we want to evaluate
20 the interview summaries that weren't available
21 yet to take a look at those. Those would be in
22 addition to the ones that we have already

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1 looked at.

2 So, on to the claimant evaluation.
3 What we really wanted to get done is
4 characterize the external dosimetry for the
5 completeness of the records and to look for
6 gaps. That is item 2 there. This is sort of
7 the classic coworker question: when you see a
8 gap, you ask the question, why is there a gap
9 in the monitoring? And the two usual
10 possibilities are they weren't monitored
11 because they weren't exposed or they were not
12 monitored but like they should have been
13 exposed.

14 In this particular site, there is a
15 third option that is rather interesting. It is
16 that they moved to another location. In
17 particular, there are two locations. One is
18 Argonne. And, of course, that is being
19 evaluated separately. The other location is
20 the NRF area, which is the Naval Research
21 Facility, I believe. That is not covered under
22 the program.

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1 But, in either of those cases, if
2 they had moved to those locations, they
3 wouldn't have any dosimetry associated with
4 INL, even though those two areas are
5 technically within the site boundary. So, if
6 you see a gap, you kind of have to ask the
7 question, is that the reason why we see a gap?
8 It is because they weren't monitored because
9 they actually were moved to a different area.

10 And the last one is really where the
11 rubber meets the road. That is, does this
12 Class Definition as it stands capture all the
13 relevant workers that it should?

14 A little bit about our approach
15 here. We wanted to analyze a subset of
16 claimants and their available records, which
17 obviously we want to look at their dosimetry
18 records to see how complete they are and
19 evaluate any gaps as we see them.

20 We want to look at that Department
21 of Labor file. You might wonder why, but there
22 is actually a lot of good information in those,

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1 especially pertaining to who the claimant
2 worked for, because they use that to establish
3 the covered employment. But there is also a
4 lot of energy statements that you can find in
5 those that aren't actually contained in the
6 CATI interview because they were done as part
7 of the actual initial application process.
8 And, of course, we have the CATI interviews
9 themselves.

10 We used an iterative process in
11 selecting the claimants for a focused review.
12 A lot of times we will go into these records
13 and try to get a cross-section, a
14 representative cross-section of claimants. In
15 this case, since we are really testing a Class
16 Definition to see if it going to miss anyone,
17 we wanted to do a focused review, really go in
18 there and sort of seek out, see if we can find
19 any problems.

20 So, the main thing I want to stress
21 here is it is not a representative cross-
22 section. It is not a random sample. We

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1 literally went in to try to find the claimants
2 who might be problematic.

3 A little bit more on our approach.
4 The initial group of claimants, we did sort of
5 in the beginning spread a wide net, just to get
6 an idea of what the dosimetry records look like
7 for different job types, different employers,
8 different subcontractors.

9 As you can see here, it is sort of
10 the initial go at it. We have a variety of job
11 types there, not just subcontractors or
12 construction, but you also have the HP techs;
13 you have the firemen, operators.

14 Based on that initial assessment, we
15 found, not surprisingly, that we should be
16 probably focusing on the subcontract workers,
17 in particular, those that had intermittent
18 employment. They might have come to the site
19 for a month or two, perhaps been laid off, and
20 then, come back six months later for a month or
21 two.

22 So, in this initial

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1 characterization, we have 30 total claimants.
2 That includes the ones in the initial group,
3 which was sort of spreading the wide net, and
4 also the focus group, where, again, we are
5 trying to find problems to see if this thing
6 really holds up.

7 So, what information did we have to
8 go on? Well, obviously, we had the cycle
9 reports, which you saw several examples in
10 Tim's presentation; the temporary badge
11 reports; internal monitoring, because any sort
12 of internal monitoring record will, also,
13 contain, obviously, a date and the work
14 location.

15 We use the CATI and other interview
16 statements. Like I said, you can sometimes
17 find those in the Department of Labor files.

18 And this next one is really kind of
19 interesting. It is called a location file
20 card. And this isn't a dosimetry record. It
21 is literally a record for an individual worker
22 that gives the employer, the area of work, and

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1 then, the dates that they were assigned to that
2 area.

3 Now these weren't always complete.
4 Sometimes you would only get the employer.
5 Sometimes you would only get the area. And you
6 usually would get both dates, but sometimes you
7 would only get the start date or sometimes you
8 would get the end date. But the point is, it
9 is a piece of information that we can directly
10 tie workers to CPP and, then, test to see if
11 they have a badge.

12 This last one, the master security
13 card, is only slightly useful because it
14 doesn't give an area, but oftentimes we can use
15 that to say, well, they were transferred to
16 Argonne or they were transferred to the NRF,
17 and that explains why we see a gap.

18 So, based on those 30 claims we
19 looked at, we developed five basic categories.
20 I have them listed here. I think it might be
21 more useful to us if we just go through some
22 examples, so you can see what each one of these

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1 really represents.

2 We are going to look at a couple of
3 these charts. So, I just want to kind of
4 explain what we are seeing here. It is a
5 timeline, and the line on the bottom, the red
6 line, that is the DOE-covered employment. You
7 see a bunch of blue dots above it. Those are
8 actually the end date for the film badge
9 cycles. And then, the green is that location
10 file card I just described, where it is not a
11 dosimetry record, but it does show information
12 about where a worker was assigned.

13 So, a Category 1, basically, we
14 define as no observable gaps. As we can see,
15 the red line is pretty continuous through this
16 employment, pretty much the entire SEC period,
17 and all those little blue dots, you really
18 don't have any gaps. So, from our standpoint,
19 we just have no observed gaps with this; they
20 are not a problem.

21 Category 2 gets a little more
22 interesting. Here again, we have a red line

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1 spanning the entire SEC period. As you can
2 see, very close dosimetry records. And then,
3 about 1967, they are start to fan out. And so,
4 you almost have like an annual dose record.

5 Now you might look at that and say,
6 well, they were on an annual basis. Not so
7 fast. When you actually look at the codes,
8 this particular worker was supposed to be on a
9 quarterly monitoring schedule after 1967. As
10 you can see, in 1967, it is exactly a quarter,
11 but, then, it gets spread out. So, you say,
12 are there missing records there?

13 Well, an interesting thing that
14 these records have is called a PSN number.
15 Basically, what we observed was, even though
16 these dosimetry records are more spread out,
17 they actually have a sequential number
18 associated with them. So, one could surmise
19 that, even though their dosimeter was labeled
20 as quarterly, a decision was made that perhaps
21 an annual basis was more appropriate. When you
22 look at each one of those records, they go

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1 sequentially. So, one, two, three, four, five,
2 and such. So, even though there might appear
3 to be gaps on this chart, it is SC&A's opinion
4 that these records are still complete.

5 Move on to Category 3. It gets a
6 little more interesting. As we can see here,
7 this worker had some gaps in their employment.
8 We have four separate employment periods here.
9 There is a cluster of dosimetry records around
10 the end of 1963. From about mid-1967 into
11 1969, you have a very close cluster of
12 monitoring. The third monitoring period there,
13 we don't have anything. And the fourth one, we
14 have a couple of dosimetry records towards the
15 end.

16 Now a couple of notes on this
17 particular example. In 1964, while it shows it
18 as blank, we actually have a dosimetry record,
19 but it actually indicates that the worker was
20 not in the area. So, while he had a dosimetry
21 record, he was not in that actual area. There
22 was no dose recorded. We really don't know

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1 where he was.

2 In the second period where there is
3 that big cluster of dosimetry records,
4 interestingly, that is a situation that the
5 worker was actually badged in multiple areas in
6 the same timeframe. In this case, it was CPP
7 and the MTR area. He actually had a badge in
8 each area because I guess he moved freely
9 between each area and he needed to be
10 monitored.

11 The third employment period, again,
12 no dosimetry. All we know about that period is
13 he worked for H.S. Wright, but we don't know
14 where. So, we really don't know what was going
15 on there. So, that is sort of a situation
16 where there is really kind of a gray area. We
17 have these gaps. We don't really have a way of
18 explaining them, but we really don't have any
19 indication either way of whether there should
20 be a dosimetry record there and it is missing
21 or the person simply wasn't monitored because
22 they were doing non-radiological work.

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1 And these are the notes I just said.
2 Let me see if I missed anything.

3 There were no bioassay samples, the
4 fourth bullet. So, again, we don't have
5 information that way. Unfortunately, the CATI
6 report was with the survivor, and they had no
7 information about what work locations this
8 claimant was in. So, again, we just simply
9 don't have really the information to explain
10 either way why that gap exists.

11 Category 4, this person has no
12 dosimetry records during the SEC period. As
13 you can see, there is one fairly-lengthy
14 employment in the beginning, two very small
15 dots; that could be a week or two, you know.
16 The one dot sort of over towards the right,
17 that one is actually explained by the worker
18 being transferred to ANL, which you can see the
19 yellow dot above it.

20 And then, we have the final period.
21 Again, no dosimetry. We don't really know.
22 Some notes on that. The location file card for

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1 this claimant only indicates the employer. We
2 don't have any information on location, at
3 least during the SEC period. We have several
4 notes from the CATI report, which was performed
5 with the claimant, and they named the CPP as
6 one of the work locations. They also named the
7 LOFT project and the SL-1 reactor.

8 Interestingly, when asked about the
9 frequency of the badge, they said daily. And
10 as we saw on the previous chart, we don't have
11 any of those records. They say the badge
12 exchange frequency was several times a week.
13 And there's a couple of descriptions of CPP
14 here describing the ways. And they say in that
15 second-to-last bullet there that they were at
16 CPP a lot of the years, and this was one of the
17 most contaminated areas.

18 Now the location file card does
19 indicate that in 1978 they were assigned to
20 CPP. So, you have to ask yourself, well, is
21 that what the CATI report is referring to? But
22 the location file card only says two months;

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1 the claimant indicates a lot of years. So, it
2 is really tough to say.

3 But, based on that CATI report, it
4 sort of got us scratching our heads and gives
5 us a little pause. When we see no dosimetry
6 for those periods, you have to ask yourself,
7 why? And could there potentially be a problem
8 there? Again, it is still a gray area because
9 we don't have direct evidence that their CPP
10 work happened during the SEC period, but it is
11 certainly a possibility.

12 Onto Category 5, and Tim described
13 these, we don't have any dosimetry records that
14 indicate the area. All we have is the annual
15 summary. So, it is really not possible to
16 figure out where that worker was badged.

17 The fact that they have an annual
18 summary indicates they were monitored, but,
19 again, we don't have the information to say
20 where. So, that really gave us pause, which is
21 like the last category here. It really
22 prompted us to move into what I like to refer

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1 to as phase 2, where we want to figure out how
2 many of these Category 5 claims do we actually
3 have.

4 So, we went in and we identified at
5 the time about 800 SEC claims. That is
6 slightly less than what Tim found, but fairly
7 close. And we found that, of those 796, 144
8 were Category 5. That is, they only had the
9 annual records. Of those 144, we went in and
10 we found that 39 had direct evidence that they
11 were assigned to CPP during the SEC period.

12 Now what do I mean by direct
13 evidence? We are back to those location file
14 cards. We have a record that the person was
15 assigned to CPP during a specific era of the
16 SEC period. And of those 39 -- again, we are
17 sort of parsing this down -- 144 Category 5s;
18 39 of those had direct evidence at CPP and 12
19 of the 39 happened to be subcontract workers.

20 So, that leads us to Finding 1. The
21 dosimetry records contained in NOCTS are not
22 sufficient to accurately determine if a given

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1 claimant worked at the CPP and, thus, qualifies
2 for the SEC for at least some work, due to the
3 absence of external dosimetry records
4 designating the area worked.

5 Now some supplemental records were
6 captured beyond what is contained in the
7 claimant NOCTS file. And during an April 22nd
8 technical call, NIOSH informed SC&A and the
9 Work Group that significant additional
10 dosimetry records had been captured and that
11 the NOCTS records probably were incomplete.
12 Now this is not the records that Tim was
13 describing that was in June; this was before
14 that. So, we will call it the supplemental
15 records, part 1.

16 So, that was about over 7,000 pages.
17 It included both routine reports and temporary
18 badges. So, we said, all right, we have 39
19 Category 5 workers who we have direct evidence
20 were at CPP. Let's go into these supplemental
21 records and see if we can find that one film
22 badge which would allow them to be included.

