

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

convenes the

WORKING GROUP MEETING

ADVISORY BOARD ON
RADIATION AND WORKER HEALTH

NEVADA TEST SITE

The verbatim transcript of the Working
Group Meeting of the Advisory Board on Radiation and
Worker Health held in Cincinnati, Ohio, on May
21, 2008.

*STEVEN RAY GREEN AND ASSOCIATES
NATIONALLY CERTIFIED COURT REPORTERS
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TRANSCRIPT LEGEND

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-- (sic) denotes an incorrect usage or pronunciation of a word which is transcribed in its original form as reported.

-- (phonetically) indicates a phonetic spelling of the word if no confirmation of the correct spelling is available.

-- "uh-huh" represents an affirmative response, and "uh-uh" represents a negative response.

-- "*" denotes a spelling based on phonetics, without reference available.

-- (inaudible)/ (unintelligible) signifies speaker failure, usually failure to use a microphone.

P A R T I C I P A N T S

(By Group, in Alphabetical Order)

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P R O C E E D I N G S

(9:00 a.m.)

WELCOME AND OPENING COMMENTS

1
2
3 **DR. BRANCHE:** Good morning. I'm Dr.
4 Christine Branche, the Designated Federal
5 Official for the Advisory Board on Radiation
6 and Worker Health. And today we are now
7 starting the working group on the Nevada Test
8 site, the site profile with Mr. Robert Presley
9 as the Chair.

10 Would the Board members who are in the
11 room please announce your names?

12 **MR. PRESLEY:** Robert Presley, Chair.

13 **MR. CLAWSON:** Brad Clawson.

14 **DR. ROESSLER:** Gen Roessler.

15 **MR. SCHOFIELD:** Phil Schofield.

16 **MS. MUNN:** Wanda Munn.

17 **DR. BRANCHE:** Are there any Board members
18 who are participating by phone?

19 (no response)

20 **DR. BRANCHE:** Is there anyone on the phone
21 who could please let me know that they can
22 hear me?

23 **MS. OH:** Christine, this is Kate in Senator

1 Reid's office.

2 **DR. BRANCHE:** Great. Thank you very much.
3 I'll announce you specifically in just a
4 moment, but thanks for letting me know that
5 you can hear me.

6 We do not have a quorum on the Board
7 so we may proceed. Will the NIOSH staff who
8 are in the room please announce your names and
9 please say if you have a conflict with the
10 Nevada Test Site.

11 **MR. ELLIOTT:** Larry Elliott, NIOSH/OCAS. I
12 have no conflict on NTS.

13 **MR. ROLFES:** Mark Rolfes, NIOSH, no
14 conflicts.

15 **MR. CHEW:** Mel Chew of the O-R-A-U team, no
16 conflicts.

17 **MR. RICH:** Bryce Rich with the O-R-A-U team.
18 I do have a conflict.

19 **MR. ROLLINS:** Gene Rollins with the O-R-A-U
20 team, no conflict.

21 **MS. HOFF:** Jennifer Hoff with the O-R-A-U
22 team, no conflicts.

23 **DR. BRANCHE:** Are there any NIOSH staff
24 participating by phone? Would you please
25 state your name and say if you have a

1 conflict?

2 **MS. ADAMS:** Nancy Adams, no conflict.

3 **DR. BRANCHE:** Are there any ORAU staff who
4 are participating by phone? If you could
5 please state your name and say if you have a
6 conflict.

7 (no response)

8 **DR. BRANCHE:** SC&A staff who are in the room
9 please announce your names and say if you have
10 a conflict.

11 **DR. MAURO:** John Mauro, SC&A, no conflict.

12 **DR. BRANCHE:** SC&A staff participating by
13 phone would you please announce your names and
14 say if you have a conflict?

15 **DR. MAKHIJANI (by Telephone):** Arjun
16 Makhijani, no conflict.

17 **DR. ANSPAUGH (by Telephone):** Lynn Anspaugh,
18 conflict.

19 **MS. BRIGGS (by Telephone):** Nicole Briggs,
20 no conflict.

21 **MS. ROBERTSON-DEMERS (by Telephone):** Kathy
22 Robertson-DeMers, no conflict.

23 **DR. BRANCHE:** Mr. Anspaugh, you said that
24 you do have a conflict?

25 **DR. ANSPAUGH (by Telephone):** Yes.

1 **DR. BRANCHE:** Thank you. I just want to
2 make sure that I heard that correctly.

3 Are there any SC&A staff who I didn't,
4 who I interrupted as they were saying their
5 names?

6 (no response)

7 **DR. BRANCHE:** Other federal agency staff in
8 the room, please state your names.

9 **MS. HOWELL:** Emily Howell, HHS.

10 **DR. BRANCHE:** Other federal agency staff
11 participating by phone, would you please
12 announce your names?

13 **MR. KOTSCH (by Telephone):** Jeff Kotsch,
14 Department of Labor.

15 **DR. BRANCHE:** Petitioners or other
16 representatives who are participating by
17 phone, would you please feel free to state
18 your names?

19 (no response)

20 **DR. BRANCHE:** Workers or their
21 representatives who would like to announce
22 their names?

23 (no response)

24 **DR. BRANCHE:** Members of Congress or their
25 representatives who would like to mention

1 their names.

2 **MS. OH:** Katherine Oh in Senator Harry
3 Reid's office.

4 **DR. BRANCHE:** Katherine, for the record
5 would you please state your name? We need the
6 court reporter to be able to register that
7 properly.

8 **MS. OH:** Sure, Katherine, K-A-T-H-E-R-I-N-E,
9 Oh, O-H.

10 **DR. BRANCHE:** Thank you very much.

11 Are there other members of Congress or
12 their representatives on the line?

13 (no response)

14 **DR. BRANCHE:** Are there any others who are
15 participating by phone who would like to
16 mention their names?

17 (no response)

18 **DR. BRANCHE:** Before I turn it over to Mr.
19 Presley, I just have a couple of
20 announcements. We will hear from Ms. Oh,
21 Katherine Oh, who is a staffer in Senator
22 Harry Reid's office. And she's going to read
23 a letter from the Senator into the record.
24 And based on the discussion I have with Mr.
25 Presley, she will do that at ten o'clock a.m.

1 eastern time.

2 As well each of the Nevada Test Site
3 work group members and I and several others of
4 us received a fairly lengthy letter from
5 [Identifying Information Redacted] who is with
6 [Identifying Information Redacted]. I would
7 just like to say for the record, Mr. Presley
8 and I discussed this, and the entire contents
9 of the 24-page document will be entered into
10 the record. We've given the information to
11 the court reporter, and the entire document
12 will be typed into the record. So we've now
13 said that publicly.

14 (Whereupon, the four letters were delivered
15 to the court reporter and are attached to this
16 transcript beginning on page 241.)

17 **DR. BRANCHE:** For everyone participating by
18 phone, I ask, and unfortunately, I'll probably
19 have to remind you, but I do ask that you mute
20 your phones. You would need to use star six
21 if you do not have a mute button. It's
22 important that you mute your phones because
23 everyone participating by phone has the
24 quality of their reception for the call is
25 affected by everyone else's participation. So

1 I do ask for your indulgence. Again, if you
2 do not have a mute button, then please dial
3 star six. And when you are ready to speak,
4 then please use that same star six. Thank you
5 very much.

6 Mr. Presley, it's all yours.

7 **INTRODUCTION BY CHAIR**

8 **MR. PRESLEY:** Thank you, Christine.

9 Today we have two things that we'd
10 like to wrap up on the site profile for the
11 NTS site profile. We want first to discuss
12 items having to do with tunnel reentry, and
13 then we want to get into issue eleven and wrap
14 that up today. If we have any more time this
15 afternoon, we plan on starting to work on the
16 NTS SEC petition.

17 But the main thing is trying to wrap
18 up the site profile for NTS. And at this time
19 I'd like to call on Mark Rolfes, our
20 representative from CDC, or OCAS. I'll let
21 Mark start his presentation.

22 **MR. ROLFES:** Well, thank you, Bob, and thank
23 you everyone for coming today. As Bob said we
24 had a couple of issues that we would like to
25 discuss to hopefully allow us to close out

1 this portion of the discussion relevant to the
2 site profile for the Nevada Test Site. The
3 two issues that we wanted to discuss are
4 related to air monitoring data following an
5 initial reentry. For example, for individuals
6 who might have reentered into the tunnels
7 without respiratory protection following the
8 initial reentry that was done with scuba
9 equipment, S-C-B-A.

10 Also, we wanted to discuss the
11 environmental radiation exposures at the
12 Nevada Test Site. And to do that I'm going to
13 ask members of our Oak Ridge Associated
14 Universities Team to take us through those two
15 issues. I believe the first issue we'd like
16 to discuss is the tunnel reentry or post-
17 tunnel reentry time period. And to do that
18 I'd like to ask Mel Chew to give some of the
19 information that he's prepared.

20 **TUNNEL REENTRY**

21 **MR. CHEW:** Thank you very much, Mark.

22 I think Mark had sent members of the
23 working group quite a few attachments here,
24 and so I'm going to be talking from those
25 attachments. You can follow along with the

1 talking points.

2 **DR. MAKHIJANI (by Telephone):** This is
3 Arjun. Is there any way this material can be
4 e-mailed to me?

5 **MR. ROLFES:** I don't have the ability to
6 send an e-mail right now.

7 **MS. BRIGGS (by Telephone):** Arjun, this is
8 Nicole. I can e-mail that to you right now.

9 **DR. MAKHIJANI (by Telephone):** Okay, great,
10 thank you.

11 **MR. CHEW:** Can everyone hear? The mikes are
12 a little different than the ones we have used
13 in the past. They're actually hand mikes,
14 too, so we can pick up. Can everyone on the
15 phone hear my voice there? Arjun, are you
16 going to respond? Can you hear me?

17 (no response)

18 **DR. BRANCHE:** Would someone please indicate
19 that they can hear Mr. Chew?

20 **MR. SMITH (by Telephone):** This is Billy
21 Smith. I can hear you.

22 **MR. CHEW:** Thanks, Billy. I appreciate that
23 very much.

24 Let me start this morning with a
25 little bit of digression here. I'd like just

1 to read something from an obituary, actually,
2 and I'll show why it was kind of key to this
3 discussion here. The gentleman I'm talking
4 about is a Cliff Penwell. He was 83, and he
5 passed away last Thursday, May 15th. He was a
6 World War II veteran, a member of the Marine
7 Corps.

8 But in 1957, he began to work at the
9 Nevada Test Site starting as a Radiation
10 Safety Monitor. He was present at over 650
11 atomic tests in a 30-year career, and later
12 became the Radiological Field Operations
13 Superintendent. He is survived by his wife,
14 [Identifying Information Redacted], his
15 daughters and four grandchildren and as well
16 as two great-grandchildren.

17 The reason why I'm going first this
18 morning is that Billy Smith and Bill Frangas*
19 who happen to be on the call who is with
20 Tunnel Supervision, is going to be attending
21 the memorial service that's going to be held
22 at 11:20 Nevada time today.

23 I do have a personal relationship with
24 Cliff. When I first went to the Nevada Test
25 Site in the late 1961, he was the Radiological

1 person who took me in tow with him to show me
2 the ropes at the Nevada Test Site. So I'm
3 very much indebted to Cliff. Our sincere
4 condolences to his family, and I would like to
5 acknowledge his significant contribution to
6 his country, to his service in World War II
7 and to the service and the safety of the
8 (unintelligible) Program. Thank you very
9 much. Cliff, may you rest in peace.

10 I'd like to start today, I think you
11 can follow along with the notes. The point
12 was made in the site profile that there were
13 workers who participated in the tunnel
14 following the nuclear tests and recovery
15 operations under radiological conditions
16 including bioassays and from which dose
17 reconstructions can be performed. However,
18 the remaining concern there was a group of
19 workers who were not on routine bioassay and
20 who were assigned to preparatory projects in
21 contaminated tunnels after from previous
22 tests.

23 So the question was raised to
24 demonstrate or to document those workers who
25 were not exposed to a significant and

1 unmonitored internal sources of intake and
2 there was sufficient data to allow a bounding
3 of internal doses from the work in the
4 contaminated tunnels from previous tests. So
5 I'm going to show a few things. I put some
6 things on the wall. There's also you people
7 who got the e-mails did receive copies of it.

8 I'm going to try to walk you through a
9 tunnel. I also brought some pictures of what
10 tunnels look like for reentry. So let me just
11 talk about what was the approach and how do we
12 basically look at this problem and how to
13 address this problem here. The approach is
14 very important.

15 **MR. ROLFES:** Just to call everyone's
16 attention. We're working from the talking
17 points related to air concentrations following
18 tunnel tests.

19 **MS. MUNN:** What day was this?

20 **MR. CHEW:** That was sent Saturday.

21 **MR. ROLFES:** It would have been Monday.

22 **DR. BRANCHE:** It's a large document that he
23 sent, Mark sent, on Monday.

24 **MR. PRESLEY:** Twelve attachments.

25 **MR. CHEW:** And it says talking points

1 related to the tunnel.

2 **MR. PRESLEY:** Wanda, if you can't find it,
3 if you want --

4 **MS. MUNN:** I think I'll be all right.

5 **MR. CHEW:** Does anyone need a hard copy
6 around the table? Jennifer has some hard
7 copies.

8 **DR. BRANCHE:** Dr. Makhijani, did you receive
9 those documents that Mr. Rolfes sent?

10 **DR. MAKHIJANI (by Telephone):** I'm just
11 downloading my e-mail to see if they've come
12 in.

13 **DR. BRANCHE:** All right, we'll wait to hear
14 from you if you haven't received it.

15 **DR. MAKHIJANI (by Telephone):** I have not
16 yet.

17 **MR. CHEW:** The approach to look at this
18 problem was there's a considerable amount of
19 information at the Records Center at the
20 Nevada Test Site. And I'd like to thank the
21 Records Center for providing for us here.
22 Tunnel shot histories and locations were
23 reviewed in recorded documents from Defense
24 nuclear agencies, the DOE. At the time there
25 was AEC Nevada, and a variety of Health and

1 Safety reports, survey reports, data logs.

2 And during the time period at the
3 beginning of the resumption of underground
4 testing, which was about the 1961 timeframe --
5 I'm going to talk about 1961 -- and to the
6 mid-1970s. This was the period of the
7 development of containment technology. I
8 think that's the important point here.
9 Containment, things in the tunnels, were very
10 exciting. It was going to be underground
11 because of some of the test ban requirements
12 here, the underground. And so learning how to
13 contain shots underground was a very important
14 part of that technology. And so there are
15 greater containment issues here.

16 A selection of monitoring data from
17 representative tunnel shots were chosen that
18 will cover the time period in question and
19 demonstrate the preparatory work. And what I
20 mean by preparatory work is that people spent
21 most of their time in the tunnel getting,
22 preparing the tunnels for an event or a
23 detonation. These were including putting
24 experiments in, putting in the emplacement
25 where the devices or the test units are being

1 conducted here.

2 And following the testing and recovery
3 operation with a special emphasis to compare
4 activity in the tunnels following completion
5 of recovery efforts here. Both a time and
6 location matrix of the tests of interest I
7 have included here, and I can bring you to
8 that just to talk about the different events
9 that happened in the tunnel.

10 The process for record extraction can
11 be briefly explained by reference to the
12 excerpts from the index. And I think I sent a
13 copy of the index. It was quite large here,
14 but I just show the index here. This is only
15 one of the indexes for the series called
16 Operation Thorax. It's a very large file.
17 But it tells you what the people had to do to
18 go in to find the data.

19 If you actually go into the index, you
20 can see all the different documents, the
21 forms, the reports, the data that correspond
22 to a specific tunnel, a specific event, and
23 that's how you need to do to gather, to
24 extract the data. There are thousands of
25 pages of these indexes organized by DOE under

1 subject category.

2 The database is extensive and the
3 result took some considerable time to
4 research. And I'd like to certainly
5 acknowledge Bryce Rich, who's sitting next to
6 me on my right, and Billy Smith, who spent
7 considerable time at the Records Center to
8 gather this data for this presentation. Thank
9 you very much, Bryce and Billy.

10 I don't think I need to go down each
11 one of the indexes, but you can see it. You
12 have a copy in your e-mail. It's quite a few
13 pages here. But you can just see that, for
14 example, you can go right to a particular
15 location, and it says this is the V-Tunnel air
16 data. It tells you what reel it is, and what
17 frame it is. This is all in microfiche. No,
18 it's not microfiche, Bryce it's in --

19 **MR. RICH:** It's on reel, not that ^.

20 **MR. CHEW:** Okay, and when you see it, you
21 download it onto a big computer screen, and
22 then --

23 **MR. PRESLEY:** It's on microfilm.

24 **MR. CHEW:** Microfilm. Okay, very good.

25 **DR. BRANCHE:** One note, Dr. Makhijani, I

1 noticed on the e-mail from Mr. Rolfes that you
2 were not included so I just now e-mailed you
3 all the documents.

4 **DR. MAKHIJANI (by Telephone):** I'm going to
5 get them twice now. I just received them from
6 Nicole. Thank you though.

7 **MR. CHEW:** The purpose of this presentation
8 is to provide a summary of the information and
9 the data analysis resulting from this
10 particular study and some of the background
11 operational facts that addresses the basic
12 issues available from site knowledge and also
13 being confirmed by the records. And then I'd
14 just kind of read a little bit about the
15 background that we think is relevant to help
16 evaluate the data.

17 But I'm going to stand up for a second
18 here and go to the board and bring you some
19 realism I hope of what the tunnels kind of
20 look like here. And many people said, Mel,
21 you were there in 1961. That kind of puts you
22 at 840 years old, very close to it.

23 I'm holding up some pictures here of
24 some people going back in and how they were
25 dressed out, and this is some of the initial

1 reentries here. You can see a person holding
2 a PAC-3G alpha instrument here in some of the
3 reentries here. This is going back into, this
4 is the initial reentry. This is not the group
5 that we're actually talking about because all
6 of these people during initial reentries were
7 bioassayed, surveyed and were well protected.

8 The group that we're focusing in on is
9 the people that went in after these particular
10 recovery operations took place when the tunnel
11 was deemed to be radiologically safe so they
12 can go back into digging new drifts, put in
13 new experiments and fix up the tunnels in
14 preparatory for the next event. I'm just
15 going to show you a couple more of these
16 pictures here, and I'll pass these around.

17 I'd like to show this particular one.
18 Mr. Penwell, who passed away, was this
19 gentleman here, he was the tunnel's
20 radiological supervisor. And this is some
21 wires that they communicate with the people as
22 they were going into the tunnel. And this is
23 a radiation monitor looking in. There's the
24 many, many holes that are dipped into the
25 drifts and the tunnels here for emplacement of

1 the charges and experiments and things like
2 this. This is how the people monitor what
3 potentially is leaking out of it.

4 Another picture here of the people
5 coming back out of the tunnels and how they're
6 radiologically monitored and surveyed. And
7 this gentleman, I had to figure out what he
8 was carrying, and this is, he was carrying a
9 miner's lamp and the battery pack that's
10 dangling down there. Just to give you some
11 realism about going into the tunnel.

12 **DR. ROESSLER:** Now I remember we saw the
13 outside of the tunnels, but I'm trying to
14 visualize how deep they are.

15 **MR. CHEW:** Well, I'm going to go there.
16 Thank you, Gen, that was a very good one.

17 You can go and follow along with me.
18 There's a drawing that I'm going to show.
19 It's called the U-12-B Complex. And I'm going
20 to take advantage of being on the board here,
21 and it's actually on one of the attachments
22 here. You may have to find it. There was a
23 series of little drawings. This is probably
24 the key one, the U-12-B Complex. I'm going to
25 take you through this particular tunnel and

1 walk you through, and I'm going to give you
2 some distances.

3 Thank you very much, Gen.

4 This is a portal where the people
5 actually entered the tunnel. This is a road
6 that drives up to the tunnel. They assemble
7 usually further down and get suited up
8 properly with the proper respiratory
9 protection and badging, dosimetry and et
10 cetera. And then this is after an event.

11 I'm going to just walk you through a
12 tunnel first, all right? And the first one
13 I'd like to draw attention, this is called B
14 Tunnel in 1957, 9/19/57. It was the first
15 tunnel shot here called Rainier. This was
16 prior to the period we're focusing on. This
17 is 1957.

18 Right after that in 1958 Tamalpais was
19 shot, and that was right in this particular
20 portion, the drift on the right-hand side.
21 And that was done in ten-eight. To give you
22 the dimensions generated from it, you can see
23 some numbers along the side of the tunnel
24 where people reentered. The first number is
25 304. That means it's 304 feet from the

1 portal.

2 And as you go in further here, this is
3 the 980-foot level. And then the Rainier is
4 roughly at the 1,400 where the drift goes into
5 the Rainier tunnel it's 1,438 feet into the
6 tunnel. This is in feet. Now Tamalpais and
7 the next one was expended in 10/29/1958. And
8 this was Evans right in here, down this
9 particular drift. So the first series fired
10 to the moratorium that occurred in 1958 was
11 Rainier, Tamalpais and Evans, which were also
12 the names of some of the mountains in
13 California.

14 Now there's also the other shots that
15 I'm going to be focusing in on the discussion
16 is the Cheena* event, which is down this
17 particular drift. When we follow this it's
18 the 1,900-foot level. This is the 2,300-foot
19 level, 2,344, and the working point is right
20 here about 1,000 feet in, almost 960 feet in
21 from this particular entry point was the
22 Cheena. And that was executed in 10/1961.

23 And then this particular one was
24 Feather, going around the corner here at the
25 3,500-foot level. And that was in 12/22/1961.

1 And this is the last one here is Yuba. It was
2 done here in that particular tunnel, and that
3 was 1963. You see there's a period of
4 timeframe between '62 and '63 and we're taking
5 a lot of air samples right at that time
6 because after those particular two events the
7 releases of fission products and debris came
8 down the tunnel and they radiologically
9 cleaned it up. They took a considerable
10 amount of air samples in for people to go back
11 into to put the experiments in Yuba in 1963.
12 This is Feather, Cheena and Yuba are names of
13 rivers in California. And I think the last
14 working group someone had asked me how did
15 they get these names for these events. Well,
16 these are Livermore shots, and being Livermore
17 and being California, the test director has an
18 option to name whatever he wants. And so
19 they're names of mountains and rivers of
20 California.

21 **DR. ROESSLER:** Now every time they went to
22 one of those farther points, they always have
23 to come in at that one entry point?

24 **MR. CHEW:** Yes, they did. Yes, they did.
25 That was the entry point.

1 I think I just want to give you a feel
2 for it. We're talking about from the entry
3 point all the way to the working point.
4 That's another term that we used in the test
5 program called the working point, and that's
6 where the device or the gadget that we call it
7 is assembled and put together for the
8 execution itself.

9 Then there's a lot of considerable
10 amount of activity prior to the event.
11 There's sandbagging and grouting was put in to
12 ensure that things did not leave the tunnel
13 itself. However, there are experiments here.
14 One of the most important part of the
15 experiments is called reaction history.
16 Reaction history is what happened through the
17 event. What were the yields here?

18 The best way to look at the yields,
19 what gathers from the fission products here
20 and tracers that were put in, and give a
21 diagnostic tool. And those particular way to
22 do it was actually insert a small tube right
23 from the working point and into a vacuum
24 chamber and then they go back out to recover
25 those particular samples whether they're gas

1 samples or particulate samples, take them back
2 to the laboratories for analysis similar to
3 core sampling, but that's how they did that.

4 Later on they also did core sampling,
5 too, when they came in from the top of the
6 mesa and drilled down. So those are many
7 opportunities to release activity into a
8 tunnel. I hope I'm giving you some feeling
9 for what that tunnel looks like here.

10 My personal experience, I was part of
11 the reentry team, part of the Livermore
12 technical group to come back in to look at
13 developing diagnostic sampling, was involved
14 with the tracers and things like this we put
15 in there. And I made some of the initial
16 reentries into Feather, and I learned a lot.
17 And that's in December 22nd, 1961.

18 **MR. PRESLEY:** Mel, I'm sorry. Do you want
19 to say how big in diameter the central shafts
20 were versus -- that way you'll give them some
21 idea of how big these things were.

22 **MR. CHEW:** The tunnels were approximately
23 about, look a little less than the width of
24 this particular room and about equally to
25 high, and maybe a little higher, were

1 ventilation ducts. The side drifts became
2 smaller and smaller depending on how big the
3 experiments were and how big the recovery
4 operations would be. But then the actual
5 location where the working point is, is a room
6 about the size of, a little bit larger than
7 the restroom, say the bathroom.

8 We would bring in the parts that were
9 actually assembled the device in place and
10 putting all the arming and equipment and
11 things like this. There was obviously quite a
12 bit of extensive amount of technical work that
13 has to do to making sure the experiments are
14 going to be conducted properly to look at the
15 signals they were looking for.

16 **DR. MAURO:** The air supply and the exhaust.

17 **MR. CHEW:** Yes, I'm going to talk about
18 that. Thank you, John.

19 There are some, in the main drifts
20 there are three places of ventilation systems
21 here. And then the air is sucked in from the,
22 pulled back from the working point and
23 exhausted right at the portal like in a stack.
24 So you can almost think of the tunnel as like
25 a small glovebox or a big glovebox; however

1 you want to think about it.

2 And so as they go back in further and
3 further, additional ventilation ducts are in,
4 attaching onto the main ventilation ducts that
5 are pre-installed. I'd like to also point out
6 for John, radiological monitoring for both air
7 sampling and looking at the radiation gamma
8 detectors are placed along the RAMs units,
9 Remote Area Monitoring unit here.

10 But the ventilation is a very key
11 point because that's when the initial reentry
12 goes back in, the tunnel superintendent is
13 responsible, the tunnel safety, is
14 responsible, number one, to making sure carbon
15 dioxide, carbon monoxide, explosive mixtures,
16 breathable air and the ventilation duct is
17 properly, because that's how the exhaust
18 issues.

19 **DR. MAURO:** So there is some kind of stack
20 at the entrance.

21 **MR. CHEW:** Yes, right here.

22 **DR. MAURO:** And there's a fan blowing out.

23 **MR. CHEW:** Yes, it's blowing straight up.

24 **DR. MAURO:** Straight up. And ducts feeding
25 into that fan. And now the exhaust fan itself

1 is there at the exit point.