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1 We were able to do that for at least
2 one dosimetry badge of those 39 workers, or 36
3 of the 39 workers, which is good. So, that
4 means you could potentially use the
5 supplemental records to sort of fill in some of
6 those gaps. But there are still those three
7 workers who we could not find at all. As it
8 happens, all three were employed by
9 subcontractors, and they had the construction
10 or maintenance-type jobs. As we noted on the
11 previous slide, 12 of the 39 Category 5s were
12 employed by subcontractors. So, that
13 essentially means that three, the three that we
14 couldn't find records for, three of the 12
15 subcontractors didn't fit. That is roughly 25
16 percent or it is 25 percent.

17 Now we fast-forward to the
18 teleconference earlier this month. I assume
19 NIOSH saw those three workers and said this is
20 really a problem. So, NIOSH queried DOE for
21 specific records to those three workers. DOE
22 was able to supply those records in time for

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1 the meeting. And so, we actually do have that
2 one dosimetry badge for those three claimants
3 that really appeared to be problematic
4 previously.

5 And so, we updated our Finding 2
6 based on that information. And this reads,
7 "Based on the evaluation of available claimant
8 records, a portion of the supplementary
9 dosimetry records" -- that is because we know
10 that we didn't have any of them at this point
11 -- "and claimant-specific dosimetry records"
12 -- and what I mean by that is the records for
13 those three workers that were problematic --
14 "SC&A was able to find at least one dosimetry
15 badge for all claimants reviewed who had direct
16 evidence of work at the CPP. However, SC&A is
17 not able to evaluate the completeness of the
18 full set of supplemental records until such a
19 time as all CPP-related external monitoring"
20 -- and that would be for the first period in
21 which you need a CPP-related badge -- "and INL
22 external monitoring as a whole for the second

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1 period," because all you need is an INL badge,
2 "we can't evaluate that completeness until it
3 is obviously provided."

4 So, some summary conclusions here.
5 The NOCTS records are currently insufficient.
6 As Tim pointed out, that was mainly based on an
7 efficiency measure. When DOE was first sending
8 these records, they weren't thinking we are
9 going to need that sort of area-specific
10 information. So, supplemental records are going
11 to be required to be able to administer this
12 SEC as it is currently set out.

13 It is our opinion that the
14 probability of incorrectly excluding an AEC or
15 prime contract employee from the SEC is
16 probably pretty low, and that is based on our
17 observations from the first part of the
18 presentation where we had that SC&A 30, and it
19 really looked like gap analysis.

20 And as I said before, at least one
21 dosimetry record was identified for each claim
22 with direct evidence that they were there. But

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1 we would like to remind you that at this time,
2 or at the time of creating this presentation,
3 all of the supplemental records were not yet
4 available. So, we really can't say to what
5 extent that will fill in all the gaps we have
6 seen.

7 Some SC&A recommendations:

8 First, it would be good to evaluate
9 the additional supplemental records, see if
10 they fill in those gaps. As I said very early
11 on, conduct some focused interviews
12 specifically with some of the intermittent and
13 transient subcontractors and trades workers to
14 see what they have to say about the universal
15 badging policy.

16 This one, the third bullet, to what
17 extent it is feasible, we are not really sure,
18 but it would be a really good piece of evidence
19 is to ascertain what subcontractors actually
20 supported radiological work and, also what
21 subcontractors didn't support radiological
22 work. Because if you see a gap and you look in

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1 the records and you say, "Well, they moved to
2 such-and-such company. They only ever worked
3 maybe doing new construction in clean areas,"
4 that would be another important piece of
5 evidence.

6 Finally, because this is such a
7 complex SEC definition, it would be important
8 to validate the records search process. This
9 would include looking at specific workers to
10 see if there are any that appear to be excluded
11 from the SEC who really should not have been.

12 And I don't have a question slide.
13 So, I will entertain any questions. I heard
14 having shorter slides is better.

15 (Laughter.)

16 CHAIRMAN MELIUS: Questions from the
17 Board Members?

18 Yes?

19 MEMBER BEACH: I was just curious,
20 on the location file cards, were those for all
21 employees at INL, including construction, or
22 were they just for certain categories? What

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1 did you find in that?

2 MR. BARTON: I can't say for sure.
3 I know we found four construction workers or
4 subcontract workers, but there were also
5 certain claimants that didn't have them
6 included. And I don't know if that is because,
7 like the annual dosimetry records, it just
8 wasn't deemed important to send them, because
9 perhaps their employment was already
10 established or not. But I can tell you we saw
11 them for pretty much every type of work that we
12 looked at. But, like I said, there are certain
13 claimants that don't have them in their file,
14 for whatever reason.

15 MEMBER BEACH: And you found those
16 for all --

17 MR. BARTON: Also, I would like to
18 point out that those, while a very useful tool,
19 are not complete, either. In fact, if we go
20 back -- it will make you all sick -- all right,
21 well, let's look at this one.

22 The green up there is employment

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1 period that is covered by the location file
2 cards. As we can see, the period prior to 1967
3 we don't have anything in those files, but,
4 obviously, we have plenty of dosimetry there.
5 So, while those are a very useful tool, they
6 can't be considered complete, either.

7 MEMBER BEACH: Yes, and I guess I
8 wasn't thinking of as useful or not useful,
9 just curious about them and how they could be
10 used if something was missing. So, thank you.

11 CHAIRMAN MELIUS: Any Board Members
12 on the phone have questions?

13 MEMBER MUNN: That is an astonishing
14 amount of records --

15 MR. KATZ: Wanda, we couldn't hear
16 you very well. I'm sorry, Wanda, you're still
17 really unintelligible. Can you try again?

18 MEMBER MUNN: I will try.

19 MR. KATZ: There, that's much
20 better.

21 MEMBER MUNN: I have a delay,
22 regardless of how we speak from the phones

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1 here.

2 I was commenting that I think both
3 the agency and the contractor should be
4 complimented on the amount of details that is
5 going into this particular site and particular
6 setting. It is impressive for the reader and
7 for the listener to follow the amount of
8 activity that has gone into this.

9 Thank you.

10 CHAIRMAN MELIUS: Okay. Any other
11 questions?

12 (No response.)

13 Okay.

14 MR. KATZ: Yes, Paul has one.

15 MEMBER ZIEMER: Well, this seems
16 like kind of a futile exercise in a way
17 because, unless you actually could check every
18 single worker, you are not going to know the
19 answer to this, you know, whether there is a
20 missing one, so whether there is one person out
21 there that doesn't have dosimetry. But, if
22 that occurred, I am trying to think of how

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1 process-wise.

2 So, it goes to the Department of
3 Labor, and they would, then, say, "You're not
4 in the SEC. We don't have any dosimetry on
5 you." Is that what would happen?

6 MR. BARTON: Correct

7 MEMBER ZIEMER: So, then it would
8 bounce up to NIOSH?

9 MR. BARTON: Correct.

10 MEMBER ZIEMER: And they would have
11 an opportunity to pursue that, right? I am
12 just trying to think if it is worth the effort
13 at this point to search and search and see if
14 we can find one. Let it find itself in the
15 process. If we end up with this as a
16 definition, I am not sure what we accomplish by
17 pursuing what SC&A has been pursuing here.

18 CHAIRMAN MELIUS: But, if we had
19 done that in March, we would have been wrong
20 because NIOSH did not have available to it
21 complete information on the dose records and
22 the monitoring practices for the area, that

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1 they went to an INL-wide badging system as
2 opposed to the specific area badging system.
3 So, we would be here now, you know, and so --

4 MEMBER ZIEMER: I've got to think
5 about that.

6 CHAIRMAN MELIUS: Yes, uh-hum. You
7 see what I'm saying? And the missing set of
8 records which may be the key records Tim got
9 yesterday. And so, we have not looked at them.

10 I think you are raising a good
11 question, Paul. The question is, how much due
12 diligence do we do to assure that this Class
13 Definition is feasible to implement?

14 MEMBER ZIEMER: Yes, you don't want
15 to sample every single record.

16 CHAIRMAN MELIUS: Yes.

17 MEMBER ZIEMER: And if there is one
18 out there, I'm just sort of saying, okay, so
19 what happens in that case? I think it bounces
20 up to NIOSH.

21 CHAIRMAN MELIUS: Well, if it is
22 one, but what if it is -- you know, it depends

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1 on what is missing. I think we have heard
2 there are different things missing in different
3 parts of this, and record systems aren't
4 perfect. So, there is a question of how far do
5 we go, but right now I think we are at a fairly
6 early stage of looking at it.

7 You know, we are basically going on
8 what NIOSH knew from talking to various people
9 and investigating the site, NIOSH/ORAU. And
10 they talked to a number of people, but somehow
11 in the initial phase, as they went to do the
12 Class Definition, they were not aware that
13 there was this four-year nine-month, whatever
14 period it is, where badges were not given out
15 by area. They were given out, used for the
16 whole, and reverted back. And so, yes, I am
17 not sure what the right answer is.

18 MEMBER BEACH: Can I have one more
19 comment?

20 CHAIRMAN MELIUS: You can have one
21 more comment, and I am going to move us along.

22 MEMBER BEACH: So, one thing that I

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1 am concerned about is most of the missing that
2 we found early on were construction workers,
3 and we are also having difficulty finding
4 construction workers to interview. So, it is
5 just concerning in that aspect. And we don't
6 know what we are missing until they come
7 forward, and the path forward is not always
8 clear for people that are missing the records.

9 CHAIRMAN MELIUS: We need to give
10 the petitioners the time to make comments.

11 So, John, I am afraid we are skip
12 you. We don't have time.

13 I think we are trying to fit too
14 many slide presentations into a relatively-
15 short period of time.

16 MR. STIVER: This is John.

17 That would be fine. My presentation
18 is basically a status update anyway. So, it is
19 not like there is a lot of contentious issues
20 to be --

21 CHAIRMAN MELIUS: Right. No, I
22 looked at your presentation before I decided

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1 this, and it is available on the website.

2 Okay. Bob, you can sit down.

3 I believe petitioners are here or
4 wanted to make a comment. So, go ahead.

5 MR. ZINK: Hi. My name is Brian
6 Zink. I am the authorized representative for
7 Gerald Wolz. He is the petitioner.

8 He worked, actually, at INL and ANL,
9 had bladder cancer. His case went through dose
10 reconstruction and he was denied.

11 Over the course of however long this
12 petition has been pending, I talked to Gerald
13 about wanting or interested in being the
14 petitioner. He agreed, so we pressed forward.

15 Now, irony and life then hit him.
16 And when a proposed Class came out, Mr. Wolz's
17 employment dates don't match up with what is
18 now the proposed Class. He left INL to go to
19 ANL in '63, and therefore, what we are talking
20 about today, even though he is the petitioner,
21 excludes him as a claimant with his cancer.

22 Now he wants to address some issues

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1 with you also in a couple of seconds here. I
2 just want to bring up a couple of things in
3 terms of his authorized representative.

4 Most of the conversation today has
5 been about everything from the proposed Class.
6 The petition requested time earlier than the
7 '63 start date and included Mr. Wolz's time
8 from '55 to '63 at INL.

9 As an authorized representative, I
10 obviously deal with SECs all over the nation
11 and review them. I think there is a general
12 principle, anyway, that the farther back you go
13 in time, the more, at least from my
14 perspective, the more suspicious you get of the
15 recordkeeping that was going on and the issues
16 that might have been influencing those record
17 checks.

18 And also, just as a matter of
19 passing of time, things get a little more
20 foggy, information gets lost. And so, I just
21 want to address quickly the timeframe before
22 the proposed Class. And I will give three

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1 quick examples of what may or may not have an
2 influence on what NIOSH has looked at in terms
3 of review.

4 The packet that came for this
5 meeting I received last night when Mr. Wolz
6 brought me his copy. Mine is back in St.
7 Louis, I'm sure, still in the FedEx box.

8 But I did review the other one in
9 pretty much detail from the last meeting. I
10 don't know how much has changed. But in my
11 conversations specifically with Mr. Wolz, he
12 primarily was a part of the RaLa Project or the
13 RaLa process and the analytical lab. He gave
14 three examples of what may or may not have an
15 influence in long-term evaluation of what kind
16 of monitoring went on or what kind of exposure
17 they had while they were working there.

18 The first one -- and I know that
19 this analysis has been about the dosimetry
20 badges; everybody is badged, and where they
21 were and how long and where they wore it. And
22 this is part of my naivety about the concepts

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1 of badging. But he talked about being
2 presented with finger badges or ring badges.

3 In my review of the RaLa process in
4 the report, or anywhere really, did I see
5 anything that analyzed that as a cumulative
6 part of the dose process. And again, I am not
7 a scientist or a health physicist. So, I don't
8 know if those things would affect the long-term
9 dose reconstruction of a case.

10 The other example would be, when he
11 was at the analytical lab, he told me about
12 having to put a brown paper on the floor every
13 day two or three times a day to prevent the
14 tiles from being contaminated. That paper,
15 then, either at the end of the day or during
16 the daytime, would be removed and thrown away.
17 I'm not sure what or if there is any record of
18 that, if there is any readings from those,
19 whether HP looked at those types of things or
20 not. And I am curious to know whether NIOSH
21 had looked at or received any of that type of
22 information.

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1 And the third would be just his
2 talking about air leaks from department to
3 department, and that maybe, then, if that
4 occurred, if those air leaks were occurring,
5 what types of air monitoring was going on? And
6 is there a trace that you can see with those
7 air monitors at the analytical lab or the RaLa
8 area that would influence somebody's dose
9 reconstruction?

10 With the issue of the proposed
11 Class, I want to thank Tim -- I talked to Tim a
12 little bit today -- and everybody that worked
13 on it, because in reading the report, I
14 understand how detailed it is. Developing that
15 report must have been very difficult. I want
16 to thank them on all their hard work.

17 From a perspective of an authorized
18 representative working these cases and the
19 example of the 36 out of 39 or the one that may
20 not have the badge, I can tell you that that
21 would be my client, the one gentleman that
22 swears he was in CPP, had a badge, but isn't on

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1 the record.

2 And the fairness of that issue I
3 think comes into play when you are trying to
4 evaluate the definitions. I know that most of
5 the SEC definitions in other facilities is a
6 broad-based definition: employed 250 days,
7 prove you worked there, and you are going to
8 qualify for the SEC.

9 My client doesn't fit into this time
10 anyway. So, my argument really is I want this
11 to be able to go forward, so that the people
12 that will benefit from it get their benefits.

13 On the other hand, when you are
14 talking the technical issues that come to play,
15 evaluating the cases when you are out in the
16 field, it becomes complicated and frustrating
17 when you believe, as an authorized
18 representative or if you are just a claimant
19 filing it on your own, that you're that guy.

20 Obviously, if you are a living
21 worker, the benefits are extreme. If you are a
22 survivor, then the frustrating thing is even

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1 more frustrating because your ability to react
2 to questions about where you were and what kind
3 of proof you can give that you were in the CPP
4 is very, very difficult.

5 So, with that, I will let Gerald say
6 his piece, and I appreciate your time.

7 CHAIRMAN MELIUS: Yes. Before you
8 say anything, let me just clarify a couple of
9 points here. One is that the review of the
10 petition is not limited to what we have been
11 talking about today. It goes back to '49, and
12 I'm not sure when the end date is that you are
13 reviewing. You are up past '74.

14 DR. TAULBEE: The petition requested
15 through December of 1970, and so, that was the
16 initial evaluation. We went through 1974
17 because, when we found an infeasibility at CPP,
18 we had to go until we felt that there was a
19 feasibility again.

20 CHAIRMAN MELIUS: And there are, in
21 addition to this one area, there are other
22 areas that NIOSH has reserved which they are

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1 still evaluating. And there are areas that the
2 Board is reviewing comprehensively their entire
3 report. And so, the Board, with our
4 contractor, we may raise questions about
5 additional areas. And there is still the
6 Argonne West report to come out that Tim
7 mentioned in his, which could further
8 complicate this.

9 So, I just want to make sure
10 everybody understands that this is much more
11 comprehensive than what we have been talking
12 about today. Actually, if I had let John
13 Stiver talk, it might have been a little
14 clearer to you.

15 But I didn't want you to think that
16 you are already excluded in terms of what is
17 going on, and information that you or anybody
18 else can provide about the entire site is
19 helpful and is useful. We usually try to break
20 these down into sort of work with and
21 understand and do them sort of step-wise in
22 terms of this process. So, I just wanted to

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1 make sure that is clear and that people don't
2 think that this is the only thing we are
3 looking at.

4 With that introduction, I apologize
5 for stopping there, but I hoped that it would
6 help.

7 MR. WOLZ: Thank you. I appreciate
8 the opportunity to just address you briefly.
9 And thank you for the work that you have done.
10 It is not only appreciated by me, but I know I
11 just don't think of me as Mr. Wolz; I guess I'm
12 the guy that is responsible for all the work
13 you're doing. You can either like me or hate
14 me for it. But it is appreciated, and I do
15 hope that it will be of some benefit to many of
16 the fine people I worked with over the years,
17 many, many years ago.

18 I kind of think of this whole thing
19 like my workers, a lot of people are observers
20 and other people have been in the heat of
21 battle. Think about the battle over airspace
22 over Germany in World War II and the people who

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1 went up in the B-17s, and they actually took
2 the bullets and the flack, and they felt the
3 fear and the problems associated with their
4 survival.

5 And they trusted -- they were young
6 men like we were -- and they trusted in -- in
7 our case we had HPs and we had monitoring,
8 dosimeters, and things like that, that they
9 said, "You'll be fine. You know, you can have
10 so much of a dose and you can go in and do this
11 work, and you'll be fine."

12 And so, we kind of took the bullets
13 like those guys did up in the B-17s in World
14 War II. And it was fine. It was a good job,
15 and we needed the work and were happy to do it.

16 But now, as more information comes
17 -- I worked there for over 40 years on the site
18 -- I see things improved. Back in those days,
19 I mean, we were flying B-17s versus you're
20 probably in jets today. So, things have gotten
21 better.

22 But I did see the spills, the gas

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1 leaking in the facility. I see the worries
2 that people had that were operators and
3 supervisors and things that ran around.

4 Most of the concerns I have had to
5 do with working in the analytical lab. And
6 there was two cells. One was a warm cell, and
7 the other was the hot cell where we had the
8 radioactive samples come in. And that is the
9 one that Mr. Zink described that was
10 contaminated almost every shift. And we would
11 clean up the blotter paper, and so forth.

12 Anyway, it was quite a time, and we
13 can all have, those of us that are observers
14 looking back, you all have done a good job
15 trying to see how things were in those times.
16 And I appreciate what you have done to try to
17 understand how life was in those times.

18 But, you know, you can have
19 sympathy, but you really can't have empathy
20 unless you have been there. And it is just
21 like the guys in the B-17s; I have sympathy,
22 but I don't have empathy. I wasn't there.

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1 So, I thank you for your service and
2 your work, and I hope it will be of great
3 benefit to at least someone.

4 I do say, though, finally, that
5 there are two words that come to my mind. One
6 is trust, which we trusted. We trusted, and it
7 didn't quite work out. And also, if there is
8 any doubt, if in all this process there is any
9 doubt, there is only one way to be fair, and
10 that is to include anyone who had radiation and
11 got cancer, as far as I'm concerned.

12 So, I thank you for your time.

13 CHAIRMAN MELIUS: Thank you. We
14 appreciate your willingness to step forward,
15 and we will do the best we can to address these
16 issues.

17 We need to decide what to do to step
18 forward, at least in this initial
19 recommendation from NIOSH. I think, as I have
20 stated, I'm concerned that we are still
21 gathering information and it is still early,
22 and I am little more concerned because we have

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1 had surprises as we have gone along. I would
2 like to make sure, at least feel more
3 comfortable before we move ahead with making a
4 recommendation.

5 At the same time, again, keeping in
6 mind what Paul said, it is that we could spend
7 a lot of time trying to follow this through to
8 the last person and not be able to actually get
9 there. And I don't think that is fair, either.
10 But I think giving it some more time for both
11 SC&A and NIOSH to gather this information and
12 evaluation, I think would be helpful.

13 But that is just my view from the
14 Work Group. The Work Group did not make a
15 recommendation because we were catching up with
16 some surprise reports, last-minute reports, and
17 so forth. But that's fine.

18 Other views?

19 MEMBER ANDERSON: From the
20 Committee, I mean, part of the thing is, so how
21 much time do you think is needed and what more
22 is going to be done? I think I am very

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1 comfortable with saying let's give it a little
2 more time because data just came forward. We
3 heard about entering more data, but it really
4 comes down to, is there an alternative approach
5 to the definition they are working with? I
6 mean, has the Committee thought about what
7 would be that?

8 CHAIRMAN MELIUS: Paul?

9 MEMBER ZIEMER: Well, aside from the
10 issue of alternative definitions, I think
11 procedurally it is appropriate, and our process
12 usually is that in situations like this the
13 Work Group involved makes a recommendation.
14 And I think they haven't had the opportunity
15 yet on this. I would like to see the Work
16 Group take a look at this.

17 MEMBER ANDERSON: Yes, I mean, if it
18 is, just because of the timing of this, the
19 Work Group didn't get a chance to review it
20 all, get together and talk, make a
21 recommendation, then that certainly can be
22 done.

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1 CHAIRMAN MELIUS: Yes, a chance to
2 get together and talk, but we really didn't
3 have time to review the information --

4 MEMBER ANDERSON: Yes.

5 CHAIRMAN MELIUS: -- because, as you
6 see, it is happening very quickly. And again,
7 I am not faulting NIOSH or SC&A for how this
8 information came forward, but at the same time
9 I think people need time to review.

10 What I would propose is that I think
11 the process -- and Phil and the other Work
12 Group members can chime-in if they have some
13 thoughts also -- but we give both NIOSH and
14 SC&A some time to look at this new set of data,
15 monitoring data, because I think that will be
16 helpful, and understand it and what is
17 available and how extensive it is, and so
18 forth, and how that meshes up with what else we
19 have heard, and do that.

20 That we, after they have had a
21 chance to do some evaluation, that we have a
22 Work Group meeting and sort of map out what

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1 evaluation makes sense to do on that and a
2 timeframe for that.

3 I would hope we could at least get
4 some progress made on that and maybe even be
5 able to make a recommendation by the time of
6 the Board call on September 22nd. That is a
7 couple of months from now. If possible, do
8 something there; if not, certainly the November
9 meeting.

10 MEMBER ANDERSON: I think that is a
11 good time.

12 CHAIRMAN MELIUS: Yes, yes, and do
13 that. It is sort of a step-wise process.

14 I think one of the other issues --

15 MEMBER ANDERSON: Make that a
16 motion.

17 CHAIRMAN MELIUS: Well, I just want
18 to mention one of the other issues that I think
19 everyone has to recognize is that, I think Tim
20 pointed out in his timeline going forward,
21 which I had asked him to do because it helps
22 us, is there's lots of other things that need

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1 to be done here, again, to be fair to everybody
2 that worked on the site and to get enough
3 information out for evaluation and for NIOSH
4 really to finalize their recommendations on
5 both Argonne West, and there's some reserved
6 areas in the original report that they did.

7 So, this is going to take some time,
8 and that effort is taking away some of the
9 resources that might be available to do it.
10 So, if this is all we were concentrating on, I
11 think we would be able to address it very
12 quickly. I'm not sure that that is going to be
13 easy.

14 As I say, again, if we have to go
15 back to the site and do interviews or gather
16 other information or rely on NIOSH to do
17 something, it is going to be difficult. But I
18 think, again, we try to do it, so we can do an
19 update maybe, at least an update at the
20 September meeting, maybe a recommendation. And
21 then, take it one meeting at a time and see
22 where we are with this.

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1 It is possible that some of the
2 reserved areas will affect this in terms of
3 what might get covered as well as the Argonne
4 West. So, do that.

5 Phil, you are the Work Group Chair.

6 MEMBER ANDERSON: Yes, we're making
7 commitments for you, Phil.

8 (Laughter.)

9 MEMBER SCHOFIELD: Thanks. I
10 appreciate that.

11 MEMBER ANDERSON: We just want you
12 to say yes, and then, we will be good to go.

13 MEMBER SCHOFIELD: Well, you know, I
14 will say INL has really been helpful. There's
15 been numerous trips up here for interviews, for
16 document retrievals. And if you walked in that
17 building and looked at the shelves of just row
18 upon row of boxes, and they are not all neat,
19 categorically itemized where you can just say,
20 "Go down row 3, you know, the fourth shelf, the
21 fifth one over, and that's where your document
22 is going to be."