2 **MR. CHEW:** Yes, the fans are up, sitting --
3 and actually, if you look at the portal -- I
4 think some of you people went up and looked at
5 the portal --

6 **MR. PRESLEY:** They've seen --

7 **MR. CHEW:** You see that the exhaust ductwork
8 and the blowers are right up on top of the
9 portal.

10 **DR. MAURO:** And that's monitored?

11 **MR. CHEW:** Yes, they are with the HEPA
12 filters and the monitor had charcoal filters.

13 **DR. MAURO:** Pre- and post-HEPA?

14 **MR. CHEW:** Pre- and post-HEPA, yes, sir.

15 **MR. SMITH (by Telephone):** Mel, this is
16 Billy Smith.

17 **MR. CHEW:** Hi, Billy.

18 **MR. SMITH (by Telephone):** Bill Frangas just
19 walked in. He may be able to shed some light
20 on how that ventilation system works.

21 **MR. CHEW:** Did he hear John's question by
22 any chance, Billy?

23 **MR. SMITH (by Telephone):** Yes, he did.

24 **MR. CHEW:** Bill, would you have anything --
25 let me introduce you to the working group,

1 Bill Frangas. He was the mining
2 superintendent. Bill has been at the test
3 site, Bill maybe can tell a little bit about
4 your own history there when you started at the
5 test site. But I appreciate Bill coming and
6 having to be on this call. He's also a very
7 close friend of Cliff Penwell and will be
8 attending his services.

9 Bill?

10 **MR. FRANGAS (by Telephone):** What is it that
11 you don't understand about the ventilation
12 system?

13 **MR. CHEW:** John, do you want --

14 **DR. MAURO:** This is John Mauro. I just
15 asked a question. I wanted to know where the
16 exhaust point was and where the fans were
17 discharging the air to the atmosphere that was
18 drawing down the negative pressure inside to
19 keep the air moving. And whether or not at
20 that location there were air samples being
21 collected prior to the HEPA filter and perhaps
22 charcoal filter because I know iodine, of
23 course, is of concern.

24 And whether or not there was another -
25 - and I'm mainly concerned with prior to

1 because there would be a good integrator of
2 what the airborne activity is leaving the
3 drift. And of course, after the HEPA and/or
4 charcoal filter what would actually be
5 discharged to the atmosphere. So that was the
6 reason for my question.

7 The way I look at it that's a very
8 convenient place to gather data that would
9 provide you with insight into the integrated,
10 in other words, you're at a point now where
11 all the air collected from the entire place is
12 discharged. So it's a good starting point to
13 get a sense of the magnitude of the airborne
14 activity particulate. I assume it was a
15 filter --

16 **MR. CHEW:** It was a filter probably in the
17 sampler.

18 **DR. MAURO:** The sample, perhaps silicon gel
19 for tritium, perhaps charcoal for iodine. I'm
20 not quite sure if it's segregated into those
21 compartments which they, of course, did more
22 recently, because that would be a very nice
23 distribution capturing the three main
24 elements: particles, tritium and iodine.

25 **MR. CHEW:** John, I think I want to make

1 sure. We're focusing today about what happens
2 when the people went back in and the
3 atmosphere and not necessarily the effluent
4 monitor for later. That could be another
5 discussion.

6 **DR. MAURO:** No, I am interested in the
7 effluent, but I'm also interested if it's
8 upstream from the HEPA and charcoal filters,
9 what you've really got is a really nice sample
10 of what is moving through the air and on its
11 way out. So that would be a good spot to get
12 an idea of what we're dealing with.

13 **MR. CHEW:** When they first turn the
14 ventilation on, people are usually not in the
15 tunnels unless they were focusing on exposure.
16 They don't represent when people are there.

17 **DR. MAURO:** Okay.

18 **MR. CHEW:** Bill, did you want to clarify
19 anything I said here? Do you have any points?

20 **MR. FRANGAS (by Telephone):** In large
21 commercial tunnel-driving operations,
22 traditionally they blew the air in. They've
23 got it on positive. And then the air is
24 sucked in from the outside, and it blows into
25 the heading. Now, in our operations we went

1 into to reverse. In other words we tried to
2 put the bad air in the pipe and exhaust it
3 out. You still following me?

4 **DR. MAURO:** Yes.

5 **MR. FRANGAS (by Telephone):** Initially, the
6 tunnels were short. The ventilation was
7 sometimes marginal, and it took awhile to get
8 enough equipment and enough air and so on.
9 Now, in terms of the HEPA filters and whatnot,
10 I never did, I just don't recall when they
11 were start being used.

12 **MR. SMITH (by Telephone):** John, this is
13 Billy. One of the things that, you know,
14 listening at your question, one of the things
15 that I think you need to understand is that
16 the air that was in the tunnel that people
17 were working in was actually being sucked out
18 of the tunnel from the end of the vent line
19 inside the tunnel and pulled out of the tunnel
20 and passed through HEPA filter systems.

21 So your questions about sampling at
22 that point to give you an indication of what
23 the air is, is probably, would give you a very
24 high value because all of the HEPA filters and
25 the charcoal filters would have been,

1 concentrate the materials that are being
2 pulled down the vent lines. People are
3 actually breathing air, fresh air, that's
4 being sucked in from the tunnel portal as the
5 air is being pulled out from the rear end of
6 the tunnel.

7 Is that clear, John?

8 **DR. MAURO:** Yeah, so what you're saying is
9 that the concentration of radionuclides in the
10 air in the tunnel is going to vary as a
11 function of how, where you are in the tunnel.
12 The only reason I brought it up is that I saw
13 that as if that's your last point before
14 discharge upstream of the filtration, and
15 you're grabbing air samples, what you've just
16 done is say, okay, here's the number of curies
17 per second or millicuries or whatever --

18 **MR. RICH:** This is Bryce Rich. They did
19 take ventilation samples, ventilation
20 discharge samples, and did effluent
21 evaluation, you know, discharge to the
22 environment by the scrubbers as you indicate.

23 **DR. MAURO:** I understand that, but, please,
24 I'm trying to build a little picture in my
25 mind, and if there were -- typically, you take

1 your samples downstream of the filter because
2 you're concerned about what you discharge into
3 the atmosphere. I mean, that's standard. But
4 I don't know if they always take samples
5 upstream, especially since you'd like to get a
6 handle on what is, in fact, in the air prior
7 to it hitting the HEPA filter because that's
8 the air that's in the tunnel.

9 **MR. RICH:** They did have samples on both
10 sides.

11 **DR. MAURO:** Okay, that's all I was asking.

12 **MR. CHEW:** And, John, I think we'll make
13 sure that we're focusing on today, you know,
14 the discussion is this is the initial
15 reentries we're talking about. And then we're
16 trying to concentrate on what the air
17 concentration would be after the initial
18 recovery. But I wanted just to walk you
19 through a timeframe here. That's good, John,
20 good question.

21 **MR. CLAWSON:** While we're talking about this
22 -- this is Brad. When they take and after
23 they set the shot off, do they start the
24 ventilation up after that or do they make an
25 initial manned entry into there to be able to

1 review what they've got back there before they
2 turn that on?

3 **MR. RICH:** They install in the tunnel remote
4 monitors to determine, you know, both the gas
5 mixtures and radiological gases and rams.

6 **MR. FRANGAS (by Telephone):** Well, I think
7 in order to make sense on this discussion,
8 we've got to get ourselves a time. In 1958
9 people like myself that came out of, I came
10 out of the copper mines and that was the, in
11 the copper mines we just believed in putting
12 the air on suction and putting the, suck the
13 good air in and put the bad air in a pipe.

14 In 1958 the laboratory is underground
15 for the first time. You know, Rainier was
16 shot in 1957, in September of '57, and then
17 the big effort to get off of Tamalpais and
18 Evans that took place because of the
19 Eisenhower moratoriums coming up on Halloween
20 on October 31st of '57, so in terms of the
21 coordination of the laboratory and the
22 contractor and the air movements and whatnot
23 was pretty primitive.

24 As time went on and the tunnels became
25 bigger and the equipment and ventilation and

1 whatnot became adequate, there were
2 significant changes made. So in, I think in
3 the fall of 1958 the coordination between
4 laboratory and the so-called users,
5 experimenters and the contractors, we were all
6 getting acquainted with one another.

7 And I would judge that much of the
8 efforts that took place there were
9 misunderstood by both parties. It took awhile
10 for us to ^ what the laboratory wanted, and
11 the laboratory had a certain amount of
12 arrogance as to getting their experiments
13 done. I'm just giving you kind of a
14 historical point.

15 Now after the reentry was made in
16 Tamalpais, and the explosion took place, one
17 day after that the entire systems was no
18 longer free-wheeling. And at that time
19 procedures and everything was tightened down,
20 and the entire system then became a totally,
21 completely controlled effort. So you still
22 are following me.

23 **MR. CHEW:** Thank you, Bill.

24 **MR. CLAWSON:** My question was I'm trying to
25 picture in my mind, we're getting ready to be

1 able to do a shot and so forth like that. We
2 go back there. I presume we'd shut down the
3 ventilation system. We'd get everything all
4 set up for that. Then we'd do the blast. And
5 the initial reentry, it seems like to me that
6 before they'd turn the ventilation or anything
7 on, they'd make the initial reentry to see
8 what they've got. Or would they turn that on
9 before or -- because, you know, you could
10 damage an awful lot of stuff.

11 **MR. CHEW:** Well, one of the things is that
12 there could be an explosive mixture in there.
13 If you turn that -- I think that's where
14 you're going with that.

15 **MR. CLAWSON:** Right.

16 **MR. CHEW:** And if you turn the ventilation
17 on, you're going to go boom possibly.

18 **MR. CLAWSON:** Right.

19 **MR. CHEW:** Bill, I don't remember. Can you
20 maybe recall, the question is that right after
21 the event and the initial reentry team to go
22 in to survey the condition of the tunnel, were
23 the ventilation systems turned on prior to
24 them going in or shortly thereafter when they
25 assessed that there will not be any damage

1 that may occur if the ventilation was turned
2 on. I think that's the question.

3 **MR. CLAWSON:** Yeah, I'm just trying to
4 picture how they'd --

5 **MR. CHEW:** Do you recall that?

6 **MR. FRANGAS (by Telephone):** In 1958 terms,
7 all of the above.

8 **MR. CHEW:** How about in the '60s here?

9 **MR. FRANGAS (by Telephone):** By the '60s the
10 system was pretty well sophisticated.

11 **MR. CHEW:** And is it safe to say the
12 ventilation systems were turned on immediately
13 after the event so to ventilate the initial
14 reentry team can go in safely?

15 **MR. FRANGAS (by Telephone):** Yes. As a case
16 in point, Tamalpais was shot -- I don't
17 remember, October 9, 10, something like that
18 in '58.

19 **MR. CHEW:** Yes, October.

20 **MR. FRANGAS (by Telephone):** There were some
21 monitoring devices outside the portal. And if
22 I recall right, there were some notions that
23 the airborne contaminants were up in the
24 10,000 R range. And so for people like myself
25 who'd been on the Test Site at that time about

1 three months and just getting acquainted with
2 this business of, you know, that indicated to
3 me that that tunnel was through. It was out
4 of the picture. And we still had another shot
5 called Evans to follow that.

6 After the event was executed, and I
7 heard those numbers, I went home because I'd
8 been on that job 24/7 for weeks on end. There
9 were some times that I didn't get, I was in
10 that tunnel almost 24 hours, and the only time
11 I got some sleep is when I slept on my desk
12 out at the portal. They was hell bent to get
13 these shots off before that moratorium kicked
14 in. Well, we execute the shot. We wind up
15 with those airborne contaminants up in that
16 high range, so I go home.

17 The afternoon, the following afternoon
18 the day after the shot, I get a call and says
19 hustle on back, we want to make a reentry. So
20 I hustled on back. At that time the levels
21 were down in the 400 MR range which was
22 permissible for reentry. Prior to my coming
23 there, there are some people, and there was no
24 one totally in charge of the entire operation.

25 If I recall correctly, some of the

1 Livermore people went into the tunnel a few
2 feet. They took some measurements. Some of
3 my guys were being rounded up. And the point
4 I'm making there was not a formal process for
5 reentry. A lot of anxiety, you know, like,
6 well, we've got to get in there and see what's
7 happening. And then, of course, on that
8 afternoon is where that infamous hydrogen
9 explosion took place.

10 Following that experiment both the
11 laboratories and the contractor sat down and
12 put together and said there will never again
13 be a reentry that is not totally identified,
14 totally controlled under the command of one
15 person. There's an old saying in my business
16 that when there's more than one guy in charge,
17 in reality, nobody's in charge. And so those
18 were the learning curves, those were the
19 points we put on the curve. And from then on,
20 you know, following Tamalpais, from then on
21 there never was again a reentry that wasn't
22 under total control.

23 Now in terms of when did you turn the
24 ventilation on and off and et cetera,
25 conditions and readings from monitors inside

1 and outside and judgments were made on actual
2 conditions. But they were under the purview
3 and under the control of knowledgeable people
4 at all times after that first situation.

5 **MR. CHEW:** Thank you, Bill.

6 **MR. ROLFES:** This is Mark Rolfes from NIOSH,
7 and I do have a procedure from November 9th,
8 1961. It's titled "The Lawrence Radiation
9 Laboratory General Reentry Procedure for
10 Underground Nuclear Events" and does describe
11 a little bit about the summary of reentry
12 operations. And I just wanted to point out
13 that some of the initial steps, it indicates
14 remote reading radiation monitors including
15 one at the ventilation stack, TV coverage of
16 the tunnel portal and shaft collar, survey
17 with geophones, with direct reading recorders,
18 tunnel condition indicators and communications
19 with photo and sample aircraft in the area.

20 It goes on to say that ventilation
21 into the tunnel or shaft complex will be
22 started at the earliest possible time. Tunnel
23 reentry will not be made until the vent lines
24 are monitored for gas and it is determined by
25 the test group director that it is safe to

1 start actual tunnel or shaft reentry. I
2 believe I provided this previous and put it on
3 the O drive for people's review. I can also
4 send it again if everyone would like, but it
5 does have additional details regarding the
6 actual procedures for the reentry.

7 **MR. CHEW:** But I think that's pretty general
8 to answer your question. I mean, they looked
9 at the conditions here before they took a risk
10 of turning the ventilation on. I think that's
11 important.

12 **MR. CLAWSON:** Well, and also a lot of times
13 I'm sure that when these blasts went off, you
14 did lose some of your instrumentation. So
15 that's what I was trying to figure out was, is
16 how because I read what you were saying there,
17 and I was wondering how they got that
18 information.

19 **MR. CHEW:** I think I lost one of mine, and
20 somebody said, well, you go get mine.

21 **MR. CLAWSON:** I looked at some of your
22 photos, and it looked like they were
23 restringing instrumentation wires.

24 **MR. CHEW:** That's communication wire.

25 Bryce, do you want to make a comment

1 on that?

2 **MR. RICH:** You need to understand that as
3 Bill has indicated, after the first learning
4 curve, it was always under the, these events
5 were always under the command of a test group
6 director, and the equipment laboratory
7 appointed a test group director who was
8 responsible for reentry and the safety of
9 people associated, using the Site's
10 contractor, REECO, the tunnel people, the
11 people that really had expertise. And he
12 reported directly to the DOE test manager.
13 And so there was that chain of command. After
14 the recovery, which could have gone on for
15 months, then it was passed back to the tunnel
16 superintendent for control.

17 **DR. ROESSLER:** Bryce, can you give us a date
18 -- or maybe Bill can -- at what point did this
19 control and all the changes take place?

20 **MR. RICH:** It depended upon the event.

21 **MR. CHEW:** Oh, you mean when they
22 transferred from the test director to the
23 tunnel entry --

24 **DR. ROESSLER:** At what point did things
25 become under much better control and --

1 **MR. RICH:** Oh, you mean in the history.

2 **MR. FRANGAS (by Telephone):** There's a
3 simple answer for that. The day after
4 Tamalpais.

5 **DR. ROESSLER:** And give me the date on that.

6 **MR. CHEW:** That's 10/8/1958. But then we
7 went to the moratorium, and then things got,
8 when resumption of the testing was under this
9 procedure, it was dated November 1961. ^ was
10 December of '61.

11 **DR. ROESSLER:** I think it's important to
12 have dates associated with the information
13 that we're receiving.

14 **MR. CHEW:** I'd like to, there's a picture,
15 you saw the people there wearing a pack. And
16 that's called a McKay Pack. I think in this
17 room I think Bryce and I are the two ones who
18 were certified to wear a McKay Pack. We had
19 to go through a considerable amount of
20 training. This is a re-breather that allows
21 you to go in to breathe for two hours,
22 different than the scuba gear for 20, 30
23 minutes.

24 And what they did is they took your
25 carbon dioxide that you breathe out and

1 basically pass it through some calcium
2 hydroxide. And it takes out the CO2 and then
3 gives us about another ten or 15 percent of
4 oxygen. So we carry this bottle. When the
5 carbon dioxide actually got into the calcium
6 hydroxide, it got hot, but I always remember
7 seeing Bryce for the first time because he was
8 getting certified for his McKay, and he was
9 playing baseball. They set them up to play
10 baseball wearing a McKay Pack.

11 **MR. RICH:** And the sweat was right up to
12 there on my mask.

13 **MR. CHEW:** This is all mine safety equipment
14 you all know. Our certification only lasted
15 for a year, so we had to get re-certified.

16 **MR. CLAWSON:** Are you still certified?

17 **MR. CHEW:** No, I think there's an age limit.
18 I think you have to be young.

19 Let me continue here because I want to
20 focus in on what the data shows. If you can
21 follow with me here, we're going to talk about
22 the air activity where it was migrated and
23 controlled at the tunnels through pre-
24 installed ventilation as we talked about.
25 Generally, a minimum of 2/10,000 CFM positive

1 pressure blowers were used in the base flow
2 driving ventilation.

3 Post-shot venting of gases,
4 radioactive, toxic and explosive, probably the
5 latter two were more important as you can now
6 imagine here, through charcoal filters and
7 HEPA filters were performed at these shots as
8 needed, generally, just prior to reentry or in
9 unusual seepage problems that developed here.
10 The remote radiation, toxic, explosive gas
11 monitoring devices in the test strip in
12 several locations by which conditions in the
13 tunnel can be determined remotely following
14 the tests and prior to personnel reentry
15 activity.

16 Initial reentry teams consist of
17 Health and Safety personnel to address the
18 radiological and toxic conditions here, Mine
19 Safety personnel to address tunnel integrity
20 and safety in addition to other experimental
21 technical personnel as needed here. We were
22 very anxious to get back and get our
23 experiments obviously, but they held us back.

24 The protection of workers during
25 reentry into the test chamber and other known

1 suspected high-level condition including full
2 protective gear, respiratory protection as
3 I've shown you with air re-breathing equipment
4 here for high-level workers. These protective
5 measurements were applied preventively, and
6 protection measures were used in situations
7 where you're going to anticipate potential
8 significant levels of air activity as
9 evidenced from the known surface
10 contamination.

11 But if you went back in a monitor, I
12 mean, your instruments told you a lot. And
13 the people were very, very experienced. They
14 could put it on the ground ^ taking air
15 samples you can tell a lot. If you take an
16 air sample and put an instrument right away,
17 and then based on some of the counts, you can
18 get a kind of a gross feeling where you are.
19 You also know by just, you walk into a highly
20 contaminated, you got contaminated. I mean,
21 your survey showed that.

22 And so there was a lot of indicators
23 other than just the air sampling. And that's
24 a kind of important note. When do you
25 actually end up relaxing those conditions here

1 and when the air samplings are representative.
2 The group that we're talking about was the
3 group who went in without bioassay.

4 **DR. MAURO:** It sounds as if though one of
5 the action levels was your millirem per hour
6 reading as being a primary indicator of it's
7 time to leave --

8 **MR. CHEW:** Sure.

9 **DR. MAURO:** -- as opposed to, let's say,
10 some gross alpha character or air sample.
11 That would be your first trigger.

12 **MR. CHEW:** They did both. As a matter of
13 fact, the picture I showed you with the person
14 kneeling down, that's a Pack 3G, and it looks
15 for alphas. It's a depth-proportional
16 detector.

17 **MR. RICH:** Brad raised the question about
18 the remote monitors that were fed through the
19 gas stevedore and the overburden they called
20 it. And they monitored several of those
21 remote monitors, both for ^ and for radiation
22 levels, and the results on the remote monitor.
23 They lost one or two ^ so they didn't lose
24 those monitors so they knew ahead of time the
25 conditions in those tunnels. And then the

1 ventilator --

2 **DR. BRANCHE:** Excuse me. There's a
3 participant by phone, you will need to mute
4 your phone. I'm sure it's disturbing the
5 other people online. Thank you.

6 **MR. RICH:** -- and then they could watch the
7 decrease and how effective the ventilation was
8 before. An entry team went to the gas-sealed
9 door and opened up doors and then this was a
10 manned reentry to look at the condition of the
11 tunnel as well as the radiological conditions
12 after they went into the tunnel. But as Bill
13 said, they had an experiment situation where
14 an explosive mixture went off in the tunnel so
15 they were extraordinarily careful after that.

16 **MR. CHEW:** Thanks, Bryce.

17 I think you can follow along with me
18 in the written text. I'm going to scroll down
19 about two or three bullets because some of
20 those particular points that are on those were
21 discussed already. And I'm going to go down
22 to the area where it says a suspect or known
23 highly contaminated areas were reentered when
24 the first task was to check and be sure that
25 the vent lines were intact and functioning and

1 install new vent lines at the head of the work
2 and newly-opened test chambers contaminated ^.

3 Example, sometimes you ^ activity
4 where some of the experiments getting to that
5 particular entry point -- but remember, this
6 is kind of convoluted, the particular drifts
7 in here -- that they were so highly
8 contaminated that you'd have to make a side
9 trip. So they had to kind of bring in people
10 to dig a new drift to access one of the other
11 drifts that you put the experiments in. You
12 couldn't possibly go in because of the
13 contamination directly into the one that you
14 had put your experiment in. So we kind of
15 relied on that ourselves.

16 **MR. CLAWSON:** This is Brad. Would they take
17 and seal off that tunnel?

18 **MR. CHEW:** Yes, they did. They sealed it
19 off.

20 **MR. CLAWSON:** After the tunnel and come
21 around from another direction.

22 **MR. CHEW:** There was a lot of that.

23 **MR. RICH:** That's why the recoveries took
24 weeks and months sometimes.

25 **MR. ROLLINS:** And, Mel, that picture that

1 that during that, you know, going in and then
2 cross-cutting, they aren't going into any
3 contamination that they don't know about. So
4 he's monitoring the face or the cuttings that
5 came out of those holes before they put
6 charges in them.

7 **MR. CHEW:** These are emplacement holes for
8 charges. I think that's what you were asking.

9 **MR. CLAWSON:** They're tunneling on and
10 making sure they haven't drilled ^, and also
11 shows on the front of this.

12 **MR. CHEW:** The document and detail project
13 event reports contaminated tunnels were
14 immediately sprayed or washed down with water
15 to settle the dust and create a wet surface
16 and to obviously lessen resuspension. Water
17 glass or a heavy oil spray was applied to a
18 more permanent fixture of measurable
19 contaminants.

20 I think, Bill, I forgot to ask you. I
21 don't remember the water glass. What was the
22 constituent of water glass? Do you recall
23 that? I think I'm catching you off guard
24 here. What was water glass made out of?

25 **MR. FRANGAS (by Telephone):** That's been a

1 long time ago.

2 **MR. CHEW:** Obviously when they would spray
3 this down it kind of held things in. I just
4 did not recall what the material, that was
5 what you folks did to help us in the tunnels
6 here. Okay, let me move on.

7 Heavy oil --

8 **MR. PRESLEY:** Mel, excuse me just a minute.

9 **MR. FRANGAS (by Telephone):** Just to get a
10 perspective here. Once an event was executed,
11 all the major effort was to make the initial
12 reentry, turn on the ventilation, determine
13 where the contaminants are, if any, what
14 protection has to be taken place. And that
15 generally took a day or two.

16 And then once all of that was
17 established, when the inspection team went in
18 wearing the McKays, which were a four-hour
19 breathing apparatus, determined -- you know,
20 there were a lot of other things besides
21 contaminants. Had to make sure that there
22 wasn't any loose rock in the back. The back
23 is called the ceiling of the tunnel. And
24 after all of that had been taken care of, then
25 the complexion of the reentry changed to

1 letting the so-called users get back to their
2 experiments.

3 And a lot of those experiments were
4 time sensitive and so you had to get them as
5 soon as you could. So the point I'm making
6 here is that although reentries generally have
7 a lot of similarities, no two of them were
8 ever totally alike. And those penetrations
9 back into the tunnel had to be judged by the
10 actual conditions as we knew them.

11 Now, as time went on we got pretty
12 well sophisticated. We wound up with monitors
13 inside the tunnel that were connected to the
14 CP, the control point, and decisions could be
15 made from the control point 30 miles away as
16 to whether or not to turn on a particular fan
17 or all the fans or whatever. And so this was
18 the way that the system operated there. At
19 the portal, portal control was maintained 110
20 percent.

21 **MR. CHEW:** Bill, thank you very much here.
22 We're going to have to interrupt our
23 discussion here for a few minutes. I'm going
24 to turn it back over to Christine because have
25 a speaker from Senator Reid's office.

1 **DR. BRANCHE:** Yes, Mr. Presley and the work
2 group.

3 Ms. Oh, are you on the line?

4 **MS. OH:** Yes, I am.

5 **DR. BRANCHE:** Okay, great. Ms. Katherine Oh
6 is the Legislative Assistant to Senator Harry
7 Reid. And she has a letter that's been
8 addressed to the Board and to this work group.

9 Ms. Oh, I'm also going to submit your
10 letter so that it can be entered in its
11 entirety into the record. But please go ahead
12 and read your letter.

13 **MS. OH:** Thank you for this opportunity.