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1 Like most of these facilities, you
2 get this weird collection of documents that get
3 stuck in the same box. And it is a time-
4 consuming process, but I think, also, we have
5 already gained possibly four years on this SEC
6 that a while back we didn't have.

7 I mean, I am all for getting the SEC
8 passed as soon as possible, but to the same
9 point, you know, I think we do have to be a
10 little bit cautious because we do have all this
11 new data that may actually help us. But,
12 obviously, it is going to take time for people
13 to look through those documents.

14 CHAIRMAN MELIUS: Henry, you were
15 going to make a motion?

16 MEMBER ANDERSON: Well, yes, I would
17 make a motion. I don't know, do we need a
18 motion to just kind of table it and have it go
19 back to the Committee?

20 MR. KATZ: You don't need a motion
21 to act on this.

22 CHAIRMAN MELIUS: No, no, I know.

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1 MEMBER ANDERSON: I think we just
2 had a good discussion. We learned a lot and
3 progress is being made, and we will hear back
4 from the Committee on the call. I think the
5 way forward has been identified, to look at the
6 new data. And I think SC&A has got a
7 methodology that was useful to look at, and
8 let's see where we go.

9 MEMBER SCHOFIELD: Well, we are
10 trying to get Josie and Genevieve just to move
11 here to look at documents.

12 (Laughter.)

13 MEMBER ANDERSON: Before the snow
14 falls.

15 (Laughter.)

16 CHAIRMAN MELIUS: Okay. So, we will
17 move forward on that basis. Good.

18 Thank you, everybody. Thank you.

19 And sorry, John, you didn't get a
20 chance, but we heard you in the Work Group.

21 MR. KATZ: So, are you ready for
22 public comments?

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1 CHAIRMAN MELIUS: Public comment. I
2 am going to go out and get the list.

3 MR. KATZ: Right. Well, has
4 everyone who wants to comment who is here in
5 the room had a chance to write their name down
6 on a sheet out on the desk outside? I don't
7 see anybody moving. So, I expect so.

8 In any case, even if you haven't,
9 you can just volunteer after we get to the last
10 person on the list to comment, and we will go
11 through all people in the room first.

12 (Whereupon, the above-entitled
13 matter went off the record at 5:30 p.m. and
14 resumed at 5:35 p.m.)

15 CHAIRMAN MELIUS: Okay, we'll get
16 started.

17 MR. KATZ: So, do we have the phone
18 lines back up, Eric? Thank you.

19 So, while people are getting seated,
20 let me just make my remarks about public
21 comments for those of you from INL or Rocky
22 Flats or elsewhere who are here or on the phone

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1 and want to comment.

2 Many of you know, we transcribe
3 these meetings fully. So, everything that
4 everybody says is on the record and is
5 published on the NIOSH website for all the
6 public to see. So, you're welcome to say
7 anything you want about yourself or anyone
8 else, for that matter, but about yourself, and
9 that will get published just as you say it,
10 including whatever personal details you give.
11 So, you should be good with that.

12 If you talk about other people,
13 though, be them relatives or friends or
14 colleagues, coworkers, what you say about other
15 people we will protect those people's privacy.
16 So, you are welcome to say what you have to say
17 here, but when we do the transcript, the
18 written transcript for that, we will redact
19 enough detail from those statements about other
20 people to protect their privacy because we
21 don't have them here to certify that they want
22 all of that on the record for the public.

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1 So, I just want you to understand
2 that. If you want to see sort of the full
3 policy, there should be a statement up there on
4 the desk, but they are also on the NIOSH
5 website. It is a Redaction Policy we have for
6 our transcripts.

7 And that takes care of my needs.

8 CHAIRMAN MELIUS: Okay. We will get
9 started then. I am going to start with, or at
10 least the best I can, to start with people from
11 INL-related sites. There are some other people
12 signed up from other sites. We will do them
13 after we do the INL. That is our usual
14 practice.

15 I have someone signed up named
16 Robert Jones, I believe. Yes? Would you like
17 to speak?

18 MR. JONES: I would.

19 CHAIRMAN MELIUS: Okay. If you will
20 step up to the microphone?

21 MR. JONES: Members of the Board,
22 gentlemen and ladies, I would like to say a few

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1 things to you.

2 My name is Robert I. Jones. I
3 worked at the INL for 35 years. I now have
4 bladder cancer.

5 But I have been listening to the
6 things that have been said, and a lot of things
7 come into my mind. I guess what I have in my
8 mind is all of the times that I worked at CPP.

9 I started at CPP as a laborer and
10 was quickly transferred to being a pipefitter
11 helper. I worked there for a good number of
12 months, and then, was transferred to another
13 area.

14 I spent a lot of time at the
15 different reactors. I worked at Westinghouse
16 at one time. I was sent there to take water
17 samples. And I waited probably about six-seven
18 hours there waiting to get into the gate. And
19 finally, the guard said, "Let me get the water
20 sample for you." So, I only worked there a
21 short period of time, about six hours.

22 I would like to tell you that people

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1 that were transferred to the CPP area were
2 transferred, a good many of them, just by
3 hearsay. A good many of them, the supervisor
4 said, "I want you to report to CPP tomorrow."
5 And that is the way that is done. So, I know
6 you gentlemen have a difficult time in trying
7 to sort out who worked there and who didn't.

8 I was transferred -- I've been
9 trying to think of how many times I worked at
10 CPP -- but I worked there for six months at the
11 beginning. And then, I worked there as a
12 second class pipefitter and I worked there as a
13 first class pipefitter.

14 And it was very interesting times.
15 In 1976, I was sent to the dispensary to a
16 physical. While at the dispensary they told me
17 that I had some problems.

18 And I'm sorry, but my memory kind of
19 slips me at times because of my age.

20 But, anyway, I had a good experience
21 working at the site. I retired as a pipefitter
22 supervisor, which I had pipefitters, welders,

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1 and a couple of machinists.

2 I had a good experience at the INL.
3 However, in 1976, as I started to tell you, I
4 was given this physical examination, and the
5 physical showed that I had some problems with
6 an X-ray. But I didn't think too much of this,
7 and the next few years I just kind of forgot
8 about it. But after I retired from the site, I
9 got to thinking about this X-ray.

10 And so I contacted DOE, and they
11 were very cooperative and they let me take a
12 picture of the X-ray and send it to a doctor in
13 Salt Lake City. I contacted this doctor and he
14 said he would be glad to look at it. And this
15 was a doctor that had a mile of credentials of
16 being a doctor that took care of those kind of
17 patients.

18 It was discovered -- and this was
19 after I had left the site -- it was discovered
20 that I had asbestosis of the left lung and
21 asbestosis of the right lung. And this doctor
22 gave all of this to me on a NIOSH piece of

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1 paper. And this was a paper that showed all of
2 his credentials, showed all of his information
3 and everything else. But, as so many things
4 happened, the Department of Labor wouldn't
5 accept that. In fact, this doctor even wrote a
6 letter to them.

7 But I just would like to thank you
8 for your experience. I wish to thank you for
9 the duties that you've done, and I say this and
10 I do it, and thank you very much, gentlemen and
11 ladies.

12 CHAIRMAN MELIUS: Thank you. We
13 appreciate you taking the time to come and
14 speak today.

15 Brandon Leatham? Welcome, sir.

16 MR. LEATHAM: My name is Brandon
17 Leatham. I'm the Sheet Metal Workers business
18 rep for Local 103 here in the area.

19 Kind of a little bit of background
20 on myself. When I was 20 years old, I went to
21 HP school to become a radcon tech. That was
22 after going to school for something I didn't

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1 want to pursue.

2 I'm just going to ask the Board a
3 couple of things to keep in mind. I worked out
4 at the INL several times, several locations.
5 And they can send you here to this facility one
6 day, you can be at this one for a month, you
7 can be at this one for three years. It's just
8 back and forth.

9 In having that background with the
10 radcon school and kind of understanding the
11 processes and procedures that took place, even
12 20 years ago when I went to school, compared to
13 the processes they did back then, were day and
14 night. You know, you get some of the old guys
15 to tell you, "Oh, yeah, back in the day, we did
16 this, we did that," or whatever.

17 A lot of the people back then didn't
18 understand the hazard. It was kind of one of
19 those things, there wasn't a hazard if you
20 couldn't see it. If it couldn't cut you, it
21 wasn't really a hazard. So, I'm sure you guys
22 understand that, or whatever, but I was just

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1 going to mention that.

2 And then the other thing is I've
3 been trying to get a bunch of our guys in the
4 various crafts -- sheet metal, pipe trades,
5 ironworkers, all this stuff -- to kind of come
6 on these and stuff like that. The problem that
7 I'm finding is this started in the '50s. Those
8 guys now are well into their eighties. Most of
9 us in the construction trade do not live past
10 75. Right now, probably the average age for
11 retirees that pass away, unfortunately, is
12 about 70 years old. And back in the fifties,
13 it was even a little bit harder.

14 So that's one of the reasons that we
15 are having a hard time finding the construction
16 craft to come talk to these events. Other than
17 that, I was just going to mention that. Maybe
18 that was a little enlightenment on why we're
19 not getting so many construction trades coming
20 up and stepping forward. But thank you for
21 your time.

22 CHAIRMAN MELIUS: We appreciate it.

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1 I think I would also just add, people don't
2 have to come to the events or these meetings.
3 If you can get us names of people that would be
4 willing to talk, either NIOSH and/or SC&A, our
5 contractor, will interview them over the phone
6 often, or in person out here, we come out. And
7 that would be helpful and we can do it at their
8 convenience. So, that would also be helpful,
9 because we understand why people are sort of
10 reluctant to come to public meetings, and so
11 forth. You have a bunch of people like us
12 staring at you up here.

13 Helen Stanton?

14 MS. H. STANTON: I'm a mother of a
15 contaminated worker who was contaminated
16 November 8th, 2011. I think he has already met
17 with NIOSH and has proven that his dose was
18 falsified. He has proven there was BEA and INL
19 records, DOE records. And you don't have to
20 deduct me; I have his power of attorney and
21 he's here.

22 But mostly I'm here today to

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1 represent people who can't be here. I was an
2 ombudsman for 11 years in long-term care. I
3 talked to many, many people who are not going
4 to be here. They worked with SL-1. They were
5 first-responders. I can't give you their names
6 because of confidentiality, but I know where to
7 find them.

8 I also know where to find your
9 construction workers. I know one right now who
10 was turned down, and he has COPD, on oxygen
11 24/7. He worked at the site 27 years in a lot
12 of different places.

13 And I can tell you where your lost
14 records are. Their lost was my son's first
15 urine sample. It's gone. It disappeared. It
16 was the hottest one. It would have proven his
17 dosage 10 times faster than it was proved.
18 When he went in that morning, his dosimeter
19 read 259. Nine months later, DOE and BEA came
20 up with the dosage of 200 millirems. How does
21 it go down when you breathe over 5 minutes
22 close to 4700 dots of plutonium-239,

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1 americium-241, and uranium probably all the
2 numbers? How does it go down?

3 Nobody in Idaho Falls believes that
4 myth, and every time I see a bus go by that
5 says "safety always," I feel like taking the
6 spray can of paint and writing "bullshit" right
7 on it, because that's exactly what we are
8 getting.

9 I am really happy that CDC came out
10 with this. It's a guideline for safety. I
11 don't know how many of you have read it. It
12 has what should happen in case there is a
13 radiation emergency. That did not happen to
14 the 16 workers at the site. You have three of
15 them here today, and you can ask them.

16 When I talk to people in long-term
17 care, this has been going on for years. It's
18 not right now. It's for years. Their medical
19 records are lost. They can get no help. And
20 I'm really happy that NIOSH is here. And I'm
21 starting a support group in this area so people
22 can come together and talk about what happened

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1 to them.

2 Right now, when I talk to somebody
3 in the room, they think they are the only
4 person who was contaminated, and that's because
5 that's what they're led to believe. When these
6 three guys back here came down with radiation
7 illness, the INL doctor told them they all had
8 influenza. My son has never had the flu in his
9 life. He very seldom had a cold. And
10 influenza, all at once. That, again, is big
11 BS.

12 And if the site followed what's in
13 this book, they would have all had showers. I
14 think two of them did; none of the rest. My
15 son brought contamination home. We proved it.
16 He brought it home to his wife and his 14-year-
17 old daughter and probably to me. I don't live
18 with him, but I was there.

19 You know, something has to happen
20 with the nuclear industry. Our elected
21 officials do not listen. In fact, I tried to
22 get an audience with Simpson. He has a young

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1 man that works there, and he said, "You know,
2 you need to go to court." I said, "Okay, we
3 will."

4 Now the head guy is retiring. He is
5 being honored. When he stood up in front of
6 the safety meetings, he would tell the workers,
7 "Is this negligence or is it just
8 incompetence?" Well, I'm saying right now, Mr.
9 Grossenbacher, you are both incompetent and
10 willingly negligent and you're causing deaths.
11 We don't need to fight terrorists in other
12 countries when we have people killing our
13 workers right here.

14 Thank you for listening to me. And
15 anyone who would like to get in touch and just
16 talk so they are not by themselves, I'll be
17 happy to give you my phone number. Thank you.

18 CHAIRMAN MELIUS: Thank you. The
19 next person I have signed up is Raymond James.

20 MR. JAMES: My name is Raymond
21 James. I have currently applied for your
22 program. I don't know for sure why I did get

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1 the letter, but it did request that I come to
2 your meeting, or told me about the meeting and
3 said that I could come to it. I didn't start
4 working at the INL until 1981.

5 I had some questions in my mind that
6 I couldn't quite get answered by DECRC Center,
7 which I don't blame them. I've got nothing but
8 good results out of that center, by the way.
9 Sherry's been a terrific person to work with.

10 My question being was, I got a
11 letter back stating that the reconstruction
12 process is now being done by -- I guess it's
13 the ORAU. And during that process, I'm not
14 exactly sure how they are able to maintain all
15 the work that you performed at the INL.

16 I was a contractor that contracted
17 through Morrison-Knudsen, through EG&G, through
18 WINCO, and Lockheed. I owned part of the
19 business at that time. I was a business owner
20 and a worker. I worked from 1981 up until 1999
21 at various places at the site: TAN, CPP, TRA,
22 WRF, and at Argonne and various places.

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1 I know all the places that I worked.
2 I have people that will vouch for that. I can
3 get the paperwork for that. I don't know if
4 the INL has any records of subcontract people
5 and where they did work at those times. That's
6 one of the reasons that I wanted to speak,
7 because I hired a lot of welders and
8 pipefitters, sheet metal people, out of the
9 locals who worked at various places throughout
10 the site. And I can remember where a lot of
11 the people did work and the type of work they
12 did.

13 But, yet, I don't think that a lot
14 of that was documented, and not for the reason
15 of getting your radiation dose, but also those
16 people that worked in the cells, cutting into
17 piping, drilling into the walls to hang
18 brackets or whatever, and maybe getting alpha
19 or beta particles that probably weren't picked
20 up necessarily on a film badge.

21 So, my question was, does the dose
22 reconstruction process take into account this

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1 type of activity where a person could get skin
2 cancers and internal contamination? I, for
3 one, personally, have had 52 skin cancers, and
4 I know that I did a lot of welding and cutting
5 and grinding and drilling in the cells at CPP,
6 at TAN, various locations.

7 And I know that my claim right now
8 is in about the 10th month. So, I should be
9 hearing back before too much longer on it. But
10 the reason that I did come here was because of
11 the letter I got. And my thoughts turned to
12 the various things that I said to you folks
13 about this.

14 So, that's about all. I wanted to
15 make sure, or to say to make sure that those
16 people that probably don't have a film badge
17 reading, it is taken into consideration during
18 that dose reconstruction that they probably
19 could have picked up a lot of different
20 radiation and exposure that wasn't actually
21 recorded.

22 CHAIRMAN MELIUS: Thank you for

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1 coming in. Yeah, other sources of exposure are
2 taken into account. Actually, you might want
3 to talk to Tim Taulbee in the back of the room
4 there, who spoke earlier. He can probably tell
5 you a little bit more specifically about what's
6 going on with INL.

7 And also, on the issue of the
8 subcontractor records, we work with DOE and
9 others to get that information so it can be
10 used by DOL and NIOSH in the dose
11 reconstruction and review of various individual
12 cases, and so forth, individual claimants. So,
13 it is done.

14 It's helpful to know, have maybe
15 more detailed information from you, to make
16 sure that the times that you did work up there
17 or had crews up there, that those all were
18 recorded. Because at least our experience at a
19 lot of other sites is that subcontractor
20 information, the kind of work that you did,
21 there aren't always good records on. It varies
22 from site to site, time to time, the type of

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1 work, and so forth, that's done. But Tim can
2 probably fill you in more.

3 I would just also add that there is
4 a lot of evaluation going on, both by NIOSH
5 and, again, now by the Board in terms of
6 looking, sort of updating the information. And
7 if we find missing information, whatever, it
8 would be taken into account in terms of going
9 back to a dose reconstruction.

10 So, if you want to talk to Tim, or
11 at least give him your name and contact
12 information, he will be able to follow up and
13 make sure that some of your concerns are being
14 addressed.

15 MR. JAMES: Well, I was mainly
16 concerned about other people that would be
17 involved in that same situation that didn't
18 have the records of the employment or various
19 places that they did work at the INL in the
20 construction trades.

21 Because like our contracts, when I
22 got out of my business and sold out in 1999,

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1 the person that assumed all the responsibility
2 of all the paperwork for that company, they
3 destroyed them after seven years. So we didn't
4 have any record of the contracts. I hope the
5 INL still might, but --

6 CHAIRMAN MELIUS: Yeah. Well,
7 that's why I say, again, if you can sort of
8 pass along what information you have to Tim and
9 to the people at NIOSH, I think it would be
10 helpful in terms of reassuring based on what
11 you know. The records vary. Again, I can't
12 speak specifically to this site in terms of
13 their recordkeeping on that issue.

14 MR. JAMES: I understand that and I
15 do appreciate it.

16 CHAIRMAN MELIUS: Okay. Again,
17 thank you. Is there anybody else who wishes to
18 speak in relationship to the INL site? Yes, go
19 ahead. What's your name? Go ahead. Please
20 come on up.

21 MS. THATCHER: My name is Tami
22 Thatcher. I live here in Idaho Falls, and I am

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1 a former INL worker.

2 Last year I kind of asked, I made a
3 comment about drinking water. I was asking
4 whether NIOSH had looked at INL drinking water
5 historically. And I have exchanged some emails
6 with NIOSH. I've gotten answered that
7 basically displayed a complete lack of
8 understanding of the contamination historically
9 in drinking water at various sites at the INL.

10 I was told the Idaho aquifer is
11 clean. I was told, "Well, we have not looked
12 at all years at all facilities." Well, I don't
13 think you have looked at any years at any
14 facilities. I have no evidence of that.

15 But, anyway, as I got handy with the
16 U.S. Geological Survey mapper capability
17 online, if you know which wells are the
18 drinking water wells, if you know the
19 facilities and the drinking water wells, you
20 can look up USGS data.

21 I have visited the DOE ID public
22 reading room. I have examined DOE health and

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1 safety reports. Environmental health and
2 safety reports from the '50s and '60s, they
3 really are interesting. They would have a
4 paragraph and say, you know, we have drinking
5 water at TAN, and we are dumping chemicals.
6 And it would never say which chemicals. It
7 would never point to any monitoring going on.
8 They are very entertaining reports.

9 You'd have this detailed report with
10 graphic art, and then, you know, in 1959, very
11 detailed. 1961, all heck breaks loose. SL-1
12 accident. Criticality at the chem plant. You
13 didn't have another health and safety report
14 for four years, and then they did a little
15 combined thing.

16 Very humorous, actually, what passed
17 for health and safety reports. Every two to
18 four years, they changed the title of the
19 health and safety report and the numbering
20 series to make it difficult for people to
21 access or find those reports, however little
22 they actually had in them.

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1 Anyway, when drinking water laws
2 went into effect in the late '80s and affected
3 the INL, the USGS did some chemical monitoring
4 in drinking water wells, monitoring that had
5 not been conducted prior to, like, 1987, even
6 though they started dumping chemicals about
7 1952.

8 So, at that point, places like TAN
9 put people on bottled water, installed a
10 sparger. Had everything from carbon tet at
11 RWMC, which still exceeds federal drinking
12 water standards, hexavalent chromium at the
13 Test Reactor Area, a lot of chemical stuff.

14 So if you were to say, "I'm just
15 going to look at what USGS monitored," you're
16 not going to have a picture of the
17 contamination. You have to go forensically,
18 when was it dumped? Oh, and then, when did we
19 monitor it? And for what historically you had.

20 Now, to the radionuclides, I asked
21 USGS, first of all, "Do you have a report that
22 describes INL drinking water?" And I was told,

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1 no.

2 I was able to find some tritium
3 reports, a tritium report of 20 years of time,
4 the '60s and '70s, I guess, or '70s to '80s.
5 And it had two paragraphs on INL drinking
6 water. And it spoke to the very last year of
7 the interval they were examining. And they
8 said only one well in this, you know, 1988, or
9 whatever, exceeds the federal MCL. They
10 neglected to mention the previous 10 years
11 where they had been five times the MCL, a very
12 deliberate downplaying of the contamination in
13 the INL drinking water.

14 So, they started dumping tritium in
15 the '50s. They started reprocessing fuel at
16 CPP in the '50s using the disposal well, 1952.
17 Tritium they began monitoring in 1961.

18 So if you are going to base your
19 doses on what USGS monitored, you're going to
20 miss the '50s. You have to look forensically
21 to figure out what was in the water, and you
22 have to go collect that data yourself from USGS

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1 and wherever you can find it.

2 When it came to long-lived
3 radionuclides, the USGS conducted a study in
4 the '90s. They looked at iodine-129, the long-
5 lived kind. Neptunium, uranium, chlorine, et
6 cetera. They estimated what had been disposed
7 of in the INTEC disposal well of these long-
8 lived radionuclides.

9 This was a report pretty darn
10 applicable to INL, wouldn't you say? USGS did
11 not give it a USGS report number. At INL, USGS
12 reports are usually given dual numbering. They
13 are given a Department of Energy ID number as
14 well. It was given neither of those two
15 numbers. The report was put in a closed-access
16 journal and dated 1998, you know, the really
17 historical bad battle days, 1998.

18 And they have the plumes. But to
19 know what iodine-129 you had in the drinking
20 water wells at Central Facilities, you're going
21 to have to look back in time. It wasn't
22 monitored in the '50s, '60s, '70s, '80s, or

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1 until the late '90s. You've got to infer from
2 what later happened, and they have said that
3 they would add that report to the INL USGS
4 bibliography.

5 So, I'm just saying a lot of
6 deliberate effort has gone into not allowing
7 workers to really know what was in the water.
8 Again, Central Facilities, a couple of decades
9 of exceeding the MCL for tritium, 50 percent of
10 to five times the MCL for iodine-129 at CFA and
11 at INTEC. And this is just piecing together
12 years that I could glean the data.

13 So, I want you to understand, when
14 you go looking for information and you get that
15 statement that says, "We started monitoring
16 water in 1949, and the USGS does all this
17 rigorous monitoring," if you don't know what
18 was monitored and when, and what the result was
19 of that sampling, and which well, you don't
20 know squat.

21 And they hopped around. There's no
22 consistency in what they monitored and when

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1 they monitored it, basically. And when
2 drinking water laws did go into effect, in the
3 late 1980s, there are a couple of years of
4 detailed drinking water reports.

5 Especially when Lockheed took over
6 the contract in the early 1990s, they wanted to
7 know what they were walking into. You have a
8 handful of years that do look at each drinking
9 water well and say, you know, here's alpha,
10 here's beta, here's tritium, the results for
11 each well. But those are very, very much the
12 exception.

13 And the results, when they would
14 give results for something like iodine-129,
15 they were given in terms of dose concentration
16 guidelines, which are, you know, 100 millirem
17 instead of the 4 millirem federal drinking
18 water standard. So they would say, "We had
19 this fraction of a percent of the dose
20 concentration guideline," when they were 80
21 percent or 100 percent of the MCL.

22 So, I recognize that the doses from

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1 drinking water might not change a dose
2 assessment, but it could change an organ
3 assessment, if you actually look at what
4 radionuclides were in the water.