14 Dear Dr. Ziemer, Dr. Branche, and
15 Members of the Advisory Board: I write to
16 express my strong support for Petition SEC-
17 00084 to include Nevada Test Site workers
18 employed from January 1, 1963 to September
19 30th, 1992 in the special exposure cohort. For
20 the reasons explained in the petition, as well
21 as concerns described elsewhere, I urge you to
22 recommend giving these men and women the
23 expedited and streamlined eligibility that is
24 available only through SEC membership under
25 the Energy Employees Occupational Illness

1 Compensation Program Act.

2 As a member of Congress who was
3 involved in the passage of this law, I know
4 firsthand that we intended for this landmark
5 law to ensure timely, uniform and adequate
6 compensation for our nation's Cold War
7 veterans who sickened on the job. While a
8 limited number of Nevada's claimants have
9 received benefits under the Act, I am deeply
10 troubled by the failure of the program to
11 fulfill this promise for so many other
12 deserving NTS workers. They are among the
13 individuals covered by the petition pending
14 before the Advisory Board's Work Group on the
15 Nevada Test Site.

16 Unfortunately, these individuals now
17 face an unreasonable and excessive burden of
18 proof arising from the problems unique to NTS.
19 Due to the numerous flaws in the data and
20 methodologies used by the Department of Labor
21 and the National Institute for Occupational
22 Safety and Health, I continue to hear from my
23 constituents that the eligibility hurdles and
24 bureaucratic red tape are extremely difficult,
25 if not impossible, to overcome. The dose

1 reconstructions estimated by NIOSH are
2 especially problematic for NTS workers as the
3 petition explains. Although NIOSH's
4 evaluation of the petition is largely
5 dismissive, I appreciate that members of the
6 Advisory Board and its contractor Sanford,
7 Cohen and Associates continue to pursue these
8 serious and legitimate concerns.

9 Among the issues that deserve your
10 continued scrutiny are NIOSH's unwarranted
11 conclusions and flawed assumptions about the
12 integrity of the external dose record,
13 internal dose monitoring coverage, Iodine-131
14 data, hot particles exposure, air-
15 concentration data, neutron doses, and
16 resuspension of airborne materials. As
17 numerous NTS workers have testified, it is
18 important to keep in mind that radiation
19 monitoring protocols often did not match up to
20 reality. The adequacy, validity, and
21 reliability of key parts of NIOSH's Technical
22 Basis Documents for NTS also remain in doubt.
23 Not only are the NTS site profile documents
24 still unfinished, future editions are not
25 expected to address key shortcomings,

1 including unplanned releases of radioactive
2 materials and exposures associated with
3 classified programs. Serious flaws in the
4 methods themselves, not just the data used in
5 the calculations, should give you pause as
6 well.

7 The Energy Employees Occupational
8 Illness Compensation Program Act created the
9 Special Exposure Cohort in anticipation of
10 such weaknesses in the standard eligibility
11 process. When the necessary information is
12 inaccurate, incomplete or simply nonexistent,
13 the SEC option ensures that gravely ill
14 workers and their loved ones can still be
15 given some measure of recognition for their
16 sacrifices. In the case of the NTS petition
17 pending before the Advisory Board, over 400
18 filed claims could potentially qualify for the
19 SEC designation. Given these high stakes, I
20 respectfully ask you to give Nevada Test Site
21 workers' petition every consideration and
22 recommend approval to the U.S. Secretary of
23 Health and Human Services. Sincerely, Harry
24 Reid.

25 **MR. PRESLEY:** Katherine, thank you very

1 much.

2 **MS. OH:** Thank you.

3 **MR. CHEW:** Do you want to take a break?

4 **MR. PRESLEY:** That's what I was going to
5 say. While we're stopped, I want to take
6 about a ten-minute break. Be back in here
7 please at 15 after ten. Is that all right?

8 **DR. BRANCHE:** And we'll mute the phones.

9 (Whereupon, the working group took a break
10 until 10:15 a.m.)

11 **DR. BRANCHE:** I think we're just about on
12 time so can someone who's participating by
13 phone let me know that you can hear me?

14 (no response)

15 **DR. BRANCHE:** I know you're probably on mute
16 because I've asked you so nicely so many
17 times, but could someone let me know that
18 they're participating by phone?

19 **UNIDENTIFIED SPEAKER (by Telephone):** We're
20 here.

21 **DR. BRANCHE:** Thanks so much. I appreciate
22 it.

23 Mr. Presley.

24 **MR. PRESLEY:** Mel.

25 **MR. CHEW:** Thank you very much.

1 While we wait for everybody to gather
2 back into the room, I just want to go back to
3 the wall that showed, I described the B
4 Tunnel. And the reason for that later on is
5 that many of the information that I'm going to
6 ^ on radiation activity post-shot is going to
7 be from the B Tunnel because of the five
8 previous shots it's probably the
9 representative tunnel area, John.

10 The one Pile Driver, and the Pile
11 Driver was a very interesting experiment and
12 that was executed on 6/2/66 and was from U-
13 15A, another tunnel complex here. You can
14 turn around and look at this one. This one
15 was a shaft that went down from the top of the
16 surface of the mesa down to almost about 1,400
17 feet. So here is the shaft that they built.
18 And the shaft was roughly, I remember it's
19 about five or six feet in diameter. It's not
20 much more than that.

21 Then they had a skid and you can put
22 about three people, or maybe four if you jam
23 or squeeze everybody in on top of each other,
24 and the skid brought us down. So we all went
25 down in the tunnel and then going back into

1 this particular, then they went down to the
2 1,400 foot level and dug a drift.

3 And the drift came all the way out
4 from this particular point, and here's what
5 the drift looked like. Here's coming down the
6 excess draft, and this drift is now, we're
7 down at 1,500 ^, not just per portal. So
8 there's a couple of other little safety issues
9 that they had to face, too.

10 Brad, I think you can imagine making
11 sure that people were down there.

12 And then this experiment was called
13 Pile Driver. These were structures that were
14 actually built into the drifts for the
15 experiment. And the experiment at that time
16 was to determine how the survivability of some
17 of our missile silos were. And that was the
18 experiment. And so they were looking at the
19 effects, the blast effects, from this
20 particular shot. How it affected actual
21 structures. We built structures there to
22 assimilate some of our containment for our
23 missile silos and obviously some of the
24 information that was used at NORAD for the
25 protection of the, that particular tunnel. I

1 just want to show you the different way of
2 actually executing the shot here. So here was
3 the shot down here. The working point where
4 we looked at the effects of what happened to
5 those particular structures. Then we went
6 back down and looked at them.

7 **MR. CLAWSON:** Now that is tied into the B
8 Tunnel ventilation system though, isn't it?

9 **MR. CHEW:** There's another picture that
10 shows the ventilation. This is the Gumdrop
11 Tunnel.

12 **MR. RICH:** However, a different part of the
13 site.

14 **MR. CLAWSON:** Okay, so Pile Driver was
15 standing all by itself.

16 **MR. CHEW:** Yes.

17 **MR. CLAWSON:** It had its own ventilation
18 system.

19 **MR. CHEW:** Yes, it was 15A. It was a
20 different, but I just wanted to show you a
21 different kind of configuration where people
22 had to go down the shaft and then go back into
23 the drift that's mined already 1,400 foot
24 down.

25 **DR. MAURO:** Where's the supply air? I mean,

1 I know the air's coming out. Where's the air
2 coming in?

3 **MR. CHEW:** They bring in ventilation ducts
4 along the side.

5 **DR. MAURO:** So there are other holes?

6 **MR. CHEW:** Yeah, there are other holes here,
7 ductwork.

8 **DR. MAURO:** And they're somehow sealed
9 during the test and then they're unsealed --

10 **MR. CHEW:** Yeah, with grout and things like
11 this. And they blow air in and blow it back
12 out this way.

13 **DR. MAURO:** Is the negative pressure inside?

14 **MR. CHEW:** Yes.

15 **DR. MAURO:** I imagine. That makes sense.

16 **MR. RICH:** Many of these shots had other
17 vents.

18 **MR. ROLLINS:** Did the muck come out of the
19 shaft?

20 **MR. CHEW:** Out of these shafts? When they
21 went back in for ^.

22 **MR. ROLLINS:** Just when they built all of
23 these structures, I mean, how did they get the
24 muck out?

25 **MR. CLAWSON:** They have to blow out the

1 shaft.

2 **MR. ROLLINS:** Okay, up the shaft.

3 **MR. CHEW:** This main access draft.

4 **MR. ROLLINS:** They had a system that would
5 take it up.

6 **MR. CHEW:** I remember the ventilation duct
7 because I remember there was an issue about
8 some of the gases that part of the laboratory
9 experiment, I guess however you want to say
10 that, that we had to be concerned just in case
11 it got loose inside the tunnels and people
12 were there. I did some analysis making sure
13 what we can do to have to make sure that
14 people can evacuate properly. And so that
15 also limited the amount of people under the
16 ground when we were doing that.

17 Okay? Let me go on. I do want to,
18 since I have these up on the wall, and this is
19 Gumdrop, which is 16A. This is the Gumdrop
20 Tunnel, and this is the portal. And I brought
21 this picture along because it showed where the
22 RAM stations were marked off here. RAM
23 stations here, explosimeter and the pumping
24 station, and this is the working point for the
25 Gumdrop event.

1 And so this will show you a different
2 tunnel diagram. So it's not just a simple B
3 Tunnel one. But this is the one that we
4 mainly used quite often here. Now I'm going
5 to concentrate on this discussion because
6 there were five other events prior to it. The
7 pictures and timeframe now, again, this is the
8 timeframe line.

9 We have shots that happened in '58,
10 and then we had a moratorium. And then we
11 have two shots, Feather and Cheena that
12 happened in 1961. Now there was a very
13 important event, the experiment done called
14 Yuba. And it was at this end here. The shots
15 went along here. So this is a clean drift in
16 here where the people have to pass by to go
17 back into the tunnel. That's the group of
18 people we're talking about. This is after --
19 this happened quite often. They went back and
20 started -- these happened in '61. Yuba didn't
21 happen until late '62. So there was a time
22 period, about quite a few months, that they
23 were preparing the tunnel for the Yuba event.

24 **MR. RICH:** The better part of a year.

25 **MR. CHEW:** Yes, a better part of the year.

1 Thanks, Bryce.

2 And so, John, I think it was important
3 that after these particular events and after
4 the initial reentries under full protective
5 gear, that now the miners went back in the
6 tunnel. So you're going to say to people that
7 I went back into the tunnel, and there's no
8 question. I went back in the tunnel to help
9 prepare the Yuba event. Well, fortunately,
10 air compare samples were continually taken
11 afterwards.

12 And so I think this leads me to -- and
13 I'm not going to go on any more of the little
14 points that talks about the process because I
15 think you can read along. I'd like to draw
16 the attention immediately to the few graphs
17 that I'm going to show here.

18 John, I think the first one, we can
19 talk about that. This is the air activity
20 graph. You can go to your attachment here.

21 **MR. PRESLEY:** Six N.

22 **MR. CHEW:** Six N, thank you.

23 The air activity graph. Be sure
24 everybody stays with me because I think this
25 is the meat of the discussion here.

1 **MR. ROLFES:** Attachment 6LN Air Activity
2 Graphs, PC Reference-dot-W.

3 **MR. RICH:** Lognormal distributions.

4 **MR. CHEW:** Well, as I said, Bryce and Billy
5 went and collected the particular samples and
6 you can read along. There are seven airborne
7 and reactivity concentration datasets were
8 developed and listed in Table 2. And we're
9 going to go there. And each of the datasets
10 apparently were fit in lognormal distribution
11 and did some analysis to show that it is
12 lognormal, and this was put onto a
13 spreadsheet. And then I thought we can give
14 you the data, but I think the best way to show
15 it is graphically.

16 And I think the very first one you can
17 see is going to be called NTS-12B-Airborne
18 Alpha Activity Post-Shot Tunnel. Is everybody
19 with me?

20 (affirmative response)

21 **MR. CHEW:** Well, we took the liberty of also
22 putting a comparison to the DAC, and that's
23 using ICRP-30 as a comparison for the DAC.
24 And if you look at alpha, and as you all know,
25 the people who've been in the tunnels, even if

1 you go into a regular tunnel, you're going to
2 take air samples, you're going to get radon ^.
3 And so some of these activities is going to be
4 biased high because if they read, for
5 instance, ^ on an alpha probe or ^ meter, and
6 you see it's below the DAC level and you took
7 it immediately, you don't need to really have
8 to wait four or five days because ^ long life.
9 But even then they still did that.

10 But that gives you an immediate
11 indication that the people who work in
12 operational output contamination understand
13 that. And this represents at least 500
14 samples. Now the shot that we're talking
15 about happened in December 22nd, 1961. This is
16 many months afterwards which would be
17 representing when people would be going in
18 without all of the radiological radax*
19 conditions because now the concentration, air
20 concentration, they had in the tunnel has
21 reached to this particular point.

22 **DR. MAURO:** Well, when you say you have a
23 DAC, I guess you're assuming certain isotopes?

24 **MR. CHEW:** Yes, this is assuming -- you read
25 the text, John -- it's assuming Pu-239.

1 **DR. MAURO:** So you made your worst possible
2 --

3 **MR. CHEW:** Make the worst possible case.
4 Probably uranium is going to be there, too --

5 **DR. MAURO:** And you're saying the short-
6 lived radon daughters, since you didn't wait
7 for decay --

8 **MR. CHEW:** Some did and some didn't. We
9 just had to make sure because --

10 **MR. RICH:** Most of them are decayed. They
11 did, the laboratory did a long-lived analysis
12 --

13 **DR. MAURO:** Okay, so it's safe.

14 **MR. RICH:** -- they did a midday count, a day
15 count, and up to five-day counts.

16 **DR. MAURO:** And the ones we're looking at,
17 these have been decayed, allowed to decay so -
18 -

19 **MR. RICH:** Most have, however there were
20 some that were I just opted to leave the first
21 count in, so these are biased high.

22 **DR. MAURO:** I think I understand now.

23 **MR. CHEW:** From an operational standpoint we
24 always had to play, when you work in plutonium
25 facilities in a situation, you have a few

1 tricks in your back pocket. You look at the
2 alpha-beta ratio very quickly. You took a
3 general air sample and looked at the alpha-
4 beta ratio, and then you go back in and you
5 take an immediate air sample. Rather than
6 waiting for the decay time, you go ahead and
7 count it right away. Then you kind of know
8 that you really have something or not.

9 **DR. MAURO:** Given the time that passed,
10 certainly what you're saying is we're really
11 looking at the relatively long-lived
12 radionuclides that are alpha emitters. And I
13 gather from this that you're not too concerned
14 about tritium, certainly not concerned --

15 **MR. CHEW:** We have data here.

16 **DR. MAURO:** Oh, you do.

17 **MR. CHEW:** You're ahead of me, John.

18 **DR. MAURO:** So right now what we're saying
19 is, listen, we've got a pretty good handle on
20 their possible exposures to Plutonium-239 that
21 may have been airborne --

22 **MR. CHEW:** ^ here where we ^ out these
23 tubes. We're getting ready for Yuba. We're
24 taking these kind of air concentrations here
25 for the people going back in. They went back

1 in without respiratory, and also most likely
2 represent the people who were not on a routine
3 bioassay. I think that's real key.

4 Well, since you're moving ahead, I
5 think you can look at this one and make good
6 sense out of that one here. You can go to the
7 next slide which shows the beta activity. And
8 if you look at it, the DAC levels were, look
9 at it, and I think you can read what the
10 activity we're looking at. We're looking at
11 some of the ruthenium wells three, well six.
12 Those are the shorter ones. There's
13 zirconium, Niobium-95, Strontium-90 and --

14 **DR. MAURO:** So you're not assuming this is
15 all Strontium-90.

16 **MR. CHEW:** Right, we're not. And we do
17 chemical analysis to show only a small
18 percentage of Strontium-90. But as you know,
19 because you know DAC levels, and you and I
20 have discussed this at many different
21 locations here, John, the Strontium-90 DAC is
22 right about in here. It's going to be in the
23 order of three times ten to the minus eight ^.
24 And this is the DAC level concentration.

25 And you can see, and what I expected

1 because we're talking about quite a few months
2 afterwards, that the airborne beta activity
3 representing longer-lived β fission products
4 here would be at least two or three orders of
5 magnitude below the DAC level.

6 **MR. RICH:** All the DACs for strontium and
7 zirconium and niobium and iodine are all in
8 the queue of β minus ten range, or it's a
9 magnitude higher than the, along with alpha
10 concern. And for that reason there were some
11 of the beta samples they didn't count twice.
12 They just simply get a single count. So these
13 samples are also biased levels.

14 **MR. ROLLINS:** Gene Rollins. When we worked
15 on, when I worked on the Savannah River TBD,
16 environment TBD, what we learned was that
17 ambient measurements of beta activities did
18 not track with stack releases. What that told
19 us was that there were a lot of constituents
20 in that air that are not the result of the
21 activities that are going on inside that
22 tunnel. And if we assume that's all
23 strontium, that's going to be extremely
24 conservative in my way of thinking. But you
25 say that we have radiochemical analysis that

1 will allow us to make some judgment about how
2 much there actually was of Strontium-90.

3 **MR. CHEW:** Yes.

4 **MR. ROLLINS:** Something we would probably
5 need to look at and take advantage of.

6 **MR. CHEW:** And those samples of
7 radiochemistry was not only done by the
8 Reynolds Electric legal folks, but also those
9 samples were sent back to the respective labs
10 like Livermore and Los Alamos because we were
11 very interested technically in the data here.

12 **MR. ROLLINS:** And it would be interesting to
13 find out exactly what the constituents that
14 were contributing to that activity actually
15 were.

16 **MR. CHEW:** And I think a very important
17 point to show here is that, I think the key
18 point is that even if they went after, a
19 significant time after the shot when it's kind
20 of, relatively supposed to be clean and people
21 ^, they continued to take air samples at that
22 ^. And we have the data.

23 **MR. RICH:** One other thing, in any tunnel
24 environment obviously you're going to get, as
25 Mel's indicated, radon and thoron daughters.

1 Barometric pressure makes a huge difference by
2 an order of magnitude or more. And so as a
3 consequence this is data over a year's period
4 of time and those fluctuations you see are
5 probably fundamentally and primarily
6 barometric pressure associated, natural radon
7 daughters.

8 **DR. MAURO:** But not in this case. This is
9 you're not looking for radon progeny. I mean,
10 I heard you did some radiochemistry, and you
11 understand the mix, more or less, of what
12 they're dealing with here.

13 **MR. RICH:** They did some additional analyses
14 on these samples to determine if there was
15 anything else present. That was way, way down
16 below [^]. These levels are gross beta. And by
17 the way, the filters that they took normally
18 are charcoal filters with a free filter. And
19 so they did beta and alpha on the free filter
20 and gross gamma on the charcoal filter so you
21 see [^].

22 **MR. CHEW:** Let me just go on. The next one
23 -- you can just follow this. The next line is
24 the tritium concentration like you asked,
25 John. And we use obviously the most

1 conservative tritium without being HTO and
2 that's probably true ^. So we're probably an
3 order of magnitude or thereabout below the DAC
4 level. You've got to remember the DAC levels
5 also represent the people in continuous
6 exposure, and you know they didn't go into the
7 tunnels continuously, so you know that.

8 **DR. MAURO:** My reaction is that what you're
9 saying here is when testing resumed in the
10 early '60s, and you were getting ready to go
11 back into these tunnels, measurements made to
12 determine if there was some residue of
13 airborne particulates, and certainly I'm sure,
14 external exposure that was of such a level
15 that we had to be concerned.

16 So I think that, at least in this
17 case, what you -- I mean, I read that pretty
18 quickly. Is that clearly they had a good
19 handle for the reentry following, years
20 following the initial set of tests and get an
21 understanding of what are we about to walk
22 into. I guess when we started this I had in
23 my head the story went more toward, okay, why
24 do we have to do the test. There was, people
25 went in shortly thereafter to retrieve.

1 I guess I was a little bit more
2 concerned about that part of the process. But
3 I could see here, I didn't even, quite
4 frankly, I didn't even think in terms of three
5 year old drifts and making sure that there's
6 nothing there of concern. And I think there's
7 a good point --

8 **MR. CHEW:** Well, I think the question comes,
9 these were the unmonitored folks. And so as a
10 person who was a regular tunnel worker, I went
11 back into installed new ventilation ducts. I
12 was unmonitored, and we don't have any record
13 or bioassay and here are some ways that we can
14 now assign some exposure.

15 Let me go an, I'm going to go on to
16 the next --

17 **DR. MAURO:** Before we leave this. Now
18 you've done your, basically what was done
19 here, the folks did their homework before they
20 let people go back in to get ready for some
21 new shots. During them, those activities
22 where they were unprotected, was there ongoing
23 -- now you're in there disturbing. You're
24 drilling, I assume, you're setting up. You're
25 building; you're doing things. And now you're

1 going to create more dust. Are these samples
2 taken while those activities were going on?

3 **MR. CHEW:** The answer is definitely yes,
4 exactly right. That's exactly right on. It
5 is going to do -- obviously concerns as they
6 dig new drifts and experiment doing
7 disturbances ^ activities.

8 We're going to just for comparison go
9 to the next set of slides which is Dormis*.
10 And Dormis, I want to focus in on these
11 concentrations were taken shortly after the
12 event here. And these concentrations
13 represent different -- it's the next slide
14 down. And it's U-12G Dormis here. And the
15 reason for bringing this up here -- and
16 thanks, Bryce -- is that we want to show you
17 what kinds of activities were there during,
18 immediately during recovery entry. And these
19 people were not only protected but were also
20 bioassayed. This represents a group that were
21 bioassayed. Now we've already talked about
22 the group that were not bioassayed, so --

23 **MR. RICH:** Let me just add one thing, Mel.
24 During recovery all of these operations are
25 under the directions of the Weapons Laboratory

1 Testing Director. And after the recoveries
2 were done, after the experimental drifts had
3 been entered and all of the known high
4 radiological jobs were done, the tunnel was
5 sealed off and repaired and turned back over
6 to the tunnel superintendent for future use
7 and preparation. And so an evaluation was
8 done before it was turned back over to them.

9 **DR. MAURO:** And this data --

10 **MR. RICH:** And this gives you an idea of
11 activities during recovery, during recovery.

12 **DR. MAURO:** But this was after the radiation
13 safety folks cleared it so to speak?

14 **MR. RICH:** No, no --

15 **DR. MAURO:** This is while the --

16 **MR. RICH:** This is the initial --

17 **DR. MAURO:** This is the initial --

18 **MULTIPLE SPEAKERS:** (Indiscernable)

19 **MR. RICH:** There's a delay you hadn't
20 noticed here. There is a delay.

21 **MR. CHEW:** Let me read you a little bit
22 about Dormis. And, John, the point of
23 bringing this one out is this is about the
24 worst you've got. I think that's the whole
25 point, and I think that's why we want to show

1 that particular data, recognizing we're
2 focusing on the unmonitored worker, which I
3 thought I showed you at an earlier time.

4 **DR. ROESSLER:** On this data then the people
5 were bioassayed. You have these measurements,
6 so supposedly you could make some comparison
7 between the bioassay and the conditions in the
8 tunnel.

9 **MR. CHEW:** Sure. We did that.

10 **DR. ROESSLER:** If you were to take it to the
11 next step.

12 **MR. CHEW:** Yeah, you can.

13 **MR. RICH:** Quantitatively, they didn't get
14 much activity detection in bioassay --

15 **DR. ROESSLER:** So you can bound something
16 then.

17 **MR. RICH:** -- except for episodic. There
18 were events, incidents that occurred during
19 recovery that surprised people. And then they
20 knew about it.

21 **MR. CHEW:** They were wearing this. They
22 were taking the air concentrations, but they
23 were wearing this. So to answer your question
24 is a very good one. When we take the bioassay
25 it will basically tell what the protection

1 factor would be.

2 **MR. RICH:** And a lot of them were covered
3 with full-face respirators.

4 **MR. CHEW:** And full-face respirators.

5 Dormis, I'm just going to read about
6 Dormis here. You can actually, I'll just give
7 you a little background. This event was
8 detonated on August the 31st, 1967 at 0900
9 hours at Tunnel U-12G, Drift 7. A previous
10 event, Red Hot, was conducted in the same
11 tunnel complex. Stemming and containment
12 failed on this particular resulting in damage
13 to and to contamination of experiments here.

14 The uncontrolled effluent was released
15 into the atmosphere and minor levels of
16 radioactive effluents was detected offsite.
17 This came directly from the DNA report. The
18 initial surveys through the portal occurred on
19 September 1 with a maximum exposure of about
20 an R per hour was measured. After this survey
21 no further attempts to enter U-12G until
22 September 5th. They let some of the short-
23 lived fission products decay.

24 Upon reentering the team encountered
25 water on the tunnel floor inside the gas-

1 sealed door, and the exposure rates were as
2 high as ten R per hour and made toxic and
3 explosive gas mixtures and exited the tunnel
4 after ten minutes inside the gas-sealed door.

5 Water was pumped from inside the,
6 water was pumped from inside the gas-sealed
7 door within weeks following the initial
8 reentry. Entry beyond the overburden plug
9 began on October the 5th. The tunnel was so
10 damaged and wet inside that the overburden
11 plug and the temperature exceeded 130 degrees
12 F. It was decided to abort the reentry
13 mission.

14 All reentry and recovery operations
15 became concentrated on mining through the U12-
16 G zero four drift into the 07 drift. Recovery
17 was made through via this particular route.
18 Some of the contact exposure, quick-exposed
19 readings was like as much as 25 R per hour.
20 The highest accumulated personal exposure
21 during the 4,250 individual logged reentries
22 into Dormis from August 31st to January 31st,
23 was 1,625 millirem. During this recovery
24 operation more than 500 operational air
25 samples were collected and processed, and this

1 is what the data represents if you're looking
2 at Dormis.

3 **MR. RICH:** But there's an extended delay
4 before they begin recovery so this gives you a
5 feeling for that --

6 **UNIDENTIFIED SPEAKER:** Reentry ^

7 **MR. CHEW:** The Dormis was 8/31/57. The
8 first kinds of activity we saw was in the mid-
9 October, about a month, about six weeks after.
10 And I read this report to tell you what they
11 really did here.

12 **DR. MAURO:** Is that typical, a two-month
13 delay before you entered?

14 **MR. CHEW:** No, no.

15 **DR. MAURO:** I didn't think so.

16 **MR. CHEW:** So some we never got back into.

17 So you can look at the Dormis and
18 alpha activity. I think we're trying to say
19 that this is the worst it could have got
20 during the ^ and what personnel were there.
21 You can see the DAC levels as compared to
22 plutonium, you know, an order of magnitude or
23 so thereabouts here, John, if you look at the
24 data.

25 **MR. RICH:** This reflects access into areas

1 where there was actual bomb debris, refractory
2 elements there. And so even with ventilation
3 you had ambient levels and long-lived activity
4 above DAC levels. So as a consequence, they
5 were ^.

6 **DR. MAURO:** In August the test went off.

7 **MR. CHEW:** Uh-huh.

8 **DR. MAURO:** Then some time after that test
9 there may have been some ventilation started
10 or there may not.

11 **MR. RICH:** They did.

12 **DR. MAURO:** They did. They started up some
13 ventilation. And simultaneously, they were
14 pulling air samples remotely.

15 **MR. RICH:** And the initial reentry to the
16 gas-sealed door and tunnel conditions of what
17 they wanted to ^ and then they started the
18 bypass operation.

19 **DR. MAURO:** But they continued to monitor
20 the airborne activity remotely with some kind
21 of air sampling device?

22 **MR. RICH:** Yes, anytime they went in they
23 monitored ahead of the teams.

24 **DR. MAURO:** So these dots, microcurie per
25 centimeter cubed, these are the results of an

1 air particulate sample --

2 **MR. CHEW:** Yes, sir.

3 **DR. MAURO:** -- that was somehow collected
4 from the location. How did you get it?

5 **MR. RICH:** These represent activities
6 measured in the tunnels by individual members.

7 **DR. MAURO:** Oh, so people went in --

8 **MR. RICH:** Yes.

9 **DR. MAURO:** -- in full gear, went in, pulled
10 samples, and this was some brief sample, a few
11 minutes --

12 **MR. CHEW:** They take ten cubic meters of air
13 and things like this.

14 **DR. MAURO:** Bring it back out --

15 **MR. CHEW:** As a gram sample.

16 **DR. MAURO:** -- and then this case would be a
17 gross alpha --

18 **MR. CHEW:** Yes.

19 **MR. RICH:** It's gross alpha, but these are
20 also decayed. These are the ones where they
21 determine long-lived activity.

22 **DR. MAURO:** Got it.

23 **DR. MAKHIJANI (by Telephone):** This is
24 Arjun. I have a question about this. How do
25 you relate the timing and location of these

1 air samples with where the workers were
2 working and what they were doing?

3 **MR. CHEW:** We sample where they are working,
4 Arjun. Remember during these --

5 **DR. MAKHIJANI (by Telephone):** Were these
6 fixed-head samplers or --

7 **MR. CHEW:** Pardon me? I'm sorry.

8 **DR. MAKHIJANI (by Telephone):** They were
9 area samplers, right? They were not lapel
10 samplers.

11 **MR. RICH:** No, they were --

12 **MR. CHEW:** They were graph samples that they
13 were taking in that like Stay Flex air
14 samplers. And the monitors went in with the
15 workers that do the initial entry, and that's
16 what they were sampling, right where they were
17 working.

18 **MR. RICH:** They were high volume.

19 **MR. CHEW:** High volume air samplers. They
20 were pulling about a CFM 35 meters.

21 **MR. RICH:** Five to 15.

22 **MR. CHEW:** No, no, they were measuring about
23 35 CFM a cubic meter. I remember.

24 No, they were not lapel samplers, if
25 that's what you're -- but remember, Arjun,

1 these people are completely suited up.

2 **MR. ROLFES:** And they were participating in
3 the bioassay program as well.

4 **MR. CHEW:** We just want to give you a little
5 perspective of how, what the worst case would
6 look like here. We can also see the beta
7 activity in the next slide over. As you can
8 well imagine the event was 8/31, and these
9 samples probably represent some of the decay.
10 And that's why they're way below DAC levels
11 here as a concentration. We would expect that
12 though, John, from the early fission products.

13 And here's some of the gamma
14 concentration here which is the island.

15 **MR. RICH:** The next one down is the island
16 where you're still close enough in that you
17 see the volatiles and the islands.

18 **DR. MAURO:** So this is a couple of months
19 later and you're picking up --

20 **MR. CHEW:** Six weeks.

21 **DR. MAURO:** Six weeks later.

22 **MR. RICH:** As you would expect.

23 **DR. MAURO:** So the iodine levels shortly
24 after were off the charts.

25 **MR. CHEW:** So I think what I'd like to come

1 back to what the point and the purpose was of
2 this particular discussion was to, the
3 question came up was what about the
4 unmonitored workers that went back into the
5 tunnels to help prepare the tunnels for new
6 events here.

7 And I want to focus back on some of
8 the early -- well, I won't show that again,
9 but the samples from U12-B, which we feel are
10 representative. And then I'm going to say
11 just to conclude my technical presentation,
12 I'm going to ask Gene, who is the document
13 owner, to maybe draw some conclusions from,
14 and I'd like to propose this to the working
15 group.

16 Gene.

17 **MR. ROLLINS:** This data collection effort
18 that we can thank Bryce and Billy and the
19 presentation, we can thank Mel for that. He's
20 done a great job doing this. But what these
21 data show us actually is that we now have
22 enough information on the quality of the air
23 in which these people typically worked.
24 Again, we're focusing on the people that were
25 in the tunnel routinely that were not

1 bioassayed.

2 I think the data does show that there
3 was some exposure there that was above what
4 they would have gotten had they not been in
5 that tunnel. And so the program, well, that
6 would require us to make some effort to
7 capture what that potential would be.

8 But the data that we have gathered,
9 and the quantity of the data that we gathered
10 together, we can now assign a claimant
11 favorable, reasonably claimant favorable,
12 intake for these individuals. And with the
13 amount of data that we have, we can develop
14 the statistical analysis that will allow us to
15 provide reasonable assurance that we're not
16 going to underestimate that dose to those
17 unmonitored individuals.

18 **DR. MAURO:** How does that play back on Table
19 7.1 in the evaluation report where you make
20 reference to these 100 workers that were
21 polled based on ^. There's a table in the
22 evaluation report dealing with there were 100
23 workers that had relatively high external
24 exposures, and then you looked at the bioassay
25 data.

1 And that bioassay data, and some
2 subset of that 100 did have bioassay data.
3 And in theory it was our understanding that
4 that represented a convenient dataset upon
5 which to build a coworker model. How does
6 that relate back to this?

7 **MR. ROLLINS:** We haven't had a chance to
8 look at that yet.

9 **MR. CHEW:** Well, I think we supplied that.
10 That came from NOCTS, I think the top 100 of
11 data. We chose the bioassay results because
12 those people, especially a good number of them
13 with the radiological monitors, that that
14 particular data is to show the people who
15 needed to be monitored. And they showed
16 higher exposures here. This is a group that
17 showed the people that they went back into the
18 tunnels that's why they were not monitored.

19 And if they demonstrated later on that
20 they went back and they didn't, then they
21 needed to be monitored because of some reentry
22 that we can pull up in the log, not during an
23 initial reentry, we could use this particular
24 dataset. The top 100 probably consists of
25 those people who actually went back in during

1 the initial reentry.

2 **MR. ROLFES:** This was also put together to
3 demonstrate. Because NTS controlled doses to
4 personnel, they controlled external doses.
5 And there was research that was done that
6 showed that if external doses were controlled,
7 internal doses would not be an issue with
8 regulatory requirements.

9 And what we had done for the table in
10 the evaluation report, we had identified some
11 of the highest external exposed individuals to
12 determine what kind of bioassay or what kind
13 of internal exposures they were potentially
14 subjected to. And this information is
15 slightly different than what we're referring
16 to in the current presentation.

17 In the current presentation we're more
18 focused on the people that didn't participate
19 in the bioassay program to determine what
20 levels of radioactivity they were exposed to
21 following the initial reentry.

22 **DR. MAKHIJANI (by Telephone):** This is
23 Arjun. I have a question. I mean, this is
24 recently collected data. How have the dose
25 reconstructions been done without this data so

1 far?

2 **MR. ROLFES:** For internal dose we have been
3 using efficiency methods such as the Technical
4 Information Bulletin-0002 or some various
5 other methods that likely overestimate
6 internal doses. We also always commit to make
7 sure that whenever we find additional data, we
8 want to make sure that if the data exceeds
9 what we have previously assigned in a dose
10 reconstruction, that we're committed to going
11 back and making sure that any new information
12 wouldn't affect a previous compensation
13 decision or dose reconstruction.

14 **DR. MAURO:** Was -0002 being used both to
15 grant and deny? OTIB-0002.

16 **MR. ROLFES:** No, it was typically for an
17 overestimate-type case.

18 **MR. ROLLINS:** And OTIB-0018 also was used in
19 a number of cases that have already been --

20 **DR. MAURO:** That's the MPC. Eighteen is the
21 one where you base things on MPCs and then the
22 adjustments were -0033?

23 **MR. ROLLINS:** Right.

24 **DR. MAURO:** So now what you're saying is
25 that was almost like a default approach until

1 you had better data, and now you're saying,
2 well, we have the 100 cases which are a
3 platform to build on. And you've got these
4 data to supplement that. I'm just trying to
5 think of there are 1,500 cases, as I
6 understand, that are of implied, of concern
7 here of those post-'62, I believe so.

8 Out of those 1,500, which is your
9 universe of people of concern that you'd like
10 to be able to reconstruct internal dose, 100
11 of them were selected based on some criteria
12 related to external exposure that was based on
13 the judgment that there was a relationship,
14 that if you pick the high external, you
15 probably picked up at least some of the high
16 internal.

17 **MR. CHEW:** We looked at the occupation, too.

18 **DR. MAURO:** And the occupation, yeah,
19 because one of the things that we've been
20 planning -- we haven't talked about this -- is
21 that we see that there is a need for
22 stratification. That is, there are a lot of
23 different categories of workers that may or
24 may not have had their own metrics, that is,
25 tunnel workers, welders, carpenters. In other

1 words categories of workers that really don't
2 come out of, are not represented by one
3 distribution, but have their own distribution.

4 And the question that we've been
5 asking ourselves is, is it possible that there
6 may be some subset of workers of the 1,500
7 where their distribution -- let's say, I have
8 some subset of 300 workers that had a
9 particular job category. All worked on a
10 particular tunnel or test series. Has a
11 distribution for the data that you do have
12 that is markedly different than the
13 distribution of the bio that you get from your
14 100?

15 I'm picturing how I look at things.
16 It was pretty simple. Okay, you've got a
17 single distribution of 100 workers subset that
18 you can build some kind of coworker model
19 around. I know you haven't done that yet, but
20 in theory you have the data to do that.

21 Then I ask myself the question, okay,
22 but if we were to go in and take those 1,500
23 and start to sample based on some
24 stratification, based on job description,
25 perhaps test series, perhaps year -- I'm not

1 sure yet -- and pull 20. The statistician
2 says once you get your strata, let's say
3 you've got six or seven categories that you're
4 ^. The statistician says it'd be nice if we
5 had 20 and has something to do with normal
6 distributions and 20 would be sufficient to
7 give you a robust geometric mean standard
8 deviation.

9 One of the things that we're concerned
10 about is if we were to do that, or if you were
11 to do that, would, in fact, the upper 95th
12 percentile of these other population groups,
13 these other strata of samples, would they be
14 bounded by the upper 95th percentile of the
15 100? And I guess, I've been thinking about
16 this last night. This is really my thinking
17 about this last night saying how would I try
18 to convince myself.

19 It's really a weight of evidence kind
20 of argument saying, listen, is there anything
21 else that I would think that would be
22 reasonable to do to convince me that the group
23 of 100 that you picked does, in fact, do the
24 trick. And I guess I'm communicating to you,
25 and this, you know, everyone at the table it

1 would be nice if we found out that we did some
2 other sampling, and based on some other
3 sampling criteria, and this would be a
4 judgment call what those strata -- I call them
5 strata -- would be.

6 Whether or not the statistics that
7 characterize the tritium intake -- I'll just
8 use tritium as an example -- and we start to
9 have an understanding of what the distribution
10 is for that group for the intake of tritium
11 per year let's say. How does that stack up
12 against the upper 95th percentile of the
13 tritium intake for your group of 100?

14 And then if a story emerges that
15 consistently your upper 95th percentile for
16 your group of 100, the tritium intake, bounds
17 or is close to or comparable to the upper 95th
18 percentile for these other strata, now you're
19 building a lot of weight. That is because
20 you're coming at the problem from different
21 directions.

22 See, right now it's almost as if there
23 are some assumptions. You grab this 100 based
24 on external dose. Not too much consideration
25 -- maybe you did; maybe you didn't -- to what

1 tests they were involved in, what their job
2 responsibilities were.

3 The way I look at it, and I might be
4 oversimplifying this, we're going to grab 100
5 of the highest external exposure, and I think
6 that's going to do it for us, and it might.
7 But our concern, everyone on the phone and the
8 other SC&A people, is that how else do you
9 come at this thing, the dataset, in a way that
10 starts to provide a high level of assurance
11 that, yeah, we've got this thing in a box.

12 So I wanted to communicate that to
13 everyone around the table to let you know how
14 SC&A's thinking about this and what might need
15 to be done. And, Arjun, I may not --

16 **DR. MAKHIJANI (by Telephone):** This is
17 Arjun.

18 **DR. MAURO:** Sure, go ahead.

19 **DR. MAKHIJANI (by Telephone):** I have
20 another question going back to Mark Rolfes'
21 earlier comment. One of our points in our
22 site profile review was that TIB-0002, first
23 of all, applies to non-tunnel workers after
24 1971. I thought we have resolved that NIOSH
25 was going to --

1 **MR. ROLFES:** Yes, Arjun --

2 **DR. MAKHIJANI (by Telephone):** -- wait a
3 minute. We reviewed some earlier dose
4 reconstructions in which TIB-0002 was
5 improperly used at NTS. And I thought we'd
6 settled this issue, but now I hear that TIB-
7 0002 is still in use. And we also understood
8 that maybe TIB-0018 and TIB-0033 were not
9 going to be used for NTS, but maybe that
10 understanding is not correct. So I'm a little
11 confused about how you're doing dose
12 reconstructions.

13 **MR. ROLFES:** I'll clarify that for you,
14 Arjun. John Mauro had asked how we were
15 completing dose reconstructions, and I took
16 that to mean historically for Nevada Test
17 Site. We had been using TIB-0002, but based
18 on your review of the site profile, SC&A's
19 review of the site profile, we did indicate
20 that we would not be using TIB-0002 any more
21 so we decided to use TIB-0018 in lieu of TIB-
22 0002.

23 There was nothing that I was aware of
24 that would indicate that doses could have been
25 higher at the Nevada Test Site than what we

1 would be assigning in TIB-0002. It was simply
2 a requirement to document why TIB-0002, we
3 needed to provide justification for why TIB-
4 0002 might have been used in a dose
5 reconstruction.

6 It wasn't an issue that doses could
7 have been higher than TIB-0002. It was more
8 of a requirement for us to provide the
9 justification within an individual's dose
10 reconstruction as to why it was being used
11 prior to 1971.

12 **DR. MAKHIJANI (by Telephone):** This is not
13 correct. I mean, the observation that we made
14 in our review was use of TIB-0002 by the rules
15 of TIB-0002 was prohibited, not allowed,
16 before 1971, and not for tunnel workers at
17 all. And so since we're talking about tunnel
18 workers, it would appear the use of TIB-0002
19 was improper. Now, I'm not talking about
20 whether justification was provided or not.
21 And so I don't know what is being done about
22 those cases and what alternative methods have
23 been used before this current data has been
24 collected.

25 **MR. ROLFES:** Well, as I indicated, we did

1 say that TIB-0002 would not be used, and we
2 would use TIB-0018 instead.

3 **DR. MAKHIJANI (by Telephone):** Well, what
4 happened to all those old cases?

5 **MR. ROLFES:** What's that?

6 **DR. MAKHIJANI (by Telephone):** What happened
7 to all those old cases?

8 **MR. ROLFES:** Well, TIB-0018 actually results
9 in lower calculated internal doses than does
10 TIB-0002.

11 **DR. MAKHIJANI (by Telephone):** Well, we also
12 -- in my conversation with Kathy Behling we
13 understood that you said at some point that
14 TIB-0018 and TIB-0033 are not going to be used
15 for Nevada Test Site, but maybe that
16 understanding is incorrect. These are general
17 procedures not oriented to the uniqueness of
18 Nevada Test Site. But I haven't been doing
19 individual dose reconstruction audits, so I'm
20 not familiar with all your worksheets and so
21 on. But I'm quite confused about the state of
22 dose reconstruction in the specific case of
23 NTS and the application of these procedures
24 without NTS-specific justification especially
25 in light of the data that you've just come up

1 with.

2 **MR. ROLFES:** TIB-0002 calculated internal
3 doses would likely exceed the information that
4 we presented today.

5 **DR. MAKHIJANI (by Telephone):** TIB-0002 is
6 irrelevant.

7 **MR. ROLFES:** Or TIB-0018, excuse me.

8 **DR. MAKHIJANI (by Telephone):** We cannot
9 allow it to be used. I mean, that's the
10 point.

11 **MR. ROLFES:** Right. TIB-0002 we are no
12 longer using. We are instead using TIB-0018,
13 and there's nothing that prevents us from
14 using TIB-0018 for dose reconstructions at
15 NTS, correct, because they are based on the
16 maximum permissible concentrations or some
17 fraction thereof which we have indicated in
18 our presentation today that the air sampling
19 indicates that much lower internal doses were
20 observed than what we would be assigning from
21 TIB-0018.

22 **DR. MAKHIJANI (by Telephone):** Have you done
23 a comparison?

24 **MR. ROLFES:** I believe that we just
25 indicated this information in this

1 presentation.

2 **DR. MAURO:** Let me help out a little. We
3 reviewed TIB-0018 and -0033, and for those not
4 familiar with it, what it really boils down to
5 is the concept that says, listen, starting in
6 the '60s and moving on, the concept of MPCs
7 and controlling access to areas that had
8 elevated airborne activity, if there's a
9 comprehensive health physics program in place,
10 you had control over access and egress from
11 areas that have elevated levels of airborne
12 radioactivity.

13 Given that that's the case, that is,
14 you can trust that, yes, there was this degree
15 of control, then one could argue that people
16 aren't going to be allowed to go into areas
17 for extended periods of time where the
18 concentrations of airborne are above the MPCs.
19 And so therefore, what TIB-0018 does is say,
20 okay, under worst case conditions, if we do
21 know that a facility has a comprehensive
22 health physics oversight controls, we can say
23 with a degree of confidence no one's going to
24 go, unless there's an accident, of course, no
25 one's going to go into an area where airborne

1 concentrations are above the MPCs without
2 proper respiratory protection and access and
3 egress controls so that we always have that
4 degree of control.

5 **MR. ROLLINS:** And bioassay.

6 **DR. MAURO:** And of your bioassay program.
7 And superimposed on that, and everyone agreed
8 that that was a good way to place a plausible
9 upper bound given the set of conditions just
10 described. You've got a well controlled
11 oversight radiation protection program. And
12 when we looked at that, we were looking at it
13 more from the point of view of an engineer
14 facility, a Hanford or a Savannah River or
15 another facility where it was designed, built
16 and under some kind of direct control with
17 institutionalized, well-established designs
18 and health physics controls.

19 That in itself -- and then the next
20 fear that came in and said, well, that
21 represents, well, it's a bounding situation.
22 In effect what TIB-0018 does says we're going
23 to assume that you're at the MPC for the worst
24 possible radionuclide, usually Strontium-90.
25 There's a complicated workbook, but it really

1 is off the charts. And I would agree.

2 If you've got a well established
3 radiation protection program, and you assume
4 that there's no transient or accident that's
5 going to result in some large problem where
6 people could be exposed. You have direct
7 control over access. I think it's reasonable
8 to say -- well, it's unlikely that you're
9 going to be exposed to levels above an MPC.

10 Then along comes OTIB-0033 which says,
11 you know, that may be a little bit too
12 conservative. Let's tweak it. As a function
13 of the number of parameters you could apply an
14 adjustment factor and be at 0.5 an MPC
15 annually, a chronic exposure of 0.5, maybe a
16 0.1. So this construct came out that I see as
17 -- and this is really a judgment that the
18 Board and the work group has to make -- is
19 that that construct almost becomes an approach
20 that says, well, under other circumstances are
21 we ever going to have airborne problems that
22 we can't reconstruct. We could always do
23 that.

24 In other words we could always say,
25 well, we know for sure it's not above the MPC,

1 and we also know that as you move on in time
2 for different facilities, we could even say we
3 know for sure it's not above 0.5 an MPC claim
4 or 0.1 MPC. Now, that approach sort of
5 bypasses the whole concern about having
6 realistic airborne samples representative of
7 the breathing zone and associated bioassay
8 samples for the purpose of dose
9 reconstruction.

10 And I guess our concern was that is
11 that strategy for doing dose reconstruction
12 reasonable consistent with the letter and
13 intent of the rule. And second, a big problem
14 that Hans Behling brought up is that in
15 general those samples were general air
16 samples. And we have a ton of evidence that
17 depending on the circumstances, the difference
18 between general air samples and breathing zone
19 samples, very often the breathing zone samples
20 are a factor of ten higher easily on many
21 occasions, not all occasions.

22 So I guess what I'm saying is that
23 that platform, especially as applied to an NTS
24 situation, seems to be pretty far removed from
25 the original intent of -0018 and -0033. And

1 applying it to this setting, I guess we have a
2 bit of concern about that applying it to this
3 setting. But now to a degree now you have
4 resolved some of that concern because you're
5 saying, well, we don't really think we're
6 going to do it that way any more.

7 What we have now is this group of 100
8 where we have real bioassay data, and somehow
9 that bioassay data can be used to build a new
10 platform. And you made some comparisons
11 apparently between that platform and the old
12 18/33 approach and convinced yourself that -
13 0018 and -0033 were off the charts as compared
14 to your bioassay data. So this is a story
15 that I believe is unfolding.

16 So what I'm hearing is, I think
17 rightly so, moving away from what I consider
18 to be a fundamentally questionable concept.
19 And I'm speaking just for myself as a health
20 physicist. The 18/33 approach as a default
21 fix for all problems when you don't have good
22 air sampling or bioassay data for a particular
23 facility. I'm sort of glad that that's sort
24 of, we're moving away from that and moving
25 into something that's more site specific and

1 data specific, let's say in this case, NTS.

2 So I told you that long story because
3 I think that it's a rich problem. I think
4 there's just some fundamental problems with
5 the whole idea of using 18/33. What I'm
6 hearing though is you -- I don't know whether
7 you would agree or not agree with that, and
8 that's fine. But I'm hearing is it's really
9 no longer relevant. What really is relevant
10 now is you're leaving that behind and moving
11 on to a new platform upon which to build your
12 coworker models. Is that true?

13 **MR. ROLFES:** Well, it depends on the
14 specific case as well. For example, if you
15 have an individual that never entered a
16 radioactively controlled area, I would
17 certainly say that TIB-0018, the application
18 of TIB-0018 and -0033 would be a bounding
19 scenario. However, for an individual that was
20 participating in reentries, no, we would look
21 at bioassay data. That would -- so it depends
22 upon the specifics of the case.

23 **DR. MAURO:** Now, I foresee what you've just
24 described as being reasonable for a bounding
25 off-the-charts approach. If a person who

1 never entered a radiation controlled area, why
2 would you ever believe he was chronically
3 exposed to an MPC. That brings us to
4 sufficient accuracy.

5 I'm throwing this right on the table
6 because for the purpose of denial for a
7 person, you have a person who's doing a dose
8 reconstruction. You don't have any bioassay
9 data. You have evidence that he nearly never
10 entered a controlled area. We're going to
11 assign to him the MPC of Strontium-90 as if he
12 was breathing that all the time and do the
13 dose calculation.

14 The probability of causation comes
15 back at 30 percent [^]. But can you use that
16 same argument to say that meets the test of
17 sufficient accuracy for an SEC? And I think
18 now we're entering into a new arena, and
19 obviously it doesn't. I mean, as a health
20 physicist you just invented a number that
21 clearly was impossible to be that high for
22 this person.

23 **MR. RICH:** Profoundly.

24 **DR. MAURO:** Well, this is now where the
25 judgment comes in of the working group and the

1 Board. At what point does the conservatism
2 inherent in your bounding analysis become so
3 off the charts that it does not meet the test
4 of sufficient accuracy? Because I think
5 within the context of Part 82, where you are
6 doing it for the purpose of denial, you're on
7 great solid ground.

8 But when you're using that same
9 approach and argument as the basis for judging
10 that you do meet the criteria of sufficient
11 accuracy for Part 83, I think you've got a
12 problem. Now that's sort of like an
13 overarching concern within which we're talking
14 about Nevada Test Site now. So within that
15 concept that I just sort of laid out, now
16 we're going to come at, all right, we're going
17 to -- and I know we primarily started this as
18 a site profile issue.

19 And that's fine, but I think it's
20 important to keep in mind that we blended the
21 site profile with SEC on this particular
22 project, and that's going to be part of this
23 issue. And so this new platform that you're
24 building, whether it's robust enough in terms
25 of that group of 100 to be, what I would say,

1 claimant favorable and scientifically valid
2 for all workers that were not bioassayed, and
3 whether or not -- that's question number one.

4 And secondly, whether that new
5 platform meets the criteria for sufficient
6 accuracy is something that I think we all have
7 to think about. And I know that's what we've
8 been thinking about.

9 **MR. ROLFES:** In those best estimate-type
10 cases what we would do is go back and look at
11 the, for example, whether there was an
12 episodic release. We would go back and look
13 at those air samples that were taken for that
14 specific episodic release. Rather than apply
15 2,000 hours per year of exposure to that
16 particular air concentration, we could refine
17 that as the actual time that the individual
18 was involved in that.

19 We can certainly make things more
20 sufficiently accurate, if you will. I guess
21 we can certainly make our dose estimate more
22 precise. However, when we do that it
23 typically results in a lower internal dose,
24 and it takes a lot more time. Also, the
25 number of cases that we need to complete a

1 best estimate-type dose reconstruction for are
2 very few.