5 And I know personally people who
6 were not radiation workers who worked at the
7 Chem Plant. I didn't understand why they died
8 young of cancer. And now I do. And they were
9 getting a soup of chemical and radionuclide
10 contaminants that they were never told of, and
11 you guys had never looked at until -- you know,
12 I've brought it up before. So, I'm leaving
13 this report, hoping it will be put into the
14 record.

15 And I want to mention something
16 about RWMC.

17 CHAIRMAN MELIUS: Actually, excuse
18 me. Can you sort of wrap up, please?

19 MS. THATCHER: Yes, this will be
20 brief. Something about RWMC. We have air
21 emissions reports, and the NESHAPs reports are
22 pretty -- they are not complete in terms of

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1 radionuclides and curies from each facility.

2 We have an annual environmental
3 surveillance report for INL done by another
4 contractor. I tried to compare plutonium
5 released from RWMC. And we're talking about
6 millicurie amounts every year from these
7 accelerated retrieval projects. And they
8 didn't line up to the annual surveillance
9 reports. And DOE has now acknowledged that.
10 They have mistakes in their most recent report,
11 2013, quality control issues for the third-
12 highest radiological emitter, and for
13 plutonium, a pretty important radionuclide.
14 So, you need to verify these reports. You need
15 to double-check.

16 And I'm also going to say, when it
17 comes to statements I heard last year from a
18 person who worked at NIOSH indicating they
19 believed what the DOE and the contractors were
20 saying, they didn't believe what an SL-1
21 responder was saying. They said, "This person
22 over the years had convinced themselves of a

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1 radiation dose that had never occurred."

2 I have spent weeks going through
3 SL-1 reports and records. And if the dose maps
4 or the radiation maps are --

5 CHAIRMAN MELIUS: Please wrap up.

6 MS. THATCHER: -- not conservative.

7 CHAIRMAN MELIUS: Will you please
8 wrap up? We have a 10-minute limit and you've
9 gone far over.

10 MS. THATCHER: And anyone who
11 understands the SL-1 situation could never say
12 that this man didn't receive that dose. So,
13 your NIOSH person didn't understand the
14 situation at SL-1, and anyone who thinks that
15 that was an intentional operator act also does
16 not understand the hardware or the accident or
17 the things that were said to try to protect the
18 people at fault, the managers at fault for that
19 accident.

20 Thank you.

21 CHAIRMAN MELIUS: Is there anybody
22 else that would like to speak to INL? Yes?

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1 Okay.

2 MR. HANSON: My name is Gaylon
3 Hanson. I'm a retiree, a retired welder. I
4 also helped coordinate the former worker
5 medical surveillance here at the INL.

6 Last night at the townhall meeting,
7 they went through the slides. And on the
8 bottom of one of the slides, it said, note that
9 they are looking at other years with this. And
10 that triggered a thought that came to my mind.
11 Back in '98, we had to do a needs assessment
12 for the Worker Health Protection Program. What
13 we did is we got maps from the company that the
14 firemen used. And then we had former workers
15 come into the union hall and have them identify
16 hazards in buildings, in rooms, et cetera.

17 The funny thing is one guy looked at
18 the room or the map and says, "That isn't the
19 way it was. When I was there, we did this
20 project." And so the legacy of former projects
21 has followed along.

22 I worked at Test Area North most of

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1 my career. Before I started, it was AMP. And
2 then they had SNAPTRAN, and I'm not sure what
3 that was all about. And then LOFT came. And
4 we had to clear out rooms.

5 They made the warm shop, which was
6 used with the Aircraft Nuclear Propulsion
7 program, made that the weld shop. So, I was in
8 the weld shop, only it had a legacy that goes
9 back two times that I knew of.

10 And I'd like, when you are
11 considering future years, to think of the
12 legacy that's been left behind. And today we
13 got the 30- and 40-year-old people out there
14 doing decon work, or D&D work, and they are
15 being subjected to a 50-year-old legacy in some
16 of these buildings.

17 That's all I have.

18 CHAIRMAN MELIUS: Thank you. Thank
19 you very much, Gaylon. Now, anybody else wish
20 to speak to the INL site? Okay, so we'll do
21 you next, whoever's raising your hand. I can't
22 quite see in the back, but I'll indicate you'll

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1 be next. Go ahead, ma'am.

2 MS. BURK: My name is Carolyn Burk.
3 And I am here on behalf of my late husband,
4 Charles Burk. I'm now considered a survivor.
5 And so I am in the process of a claim. He was
6 diagnosed with leukemia in October of 2013. It
7 was at that time that we started processing
8 claims that we found out. Even before that, we
9 didn't even know that there was such a thing as
10 EEOICPA. We didn't know.

11 We started processing the claim, and
12 he was in remission. But then he was doing the
13 maintenance treatments. And about the last
14 time that he went down, he wasn't feeling well.
15 We didn't really know what was wrong. It was
16 after a lot of testing and everything, it was
17 discovered that the cells had crossed his blood
18 barrier stem and into the nervous system.

19 We were told that that was a 1 in 50
20 chance of ever happening, less than 5 percent.
21 I don't know what caused that to happen. I
22 don't know if it was because of the exposure of

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1 a lot of chemicals that could have weakened
2 that barrier. I don't know. But, anyway, that
3 is what happened.

4 Last year my husband did come here
5 at the meeting to express some concerns that he
6 had. One of the concerns that he expressed
7 last year at this very meeting, and this was
8 very shortly before he passed away and we
9 discovered that he did have the nervous system
10 condition. His concern that he was an
11 electrician, an IBEW union electrician, and he
12 worked in many sites and different locations
13 throughout the site.

14 One of the locations that he worked
15 at was at the NRBF, which was the disarming of
16 the nuclear submarines that were used for
17 training for the naval personnel. We were told
18 that that is not part of the compensation
19 because it was under the Department of Defense
20 rather than the Department of Energy.

21 His response or feelings were, hey,
22 I didn't work for the Department of Defense. I

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1 was working through the union hall. I still
2 contacted radiation exposure. And it didn't
3 seem quite right that that wasn't considered.

4 And even though when they did all
5 the reconstruction, and part of it that I read
6 was the consideration is for environmental
7 exposure. Okay, is that environmental
8 exposure? Because he was exposed. He was
9 also a downwinder. That is more than normal
10 exposure. So, I was a little bit concerned
11 about that myself. I didn't really understand
12 that, why that was not considered in his
13 reconstruction. That was one of the issues
14 that I have.

15 Also, as I did the claim, my claim
16 was that there was not proper records or
17 monitoring taken. And that was my grounds for
18 the claim, plus additional information.

19 As time went on, I have come across
20 so many of his documents that he has written --
21 that he had written and taken account of. And
22 one of his things was always write things down,

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1 date them. If it's on a calendar, a piece of
2 paper, whatever it is, document them.

3 As I started looking through things,
4 I realized that that's exactly what he was
5 doing. I found books, his logbooks, which was
6 -- some of them work orders, and that he had
7 written things down. He had written different
8 things that he was doing, different things that
9 he was concerned about, things that he talks
10 about, moving furniture that was evidently
11 contaminated. He also talked about different
12 occasions that he was involved in mercury
13 spills.

14 I was really amazed at these things
15 he did out of his field. He's an electrician,
16 but in order to do his job, he had to go in and
17 help things that were totally out of his field.

18 This is one of the ones that he
19 wrote, and this was in June of 1994. It says
20 that, "They have me and Dennis at ARA in a 40-
21 foot cleanup. Asbestos on the floor.
22 Irradiation area." I don't know what LR --

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1 LR5MR. "We asked for air monitors. They said
2 we didn't need them. They said that we didn't
3 need" -- he calls it a dirty room -- a clean
4 room, or showers.

5 He says, "There was a lot of
6 radiation, asbestos-coated wires, ropes, white
7 insulation, RadCon bags, dust." And he said
8 his lungs felt bad after he got out. He said
9 they did not have any water for them to use to
10 keep the dust down, because they told them that
11 it was not an asbestos area.

12 Like I said, there is others in
13 these books that he has written down. I have
14 sent this to the Department of Labor. I have
15 sent copies of it.

16 Another thing, upon working with
17 NIOSH and their reconstruction, on their phone
18 conversation, that conference that we had, I
19 told them there were things that I had found in
20 these books, different locations that hadn't
21 been documented before. And at the end of the
22 conversation, they were to go on and do more of

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1 the reconstruction.

2 After that, I came across something
3 else that I had found. It's like these things
4 that he had left behind just keep coming up.
5 And so I told them that I had received the form
6 I was supposed to sign, the statements. And
7 number one on the statement was that I did not
8 have any additional information in my
9 possession. And I had found this after I had
10 talked to them.

11 I said, "I can't sign this and send
12 it back because," I said, "I do have additional
13 information and that would be a false
14 statement." She still tried to persuade me to
15 sign it and said it didn't matter. And I said,
16 "I don't want to." And so, anyway, she finally
17 told me that I didn't need to.

18 She told me to give the information
19 on to the Department of Labor. I called the
20 Department of Labor, told them I had found out
21 that he had worked at Pit 9. I had verified it
22 through the union hall. And it seems that the

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1 reason it was not on the records is they told
2 me that at that time they logged in just logs
3 and it wasn't actually in the computer. They
4 just had cards. When the men went out on
5 different calls, they just put it on a card.
6 But it was indeed on those cards telling when
7 and where he was, which was Pit 9.

8 When I relayed that to her, she
9 didn't know what Pit 9 was, which, you know, I
10 wasn't surprised because I know that you people
11 work with different facilities all over the
12 United States. But she said, "I will have to
13 go ask the supervisor." So she went and asked
14 a supervisor. The supervisor said, "Yes, take
15 down that information or have her fax it to
16 us." So I have done that. I haven't heard
17 anything since I've done these different
18 things.

19 I know that I have come across
20 information that, because of his asbestos
21 exposure, I have found information that says it
22 can cause leukemia. And even if it isn't the

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1 cause of the leukemia, it could make it much
2 worse. In my eyes, there isn't anything much
3 worse than what happened to him. It was a
4 long, painful process once it went to his
5 nervous system.

6 They decided to do radiation, and
7 they even mentioned the word "radiation," and
8 it was like, "you're not putting that stuff
9 near me." But, you know, it was something that
10 we felt that would give him a chance. But I
11 appreciate your listening to what I have to
12 say, and that's my comments. Thank you.

13 CHAIRMAN MELIUS: We appreciate you
14 and very sorry about your husband. Make sure
15 you let -- Stu Hinnefeld's here, who runs the
16 NIOSH program -- make sure he has your contact
17 information, so they can make sure they follow
18 up. It gets complicated between DOL and NIOSH
19 in terms of -- I'm not quite sure where you are
20 in the process, but I think Stu can at least
21 follow up on that part and make sure the
22 information does get forwarded. Thank you.

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1 There's a gentleman in the back who
2 wanted to speak, a man with no limits.

3 (Laughter.)

4 MR. R. STANTON: That's right.
5 That's right. My name is Ralph Stanton. I
6 spoke here last year. I told you that I had
7 evidence that Battelle Energy Alliance had
8 falsified my dose, and as well as the
9 Department of Energy. They are very complicit
10 with that.

11 I met with a few of your dose
12 experts in November. Before I even got done
13 with my presentation, they agreed that there
14 were serious issues the calculation. They told
15 me that I would get a report about
16 Christmastime. I haven't seen that report.
17 I'm just wondering where it was.

18 CHAIRMAN MELIUS: Does anybody from
19 NIOSH here know who he might have met with
20 then?

21 MR. R. STANTON: I think it was John
22 Stiver. Is that --

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1 CHAIRMAN MELIUS: Stiver, okay.

2 MR. R. STANTON: Stiver, yes, and
3 Pete as well.

4 CHAIRMAN MELIUS: Okay, that set of
5 interviews, yes.

6 MR. R. STANTON: And there was also
7 another gentleman. But any idea? What I was
8 wanting to do was, because of the levels that
9 we were exposed to, I'm guessing it's a pretty
10 good chance that we are going to see issues
11 from this later on, especially in the younger
12 people who were exposed.

13 And I would like them to have a
14 record that they can go back and they can say,
15 "Look at the way this dose was calculated." We
16 have since then even more compelling evidence
17 that the dose -- well, I'm going to say it was
18 falsified. I want to make that very clear. I
19 understand that some of the people maybe want
20 to be more politically correct and say that
21 there are serious issues.