3 **DR. ROESSLER:** John, what you're bringing
4 up, if I understand you right, is that it's a
5 really broader issue, and it applies to all --

6 **DR. MAURO:** But, yeah, and the funny thing
7 about it is when you engage Nevada Test Site
8 and the issues that we're talking about today,
9 it's within this broader context. So it's
10 almost after you've got to go there, and then
11 you've got to come back, and say, okay, does
12 this platform that's being built, the 100
13 cases, and the dataset, the bioassay data that
14 is contained within it which is being used --

15 -- and I don't know how you plan to
16 use that dataset because I don't think you've
17 actually developed your coworker model yet.
18 Your basic argument says, listen, we've got a
19 lot of good bioassay data from these 100
20 workers that had high external exposure. And
21 from that we have confidence that intakes
22 these people experienced represent the upper
23 end that anyone might experience --

24 **MR. ROLFES:** You're getting into a couple of
25 separate issues, and I want to try to make

1 sure we stay on course to address the site
2 profile issues, and then we'll transition into
3 SEC issues. I think that it's important that
4 we can resolve this portion before we continue
5 on with the SEC portion.

6 **DR. MAURO:** Well, then I'll leave you with
7 this. The fundamental question is if the new
8 platform of the 100 cases in Table 7.1, you've
9 got to sort of turn it upside down and look at
10 it from different directions to make sure that
11 that distribution is, in fact, claimant
12 favorable for all different groups of workers
13 that might have worked under different
14 circumstances, settings and time periods. And
15 that if you decide to pick the upper 95th
16 percentile ^ emerges from that dataset that,
17 in fact, there's a high level of confidence
18 that that's going to be ^. Other work groups
19 ^.

20 **DR. BRANCHE:** There's someone participating
21 by phone who will need to mute their line.
22 Thank you.

23 **DR. MAKHIJANI (by Telephone):** This is
24 Arjun. I have one more question. Can you all
25 hear me?

1 **DR. BRANCHE:** Well, we think we can. Keep
2 talking, Arjun.

3 **DR. MAKHIJANI (by Telephone):** ^.

4 **DR. BRANCHE:** Arjun, I think actually it's
5 your phone that might be the problem. We're
6 getting an awful lot of static.

7 (no response)

8 **DR. BRANCHE:** Arjun?

9 (no response)

10 **DR. BRANCHE:** Is there someone else who
11 isn't muted?

12 (no response)

13 **DR. BRANCHE:** If everyone on the phone could
14 please check to make certain that you're muted
15 unless you're Dr. Makhijani. Thank you.

16 Dr. Makhijani, are you still there?

17 **DR. MAKHIJANI (by Telephone):** Yeah, I'm
18 here. Just one more question about this. If
19 TIB-0018 and TIB-0033 do not include
20 radioiodine, that has to be separately added.
21 So how is that being dealt with?

22 **MR. ROLFES:** I can't answer that off the top
23 of my head right now. Maybe Gene Rollins
24 might be able to.

25 **MR. ROLLINS:** The issue came up earlier, the

1 item that's been closed, was how had we
2 accounted for iodine intakes from containment
3 breaches events. And we included a model
4 calculation in the Chapter Five of the TBD
5 that showed what the dose to the thyroid would
6 be if the individual had been exposed to the
7 highest concentrations of iodine that were
8 measured as a result of that event and the
9 doses were trivial.

10 **DR. MAKHIJANI (by Telephone):** We haven't
11 seen a revised version of Volume Five yet, at
12 least I haven't.

13 **MR. ROLFES:** That's correct. NIOSH does
14 have all of the information. And the very
15 last page of the NTS site profile matrix that
16 I sent out, the entire matrix was essentially
17 unchanged except for the final page, which
18 shows that NIOSH has received from ORAU four
19 separate sections of the Nevada Test Site site
20 profile.

21 These contain the revisions resulting
22 from our discussions with the working group.
23 These are all currently at OCAS for approval
24 and final signature to be put up on the
25 internet once any SEC issues have been fully

1 discussed as well. So the information is
2 documented and as part of the SEC discussions
3 additional information may come up which would
4 require additional information to be added to
5 the site profile.

6 So the information is, in fact,
7 documented within the site profile at this
8 time. However, it has not been put up on the
9 internet and finalized and put on the
10 internet.

11 **DR. MAKHIJANI (by Telephone):** Thank you.

12 **MR. CHEW:** Gene, do you want to, any closing
13 comments where you can close this discussion?
14 This is focusing on the unmonitored worker in
15 the tunnel.

16 **MR. ROLLINS:** John, in your response to your
17 idea of building a platform, yes, we're going
18 to use the 100 highest; we're going to use
19 this data that was captured from actual air
20 sampling information in the tunnels themselves
21 to build a method that will allow, using
22 statistical analysis, to give us the required
23 accuracy to develop a method to assign best
24 estimate intakes for tunnel workers. That
25 work is ongoing, and when we complete it, of

1 course, and OCAS approves it, then you will
2 have a chance to review it. That's our path
3 forward.

4 **MR. PRESLEY:** As I understand it that won't
5 change the site profile one bit.

6 **MR. ELLIOTT:** It will.

7 **MR. ROLLINS:** It could.

8 **MR. PRESLEY:** It could.

9 **MR. ROLLINS:** Correct.

10 **MR. PRESLEY:** There's a possibility.

11 **MR. ROLFES:** However, it would likely be for
12 a very low number of claimants.

13 **MR. ROLLINS:** That's correct. But it would
14 be a factor.

15 **MR. ELLIOTT:** Right.

16 **DR. ANSPAUGH (by Telephone):** This is Lyn
17 Anspaugh. I'd like to ask a couple of
18 questions about the Tunnel B data. And I
19 think, Mel Chew, you said that the data were
20 taken because you were getting ready for Shot
21 Yuba?

22 **MR. CHEW:** That's correct, Lyn.

23 **DR. ANSPAUGH (by Telephone):** My question is
24 Yuba was shot on June 5th, 1963, and it appears
25 like Figure 1, the data basically ended in

1 December of '62. So is that because you
2 didn't seek out that data or were there no
3 data for that time period?

4 **MR. ROLFES:** It's figure B and we have air
5 sampling data between June 3rd of 1962 through,
6 the majority of it is through really the end
7 of the year, 1962. And I think Lyn's question
8 was why did the air monitoring data stop at
9 the end of 1962.

10 **DR. ANSPAUGH (by Telephone):** Good.

11 **MR. CHEW:** That's because you didn't go back
12 and pull those sets. Is that right, Bryce?
13 Because I want to make sure.

14 **MR. RICH:** The data start in June of '62 and
15 go through, we've got data into February of
16 '63, yeah, '63.

17 **MR. ROLFES:** The majority of the data is
18 really for a six months' period in 1962. And
19 I would suspect that it's very unlikely for
20 the air concentrations to rapidly increase
21 once air sampling stopped, that that might be
22 where you're --

23 **MR. RICH:** This is the dataset associated
24 with the preparation of the Yuba Tunnel. And
25 that represents the time period when that data

1 was available and collected.

2 **MR. SMITH (by Telephone):** Hey, Bryce, this
3 is Billy Smith.

4 **MR. CHEW:** Lyn, Lyn, I think Bryce has --
5 -- I don't want to put words in your
6 mouth.

7 -- this is what Bryce collected. It
8 does not necessarily mean, and we know that
9 there is data beyond the point that it shows
10 on the graph here that brings us up to the
11 Yuba event here. So we just did not collect
12 it because we thought we thought we had enough
13 representative information to show you what
14 was in the tunnel.

15 **DR. ANSPAUGH (by Telephone):** Okay, well, my
16 other question goes to the Shot Yuba itself,
17 and there was one person who had a thyroid
18 dose that was measured and calculated to be
19 593 rem.

20 **MR. RICH:** That's correct. There was a,
21 during reentry, and that's listed in the
22 summary on the Yuba, but that's post-Yuba --

23 **MR. CHEW:** That's post-Yuba event --

24 **MR. RICH:** Yuba.

25 **MR. CHEW:** Remember, Lyn, this is an attempt

1 to show you what the unmonitored worker in
2 preparation for, that's the questions on the
3 table, not what was the people doing after the
4 shot here. And you're absolutely correct.
5 There was a thyroid exposure for the Yuba
6 event, but that was executed on 6/5/63.

7 **DR. ANSPAUGH (by Telephone):** Well, my other
8 comment about Yuba was it appears that many of
9 these air monitoring procedures failed during
10 this particular event. The air sample wasn't
11 taken when it was supposed to have been.

12 **MR. RICH:** There was a mistake made that,
13 and an incident report developed, and dose
14 reconstruction done because there were thyroid
15 exposures. What happened was they were
16 grouting the -- on the Yuba event they
17 developed a bypass drift and were in the
18 process of driving a cross-drift from the
19 bypass into the end of the experimental
20 tunnel. The shuttle face they had sampled
21 before, but the shuttle face did not resample.
22 That was a mistake. And as a consequence, as
23 the tunnel workers were leaving after a couple
24 hours of exposure, they were able to read the
25 thyroid uptake directly with a meter.

1 **MR. CHEW:** Let's stay focused. This
2 discussion is primarily to talk about the
3 person that we do not have bioassay, who is
4 the unmonitored worker.

5 **MR. ROLFES:** The people that were involved -
6 - excuse me, Mel, just for a second.

7 The people that were involved in the
8 Yuba event, that was an usual occurrence not
9 typical of normal operations. That was an
10 extremely separate issue from what we're
11 discussing. The individuals, to address the
12 Yuba incident, the individuals that
13 participated in the drill back, those
14 individuals did participate in the bioassay
15 program and were given thyroid counts
16 following their exposures that occurred. What
17 we are trying to focus on are the individuals
18 that did not have bioassay.

19 **DR. ANSPAUGH (by Telephone):** I understand
20 that. I just wanted to point out that not
21 everything went perfectly. And I think we all
22 realize that.

23 **MR. CHEW:** We know that. That's correct.

24 **MR. RICH:** Most of the internal exposures
25 were the result of episodic occurrences.

1 **DR. MAKHIJANI (by Telephone):** This is
2 Arjun. So when we look at those 100 cases in
3 Table 7-1 for tunnel workers and so on post-
4 shot entry, we should expect to find iodine
5 monitoring?

6 (no response)

7 **DR. MAKHIJANI (by Telephone):** Isn't that
8 the implication of what you just said, Mark?

9 **MR. ROLFES:** Some of the individuals that
10 are contained within Table 7-1 were, in fact,
11 shifters and miners and, yes, I would
12 certainly believe that there would be
13 radioiodine bioassay results within that top
14 100 in Table 7-1.

15 **MR. CHEW:** For the people specifically
16 designated as miners and ^ . Remember, quite a
17 few of those events happened at the flats
18 there, and they were not inside tunnels which
19 created the additional problems of containment
20 in tritium, as you know.

21 But, yes, the answer to your question
22 is yes, Arjun.

23 **MR. PRESLEY:** We're at a point where I feel
24 we probably ought to stop, get some lunch,
25 because the people from Nevada are coming on

1 board here shortly.

2 **MR. CHEW:** It's 8:22 right now.

3 **MR. PRESLEY:** So, Mel, are we at a point, or
4 Mark, where in our presentations we can stop
5 and pick up what we need to, wrap this
6 portion. Let's get on with Comment 11 when we
7 come back.

8 **MR. ROLFES:** I think we've said everything
9 that can be said for this particular issue
10 regarding to basically reconstructing
11 unmonitored internal exposures. Well, I
12 wouldn't say unmonitored, but basically
13 bounding internal exposures or coming up with
14 a method to assign internal exposures to
15 unmonitored, meaning not participants in the
16 bioassay program tunnel workers. I think that
17 we've said everything that we can. And I
18 believe that the outstanding issue that we
19 would be discussing is pertaining to issue
20 number 11 of the site profile matrix. And
21 that is the external environmental exposures.

22 **MR. PRESLEY:** When we come back do you want
23 to say a few words about the security people?
24 You all did study that and have some slides on
25 that. Did you want to, that's one of the

1 things that has come up in the past is were
2 these people monitored or unmonitored, where
3 they worked, such like this. Do you want to
4 say some words about the guard doses?

5 **MR. ROLFES:** I think when we get back if
6 you're ready to take a break, I think we can
7 continue on with that or if you're ready to do
8 it now, we certainly can.

9 **MR. PRESLEY:** Let's take a break. Give
10 these people time to eat, and then we'll come
11 right back in to where they will be on board
12 hopefully. Can we eat in an hour, or do we
13 need an hour and a half?

14 **DR. ROESSLER:** We can't really go anywhere I
15 don't think.

16 **DR. MAKHIJANI (by Telephone):** What time are
17 we reconvening? Sorry, I missed that.

18 **DR. BRANCHE:** We're establishing that right
19 now, Dr. Makhijani.

20 **MR. PRESLEY:** It's up to you all. Do you
21 all want to meet at 12:30 or do we want...

22 **MR. SCHOFIELD:** I think one hour's plenty.

23 **MR. PRESLEY:** All right, so everybody be
24 back here at 12:30.

25 **DR. BRANCHE:** So 12:30 eastern daylight

1 time.

2 **DR. MAKHIJANI (by Telephone):** Thank you
3 very much, Dr. Branche.

4 (Whereupon, the work group meeting took a
5 lunch break between 11:30 a.m. and 12:30 p.m.)

6 **DR. BRANCHE:** We are rejoining the Nevada
7 Test Site site profile work group. Mr.
8 Presley is Chair. Would someone who's on the
9 line please indicate that they can hear me?

10 **DR. MAKHIJANI (by Telephone):** This is
11 Arjun. I can.

12 **DR. BRANCHE:** Thank you.

13 I remind everyone if you could please
14 mute your phones. If you do not have a mute
15 button, then please dial star six to mute your
16 phones. It's important so that everyone
17 participating by phone can hear and maintain
18 the quality of the sound that you mute your
19 phones unless you're speaking. If you use the
20 star six to mute your phones, then you can use
21 that same star six to unmute your phones when
22 you're ready to speak. Thank you so much.

23 Mr. Presley.

24 **MR. PRESLEY:** What we're going to do is
25 we're going to digress just a minute. John

1 Mauro has asked for a few minutes to explain
2 SC&A's position of what we were discussing
3 this morning. Once we get that done then I'm
4 going to turn it over to Gene Rollins. And
5 Gene is going to start working on Comment 11.

6 John.

7 **DR. MAURO:** Well, the only point I wanted to
8 make is that this morning we got into the
9 drifts in reconstructing internal exposures to
10 workers who were in an occupational setting
11 under an environment with potential for
12 inhalation exposure can occur. And the bottom
13 line is that we do have concerns about how the
14 set of 100 cases somehow is going to be used
15 along with the new data that we've seen and to
16 reconstruct the doses to all workers who might
17 have been exposed in the tunnels and under
18 what I would call occupational access-
19 controlled conditions who may not have been
20 bioassayed but perhaps should have been
21 bioassayed.

22 And it's not clear that the group of
23 100 and the subset of that which has bioassay
24 data is, in fact, a good foundation upon which
25 to build a coworker model for its ^. This is

1 completely different than ambient exposures
2 that Gene and I were talking about over lunch.
3 That's a subject that I believe that is one of
4 the open items on the site profile.

5 So, in effect, we really dove into an
6 internal exposure issue, certainly relevant to
7 the site profile, and very much relevant to
8 the SEC petition. But apparently, we never
9 really got to what I believe Robert Presley
10 was hoping we'd address which is ambient
11 exposures. Our understanding is that there is
12 a chapter in the site profile, Chapter Four,
13 that is currently being rewritten.

14 We have seen a white paper that was
15 prepared by Gene that describes the
16 fundamental approach or strategy for
17 reconstructing doses to people who are
18 outdoors, not under occupational exposure
19 conditions, but they're outdoors doing
20 whatever jobs they're doing and not people
21 that were sort of like enter the tunnels or
22 enter a controlled area where the access and
23 egress controls are in place. But more toward
24 people who worked on the site in general and
25 you want to assign ambient exposures to them

1 because there are airborne dust loadings that
2 are out there from resuspension and
3 dispersion.

4 And, I guess, Gene has a strategy that
5 he's writing up right now for Chapter Four,
6 and we have our list of issues, but I
7 understand there has been some developments in
8 that white paper that go beyond what was in
9 the original white paper. So I guess with
10 that as by way of introduction we're prepared
11 to discuss the concerns we have with the
12 original white paper and perhaps we can have a
13 dialogue regarding each of the issues that we
14 originally had with the original white paper
15 and perhaps the degree to which those issues
16 are being dealt with and will be dealt with in
17 your new Chapter Four.

18 **MR. ROLLINS:** And the reason that we would
19 want to do that at this time is because I
20 think we're in agreement that tunnel workers
21 were in a controlled environment. Those that
22 were unmonitored are going to be dealt with
23 with coworker models to be developed. But
24 ambient to those workers, internal ambient to
25 those workers would not be necessary over and

1 above what we give surface workers because
2 they're basically breathing the same air that
3 the people on the surface are breathing
4 because it's being pulled in.

5 And so I think that was where we kind
6 of got disjointed a little bit, and so we'll
7 be in agreement right now is that we're going
8 to modify Chapter Four. And basically, we're
9 going to develop those ambient intakes for
10 surface workers and apply them both to surface
11 workers and tunnel workers. And that's going
12 to end the issues that we have related to
13 internal ambient.

14 Is that correct?

15 **DR. MAURO:** Yeah, my understanding is that
16 it's important to make a distinction between
17 workers who enter areas that are under direct
18 access control where there's a significant
19 concern regarding potential airborne exposure
20 and also to external exposure. And all the
21 other workers that are onsite that are not
22 gaining access to these controlled areas but
23 are working for various purposes at the site
24 outdoors and exposed to residual ambient
25 exposures that are due to the fact that there

1 was residual activity on the soil throughout
2 the site.

3 That soil is being resuspended,
4 dispersed and the lots and lots of people out
5 here could be inhaling it. And the potential
6 for that exposure is much smaller, of course,
7 than the potential of people who entered
8 tunnels or who entered an access-controlled
9 area where there is deliberate controls in
10 place concerned about airborne activity.

11 So it's important to separate the two
12 because the models and approach and
13 assumptions being made in Chapter Four dealing
14 with ambient exposure is a lot different than
15 how we would come at the problem of exposures
16 to people who were entering tunnels, for
17 example. It's a different problem. So
18 unfortunately, I think that there's a little
19 bit of combining of the two that was not
20 intended.

21 **DR. ROESSLER:** So we're done with the tunnel
22 workers then.

23 **DR. MAURO:** No, I'm saying we're done with
24 the tunnel workers --

25 **MR. ROLLINS:** For ambient.

1 **DR. MAURO:** -- the ambient aspect.

2 **MR. ROLLINS:** Not occupational but ambient.

3 **DR. MAURO:** Well, to the extent your new
4 ambient section addresses the various issues
5 that we were concerned about. And I guess
6 maybe to the extent to which we can go over
7 our issues. Maybe -- I don't know how best to
8 start, but perhaps Lyn Anspaugh could itemize
9 some of the original concerns we had in the
10 original white paper and the degree to which
11 those issues, your position regarding those
12 issues at this time.

13 **MR. ROLLINS:** Okay.

14 **DR. MAURO:** Lyn, are you on the line?

15 (no response)

16 **DR. BRANCHE:** There's someone on the line
17 who needs to mute their phone. Apparently,
18 you're in a public place. Star six will be
19 very helpful.

20 Excuse me. This is Dr. Christine
21 Branche. There's someone on the line who's in
22 a public place, and we're having difficulty
23 hearing because you are in a public place and
24 have not muted your phone. If you could
25 please do so, we would appreciate it.

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Go ahead, John.

DR. MAURO: Lyn, is Lyn Anspaugh on the line?

DR. ANSPAUGH (by Telephone): I am on the line. Like everyone else right now I'm having trouble hearing.

DR. MAURO: Would you want to take a run at trying to itemize some of the specific concerns that you had with the original white paper? It goes back quite some time so that everyone can benefit from at least SC&A's concerns. And then that will give Gene a chance to talk about those issues.

DR. ANSPAUGH (by Telephone): Okay, well, we've been through several versions of how Gene has proposed to calculate the ambient environmental exposures. And I think the most recent one was more or less going back to an earlier proposal to use the air samplers that were operated on the Nevada Test Site.

A previous version had suggested using mass loading which frankly we sort of liked better than the present one. If that's still where you are, Gene, could you just make a comment or two about which of those approaches

1 you're planning on using?

2 **MR. ROLLINS:** Lyn, the latest version we're
3 going to go with the air sampling data. We
4 looked at mass loading, and my opinion was it
5 was far too conservative.

6 **DR. ANSPAUGH (by Telephone):** Okay, well --

7 **MR. ROLFES:** I think SC&A also shared the
8 same opinion.

9 **MR. ROLLINS:** And since we have the
10 empirical data, we decided it best to use
11 empirical data as opposed to modeling.

12 **DR. ANSPAUGH (by Telephone):** Okay, and your
13 empirical data that you intend to use begins
14 in 1971. Is that still correct?

15 **MR. ROLLINS:** That's correct.

16 **DR. ANSPAUGH (by Telephone):** Okay. I have
17 two major points I'd like to make about that
18 and then two minor points. The first major
19 point gets back to the question, do air
20 samplers represent the material that people
21 were really breathing. And that gets back to
22 an issue of why were the air samplers located
23 where they were.

24 And as I have gone back and looked and
25 asked questions of Martha DeMarre and other

1 people, my impression is that these air
2 samplers were not placed in order to look at
3 exposure to people, they were placed more in
4 the interest of knowing what kind of effluents
5 might be moving off the test site and what
6 some of the general activities were that might
7 be influencing concentrations. And in
8 general, there is not an attempt to place
9 these samplers, as I understand it, where they
10 would be representative of exposure to people.

11 And let me just give one example,
12 probably an extreme example, but nevertheless
13 it's a real case. And that is there was
14 frequently times when it was necessary to move
15 a drill rig from one location to another. And
16 they did not disassemble the drill rig, but
17 what they did was they jacked it up, put
18 coasters under it, and then attached seven or
19 eight large bulldozers to it and drug this
20 thing across the desert. So this is one
21 example where there would have been enormous
22 air concentrations that would not be
23 considered, as near as I can tell, were never
24 reflected in these ambient air monitors.

25 But my second major concern is that

1 there's great difficulty in knowing how to
2 take a measurement made in 1971 and back
3 extrapolate it to 1963. And there are two
4 problems with that is, one is, of course, we
5 have radioactive decay taking place. And on
6 the other hand we also have some fresh inputs
7 that occurred between 1963 and 1971 which
8 would have added a lot of short-term or short-
9 lived radionuclide activities.

10 Again, an extreme example would be the
11 Schooner event which was a large cratering
12 event. We had other cratering events like
13 Buggy and some others. So I think there's a
14 great deal of difficulty in terms of trying to
15 take air concentration data from 1971 and back
16 extrapolate it.

17 The other, a couple of minor points
18 was that there are earlier data that were
19 taken, and I believe they started in 1965, but
20 they're not nicely tabulated in environmental
21 reports. But Martha told me that these data
22 were available on microfiche, and she had, in
23 fact, printed these data out and given them to
24 NIOSH. And so I think if you're going to use
25 this approach, you really need to go back and

1 look at the earlier data as well which would
2 get you back at least to 1965.

3 And then the last minor point is I
4 think we have some fundamental disagreement on
5 how you were proposing to make some
6 corrections regarding fractionation. And I
7 don't think that, I don't know if you've done
8 something since we last talked on that issue
9 or not, but that was unresolved the last time
10 we discussed it.

11 So that's basically where we are. We
12 have two major concerns and two minor ones.

13 **MR. ROLLINS:** I tried to jot these down as
14 best I could, Lyn, so let me try to address
15 them from the hip if you will. I think your
16 comment was that the air sampling results as
17 presented in the annual environmental reports,
18 which is what I have produced and used in the
19 Technical Basis Document, may have been not
20 from where people were working.

21 If that's true, then it would be in
22 direct conflict with the words that were used
23 when those data were presented in those
24 reports, and I have those very words in the
25 Technical Basis Document but I'm having a hard

1 time pulling it up. But it was to the effect
2 was that the vast majority of these samples
3 were taken in areas where individuals were
4 currently working. And it was to assess
5 potential intakes from their activities.

6 **MR. ROLFES:** There were air samplers set up
7 around the site, around the perimeter of the
8 site, and there were also air samplers that
9 were set up, for example, on a drill rig when
10 actual work was being done. So there were
11 both types of air samples being taken.

12 **DR. MAURO:** I'm sorry, Lyn. Could you start
13 again? We ran into a little problem here.
14 Could you start again, please?

15 **DR. ANSPAUGH (by Telephone):** Any air
16 sampler that was on a drill rig is not part of
17 this dataset that's listed in the
18 environmental reports as I understand it. And
19 I also have a basic disagreement with why the
20 sampler locations were picked. But I don't
21 think that there was any sampler that could
22 represent what people were exposed to when
23 they were dragging their drill rig across the
24 desert with several large bulldozers, for
25 example.

1 **MR. SMITH (by Telephone):** Lyn, this is
2 Billy. As you well know, they never drug
3 drill rigs across the desert pavement. They
4 used the roads that were there, and they took
5 them down the roads. And when they took them
6 across the desert pavement, they were taking
7 them directly from the road to the site where
8 they were going to be using them to drill. So
9 it was not as if they were taking drill rigs
10 and dragging them across the desert pavement
11 creating fugitive dust that may have been
12 resuspended.

13 **DR. ANSPAUGH (by Telephone):** Well, that's
14 not what other people have told us, Billy. In
15 fact, --

16 **MR. SMITH (by Telephone):** Well, Lyn, I was
17 there. I was there.

18 **DR. ANSPAUGH (by Telephone):** There were
19 people that I talked to who were driving the
20 bulldozers, too, and they give me a remarkably
21 different story. But the other point, Billy,
22 even if they were on a dirt road, there'd
23 still be an enormous amount of resuspension.

24 **MR. SMITH (by Telephone):** How much material
25 was on that dirt road? Had it been used

1 frequently or not? Lyn, we shot shots using
2 drill rigs in places where the activity was
3 not on the ground. We didn't drill it back in
4 the contaminated areas.

5 **DR. ANSPAUGH (by Telephone):** Well, I think
6 that's, if you want to talk about a highly
7 contaminated area that may be true because you
8 would have scraped it off. But I think all
9 the areas are contaminated to a certain
10 extent, and we're not talking about
11 occupational exposures; we're talking about
12 ambient environmental. And I think that the
13 contamination that it takes to create a
14 ambient environmental exposure is certainly
15 within the realm of where these drill rigs
16 were.

17 **MR. SMITH (by Telephone):** Well, these areas
18 were certainly not posted.