22 I'm going further and saying it was

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1 a crime. Anyway, I feel like I can prove this
2 and I will end up proving it in further
3 litigation in the future. But the important
4 thing is that this is something right now that
5 I don't have to go back, like a lot of these
6 unfortunate folks here. I have this
7 documentation now, and it's all complete.

8 And so I think that it would behoove
9 the group to gather as much of this
10 information, and as well as the practices of
11 the Idaho National Laboratory when they do
12 calculate dose, especially ones that are well
13 over the federal safe limit, perhaps many times
14 over.

15 And so I know it's kind of an
16 unusual thing that you guys deal with, but, you
17 know, I would love to get with you, show you
18 what new evidence I have, which is, like I
19 said, it's even more compelling than anything
20 that I brought to Stiver and them, which they
21 stopped me before I showed them everything.

22 CHAIRMAN MELIUS: Okay, let's follow

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1 up on that. I'm not sure who else was involved
2 in those interviews at the time, but we will
3 pull that group together. I think, John, you
4 were -- I'm not sure who actually was -- these
5 are done jointly. I am not sure who's in
6 charge, so to speak, on these.

7 John, can you follow up, though?
8 You were there? Okay. Okay.

9 MR. R. STANTON: But there's a lot
10 of people that are looking for this information
11 and would like to have this report for their
12 records.

13 CHAIRMAN MELIUS: Okay. It's a good
14 idea to have the documentation now.

15 MR. R. STANTON: Right. That's all
16 I have.

17 CHAIRMAN MELIUS: Okay. Thank you.
18 Anyone else wish to speak about INL?

19 (No response.)

20 Okay. If not, we have several
21 people who want to speak, I believe, also
22 regarding Rocky Flats. The first person I have

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1 signed up is, I believe, on the phone.

2 Dr. Rothe? Dr. Rothe, are you still
3 on the phone?

4 (No response.)

5 Okay. We'll come back and see.
6 There is a Jon Lipsky that signed up. Again, I
7 don't know if that is to speak on the phone or
8 --

9 DR. ROTHE: Rothe.

10 CHAIRMAN MELIUS: Okay, Rothe.

11 MR. LIPSKY: Hi. This is Jon
12 Lipsky.

13 DR. ROTHE: This is Dr. Rothe here.

14 CHAIRMAN MELIUS: Okay. So, let's
15 start with Dr. Rothe, and then we will do Mr.
16 Lipsky.

17 MR. LIPSKY: Mr. Lipsky or Mr.
18 Rothe?

19 CHAIRMAN MELIUS: Mr. Rothe first.
20 Dr. Rothe first.

21 MR. LIPSKY. Okay, thank you.

22 CHAIRMAN MELIUS: Yes.

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1 DR. ROTHE: Hello. I am Dr. Robert
2 E. Rothe. I'm the sole surviving Senior
3 Experimenter at the Rocky Flats Plant Critical
4 Mass Laboratory. I will refer to those as RFP
5 and CML. Grover Tuck and Douglas Hunt are
6 deceased, and they were the other two Senior
7 Experimenters. I am also the telephone
8 interviewee for the bulk of the June 9, 2015
9 White Paper on Radiological Exposure at the
10 Rocky Flats CML.

11 I am, additionally, the author of
12 the 2005 LANL book, detailing the history of
13 the Rocky Flats Critical Mass Laboratory. The
14 book was, sad to say, badly misused and
15 misinterpreted in the writing of the above-
16 mentioned White Paper, which contains history,
17 incomplete and false conclusions based on
18 erroneous assumptions.

19 On July 20th, 2015, I gave Terrie
20 Barrie, who I think is there, an expanded
21 version of the comments I made to the Board's
22 Rocky Flats Work Group on July 14th. She most

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1 likely has distributed the expanded document to
2 NIOSH. She will also email it around.

3 I have some follow-up thoughts about
4 neptunium. The following points are stated
5 briefly here, but are detailed in the document
6 distributed by Terrie Barrie.

7 First point: there is no way
8 whatsoever that anyone can even look guess at
9 the power level for the slightly-super-delayed
10 critical experiments at the Rocky Flats
11 Critical Mass Laboratory.

12 Second point: no experiment ever
13 lasted only an hour. Two-and-a-half hours
14 would be a much better estimate.

15 The White Paper totally ignores the
16 radiation levels achieved during experiments.
17 It has been described by many radiation
18 monitors and health physicists, and often
19 exceeds 15 minutes for the 50 percent lethal
20 dose of radiation. And I hope everybody knows
21 that means. That means in 15 minutes 50
22 percent of a population exposed to that dose

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1 would die. The White Paper also underestimates
2 the fission fragments built up during the
3 experiments.

4 Now in trying to cooperate with the
5 writers of the White Paper, I do offer a few
6 possible very unlikely suggestions for
7 estimating or setting upper limits to the power
8 levels of the experiments.

9 The White Paper might try to use the
10 fact that the experiments never needed to
11 dissipate heat to bound power levels.

12 We have 1,000 megawatt reactors
13 which have a heat dissipation problem. Our
14 experiments never attained power levels that
15 needed to dissipate heat. Maybe they should be
16 used to come up with this upper power level.

17 Now, as far as neptunium is
18 concerned, I had assumed that everyone knew
19 that neptunium was continuously generated at
20 the Rocky Flats Critical Mass Laboratory during
21 all experiments and, to a larger extent, on
22 into the early 2000s. This is a natural and

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1 unavoidable consequence of the criticality
2 research. Whenever neutrons impinge upon
3 uranium-238, neptunium is a natural
4 consequence.

5 I should also point out that the
6 plutonium metal cylinders which are referenced
7 in the White Paper, that those Pu metal
8 cylinders are 25 years old and much more
9 radiologically hazardous to deal with because
10 of the natural and unavoidable buildup of the
11 component americium-241.

12 I further wanted to state that the
13 bullet list of the incidents in the White Paper
14 on page 7 is both incomplete and misleading.
15 The White Paper that I have given has authored
16 -- has provided a much more competent list.

17 I would also like to state that
18 bioassays of personnel involved in these seven
19 or eight incidents are not at all recalled. I
20 could be proven wrong here if someone showed me
21 dates and actual bioassays, but I do not recall
22 ever getting a bioassay specifically because of

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1 a particular incident.

2 In fact, we only got occasional
3 urine analysis. And I remember one time when I
4 had a facial exposure, where I had to have my
5 face washed in bleach, that I had a nasal swab
6 done. But I never had, to my knowledge, a
7 fecal sample. And, of course, we did have the
8 occasional lung sample.

9 Now the White Paper says on page 7
10 that there were no close calls at the Critical
11 Mass Laboratory. That is not quite true.
12 There was one particular incident, called the
13 Christmas Tree Experiment, where a prompt
14 criticality accident could have happened,
15 causing excursion, if, in fact, the opposite
16 end of one of these branches of the Christmas
17 Tree drifted away and fell.

18 Plutonium metal hemishell detail so
19 massively, regarding metal hemishells, that are
20 omitted from the White Paper in Table 1 can be
21 reconstructed as having weighed about 280
22 kilograms.

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1 In addition to these comments, the
2 White Paper that is being distributed by Terrie
3 Barrie describes a number of other shortcomings
4 of the White Paper.

5 Those are my comments, and I thank
6 you very much for your attention. I will leave
7 that with you -- unless there are any
8 questions.

9 CHAIRMAN MELIUS: Thank you very
10 much. And I think there will be some follow-up
11 also from both NIOSH and SC&A to talk to you
12 some more. So, we appreciate you taking the
13 time.

14 DR. ROTHE: I hope so.

15 CHAIRMAN MELIUS: Yes.

16 DR. ROTHE: Thank you. I'm going to
17 say goodbye.

18 MR. KATZ: Dr. Rothe, I know Terrie
19 Barrie is going to distribute your White Paper,
20 but would you mind -- the remarks that you just
21 made, if you have them written down, would you
22 mind sending them in as well?

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1 DR. ROTHE: No, I don't mind that at
2 all.

3 MR. KATZ: That would be super.

4 DR. ROTHE: I have also given them
5 to Terrie Barrie. So, she has them as well.

6 MR. KATZ: Oh, okay. Very good.
7 That will take care of it. Thank you.

8 DR. ROTHE: If that will do.

9 MR. KATZ: That will do.

10 CHAIRMAN MELIUS: That will do.

11 DR. ROTHE: Yes.

12 MR. KATZ: Thank you, sir.

13 DR. ROTHE: All right. Thank you
14 very much, guys.

15 CHAIRMAN MELIUS: Thank you.

16 Now Mr. Lipsky.

17 MR. LIPSKY: Yes, sir. Thank you.

18 Greetings to the Members of the
19 Advisory Board. I appreciate your service to
20 this important process.

21 My name is Jon, J-O-N, Lipsky,
22 L-I-P, as in Paul, S-K-Y. I have a master's in

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1 advanced studies in criminology, law and
2 society from the University of California at
3 Irvine. I retired in good standing from the
4 Federal Bureau of Investigation as a
5 Supervisory Special Agent in 2004.

6 From 1987 to 1992, I was the
7 principal lead FBI Special Agent regarding the
8 criminal investigation at the former Rocky
9 Flats Nuclear Weapons Plant near Golden,
10 Colorado.

11 In June 1989, I executed two
12 consecutive federal search warrants at Rocky
13 Flats.

14 In 1992, I testified before the
15 Subcommittee on Investigations and Oversight,
16 the Committee on Science, Space, and
17 Technology, 103rd Congress, regarding the
18 environmental crimes at the Rocky Flat Nuclear
19 Weapons Facility.

20 In 2005, I testified as a subject
21 matter expert in the U.S. District Court for
22 the District of Colorado, Civil Case in re:

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1 Marilyn Cook, et al, plaintiffs v. Dow
2 Chemical, Rockwell International, and Boeing,
3 defendants, on behalf of the plaintiffs.

4 I have arranged for the Advisory
5 Board to receive my seven pages of comments
6 with 62 pages of attachments today.

7 Please note that I voluntarily
8 interviewed with NIOSH on January 21, 2014, and
9 completed the document communication with NIOSH
10 regarding the investigation at the Rocky Flats
11 Plant dated March 5th, 2014.

12 I am concerned that the evidence I
13 provided of data destruction, invalidation, and
14 falsification is being handled in a manner
15 which is not claimant-favorable in the dose
16 reconstruction process. If I may reiterate,
17 the White Paper entitled "Evaluation of
18 Petitioner Concerns About Data Falsification
19 and Data Invalidation in RFP Building 123 Based
20 on Worker Allegations and Issues Relating to
21 the FBI Raid, Revision 3," contains many
22 inaccuracies, to include statements attributed

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1 to me, meant to obviate from personal
2 contamination evidentiary issues.

3 I urge the Advisory Board to read my
4 comments dated July 23, 2015.

5 Respectfully submitted, and again, I
6 appreciate this opportunity.

7 CHAIRMAN MELIUS: Thank you, Mr.
8 Lipsky. We appreciate your helping out here
9 also.

10 The next person I have on the list
11 is Terrie Barrie who is here with us.

12 MR. LIPSKY: Thank you.

13 CHAIRMAN MELIUS: Thank you.

14 MS. BARRIE: I thank you, too, for
15 your service. This is a very difficult job,
16 trying to sort through all this information.

17 For the record, my name is Terrie
18 Barrie, and I'm acting as the co-petitioner for
19 the Rocky Flats SEC petition.

20 I want to thank all of my Rocky
21 Flats experts that I work with. They are
22 honorable men and women, and I am humbled by

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1 their trust in me to represent their interests
2 and experiences.

3 As Dr. Melius mentioned this
4 morning, the petitioners did not receive the
5 bulk of the documentation needed for last
6 Tuesday's Work Group meeting until one to three
7 days before the meeting. The petitioners have
8 a huge burden on them. Not only do we have to
9 read and digest the information in SC&A and
10 NIOSH's report, but we also have to review them
11 and compare them with what we know and what we
12 have provided to NIOSH. And all of this is
13 without the benefit of having access to the
14 SRDB.

15 The No. 1 complaint the petitioners
16 and the people interviewed by NIOSH have
17 expressed so far is how NIOSH has manipulated
18 the information to fit NIOSH's position. It
19 goes beyond bias.