19 **DR. ANSPAUGH (by Telephone):** Yeah, okay.

20 **MR. ROLFES:** From our site profile -- this
21 is Mark Rolfes. This is information that's
22 been drafted in the environmental Technical
23 Basis Document for the Nevada Test Site. It
24 does indicate that equipment at fixed
25 locations continually sampled the ambient air

1 to monitor radioactive materials.

2 The locations were chosen to provide
3 representative samples from the populated
4 areas on the site as well as to monitor
5 resuspension of low-fired plutonium that was
6 spread by safety experiments before 1960 in
7 Areas 2, 3, 4, 7, 9 and 10. Access worker
8 population, geographical coverage, presence of
9 radioactivity and availability of electric
10 power were considerations in the site
11 selection for air samplers. And this is
12 pulled from a reference Black and Townsend
13 1997.

14 **DR. ANSPAUGH (by Telephone):** Okay, well,
15 there are several things about that statement
16 that you just read. Number one is that they
17 want to be where electric power is, and these
18 stations are also permanent so that that means
19 they weren't going to be out there on drill
20 rigs on a permanent basis. And they weren't
21 going to be monitoring specific activities
22 that could have been the ones raising the
23 dust.

24 **MR. ROLLINS:** Electrical was a
25 consideration, Lyn, not a requirement.

1 **DR. ANSPAUGH (by Telephone):** Pardon? I'm
2 sorry. I didn't hear --

3 **MR. ROLLINS:** Electrical, the availability
4 of electricity was a consideration not a
5 requirement. Every Health Physics Department
6 has methods to pull remote samples using
7 gasoline powered samplers and generators.

8 **DR. ANSPAUGH (by Telephone):** The question
9 is did they?

10 **DR. BRANCHE:** Excuse me. This is Dr.
11 Branche again. Again, I ask that those of you
12 who are participating by phone mute your lines
13 if you're not speaking. And I'm concerned
14 that there's someone on the line who is in a
15 public place or in a car, and you're not
16 muting your phone.

17 And unfortunately, your participation
18 is actually making it difficult for everyone
19 on the phone to hear the conversation. I
20 would encourage you if you cannot mute your
21 phone to then perhaps join us at another time.
22 Thank you, or I'll have to have the operator
23 cut you off. Thank you.

24 I'm sorry, those of you who are on the
25 phone, Mr. Anspaugh and Dr. Makhijani, please

1 continue.

2 (no response)

3 **MR. PRESLEY:** This is Bob Presley.

4 **DR. ANSPAUGH (by Telephone):** I'm sorry.
5 I'm still having a very hard time hearing.

6 **MR. PRESLEY:** Lyn, we've heard you all's
7 concerns, and Gene has written down the
8 concerns.

9 Do you have any more --

10 **MR. ROLLINS:** A couple more we want to talk
11 about if we can get off the air sampling idea.
12 I think Dr. Anspaugh said taking '71 data and
13 back calculating to '63 has problems
14 associated with it, and I don't disagree with
15 that. But the example that he used was
16 breaching containment events. And my
17 understanding when the containment breaches
18 occurred -- and Billy Smith's on the line.
19 Maybe he can elaborate on this a little bit.
20 But the footprints from the fallout from those
21 containment breaches were very well
22 characterized. And people were not allowed to
23 work inside those footprints.

24 Billy, could you add something to
25 that?

1 (no response)

2 **MR. ROLLINS:** Have we lost Billy?

3 **DR. ANSPAUGH (by Telephone):** Let me just
4 make another comment. That was not my only
5 concern.

6 **MR. ROLLINS:** I'm going to talk to the
7 others if you just give me a second.

8 **DR. ANSPAUGH (by Telephone):** Okay.

9 **MR. ROLLINS:** You also made a comment that
10 there was earlier air sampling data available.
11 Now, that may be true, but the earlier air
12 sampling data that I was able to obtain, that
13 that was provided by Martha, related more to
14 tracking the fallout plumes rather than trying
15 to measure ambient air concentrations. And it
16 would certainly not be appropriate to use that
17 type of data to develop ambient intakes.

18 And the last point that you made was
19 the refractories and how we go about putting
20 those back in where Harry Hicks took them out.
21 I think the paper that you currently have, I
22 think it puts -- I'm not sure which iteration
23 you have, but, of course, the first iteration
24 that you reviewed did not have the
25 refractories put back in for the near field

1 environment.

2 Then there's an iteration where I just
3 put them back in so they would be neutral, and
4 then when I got to thinking about it, I
5 thought, well, really if you're going to
6 deplete them in the far field, then you need
7 to enrich them in the near field. So the last
8 iteration, which I do not believe you have a
9 copy of, actually has the refractories
10 enriched by a factor of four in the near field
11 environment. I don't think you have a copy of
12 that work yet.

13 **DR. ANSPAUGH (by Telephone):** Well, you're
14 absolutely right. I do not have a copy of
15 your draft after four or any version that
16 attempts to compensate for the refractories.

17 Some of the earlier data, by the way,
18 do include measurements made at Mercury, so
19 that I'm not familiar with that data because
20 Martha was very reluctant to print it out for
21 me. If somebody could dump it off the O drive
22 for me and send it to me, I'd certainly like
23 to see it.

24 **MR. ROLLINS:** I would too. Lyn, I guess
25 we'll have to get with Martha and find out

1 we can determine what the long-term effects
2 are going to be on the surrounding
3 environment. So I'm not saying there's not
4 ambient data out there prior to 1971. I'm
5 just saying that the air sampling data that I
6 have seen prior to 1971 were basically
7 attempts to characterize the fallout plumes.

8 **DR. ANSPAUGH (by Telephone):** Well, I don't
9 think that's true. And I read -- you know,
10 there is an annual environmental report that's
11 published in 1965. I believe it may have been
12 the first one.

13 **MR. ROLLINS:** Actually, it goes back to
14 1963, but if you go into those reports, you're
15 not going to find air sampling data like you
16 find in 1971. It's just not there.

17 **DR. ANSPAUGH (by Telephone):** Well, what
18 you're going to find are plots of the data.
19 You're not going find digital tabulations, but
20 the data are available from Martha not from
21 me. And she says she gave all that stuff to
22 you guys.

23 **MR. ROLLINS:** We have those reports.

24 **DR. ANSPAUGH (by Telephone):** I'm not
25 talking about the reports. I'm talking about

1 the digital data.

2 **MR. ROLFES:** Please also keep in mind for
3 this discussion that we're having, the
4 internal doses resulting from environmental
5 ambient exposures are very, very unlikely to
6 affect the compensation decisions. We're
7 talking about maybe a millirem, two millirem
8 in some cases. It could be higher for certain
9 organs, but these doses from environmental
10 intakes at Nevada Test Site were very, very
11 low and are very unlikely to affect the
12 outcome of a compensation decision.

13 **DR. ANSPAUGH (by Telephone):** Well, I agree
14 that's probably true according to the way
15 you've done it. I don't agree it's true for
16 the exposures that some people might have
17 received while they were dragging drill rigs
18 across the site, for example.

19 **MR. PRESLEY:** Gene, do you have anything
20 else?

21 **MR. ROLLINS:** No.

22 **DR. ANSPAUGH (by Telephone):** My other
23 point, Mark, is that I don't think it's
24 appropriate to just dismiss some pathway out
25 of hand because you think it doesn't matter.

1 **MR. PRESLEY:** It's not that it doesn't
2 matter. And I think we actually have enough
3 data to say that they have sampled the areas
4 that the plumes from anything that might have
5 been dragged across the desert. If people
6 were working in an area, and they received
7 some fallout, there would be data or air
8 monitors in that area where those people
9 worked.

10 **DR. ANSPAUGH (by Telephone):** Well, that's a
11 very generous presumption. I'm not at all
12 convinced that's true.

13 **MR. PRESLEY:** Does anybody have anything
14 else on this?

15 (no response)

16 **MR. PRESLEY:** We can -- I hate to say it,
17 but this could be discussed for the next 150
18 years. So at this time I would like to call a
19 halt to this, and let's pick up with Comment
20 11.

21 **ISSUE 11: ENVIRONMENTAL RADIATION EXPOSURES**

22 **MR. ROLLINS:** Are you turning that over to
23 me, Mr. Presley?

24 **MR. PRESLEY:** Yes, I am.

25 **MR. ROLLINS:** I want to be sure that we're

1 all on the same page here, and so what I would
2 like to do if it's okay with John, could I get
3 John to restate the problem so that I can make
4 sure that we're addressing the problem that's
5 of his concern.

6 **DR. MAURO:** This is the problem that was
7 just raised by --

8 **MR. ROLLINS:** No, no, we're on to a
9 geometric correction factors for ambient
10 external.

11 **DR. MAURO:** Oh, the external --

12 **MR. ROLLINS:** Issue 11.

13 **MR. PRESLEY:** Issue 11.

14 **DR. MAURO:** Okay, now I'm hearing you.

15 This is a problem that we've
16 encountered many times before, and it's
17 certainly a tractable problem we've evaluated.
18 In effect, a person is standing on the ground
19 that is a source of contamination, a photon
20 emitter, on the ground relatively localized.

21 What happens is the radiation's coming
22 up and striking the badge. It's coming up at
23 an angle. And not only that, it's being
24 detected on a film badge that might be sitting
25 on the lapel. If you're concerned about

1 exposures to the bottom half, the lower part
2 of the body, that exposure is going to, that
3 you see on your film badge, is going to
4 underestimate the exposure to the lower part
5 of the body so there's an adjustment that's
6 needed there.

7 In addition, very often film badges,
8 the way they're calibrated is the radiation is
9 striking it perpendicular. If it's coming up
10 like this, what happens is it's passing
11 through effectively a thicker layer of cadmium
12 or whatever the shield attenuation is. And
13 what happens is you result in a readout on the
14 film badge which might be underestimating the
15 dose to the lower organs for those two
16 reasons. We've evaluated that on a number of
17 occasions, and depending on the energy of the
18 photon, the angle, the adjustment factors on
19 the order of two to maybe six or seven are
20 needed.

21 So the way I see it this is very much
22 a tractable problem. I think that it's been
23 addressed in other venues on at least two or
24 three other occasions. There's been general
25 agreement on the fundamental approach on how

1 to deal with that. So I see this as -- now,
2 I'm not quite sure of how you folks are
3 planning to deal with that.

4 Are any provisions being made in your
5 -- now, if you're dealing with an effectively
6 infinite plane, then there is no problem any
7 longer. For all intents and purposes the
8 radiation that's being experienced by the
9 badge now is the dose from the material that's
10 pretty far away to right up close.

11 So the significance of the adjustment
12 factor diminishes when you're dealing with a
13 surface that has widespread contamination
14 because you're getting, radiation's coming in
15 from all angles and so it's not as much of an
16 issue. It's of greatest concern when material
17 is close by like at your feet.

18 Then you might -- and we talked about
19 that, I believe, on Mallinckrodt for
20 exposures, how to adjust for that so the
21 numbers have been done. And so what I'm
22 getting at is that I'm not sure the degree to
23 which that particular issue has been engaged
24 as applied to the Nevada Test Site.

25 **MR. ROLLINS:** The last time we discussed

1 this, I think it was back in February, we
2 ended up realizing that we needed to make a
3 distinction between occupational versus
4 environmental exposures. And after some
5 discussion you agreed that after looking at
6 the values for elevated ambience that are
7 currently in the TBD, which are typically
8 around 100 millirem per year, that it's not
9 likely that the badge could have even picked
10 up an exposure like that. I mean it would not
11 have detected something that small.

12 **DR. MAURO:** That's correct.

13 **MR. ROLLINS:** And so you looked at the data
14 from '71 forward and said, well, we don't have
15 an ambient geometry problem out there. But
16 then you said, well, what about prior to 1971
17 and what are we going to do about that.
18 Because I think the hypothesis is as we get
19 closer to the period of atmospheric testing
20 that there could have been significant ambient
21 out there that even though the badges picked
22 it up -- and we've decided now that's not an
23 issue because everybody's getting ambient
24 because it's included on their badge -- but
25 now was the ambience high enough that a

1 geometry factor might needed to have been
2 applied during those early years.

3 Well, we thought about how we might
4 want to go back and try to determine whether
5 there was significant elevated ambient in the
6 years beginning in 1963 up to 1970, through
7 1970. And we got -- by the way on the talking
8 points now for Security force exposures as an
9 indicator of background and possible changes.

10 We could not find evidence -- even
11 though some of the documents talked about
12 using pressurized ionization chambers to
13 measure ambient radiation, we could not find
14 the results of those measurements. And I'm
15 sure they're there somewhere, but they were
16 not readily available to us.

17 What we decided to do was to go look
18 at a cohort group of individuals that were all
19 badged, that were not considered typical
20 radiation workers, and that they would be
21 assigned to an RWP to go in and handle
22 radioactive material, but were required to be
23 in all areas of the site. And the logical
24 group there was the Security force.

25 So we got the data from 300 Security,

1 that's the entire force, and we looked at
2 their data from 1963 to 1970. The idea being
3 here that we know most of their badges are
4 going to be zeros, which means by the time you
5 pull the control out, you've got nothing left.
6 Now if we hypothesize that there was
7 measurable, elevated ambient in those early
8 years, then it seems to me you would expect
9 the number of zero reads to decrease in that
10 cohort group.

11 When you look at the data we see that
12 the lowest number of this 300 people, the
13 lowest number of zero reads, 12. I mean, the
14 highest number of zero reads -- let me get
15 this right. The highest number of zero reads
16 was in 1963. In fact, of that 300-member
17 cohort group, there were only 12 positive
18 radiation doses assigned to those people. In
19 1964 there were 27 positives out of 323. In
20 1965 there were 45, '66 there were 70, '67
21 there were 60, '68 there were 95, '69, 14,
22 fourteen positives. That means there 315
23 zeros.

24 I submit to you that if there had been
25 measurable elevated ambient that we would have

1 seen more zeros in 1963 than we would have in
2 these other years.

3 And, I don't know. Did you have a
4 chance to see that, John?

5 (no response)

6 **MR. RICH:** (Inaudible)

7 **MR. ROLLINS:** Security guards. They
8 patrolled all the roads, provided security for
9 nuclear weapons.

10 **MR. PRESLEY:** There was at least one at
11 every drill site, at least one all over the
12 site.

13 **DR. MAURO:** So the number of individuals
14 with positive doses from 1960, out of the
15 total monitored individuals which was on the
16 order of 300, what in effect you're saying is,
17 well, we have data back to 1963 though 1970
18 consistently on the order of about 300
19 individuals that were monitored.

20 A number of individuals with positive
21 doses detectable above background was, the
22 highest number was in '67, 60. And the lowest
23 number was interestingly in 1963, which was
24 12. So what we get from this is that whatever
25 the ambient radiation exposure levels were

1 that this population of workers experienced
2 from '63 to '70 really didn't change very
3 much.

4 **MR. ROLLINS:** No.

5 **DR. MAURO:** If anything there might have
6 been some slight increase in the potential for
7 exposure in 1967. That's when you had your
8 highest in 1966, but that's a little higher.
9 Now as it goes toward this issue -- I'm trying
10 to connect the dots but I'm having, but I
11 can't get my head around right now. Somehow
12 you feel that that really puts to bed this
13 geometry correction factor problem.

14 **MR. ROLLINS:** Because you would have to have
15 -- okay, we've got to connect the dots.

16 **DR. MAURO:** Yeah, help me out here.

17 **MR. ROLLINS:** In order for this to be
18 important, there would have to be enough
19 ambient out there that people were being
20 unknowingly exposed to. And this would be the
21 group that would be unknowingly exposed to it,
22 not the radiation workers. That's why we
23 chose these people.

24 **DR. MAURO:** From an ambient perspective.

25 **MR. ROLLINS:** From an ambient perspective.

1 **DR. MAURO:** I'm going to go out on a limb,
2 and I always get myself in trouble when I do.
3 I do think this is a tempest in a teapot.
4 There's no issue here.

5 **MR. ROLLINS:** Thank you.

6 **MR. PRESLEY:** So we can say that Comment 11
7 has been closed. Everybody agrees? All
8 right, Gene, I appreciate that.

9 At this time I would like the whole
10 working group to discuss what we want to do as
11 far as whether we want to recommend or not
12 recommend the site profile. And if you have
13 some other discussion on this issue that came
14 up about the resuspension of particles when
15 the drilling rigs would be drug across the
16 desert floor, we will take that up at that
17 time.

18 My inclination is on that that, yes,
19 there could have been some dust. I've been
20 out there. I've seen those drilling rigs.
21 Yes, there were small -- where they turned off
22 of their -- if I remember --

23 Mel, you all correct me.

24 -- there was a road right down the
25 middle of the test site, and that's what we

1 drug those drilling rigs on. And then to go
2 from the road where they actually put the, set
3 the drilling rig up, then if there was not a
4 road there, yeah, they would have cut a road
5 with a bulldozer, and they would have drug
6 those things up to the site. That's what I
7 remember.

8 And that's where I remember seeing
9 some plumage. But I also know from my
10 experience on the Test Site that every area
11 that was being worked, whether it be putting a
12 weapon on hold, back scanning a smaller
13 drilling rig, or whatever it was, that there
14 were air monitors and people from Industrial
15 Hygiene onsite when I was there.

16 Now, Bryce, you and Mel were out there
17 more than I was, but that is what I remember.
18 Because we were checked when we would, we
19 would wear our street clothes to work. We
20 were checked by somebody from Health Physics
21 that afternoon when we walked off that site
22 and either got in a truck to come back to work
23 or else went somewhere else. That's what I
24 remember, and if I'm not right on that or if
25 there was something in the earlier days, you

1 ought to correct me.

2 **MR. CHEW:** Sure.

3 **MR. PRESLEY:** Has anybody on the working
4 group got anything else that we need to
5 discuss before we discuss what we're going to
6 do with the site profile?

7 **MS. MUNN:** My only question would be whether
8 or not there is any source of documentation
9 for the concerns that were just raised. I
10 can't imagine that there's documentation that
11 we haven't pursued in some way. Is anyone
12 aware of any existing documents that someone
13 has not located, gone through, reviewed and
14 reported on?

15 (no response)

16 **MS. MUNN:** There's always the implication
17 that there's some sort of data that's been
18 overlooked, and I just would like us all to
19 agree that any data that exists with respect
20 to NTS has been very thoroughly vetted by both
21 the agency and by the contractor.

22 **MR. PRESLEY:** Realizing that we're not going
23 to come up with 100 percent of the data.

24 **MS. MUNN:** No, I understand that. The
25 question is not whether we looked at 100

1 percent of it. The question is, are we
2 relatively sure that there's no other existing
3 data. There's always implications being
4 placed before us that there's something out
5 there we haven't seen.

6 And I just am asking verification from
7 the people sitting around this table to the
8 best of our knowledge we are aware of as much
9 existing data as possible within human
10 capability to review. We've pretty much done
11 that, have we not?

12 **MR. PRESLEY:** John, you sent your people out
13 there. You're on your own site.

14 **DR. MAURO:** What I'm hearing is that when it
15 comes to the ambient dose reconstruction
16 issue, the protocol that's being developed and
17 has been developed, Chapter Four, using the
18 1971 data, there are a number of concerns
19 related to extrapolating back. Concerns that
20 have a degree of legitimacy because going back
21 in time from '71 to '63, you know, you get a
22 little nervous when you do things like that.

23 But I also heard that it sounds like
24 there may be data in '65. Now, I'm not quite
25 sure whether the data that was referred to by

1 Martha to Lyn is the same data that Gene, that
2 you had made reference to regarding plume
3 tracking. Certainly, I agree with you. If
4 the data in '65 that we're referring to is
5 plume tracking data where you deliberately
6 went in and sampled ventings or whatever else
7 may have become airborne, and you're tracking
8 a plume, that is not ambient.

9 **MR. ROLLINS:** I have --

10 **DR. MAURO:** Now, if we have, if that data
11 somehow, '65 data is out there, somehow could
12 be used to validate the back calculation that
13 is based on '71 data, even if it's limited, it
14 would be very useful to say it looks like
15 Gene's model would predict in 1965 using '71
16 data going backwards in time using the
17 protocol being developed, we'd get these kinds
18 of, these levels of activity. Granted they're
19 probably small.

20 And if it turns out there actually is
21 some 1965 data out there, it would be a way
22 to, in terms of due diligence, say, okay, if
23 there are data out there -- and I'm not quite
24 sure there is or there isn't -- it sure would
25 be a good idea to turn over that rock and put

1 this thing to bed because we've looked at the
2 data. We've confirmed that it's the plume
3 tracking data and really isn't relevant to the
4 particular ambient model, and that's the end
5 of it.

6 Well, if it turns out it is, and we
7 look at it, I think that we could be
8 criticized for that for not taking one look at
9 that particular source. So my recommendation
10 would be let's, if there is such a dataset,
11 and it's readily available and can be
12 accessed, and we can use it to some benefit to
13 validate the models that Gene has developed
14 that would put to bed a lot of the questions
15 that we've been talking about today.

16 **MS. MUNN:** My question then would be and if
17 your premise is validated, and there is
18 something that perhaps due diligence would
19 expect us to take a look at, can that be done
20 in an expedient manner and resolved with a
21 technical communication between the parties
22 rather than another meeting of the work group.
23 Because if you're talking about this kind of
24 plume data, obviously, this is episodic and
25 would certainly, one would think the data

1 that's just been presented with respect to the
2 guards would be adequate to cover anything
3 other than a very clear, unexpected episode
4 that would undoubtedly be of record somewhere.

5 **MR. CHEW:** John, I'm just thinking aloud
6 here. The plume data that we have especially
7 Lyn is familiar, there was a couple of events
8 that were concerns in 1965. They were
9 cratering events. It was very important that
10 plume data was to demonstrate the levels of
11 activity that had gone beyond the site
12 boundaries --

13 **DR. MAURO:** So it's not useful for this.

14 **MR. CHEW:** -- and also to the limits of the
15 continental United States because there was a
16 test ban of not contaminating another country,
17 Canada. So I am familiar with that kind of
18 plume data. And so the question I'm having
19 difficulty is that where do you cut off the
20 plume data to make it --

21 **DR. MAURO:** No, no, I'd be the first to --

22 **MR. CHEW:** -- where do you --

23 **DR. MAURO:** If that's what it is, it's not
24 going to help us.

25 **MR. CHEW:** Yeah, those particular data was

1 very, very important to assure that we are not
2 violating any test ban conditions here, test
3 ban plume data.

4 **MS. MUNN:** It still appears to me that it
5 would be adequately covered by the guard data
6 that we just looked at.

7 **DR. MAURO:** Well, keep in mind the guard
8 data is the external exposure. And what we're
9 concerned about is that there's going to be,
10 that is, there's a protocol that's been
11 developed, back calculate airborne dust
12 loading of a variety of radionuclides with a
13 function of five from '63 to '71. And granted
14 that -- I agree completely. That contribution
15 to exposure is probably negligible or small
16 certainly compared to the other exposures,
17 what I would call the occupational exposure in
18 controlled areas.

19 But there's a whole Chapter Four
20 dealing with this. A protocol has been
21 developed based on extrapolating '71. And I
22 would argue that I don't know whether I would
23 use the external records for security guards
24 as a good way to get a handle on this and put
25 that issue to bed. I'd sooner say to try to

1 come to grips with some of the issues that
2 were raised by Lyn.

3 It seems to me the only real action
4 item here, if there's any, is if, in fact, you
5 say it's correct, it's over. I mean, there's
6 really not much more we can do. We squeeze as
7 much out of the data that we can. But if it
8 turns out that some of those measurements were
9 made -- and I guess Martha apparently knows
10 about this. Apparently, you do, too. If
11 you're correct, it doesn't bias anything
12 because that's not ambient.

13 **MR. CHEW:** Yes, that's not representative.
14 You're right.

15 **DR. MAURO:** So I guess that's as far as I
16 can carry it. I don't know what else to say.

17 **DR. ANSPAUGH (by Telephone):** Let me make a
18 --

19 **MR. SMITH (by Telephone):** Hey, John. John,
20 this is Billy Smith. You're absolutely right.
21 The data that Gene has talked about is direct
22 to gamma exposure. But there were two sets of
23 people that were on the routine bioassay
24 program that was sampled every quarter and
25 whole body counted annually whether or not

1 they needed it or not.

2 Those were the RAD Safe monitors and
3 those were the WSI Guards. So therefore, the
4 WSI Guards, the doses that they had, is
5 representative of both internal and external
6 exposures because they were part of the
7 routine bioassay program.

8 **DR. MAURO:** Well, that's excellent. I mean,
9 I hadn't heard that. What you're saying is we
10 actually have some bioassay data from workers
11 that were there not under control, under the
12 access controls but are working in the ambient
13 environment where there's bioassay data, 300
14 people. I don't know how many of them were
15 actually bioassayed. Well, now we're talking.
16 I mean, I'd much rather look at that than look
17 at air sampling data. I mean, --

18 **MR. SMITH (by Telephone):** John, one of the
19 things that is true is that there is no
20 indication that WSI Guards got any positive
21 doses from internal exposures. So therefore,
22 I mean, only a few episodic occasions. But in
23 those cases where they did, then that would be
24 in their personnel dosimetry records.

25 Otherwise, we're having to go through

1 tons and tons and tons of paper to try and
2 find the laboratory data that would tie a
3 result back to a person. And that is very,
4 very difficult to do. And with Martha's
5 constraints of personnel and funding, she just
6 can't support us in doing that right now. But
7 I do know that all of the guards were on a
8 regular bioassay program.

9 **DR. MAKHIJANI (by Telephone):** This is
10 Arjun. A question about that. We've looked
11 at some of these internal monitoring records,
12 and in regard to plutonium, when you say the
13 WSI Guards were routinely bioassayed or a part
14 of the bioassay program, were they monitored
15 for plutonium? Because we have found other
16 than the Health Physics RAD Safe workers,
17 plutonium data are somewhat more scarce.

18 **MR. SMITH (by Telephone):** Well, Arjun, one
19 of the sayings about the bioassay program, you
20 typically on a quarterly basis took large sets
21 of urine samples. There was about three or
22 four 16 ounce bottles of urine that were
23 actually processed and counted for gamma
24 activity, beta activity, and then run through
25 chemistry where plutonium was actually

1 analyzed and alpha counted. It was done by
2 alpha spectrometry.

3 In addition, those same people were
4 analyzed on an annual basis with either whole
5 body and/or lung counts. So there was no
6 picking and choosing as to what analysis you
7 were going to do on routine bioassay samples.
8 You did a gamma spec analysis, a gross beta
9 count and a plutonium analysis, which was done
10 by alpha spectroscopy. And also lung counting
11 and whole body counting, done with
12 spectroscopy methods.

13 **DR. MAKHIJANI (by Telephone):** Thanks,
14 Billy.

15 **DR. ANSPAUGH (by Telephone):** This is Lyn
16 Anspaugh again. Let me make two suggestions
17 for your consideration. One is Gene Rollins
18 and I perhaps could take a quick look to look
19 at a couple of issues. One is it should be
20 easy to plot where the air sampler locations
21 were relative to where we know people were
22 working. That's one issue.

23 The other one is the air
24 concentrations measured in 1965 I'm quite sure
25 were not plume tracking data. They were at

1 six locations although they were smaller in
2 number than they were in '71. But I think we
3 should be able to quickly look at that, and
4 like John Mauro's suggestion of validate the
5 model, so to speak, would be an excellent
6 thing that shouldn't take much effort to do.

7 **MR. CHEW:** Lyn's question is that the air
8 sample data is representative of where people
9 were working; is that the bottom line?

10 **DR. MAURO:** We checked that. We checked
11 that. In other words right now, remember, the
12 two issues. One is the air sampling locations
13 from 1971, the degree to which one could say
14 that those locations are pretty good for the
15 purpose of predicting what ambient exposures
16 might have been onsite from 1963 to '71.

17 Now in terms of ^, that would be a
18 location issue. And I think just looking at
19 where those samples were collected, probably
20 tell us a lot, and you may already have a map
21 showing, there they are. And then a judgment
22 could be made, yeah, it looks like it's a lot
23 more than just peripheral, that there's a very
24 real possibility that some of the samples that
25 were collected in 1965 might have been ambient

1 measurements and not necessarily plume
2 tracking.

3 **MR. ROLLINS:** May I make a comment on that?
4 May I make a comment right now? I just wanted
5 to look that up in '65. I just pulled it up
6 but I lost my connection, so it's gone now.
7 And Dr. Anspaugh is right. There are some
8 plots back there, but those plots are gross
9 beta activity, which doesn't help me much.
10 And then they did not detect alpha.

11 **DR. MAURO:** But think about it like this.
12 Okay, you're going to come up from your model
13 with some gross beta activity as a function of
14 time. I mean, in theory you can do that, say,
15 what would your model predict --

16 **MR. ROLLINS:** We do have gross beta
17 activity.

18 **DR. MAURO:** Right, and what would you
19 estimate would be earlier of the gross beta,
20 you know, picocuries per cubic meter at
21 various locations at various times.

22 **MR. ROLLINS:** Well, let me ask you this. If
23 we look at the gross beta in 1971 forward and
24 compare it to the little bit of gross beta
25 activity that we have in 1965, '66, '67, '68,

1 and we don't see statistical differences,
2 would that make the problem go away?

3 **DR. MAURO:** I think that's the weight of
4 evidence. In other words the way I look at
5 what we're doing now is, you come up with a
6 line of attack on a problem, and you come at
7 it in this direction. And when you're done,
8 say, that's pretty reasonable. But is there
9 any way we could come at it from another
10 direction which will confirm that that is, in
11 fact, reasonable? Time and again we run into
12 this. What I'm hearing is you've come up with
13 a line of attack. Certainly, it sounds
14 reasonable, but there are certain weaknesses
15 to it that it sounds to me that one way to
16 perhaps reinforce that your approach is, in
17 fact, robust would be to take advantage of,
18 well, two things that Lyn just suggested.
19 Let's go and check where those locations are
20 and see, yeah, it looks like that they were
21 sprinkled very deliberately to evaluate
22 airborne dust loadings onsite where the
23 workers worked. That may happen pretty easy I
24 think. And the other is, okay, the gross beta
25 activity. Now if it turns out the gross beta

1 measurements that were made come in at a level
2 that is not incompatible with what Gene's
3 models predict, now we've got a weight of
4 evidence. We're building a body of evidence
5 that is compelling. And we could all sit
6 around and say, listen, we did everything we
7 can to really turn this rock and look at this
8 thing. And I think in the end of the process
9 the weight of evidence is such that, yeah, I
10 think we've got a good handle on it, and
11 Gene's models work.

12 **MR. CHEW:** You're actually proposing two
13 things, John, if I hear you correctly. One,
14 to look at the sample locations to see if they
15 represent where people were working. And
16 actually, secondly, look at the data to see if
17 it fits the model.

18 **DR. MAURO:** Or at least rings true. You
19 know, I know they're not going to nail each
20 other, but they've got to ring true. Time and
21 again we run into this. Every time an
22 approach is taken in a site profile, and we
23 see that theoretically there may be certain
24 places where there's some weaknesses, what
25 SC&A always does, is there another way to come

1 at this that would help us substantiate that
2 approach is robust.

3 And that's all I'm saying. And I
4 think that what we heard from Lyn is that he
5 identified two things we can do to help
6 reinforce and determine the degree to which
7 we'll hang our hat on Gene's model. It may be
8 inconclusive.

9 I mean, one of the problems we always
10 have when we do this is we build this whole
11 idea in our head that, listen, if we do this,
12 this and this, when we're done we're going to
13 have some real answers. And if this is
14 inconclusive, it's inconclusive, but we did do
15 everything what I consider to be reasonable to
16 try to come to grips with this thing.

17 **MR. CHEW:** I'd like to get into the status
18 of the probably few events in 1965 timeframe
19 where we were doing some crater experiments
20 here that those particular samples would show
21 an elevated level, and it's not plume data,
22 but it's really ambient. So we have to
23 understand that. But we do know when those
24 events occurred. And so there is some, we can
25 visualize. I just want to let you know.

1 **DR. MAURO:** I agree. If we're concerned
2 with ambient, I don't want to be fooled by
3 looking at data which is not ambient.

4 **MR. CHEW:** That's exactly right.

5 **DR. MAURO:** And we have to be very careful
6 of that.

7 **MR. CHEW:** That's right.

8 **DR. MAURO:** I agree with that.

9 **MR. ROLLINS:** Just a point that Wanda wanted
10 me to make, and I wanted everybody to
11 understand. In each of the annual reports,
12 even starting back as early as 1965, there is
13 a map very similar to the one that is
14 currently in the TBD that shows the precise
15 locations of each of the air sampling
16 stations, or precise as they can be on a page
17 that big representing 300 miles. But there's
18 a similar map in every ^ that shows where the
19 stations were. And they moved them around,
20 and they changed the number from year to year
21 for various reasons.

22 **MR. CHEW:** They moved around where people
23 were working.

24 **MR. ROLLINS:** Why would they want to sample
25 air where nobody's working?

1 **MS. MUNN:** Yeah, there isn't any point.

2 **MR. CLAWSON:** Well, wait a minute. Let me
3 pull up a little other map for you. It's
4 called downwinders. But you know what's real
5 interesting? Nevada Test Site shows zero
6 airborne, but everything around it, most of
7 that stuff -- and this is what I have the
8 problem with -- most of that stuff was
9 implemented in there because they were trying
10 to figure out what was blowing offsite.

11 **MR. ROLFES:** True. Keep in mind that during
12 atmospheric time period when you have an
13 above-ground detonation, that's really the
14 focus of the offsite exposures. Because the
15 super heated gas is traveling offsite, there
16 isn't really going to be much fallout onsite.
17 It's going to travel because of the heat of ^
18 expanding, rising gases.

19 **MR. CLAWSON:** Right, but as the years went
20 by and so forth like that, and as they started
21 doing below-ground testing, as we've all
22 understood, they were still monitoring with
23 airplanes and so forth like that taking air
24 sample data to make sure that we didn't have
25 anything going offsite again. And this is

1 what a lot of that air sampling data was.
2 Because when it did go off it shook the living
3 heck out of a lot of stuff for a long way.

4 **MR. CHEW:** There were some cratering
5 experiments, Plow Share.

6 **MR. CLAWSON:** Plow Share was a good example.
7 Baneberry was ^ and from there.

8 **MR. ROLFES:** With those exceptions though
9 there are bioassay results for the individuals
10 that were involved directly with those.

11 **DR. MAURO:** I think that's a great ^. I
12 didn't know that we had a set of bioassay data
13 for people that only were exposed under
14 ambient conditions. And that goes back to
15 before 1971. That is another nice way to say,
16 okay, let's, do we have any detectable
17 activity. And let's say you come back zero,
18 zero. What does that mean? They're all less
19 than this. Is that compatible with the model?
20 In other words in effect would your model
21 predict, you would expect to see any, and we
22 didn't see any.

23 I mean, see, to me we're building a
24 weight of evidence that in the end says,
25 listen, everything that this data speaks to us

1 says that it rings true or it doesn't. All of
2 a sudden you have a bunch of bioassay data,
3 and you're seeing positive hits on the numbers
4 of these workers that are incompatible with
5 the model, you have to ask yourself why is
6 that occurring.

7 Now, there may be a good reason for
8 it. They may have been exposed to some
9 transient situation that was associated with
10 an event or it's not really ambient. But as I
11 said, you like to turn over those, go as far
12 as you can reasonably go. How far that is,
13 you know, that's a judgment call.

14 But it sounds to me that if you've got
15 some '65 data, you got some bioassay data that
16 somehow could be useful to let us know how
17 robust or reliable Gene's extrapolation model
18 is, it wouldn't hurt to take a look at it.

19 **MR. CHEW:** There's some logistics concern
20 because I think, John, that we've talked about
21 this before because we picked the top 100
22 because they were available in NOCTS. But
23 other data was because the logistics was
24 funding for NOCTS to support that in ^.

25 **DR. MAURO:** I thought the top 100 had

1 nothing to do with the ambient. I thought the
2 top 100 was designed to capture exposures to
3 people who were exposed in a serious way. So
4 I have those two in my head.

5 **MR. PRESLEY:** Anybody else have any more
6 questions?

7 **MS. MUNN:** My only question is that we
8 resolve the question adequately. Is there
9 another exchange that needs to go on with
10 respect to the placement of the sampling
11 equipment and ^ the questions that were being
12 raised by telephone as we just discussed.

13 **DR. MAURO:** Well, Wanda, since you're
14 looking at me, I would say that if it's not an
15 inordinate burden that would be, you know,
16 that's going to tie us up for six months or
17 something that can be done -- it looks like we
18 just about did it on the first item.

19 Now, when you look at it from the
20 point of view, okay, here's where the air
21 samples were collected. You go back to '71
22 and see where the air samples are, see where
23 workers were working, and here's where workers
24 were working in 1963 to '61. Here's where the
25 1971 air samples were. Here's the way the

1 wind was blowing. It seems like that you've
2 got the samples in the place where if there
3 was elevated ambient levels, these samples
4 would have picked them up, and they would be
5 applicable to workers who were working on the
6 site as a way to predict ambient exposures.
7 Now I think that should be done. I don't
8 think it's very difficult to do.

9 This other question regarding either
10 the bioassay data from the workers or the air
11 sampling in '65 data -- I said the bioassay,
12 I'm talking about not the 100 but the security
13 guard data. Now, it seems to me that if
14 someone would ask me, well, I'd like to look
15 at that and convince myself that those data
16 are compatible with Gene's model, and they
17 ring true, I think that's worth doing. I
18 don't know how large an effort that is. So
19 when you were looking at me that's why I,
20 that's what I would do.

21 **MS. MUNN:** And that's what I'm trying to
22 determine. Is the possibility of fairly
23 straightforward, brief white paper addressing
24 those specific points adequate do you believe?

25 **DR. MAURO:** In my mind, absolutely.

1 **MS. MUNN:** And is such a paper feasible?

2 **MR. ROLFES:** This information may already be
3 partially contained within the method that's
4 described by Gene in the current draft ambient
5 Technical Basis Document.

6 **MS. MUNN:** It sounds to me as though the
7 data is out there. It's a question of pulling
8 those data together in one spot so that they
9 can be viewed from the perspective that the
10 contractor's asking for.

11 **MR. ROLLINS:** I think what we need, we need
12 some kind of structure here; otherwise I end
13 up answering the wrong question.

14 **MR. PRESLEY:** Number one, Larry, if you did,
15 and we ask the contractor -- or not the
16 contractor, ask your contractor -- to go back
17 and take a look, to come up with a white paper
18 on these two items.

19 **MR. ELLIOTT:** Well, I'm sitting here
20 wondering whether or not it would be most
21 efficient if we finalized the revision of the
22 chapters of our site profile, or at least this
23 one on environmental ambient and issued it.
24 If we're that confident we understand the
25 issues that have been raised, and we feel that

1 we have reacted appropriately and responded
2 appropriately to those issues, and we're
3 confident that this chapter will address them,
4 perhaps maybe the best way, instead of a white
5 paper, let's issue this revised technical
6 basis document that would be used.

7 And then if that's what the working
8 group wants to evaluate, I think that's what
9 should be evaluated. I don't know. And I
10 really am at risk here of getting my head
11 chopped off by staff because I'm not sure if
12 staff is ready to pull the trigger and issue
13 this.

14 In order for us to issue it, we would
15 want to make sure that we have had all of the
16 peer and technical review comments addressed
17 including what we think may have been new
18 today in the discussion we heard. And so I
19 can't commit that, but I would say that should
20 be easier for us than reproducing a white
21 paper, which would just simply be maybe cut
22 and paste or -- I don't know.

23 **MR. PRESLEY:** Larry, if you cannot do that,
24 then can we ask them to produce -- I'm almost
25 certain that y'all have got the majority of

1 this data. We know where, there's all kinds
2 of data at the test site about where the
3 samples were, when they were taken. Y'all
4 probably have it. If we cannot come up with a
5 technical basis document, then come up with
6 some type of a paper that discusses that, yes,
7 number one, we had 14 million samples or
8 however many it was, and where the locations
9 of the samples were, and here are the
10 locations where the workers were working, and
11 take into effect the location of where the
12 workers worked changed almost monthly. Is
13 that not right? Because we put one down a
14 hole; we shot it. We moved on to the next
15 one. So that's going to change tremendously
16 especially with the workers that worked down
17 Yucca and ^.

18 **MR. ELLIOTT:** Well, can I ask another
19 question?

20 **MR. PRESLEY:** Go ahead.

21 **MR. ELLIOTT:** It's not clear, have we
22 provided access to all of the data that we
23 have used to make the revisions to the site
24 profile? Does SC&A have access to that? Have
25 we called their attention to it or not?

1 **MR. ROLFES:** Everything that we have
2 previously discussed has been put onto the O
3 drive. I do have a number of RAD Safe reports
4 and things that have been put for specific
5 projects, et cetera, onto the O drive for
6 SC&A's review.

7 Off the top of my head I don't recall
8 if there's ambient monitoring data that have
9 been put up there as well, but it may have
10 been discussed. I can probably take a look.
11 I may have some of it with me here.

12 **MR. ELLIOTT:** Well, I just wanted your
13 general sense. We either have shared all or
14 we may not have shared all. We should share
15 all of that.

16 **MR. ROLFES:** What's been discussed should
17 have been put up onto the O drive. So if we
18 had it and referenced it during one of these
19 discussions of the working group, it was made
20 available for review.

21 **MR. ELLIOTT:** Let me commit to this. I'll
22 check with staff and our fine support contract
23 folks and see if we're ready to pull the
24 trigger on this chapter. I think there's four
25 chapters that have been revised.

1 We've been holding the issuance of
2 those up until we get to a threshold of
3 understanding where we think we've got all of
4 the issues captured in these revisions.
5 Because once we issue these, we recognize that
6 there will be increases in certain types of
7 dose to certain individuals, not everybody,
8 not in all instances.

9 Where there is, we'll have to have a
10 program evaluation review, go back and revisit
11 claims previously done. But we don't want to
12 start new dose reconstructions under a
13 document, a series of documents, that have
14 just been revised and yet have to do another
15 PER on those in six months, eight months, a
16 year's time. So that's why we've been holding
17 out on issuing this.

18 And I think it puts Gene at a
19 disadvantage I think because he's got to talk
20 about a draft that he can't talk about or
21 share in great length and detail. So is that,
22 will that -- I will commit to get back to you,
23 the Chair, and the full working group and John
24 with how soon we think we can issue this. And
25 if we can't issue it in an expeditious way,

1 then we'll give you something that explains
2 what we have talked about doing here. Is that
3 fair?

4 **MR. PRESLEY:** Wanda?

5 **MS. MUNN:** That seems a reasonable approach
6 to me. My hope would be that we could have
7 identified in a relatively short time whether
8 or not we're going to be able to release the
9 new documents and then what needs to happen
10 once those documents are on the street whether
11 we can get a fairly expeditious response
12 regarding their sufficiency to address the two
13 issues.

14 **NTS SEC PETITION**

15 **MR. PRESLEY:** Let me ask you something. Can
16 we as a working group discuss at this point
17 whether we think that the site profile can be
18 taken to the Board, that we think it's
19 complete and ready to use or if we think it's
20 not complete and ready to use. There's a
21 caveat on that that at some point in time
22 before we meet on the 24th, or if we have to
23 have a meeting sometime the afternoon of the
24 23rd to go ahead and ratify this thing, and
25 say, yeah, this is what NIOSH has come up with

1 and SC&A has looked at this and agrees. And
2 then we at that point go on down the road.

3 What I would like to do today is see
4 if we are ready. We've heard a tremendous
5 amount of data and stuff on this. If we're
6 ready to say, yes, we think that the site
7 profile is good and it's workable, and that we
8 will, the working group, will say, yes, to the
9 site profile. And then we will recommend to
10 the Board, full Board, that the site profile
11 be used.

12 Or, no, we don't think it is, and
13 we'll go back and discuss and whatever your
14 issues are that you have, we'll go back and
15 get either SC&A or HHS to come in and help us
16 rectify the problem that we have here. But I
17 think that we really ought to talk about this
18 today, what we plan on doing going down the
19 road.

20 I'd rather do it face to face than us
21 have some kind of a conference call where we
22 can't hear or we all can't get there. We're
23 really lucky today. We are all five here. We
24 have some experts here with us that can
25 discuss any of the problems that you might

1 have.

2 **DR. ROESSLER:** Bob, I like your idea of the
3 23rd in the afternoon. We'd all be there I
4 assume or could be there. But it would depend
5 on the schedule that's being developed for the
6 Mallinckrodt.

7 **MR. CLAWSON:** Well, I know Josie and myself
8 are coming in a day early so we could still
9 keep the morning.

10 **DR. BRANCHE:** A lot of other people have
11 since responded so we're going for, I've
12 arranged for 1:30. But it's only supposed to
13 be like an hour. So if you wanted to --

14 Isn't that right, Nancy?

15 **MS. ADAMS:** Well, it's an hour at the site.
16 It'll probably be half an hour, 45 minutes
17 each way coming and going.

18 **DR. BRANCHE:** If you wanted to have a 4:30,
19 depending upon how long you think the meeting
20 would require.

21 **MR. PRESLEY:** Or any people coming in the
22 morning of the 23rd or the night of the 22nd.
23 I plan on being up there the night of the 22nd.

24 **DR. ROESSLER:** I haven't made arrangements
25 yet. I can --

1 **MR. CLAWSON:** I'm going to be there the 22nd.

2 **MR. PRESLEY:** Then why don't we at this time
3 we say, that gives SC&A and HHS ample time, I
4 believe, that gives them a month to look at
5 this and see where we stand. And that gives
6 us the last little bit to look at what we've
7 got and say yes or no.

8 But I want to say yes or no today. I
9 want to get a straw vote that says we have no
10 problems except this issue, these two issues.
11 Or, yes, we've got some issues, and then we
12 can't vote on it and go on down the road.

13 **MR. CLAWSON:** Well, Bob -- and this is just
14 my personal opinion -- I really hate putting
15 out a product at the end that I can't say
16 totally, 100 percent yes or no, this is what
17 it is. And if you're to be looking from the
18 outside in, yeah, we all agree this site
19 profile is good except for this chunk over
20 here. That's one of my primary concerns that
21 I have. Is just the perception that we're
22 leaving something undone.

23 **MR. PRESLEY:** Well, Brad. We're trying to
24 get everybody's, you know, it's kind of a
25 straw man vote I guess is why I'm asking. Do

1 we want to do this or do we not want to do it?

2 Larry, you have a question.

3 **MR. ELLIOTT:** Well, do you say in your
4 proposal that you're either okay with the site
5 profile being used or not being used? I take
6 that to mean the revised site profile that is
7 revisions that are based upon all of the
8 discussion that you've had as a working group.

9 **MR. PRESLEY:** That's correct.

10 **MR. ELLIOTT:** And so how can you say that
11 unless you see it? And so I pulled Mel and
12 Mark aside for a sidebar here to verify in my
13 mind where they thought we were at on these
14 four chapters. And they say they think we've
15 covered the bases, and we're ready to issue
16 this.

17 And I'm going to say let's go ahead
18 and issue them so that if you want to task
19 SC&A with evaluating a piece of it, they'll
20 have that piece to look at. And they have the
21 data available on the shared drive to confirm
22 what we say. Is that okay? So that means we
23 can make that happen within the next couple of
24 days, right?

25 **MR. PRESLEY:** How about it, working group?

1 **DR. ROESSLER:** Well, then I --

2 **MR. ROLFES:** It would be Jim's signature
3 that would, so I can't speak --

4 **MR. ELLIOTT:** Well, I can make sure Jim will
5 sign it.

6 **DR. ROESSLER:** Then I think we need the
7 equal response from SC&A that they would have
8 the opportunity to look at it. And if we're
9 proposing this meeting on the 23rd as the time
10 we would make this decision, I think we need
11 to know if John can be there or somebody --

12 **MR. PRESLEY:** Yes, John would tie into this
13 also.

14 **MR. ELLIOTT:** Well, I'm trying to get it to
15 him as quick as I can.

16 **DR. MAURO:** As far as the issues we've been
17 talking about, namely, this ambient exposure,
18 as far as I'm concerned this is very
19 tractable, very doable, and we'd certainly
20 regroup at the time it's convenient for anyone
21 and go over those two analyses and readily
22 come to a conclusion regarding Gene's
23 extrapolation model. I'm not concerned about
24 that.

25 Okay, Arjun, go ahead.

1 **DR. MAKHIJANI (by Telephone):** You know,
2 John, the ambient is in your bailiwick and
3 Lyn, and so I don't have a worry about that.
4 I just think I heard Larry say that all four
5 would be published, and I'm not clear what we
6 would be tasked to do. And I understand there
7 are quite a few internal dose issues that
8 we've raised that would be reflected
9 presumably in the new site profile. And I
10 think the internal dose issues are rather
11 complex. And if that's what the working group
12 is asking us to look at, I think you have to
13 first see the site profile revision to give an
14 estimate of how long it might take to do it.
15 Because ambient dose we've looked at a lot and
16 debated them a lot. But the internal dose
17 revision has been a long time in coming, and I
18 imagine it will have a complex series of ^.

19 **DR. MAURO:** I'll take that a little step
20 further, and I was mentioning this to Wanda, I
21 know that we're trying to separate site
22 profile from SEC. And I understand if at all
23 desirable that would be great. And I think
24 that there are two looming issues that we've
25 been talking about as SEC issues. But I have

1 a hard time seeing them as not also site
2 profile issues.

3 **MR. PRESLEY:** That's correct.

4 **DR. MAURO:** And so I guess all I could say
5 to this is that certainly regarding ambient,
6 we're going to take care of that. That's a
7 done deal. I know we're going to get home on
8 that. I'm much, much more concerned about the
9 issue we started talking about earlier today
10 which has to do with being able to reconstruct
11 internal doses using the 100 cases as a
12 platform and the new data we've seen. This is
13 fundamental for the site profile and, of
14 course, the SEC. So I'm having trouble
15 separating SEC issues from site profile
16 issues.

17 The same thing goes with external.
18 Looming is the issue of badges left behind.
19 We all are right now, SC&A's right now in the
20 middle of putting together a plan, and we're
21 ready to implement as soon as it's approved by
22 the work group to look into records to
23 evaluate, look at the weight of evidence of
24 this concern about badges left behind and the
25 degree to which if that practice did indeed

1 take place, that it could undermine the
2 ability to construct a coworker model.

3 Now both of those issues, to boil it
4 all down, to me are looming large, fundamental
5 to the SEC. I have a hard time separating
6 them from the site profile. Because some
7 place in the site profile you're going to talk
8 about how we're going to reconstruct doses,
9 internal doses. Well, what you're telling me
10 is the way you're going to do it is not the
11 old way but some new way. And we haven't even
12 scratched the surface of that.

13 The same thing goes with the badges
14 left behind. What happens if we find out that
15 the badges left behind was very pervasive, and
16 it does affect the upper end of the tail of
17 the distribution of the external exposures
18 such that the upper 95th percentile that you
19 pluck off from the distribution of external
20 exposures has been compromised for the reasons
21 we all understand? Or maybe it wasn't. But
22 we haven't engaged that yet. We haven't
23 gathered that data yet. We haven't looked at
24 it.

25 Mel, you certainly did a great job the

1 last time you sat down and looked up the mine
2 cases, and that really kicked off this
3 process. The process now needs to be
4 completed. You were the first to admit that,
5 listen, we took a look at it, and we think
6 it's a tractable problem because the records
7 are out there. And remember we talked about
8 you would look at the film badge and the PICC
9 and survey meter readings and the radiation
10 work from that.

11 Well, we got a handle on trying to,
12 compiling a weight of evidence argument the
13 degree to which this badges left behind was
14 not only pervasive but possibly could
15 undermine the reliability of the distribution
16 we built. In my mind those go to the heart of
17 the site profile as well as, of course, the
18 SEC.

19 **MR. PRESLEY:** I kind of disagree. The site
20 profile is a document on the site itself. It
21 says that Building A was here, and they did
22 check in here, and we have data here. Now,
23 when you get into the SEC petition, that is
24 when we're going to cuss and discuss whether
25 or not everybody wore their badge, and if they

1 didn't wear their badge, and we find out that
2 they didn't, then, yes, that's more of a issue
3 that has to do with an SEC petition or an SEC
4 evaluation going on. I see right now that the
5 site profile is pretty well, we've kicked that
6 around.