20 The petitioner and I are biased.
21 We're trying to represent and prove that NIOSH
22 cannot reconstruct dose. But, when we supply

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1 information to NIOSH, we give the entire
2 document, so NIOSH knows we are not taking
3 sentences out of context.

4 You heard from Dr. Rothe tonight and
5 during the Work Group meeting, and he stated
6 that -- it was very difficult to hear him
7 tonight, and I do have his written
8 comments -- but he explained that -- where am
9 I? -- that NIOSH's report and calculations, and
10 I quote, "are suspect, unreliable, and wrong."
11 And he explained why the 10 milliwatt
12 calculation was wrong and how the experiments
13 lasted a lot longer than just one hour.

14 The paper, as Dr. Rothe just
15 mentioned, the paper stated that there was no
16 misses at Rocky Flats. In addition to Dr.
17 Rothe's experience, there is also a criticality
18 assessment done by the Department of Energy.
19 And their list -- I think it was in 1989 -- and
20 in that is 40 pages of criticality infractions
21 or near misses, because it would have gone
22 critical if they weren't caught.

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1 For the Critical Mass Lab, NIOSH
2 admits that they don't have any bioassay, as
3 Dr. Rothe explained.

4 I keep looking up there.

5 So, if they do not have bioassay,
6 how can they reconstruct dose with reasonable
7 accuracy?

8 I also urge the Work Group to take
9 another look at NIOSH's paper on data
10 falsification and record destruction. I was
11 very distressed when the Work Group closed out
12 this issue before hearing from the petitioners.

13 You will hear directly from one
14 other interviewee tonight about her objections,
15 and one on the phone -- well, you heard from
16 Jon Lipsky -- about their objections to the
17 characterization of their interview.

18 I don't understand why data
19 falsification and record destruction is
20 strictly tied to the FBI raid. This was an
21 ongoing practice, from what I understand, post-
22 FBI raid and probably a little bit before.

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1 There is another interviewee that
2 cannot be here in person or on the phone, and I
3 have her permission to read her statement.
4 But, in the interest of time, I am going to cut
5 it short.

6 This is the lady who bravely came
7 forward in the September 18th, 2012 meeting in
8 Denver and said, and I quote, "I was asked to
9 destroy records." End quote.

10 And here is her statement:

11 "My name is [identifying information
12 redacted]. I have been misquoted and I am here
13 to set the record straight. In Section 2.1, it
14 is a flat-out lie that I shredded some kind of
15 field surveys. I know darned well what I
16 shredded, and it was dosimeter records as well
17 as medical records and which included fecal
18 results, urine results, dosimeter badges, and
19 reports.

20 "I find it highly offensive for
21 someone to tell me what I did see and did not
22 see, what I destroyed and did not destroy.

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1 Those individuals did not work at the plant
2 site and have no right to discredit my
3 knowledge in any way."

4 Her statement is supported by her
5 boss, who also wrote this email, and I will
6 supply those to you, too. And I quote:

7 "While working at the Rocky Flats
8 plant site, I had personal knowledge of the
9 following:

10 "Rad records were destroyed by
11 shredding.

12 "Two, contamination reports. When
13 high levels were taken, destroyed and no
14 written records were allowed to be in any
15 official record.

16 "Three, secretaries ordered to
17 destroy by shredding medical records, dosimeter
18 records, immediate readings from the RCT on
19 jobs when doses came in high."

20 Both workers are willing to testify
21 in court under oath.

22 I was under the impression that

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1 scientists are to look at all the evidence
2 before they arrive at a position, and not
3 selectively manipulate information or to
4 support false outcome.

5 NIOSH does not do this. NIOSH took
6 one book written by an author -- he worked, a
7 former Rocky Flats worker -- and used that
8 solely for their paper. There are three other
9 books that are well-researched that have been
10 totally ignored by NIOSH. Those books are
11 Making a Real Killing by Len Ackland, Ambushed
12 Grand Jury by Wes McKinley and Caron Balkany,
13 and Full Body Burden, ironically, by another
14 Rocky Flats employee, Kristen Iversen.

15 These three books are more critical
16 of the situation at Rocky, but in order for
17 NIOSH and SC&A to get a good feel, an honest
18 feel, they need to read everything, not just
19 selective things that fit into their criteria.

20 I'm almost done.

21 The thing that bothers me the most
22 personally is NIOSH's and SC&A's interpretation

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1 of DOE's Technical Safety Assessment and the
2 area review of 1988. Both contain findings
3 that alarms were turned off. Findings, this is
4 documented. Air monitors lacked proper airflow
5 and some instruments were not calibrated
6 properly.

7 During the Work Group, NIOSH and
8 SC&A "tsked-tsked" and called them bad
9 practices. Bad practices? I'm sorry, these
10 were instruments that the workers relied on to
11 determine if they had an exposure. If the
12 instruments didn't register an event, how could
13 the person responsible for sending them for a
14 nasal smear or a bioassay or a lung count be
15 relied upon to do so?

16 These bad practices were directly
17 responsible for determining worker safety. And
18 if they weren't working properly, the workers
19 were not protected.

20 I want to be clear. I am not
21 accusing any of the RCTs of any wrongdoing.
22 The majority of the team I work with were RCTs.

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1 And it doesn't matter at this point
2 in time who was responsible. The fact remains
3 that DOE and Rockwell International both found
4 separately, in separate documents, these
5 conditions and documented them.

6 And these are not bad practices, I
7 am sorry. These are examples of how dose
8 cannot be reconstructed for Rocky Flats.

9 The law itself requires the Board to
10 decide whether dose can be reconstructed with
11 sufficient accuracy. Neither NIOSH nor SC&A
12 has proven to the petitioners, the
13 interviewees, or the Rocky Flats claimants and
14 stakeholders that they can.

15 NIOSH and SC&A have distorted or
16 ignored the testimony of the workers and other
17 individuals whose information did not fit in
18 with NIOSH's comfort zone. They ignored well-
19 referenced books which involved almost a decade
20 of research each, in favor of a book that just
21 simply fits in with their position. This is
22 not science.

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1 If NIOSH cannot engage in protocols
2 of objectively reviewing all evidence
3 submitted, regardless of its slant on a
4 particular issue, then NIOSH has failed to
5 prove that they can reconstruct dose with
6 sufficient accuracy, as required by the law.

7 Thank you.

8 CHAIRMAN MELIUS: Thank you, Terrie.

9 MR. KATZ: Terrie, can you give Stu
10 copies of the materials that you want submitted
11 to testimonies? Because Stu can get those,
12 they will get them uploaded for the Board and
13 everybody to use.

14 MS. BARRIE: Okay.

15 MR. KATZ: Thanks.

16 CHAIRMAN MELIUS: The next person I
17 have listed is Joan Stewart. I thought I saw
18 you way in the back there.

19 MS. STEWART: I am Joan Stewart. I
20 worked at Rocky Flats for about nine months at
21 Nevada Test Site as their alpha expert for
22 detonations. I am one of the interviewees

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1 quoted in the paper from NIOSH, the White
2 Paper. I have already handed in my
3 clarification to Mr. Katz.

4 In the NIOSH White Paper, they
5 quoted the RCTs and inferred that the area
6 surveys were being penciled-in. That would be
7 an incorrect assumption. It was dosimetry
8 techs that were instructed to do so. When they
9 had a high result, they would pencil-in the
10 actual result, give it to management, so that
11 they could correct it. And many times it came
12 back, from the evidence that we have provided
13 in the safety concern that was filed in late
14 '86-early '87. It came back no data available
15 to the actual individual.

16 I think I need to address something
17 I have heard here. Dose versus exposure, I
18 think there needs to be a definition of dose
19 versus exposure.

20 We are hearing about contamination
21 in the area, but when you are talking about
22 external dose versus internal dose, et cetera,

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1 and contamination in the area, not necessarily
2 does contamination in an area necessarily
3 equate to dose. So, I thought I would mention
4 that. Correct me if you disagree, please.

5 The paper is interesting. I think
6 it is beneficial to have a healthy skepticism
7 when you are trying to look objectively at
8 data. But, unfortunately, in this paper I
9 believe they crossed the line. It looks like
10 it is more sarcasm in many instances.

11 When you are looking at historical
12 data like science, it is ever-evolving, ever-
13 maturing snapshots to give you a whole picture.
14 To say that -- I hate to use this term --
15 everything is settled, no further investigation
16 is warranted, I think is unfortunate and needs
17 to be reconsidered.

18 Thank you. That was nice and short.

19 CHAIRMAN MELIUS: Okay.

20 MS. STEWART: Any other questions?
21 Any questions at all?

22 CHAIRMAN MELIUS: Could you just

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1 clarify which, when you say "the White Paper,"
2 which White Paper you're referring to?

3 MS. STEWART: I apologize.

4 CHAIRMAN MELIUS: No, no.

5 MS. STEWART: "The Evaluation of
6 Petitioner Concerns About Data Falsification
7 and Data Invalidation at Rocky Flats Plant,
8 Building 123, Based on Worker Allegation and
9 Issues Related to the FBI Raid."

10 CHAIRMAN MELIUS: Okay. Thank you.
11 I just wanted to get it on the record. Okay.

12 MS. STEWART: Thank you.

13 Any other questions?

14 CHAIRMAN MELIUS: No.

15 MS. STEWART: Thank you.

16 CHAIRMAN MELIUS: Thanks.

17 Is there a Dale Simpson on the
18 phone?

19 MR. SIMPSON: Yes, sir. Okay.

20 CHAIRMAN MELIUS: Mr. Simpson?

21 MR. SIMPSON: I'm sorry, go ahead.

22 CHAIRMAN MELIUS: Go ahead. We need

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1 to get the volume up. Go ahead and speak.

2 MR. SIMPSON: Thank you.

3 I am Dale Simpson, and I represent
4 the group of stakeholders in the current 192
5 petition for Rocky Flats. It includes former
6 employee claimants and other authorized
7 representatives.

8 At this time, we are severely
9 concerned at the handling and interpretation of
10 the testimonies and the data falsification
11 issue by NIOSH and SC&A. While we recognize
12 that SC&A does state in their amendment the "as
13 low as reasonably achievable" standard may not
14 have always been implemented, I would like to
15 remind the Board that the implications of this
16 loss of data integrity are far-reaching and can
17 have an insurmountable and fatal effect on dose
18 reconstruction as coworker models, considered
19 measurements, and routine monitoring numbers
20 are now suspect and in jeopardy.

21 We would request further
22 investigation, with the strong belief that such

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1 is warranted by the absolute severity of the
2 matter, in light of the sharp contrast between
3 the reported findings and the follow-up
4 statement now on record.

5 In closing, we would also like to
6 remind LaVon and Dave that there are more than
7 a couple of issues outstanding for the Rocky
8 Flats site. These include fire in Building
9 371, the gamma radiation found in 2003 under
10 the CML, the removal of a large source of
11 cobalt-60 from the site in the 1990s, as well
12 as additional documentation presented recently
13 by Terrie Barrie regarding tritium production
14 on the site. And finally, the findings of
15 beryllium-7 air monitoring in buildings with an
16 absence of worker monitoring for such.

17 Thank you.

18 CHAIRMAN MELIUS: Thank you for the
19 comments. We appreciate it.

20 Is there anybody else on the phone
21 that wishes to make public comments?

22 MR. KATZ: Mr. Simpson --

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1 MR. SIMPSON: Yes?

2 MR. KATZ: If you wrote down what
3 you were saying on the phone, could you send
4 that in?

5 MR. SIMPSON: Yes, I could
6 definitely get that to you via Terrie Barrie.

7 MR. KATZ: Okay. Terrie Barrie is
8 great for that. Thank you.

9 MR. SIMPSON: Thank you.

10 CHAIRMAN MELIUS: Anybody else on
11 the phone that wishes to make public comments?

12 (No response.)

13 Anybody else here in the room that
14 wishes to make public comments?

15 (No response.)

16 If not, I think we are finished.
17 Thank you, everybody. I appreciate everybody
18 coming to make comments, and we will end the
19 meeting.

20 Board Members, we will talk on the
21 phone, and Work Groups, and see everybody in
22 November, wherever Ted leads us to.

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1 (Whereupon, at 7:03 p.m., the
2 meeting in the above-entitled matter was
3 adjourned.)