7 Now, everybody tell me on the working
8 group if I'm not, you know, if I'm wrong here,
9 we'll go back and start all over again. But
10 whether they didn't wear their badges or
11 whether they did wear their badges, that's
12 more of a special exposure cohort problem than
13 it is a site profile problem, to me.

14 **DR. ROESSLER:** I think your question brings
15 up this whole broader picture, and John was
16 starting to get into it earlier, is just what
17 do we mean when we approve a site profile. I
18 mean, how does that apply then to a possible
19 SEC evaluation, and how are they tied
20 together. And I think this applies to every -

21 -

22 **MR. ELLIOTT:** You've seen it in Bethlehem
23 Steel. You all approved the Bethlehem Steel
24 exposure model that we've used. Yet we
25 qualified a petition based on the necessary

1 criteria for evaluation, and we are still
2 awaiting the Board's decision on Bethlehem
3 Steel as a class, but yet we have an approved
4 exposure model.

5 **DR. BRANCHE:** Do you have another example
6 that is --

7 **MR. ELLIOTT:** Well, do you want me to go
8 down a list?

9 **DR. BRANCHE:** No, just one.

10 **MR. ELLIOTT:** I think Bethlehem Steel is the
11 prime one. But there are certainly others
12 where you have a petition underway, and you
13 have either an approved exposure, a dose
14 reconstruction approach or you have a set of
15 review comments about that approach that have
16 not yet been resolved. But I don't see any
17 difference here.

18 **DR. BRANCHE:** So approving a site profile
19 does not mean that there's an automatic
20 approval or anything else about an SEC
21 petition. It's just one step among many.

22 **MR. ELLIOTT:** I think it's best to have an
23 approved site profile in play to do dose
24 reconstructions although we don't have to have
25 a site profile at all to do dose

1 reconstructions. I think that whenever we
2 have an SEC petition that meets the basis
3 required in the rule, we owe the petitioner an
4 answer to those bases that are spoken about.

5 And my hope has always been that at
6 some point we'll find ourselves at a state
7 where we have these reviewed documents, if you
8 will, on the shelf that have no issues with
9 them. And we can say they're still living
10 documents, but, gee, we don't know what will
11 change now because we don't know what's left
12 to be done with them. We're not there yet.
13 So when we have a petition, we need to answer
14 the basis for the petition.

15 **MR. PRESLEY:** To me a site profile is very
16 much a living document.

17 **MR. ELLIOTT:** Would somebody tell me what
18 the SEC-related issues are with NTS versus,
19 you know, aside from the site profile issues?
20 Because that's of concern to us because that's
21 another reason why we've held up on issuing
22 the site profile revision. Because it's going
23 to result in two PERs at least if we have
24 major SEC issues that are not attended to in
25 the site profile review.

1 **DR. MAKHIJANI (by Telephone):** Larry, could
2 I respond just on behalf of where our team is,
3 being the task manager for the SEC. We did
4 send in mid-March a document to the working
5 group which was our preliminary take on what
6 the SEC issues were with NTS based on, you
7 know, the site profile revisions that we had
8 not seen yet so we have not reviewed what
9 changes might happen based on the evaluation
10 report and some new things that were there and
11 the related discussions.

12 Like Table 7-1 is a major example
13 because it really defines a very large part of
14 the internal dose problem. NIOSH took a
15 certain approach that cumulative external
16 doses are indicative of high exposure
17 potential for internal dose. We've got
18 cumulative data for external dose. We've got
19 the internal dose data. We can make a
20 coworker model. And we're in the process of
21 reviewing that.

22 As Mr. Presley and the work group
23 know, we've initiated a look at a very
24 significant fraction of those hundred cases.
25 And so from the point of view of internal dose

1 we couldn't sign off on a site profile that
2 said we're going to use a coworker model in
3 the way the ER says without completing that
4 work. And so that's -- but at the same time,
5 I mean, if NIOSH wants to use its existing, I
6 mean, there's nothing for SC&A to say if NIOSH
7 is using the revised site profile to do dose
8 reconstruction.

9 Maybe I'm not clear on what your
10 internal process is there. At least from my
11 point of view looking over SEC issues, we're
12 in the middle of looking at those things, and
13 it looks like a little bit of a difficult
14 thing to come to a conclusion very soon.

15 **MR. PRESLEY:** Arjun, this is Bob. You all
16 sent out a revised draft on May the 6th.

17 **DR. MAKHIJANI (by Telephone):** Mr. Presley,
18 that was not a revised draft. It was
19 essentially the same. The one on May the 6th
20 was PA cleared so that it could be given to
21 Mr. Reid's office before we briefed them.
22 Because that was going to follow that in the
23 briefing and it had not been PA cleared.
24 There were a couple of typos or something that
25 were corrected, but it's the same, and maybe

1 there was a redaction or two, but it's the
2 same document as you had in mid-March.

3 **MR. PRESLEY:** Thank you, Arjun.

4 **DR. MAKHIJANI (by Telephone):** You're
5 welcome.

6 **MS. MUNN:** This question of what constitutes
7 a site profile is one that I think bothers a
8 great many people. It would really help if we
9 could clarify in our minds here exactly what a
10 site profile is. I do believe that Bob has a
11 strong point.

12 It can be argued that a site profile
13 should be a full description of what
14 constituted the site, what structures and
15 activities occurred on the site, and when
16 those occurred. If we expect a site profile
17 to address the issues that we encounter when
18 we get into dose reconstruction or special
19 exposure cohort issues, then it would be very
20 difficult to ever resolve what a site profile
21 is.

22 Clearly, how work is performed and the
23 monitoring data that is of record on a site is
24 a reasonable part of a site profile, and one
25 would expect to see it there. But how those

1 data are used in dose reconstruction cannot be
2 resolved prior to the acceptance of a site
3 profile else we would never have a document
4 unless we are looking at a site profile where
5 there are no claimants.

6 If we're going to identify what a site
7 profile for NTS is, then we have to segregate
8 in our minds what the functions of other
9 people outside this work group are. If I
10 understand the work group's charter correctly,
11 it is for us to approve a site profile for the
12 Nevada Test Site.

13 If it is more than what I've just
14 described, we need to say so right here and
15 reconcile ourselves to the fact that we're
16 likely never going to have a completed site
17 profile.

18 **MR. CLAWSON:** Isn't that why we call that a
19 living document? I guess -- and I understand
20 your frustration because I have the same
21 frustration. As far as the TBD, it bothers me
22 to hear a claimant say, well, they denied me
23 this because according to the TBD this wasn't
24 there. What are we using the TBD for but for
25 dose reconstruction? They're calling out that

1 these people were in these areas. They were
2 doing these things. And this is what we use
3 this for is dose reconstruction.

4 So in my mind's eye we've got to make
5 sure that this TBD is as clear and direct as
6 possible for all these things. Because this
7 is what the -- and this is just my opinion --
8 this is what the dose reconstructors are using
9 to be able to do this with. And this is why I
10 guess I put so much emphasis on that it's got
11 to be done.

12 We've got to cover every, uncover
13 every rock and make sure that this technical
14 database is correct for them. Because if
15 we're just saying what a site profile is,
16 that's all well and fine because basically
17 these TBDs are like flying over any site at
18 40,000 feet. It's not getting into the nitty-
19 gritty. But they're still using this to be
20 able to reconstruct dose.

21 **MR. ROLFES:** But the most important piece of
22 data that we would use for a specific dose
23 reconstruction would be that individual's
24 information within in their bioassay and/or
25 dosimetry records. That information would be

1 the number one most valuable piece of
2 information over and above the site profile.

3 As part of the dose reconstruction
4 process we would use that dosimetry
5 information and also evaluate the completeness
6 of that data. If there was a determination
7 made that that data was not complete, then we
8 would consult the site profile to give us
9 additional guidance on how to essentially fill
10 in any gaps and make sure that we do it in a
11 claimant favorable manner.

12 **MR. CLAWSON:** And, Mark, I understand that,
13 and I just last week had an individual come up
14 to me that worked in this building for 25
15 years. And he says, Brad, what do they say
16 that I can't be exposed to this because this
17 building doesn't exist? This was a chemical
18 storage facility. So I had him take a picture
19 and send back to you guys that this is a part
20 of the building.

21 Because -- and I understand what
22 you're saying. I really do. I understand
23 that it's actually the people's dose records
24 and so forth like that. But in a lot of
25 cases, and we hear it time and time again,

1 that they're using the site profile for this.
2 And this is why I put so much, such a personal
3 emphasis on that I want to make sure that when
4 we do approve these site profiles that it does
5 have the correct information and so forth.

6 And as [Identifying Information
7 Redacted] has pointed out, we've got a lot of
8 little flaws. And you know what? Nine times
9 out of ten maybe they really won't affect it
10 because the boom tower was moved or calling
11 out a different area or so forth like that.
12 But we've got to make sure that this is the
13 right product. And I know. It's frustrating
14 to me, too. I want to make sure that we get
15 there though, and that's my only concern.

16 **DR. ROESSLER:** Brad, if we -- and I think
17 you're going in the right direction, but I'm
18 thinking the next step. If we look at the
19 site profile and we, as a working group, say
20 it's adequate, and one of the criteria is that
21 it's adequate for doing dose reconstruction,
22 then haven't we taken a big step toward the
23 determination on the SEC?

24 **MR. CLAWSON:** Well, you know --

25 **DR. ROESSLER:** Where does one stop and the

1 other begin?

2 **MR. CLAWSON:** -- you know, that's been an
3 interesting one to me, too. Where do they
4 begin and so forth like that? And I do. I
5 agree with you on that point there. The thing
6 that's interesting to me and that I really
7 hate to see, but it's going to go on forever
8 as long as we do this, is that we approve the
9 site profile and then we start going down in
10 it, and as everybody has said, the TBD is a
11 living document. All of a sudden we're having
12 to change things because all of a sudden some
13 new information came in that we didn't see,
14 which is a glorious thing, but it also makes
15 it look like why wasn't this done in the first
16 place. And I'm looking at it somewhat from a
17 kind of a claimant.

18 **MR. ELLIOTT:** Because we couldn't do all 315
19 sites in a year.

20 **MR. CLAWSON:** And I realize that, Larry.
21 And I'm not saying anything like that. We've
22 got a large --

23 **MR. ELLIOTT:** I know you didn't. But I
24 would remind -- and I'm not trying to lecture
25 here -- but remind the Board members that an

1 SEC really has a two-part test that is couched
2 in the rule, in the language, and dose
3 reconstruction is covered under another rule,
4 of course, but we talk about in dose
5 reconstruction the different approaches that
6 we use.

7 And if, as we proceed in refining our
8 abilities to reconstruct dose, and a variety
9 of doses, we run across situations where we
10 recognize in our site profile or a technical
11 basis document that we need to bolster that
12 section. We need to build it up. We need to
13 beef it up. It doesn't have enough detail
14 reminding you all that site profiles,
15 technical basis documents really are intended
16 for an audience of health physicists to give a
17 consistent approach in interpreting what
18 happened at the site.

19 And we don't claim that we have all
20 there is that should be interpreted in those
21 documents. That's why we call them living
22 documents. And we want to get there some day
23 but, you know, when we identify or when a
24 claimant or a petitioner identifies, here's a
25 dose that you haven't covered in your site

1 profile that you can't reconstruct, that's
2 where the SEC rule comes to bear. Can we?

3 We have to evaluate it. We have to
4 look at it. You have to review it. Can we
5 reconstruct dose with sufficient accuracy?
6 The rule for special exposure cohort petitions
7 says that is defined as an ability to compound
8 the dose or more precisely estimate the dose.
9 Those are the words in the rule.

10 And I think -- again, not trying to
11 lecture or preach here, but I think we have to
12 all go back and touch that stone once in
13 awhile and say can we bound the dose or more
14 precisely estimate the dose? If not, that
15 truly is an SEC criteria that's met, to add a
16 class.

17 **MS. MUNN:** And the capability of doing that
18 is based in documentary evidence well outside
19 of the site profile. The site profile is the
20 platform, is the platform from which the dose
21 reconstructor begins their understanding of
22 what transpired at that place during those
23 years. It's just a platform. The information
24 that's necessary for dose reconstruction is
25 over and above this platform. We need to

1 establish a platform.

2 **DR. BRANCHE:** But as Mark said, the site
3 profile is one piece, and perhaps not the most
4 central piece of information that's used.
5 I've been listening intently. I want to make
6 certain that we all are not letting -- I don't
7 know how to say this because everyone's
8 brought up some very sensitive information --
9 but I think we owe the claimants moving
10 forward.

11 And I'm concerned that part of what I
12 heard, Mr. Presley, is that we're waiting for
13 perfect, and a living document is always going
14 to have, you're always going to be able to add
15 some information to improve what you know.
16 And as you move into your responsibilities now
17 to review the information for the SEC, and you
18 find that something from the site profile or
19 any other piece of evidence at your disposal
20 is wanting, it'll raise questions.

21 If you had been given this task only
22 as an SEC, you would have been reviewing
23 information, and the site profile may not have
24 been perfect then either. I'm not trying to
25 rush you. I think you all have raised some

1 very important issues, but the claimants are
2 moving forward. They filed an SEC. You guys
3 have been meeting according to the information
4 that Mr. Presley put together since 2006.

5 I just want to make certain that
6 we're, I'm concerned that I'm hearing -- I
7 don't mean to be repetitive -- but I'm
8 concerned that I'm hearing waiting for
9 something perfect, and I don't think that if
10 you use the word living document, that is ever
11 going to be final. At least not, I don't
12 think there's a criterion for it to be final.

13 If we have site profiles that have
14 always been improved upon, is that my
15 understanding? More information, new evidence
16 has always been added to every site profile.
17 A site profile's just one piece of information
18 that all layers of this organism use to move
19 forward in their work.

20 **DR. ROESSLER:** I think the bottom line
21 really is the issues we have left that we're
22 going to look at before we get together again,
23 are they site profile issues or are they
24 really SEC issues? And I'm tending now
25 through this discussion to think they're SEC

1 issues.

2 **MR. PRESLEY:** A lot of them are.

3 **DR. ROESSLER:** And if that's the case, then
4 it seems like we could actually say --

5 **MR. PRESLEY:** If you go through SC&A's
6 working draft, I mean, look at what they have
7 commented on, --

8 John, this is yours.

9 -- you will see that a lot of what we
10 have talked about pertains to SEC petitions.
11 A lot of this we've gone over. It's been
12 kicked around. We're going to have to kick
13 this dog two or three more times. But there
14 are things that are in this that are SEC
15 issues. It's not going to make one bit of
16 difference to the site profile. It's going to
17 make a difference to the issue whether we
18 accept it or we reject it.

19 **DR. BRANCHE:** Well, and again, I go back
20 actually to what I believe are your draft
21 words. Unfortunately, I was not around when
22 the work group was formed to first deal with
23 the site profile, so I don't have at my
24 disposal what your charge was. But if Mr.
25 Presley's captured it accurately, your charge

1 was to document accuracy and authenticity. I
2 don't know if that's always taken as approve
3 or disapprove. And so given that the site
4 profile can change is it accurate with the
5 best of the information that you have now. It
6 might be your central question.

7 **DR. MAKHIJANI (by Telephone):** this is
8 Arjun. Could I ask a clarifying question?

9 **MR. PRESLEY:** Arjun, speak up.

10 **DR. MAKHIJANI (by Telephone):** Can you hear
11 me?

12 **DR. BRANCHE:** Dr. Makhijani, you'll need to
13 speak up, please.

14 **DR. MAKHIJANI (by Telephone):** Can you hear
15 me?

16 **DR. BRANCHE:** Now.

17 **DR. MAKHIJANI (by Telephone):** As I recall
18 the Board appointed the same working group to
19 look over the SEC issues and also authorized
20 SC&A to start the process of SEC review which
21 is why we've done a number of things and
22 initiated a number so we're proceeding in
23 parallel. And I just wanted to make sure, you
24 know, a number of these issues are being
25 covered under our SEC review.

1 other words, it's a -- and that's what I see.
2 I'd be more than happy to define that more,
3 but that's how I see it.

4 **MS. MUNN:** Every SEC issue has some
5 component in it that is a site profile issue,
6 but it is not the basis for the SEC in most
7 cases. I can probably dream up some fictional
8 or potential cases where that might be true,
9 but by and large SEC issues are dose
10 reconstruction issues, not a question of where
11 it was.

12 Now Brad had a very good example, an
13 addition that needs to be made to a site
14 profile. He gave us that. And that's a good
15 thing. That's exactly the kind of issue that
16 anyone that I know who's written a site
17 profile would want to be made aware of.
18 There's a building there that somehow has
19 missed, been missed, in our process.

20 With the site profile, as I repeated,
21 I'm repeating myself, was a platform from
22 which both the SEC dose reconstruction and
23 other issues have been built upon, not the
24 reason for an SEC, not the part and parcel of
25 it. So, yes, I agree partly with what John

1 said, but there is still the assertion that I
2 believe to be accurate.

3 **MR. CLAWSON:** You know, Wanda, this is Brad.
4 I agree. I think that part of the problems we
5 get into is we start out with a site profile,
6 and before we get the site profile, all of a
7 sudden somebody throws an SEC on us. And it's
8 very difficult for me to really divide from
9 where this is an SEC issue or is this really a
10 site profile issue. And I don't know if
11 anybody else has that problem. Maybe I'm over
12 too cautious or whatever. But I really do. I
13 have a hard time figuring out because each
14 little piece of that SEC that now we're
15 looking at is also part of a site profile
16 problem, too. And so that's why I have a
17 problem, and maybe it's just my problem, but I
18 really have a hard time distinguishing kind of
19 where --

20 **MR. ROLLINS:** No, you're not alone.

21 **MR. CLAWSON:** I know, I'm -- and that's
22 where I'm at on this.

23 **MS. MUNN:** It's difficult. And that's why
24 the citizens of the United States are treating
25 us so well. It's a hard decision.

1 **MR. PRESLEY:** You know, it's a hard thing to
2 do, but at some point you have to draw that
3 line between an SEC petition and that site
4 profile. Say, we're going to stop the site
5 profile work here. We're going to say yes or
6 no. If we say no, then we're not going to
7 stop the site profile. We're going to go on.

8 If we say yes, then we're going to
9 start working on this SEC petition. And if
10 something comes out of that SEC petition that
11 needs to go back and let's take a look at that
12 site profile or it needs to be reworked in the
13 site profile, it can be done. We'll go
14 forward. And all we've got to do is say item
15 A, page 22, whatever it is, we had to rework
16 this. Everybody looks at it. Now, this is my
17 perception. And then we say that looks good
18 or we agree with that, and the site profile
19 revision goes on.

20 **MR. CLAWSON:** But sometimes when we take and
21 change a site profile, we also create another
22 problem for NIOSH and that's that they have to
23 go back and reevaluate all the previous cases
24 that they have just may have gone through.

25 **MR. PRESLEY:** They're going to have to do

1 that anyway if we find something on the SEC.

2 **MR. ELLIOTT:** But that's a good thing
3 because if there's any change in compensation,
4 that's what we're all here striving to do.

5 **MR. ROLFES:** It's our commitment to go back
6 and revisit any cases that have been
7 previously denied.

8 **DR. BRANCHE:** So you're saying, Larry, let's
9 not, again, let's not wait to get it all right
10 with the concern that it would force going
11 back.

12 **MR. ELLIOTT:** Well, I have no idea -- here's
13 my problem. If you want to talk about my
14 problem, my problem is managing what he just
15 mentioned, the consequences of this body's
16 action. If this body says to us today that
17 they want to take up and vote on the site
18 profile and knock those issues down, and
19 whatever issues are not knocked down, then you
20 guys will have to comment to the Board about
21 what they are and have to let the Board decide
22 what they're going to do with them.

23 But if you say that, I'm happy because
24 then we can move forward with our site profile
25 and dose reconstructions under that site

1 profile and one PER for that, Program
2 Evaluation Review, to evaluate what the
3 changes might have done for others who have
4 already had their dose reconstructions. I'm
5 happy with that approach.

6 If you say, no, we're going to hold
7 off, and we're going to work this site profile
8 set of issues along with the SEC issues until
9 we get it all resolved, then I'm going to tell
10 you right here and now that's not a happy spot
11 for me to be in because I'd have to tell
12 claimants that we're not applying certain
13 changes that we would apply. They'll have to
14 wait. That's one message I have to deliver
15 that's not very happy, not very satisfying for
16 me to give but factual for me to give.

17 The other thing is, okay, yeah, we
18 might only have to issue one PER on SEC issues
19 and all of that, but it's going to be on more
20 claims. So it's a trade off. I think you're
21 better off if you deal with the site profile
22 issues and let us put that to bed, and then we
23 take that -- many of those, I believe, will go
24 away in Arjun's list for the SEC, and what is
25 left is what you have to discuss and resolve

1 for the petition. I just think it's a better
2 approach.

3 **DR. ROESSLER:** It seems like it's more
4 favorable to the claimants to just go ahead
5 and do the --

6 **MR. ELLIOTT:** We know we're going to make
7 changes. We've agreed to making changes.

8 **DR. ROESSLER:** And there's nothing negative
9 really.

10 **DR. BRANCHE:** I think you should probably
11 raise that because I was about to potentially
12 take the risk with Larry of sounding a little
13 crass. I'm a little less grateful what work
14 it causes for NIOSH. I'm much more concerned
15 about what it means for the claimants and the
16 petitioners. So if you could put it more in
17 that context than what it means for NIOSH, I
18 think it then has the ring of a valuable
19 question.

20 **MR. ELLIOTT:** To clear the site profile
21 issues and for us to implement a revised site
22 profile in accordance with what you discussed
23 puts the claimants in the best advantage
24 possible for getting a dose reconstruction,
25 especially those individuals who require the

1 best estimate dose reconstruction we can
2 provide a clear advantage. Otherwise, they're
3 disadvantaged but get what we can provide
4 them. We may hold their claim.

5 If they're a best estimate, we may
6 pend their claim until all of this is done.
7 While we're working on others, you know, our
8 efficiency approaches would allow us to treat
9 other claims under our existing site profile
10 to get an answer, but then those would have to
11 be reexamined. And so those people are going
12 to get -- here's frustration for the claimant.

13 They're going to get a message that
14 says we're going to reexamine your dose
15 reconstruction because the site profile has
16 changed and then they're going to have their
17 hopes very high that they're going to get
18 compensated out of that. And quite frankly,
19 we don't know what the rate of compensation
20 will be under these changes. For certain
21 cancers it may be and other cancers it may not
22 be feasible to get compensated.

23 So in the framework of the claimants
24 perception, I think we're serving them best if
25 we get the site profile. You're this close.

1 We issue the site profile to you all. You can
2 see how we've revised it. You can react to
3 that, and hopefully, you can come to closure
4 on that.

5 And also, at the same time, it will
6 knock down several -- I can't give you a
7 number, of course -- of the issues that are
8 relevant to the SEC petition leaving you with
9 just what whatever remains to be discussed.
10 And the petitioner gets a better, I think a
11 better evaluation that way because you're not
12 constantly, I hope, treading ground that's
13 already been walked through many times in a
14 site profile.

15 **DR. MAKHIJANI (by Telephone):** This is
16 Arjun. Might I suggest something? If NIOSH
17 publishes the new revised site profile that,
18 at least so far as the SEC is concerned, we
19 can go back and take a look at the list of
20 issues we submitted and revise those issues
21 and give you a work plan.

22 I mean, there are some things in that
23 list that are based purely on the evaluation
24 report and are not dependent on things that
25 are related to the site profile revision

1 because they carried over awaiting the site
2 profile republication.

3 So I think at least from the SEC point
4 of view it may simplify matters, reduce the
5 work potentially that we would do, and reduce
6 the number of issues, and also maybe allow us
7 to put some issues to bed and say this is not
8 an SEC issue so it can be then dealt with
9 purely in a site profile framework. It might
10 disentangle things a little bit in my opinion.

11 **MR. ELLIOTT:** I've already given orders to
12 issue the revisions to the site profile. So I
13 don't think, but yes, I've already given
14 those.

15 **DR. MAKHIJANI (by Telephone):** What I was
16 simply saying is that on publication if in the
17 SEC work we could -- I'm just clarifying that.
18 I'd like to take on that review just from the
19 point of view of revising the work plan to the
20 extent that it needs to be revised based on
21 the republication. That's all I wanted to
22 say.

23 **MR. PRESLEY:** Arjun?

24 (no response)

25 **MR. PRESLEY:** Arjun?

1 (no response)

2 **MR. PRESLEY:** Arjun.

3 (no response)

4 **DR. BRANCHE:** Dr. Makhijani?

5 **DR. MAKHIJANI (by Telephone):** Yes, yes,
6 sorry. I was unmuting.

7 **MR. PRESLEY:** What you're saying is you
8 would like to revise the work plan that came
9 out in March in the revision in May?

10 **DR. MAKHIJANI (by Telephone):** Well, it may
11 or may not need revision, but there are some
12 parts of that work plan that I think are
13 dependent on the site profile revision. There
14 are other parts that are not dependent. So
15 those parts will not need to be revised, but
16 some parts may need to be revised. We just
17 have to look at the revision of the site
18 profile, and then I can make a judgment for
19 you and send you a memorandum.

20 **MR. PRESLEY:** Okay.

21 We've gone through this today. Does
22 anybody have any stirring issues that this
23 site profile cannot be accepted?

24 **MS. MUNN:** My only concern is our ability to
25 take a look at the revision that's coming out

1 for Section Four and working on the assumption
2 that that revision will be available for
3 adequate review and technical discussion prior
4 to our working group meeting. And it does not
5 appear that either of the issues is
6 intractable. And it would seem logical for us
7 to make every effort and expectation to be
8 able to approve this site profile as a
9 recommendation to the Board in our upcoming
10 Board meeting assuming that that is a decision
11 following --

12 **MR. PRESLEY:** And there's no showstoppers in
13 any way stopping us going ahead.

14 **MS. MUNN:** Correct.

15 **MR. PRESLEY:** And so we've got that to go
16 through. Arjun's going to take a look at it
17 and get back with us before then. If there
18 are showstoppers, we stop right there and
19 start all over again. If there are no
20 showstoppers, in my estimation then I have no
21 problems with accepting this thing as is and
22 moving on to the SEC petition.

23 **DR. ROESSLER:** And are you suggesting that
24 we should accept it today or --

25 **MR. PRESLEY:** No, no. No, no, the 23rd.

1 **DR. ROESSLER:** -- because I think that we --

2 **MR. PRESLEY:** I want to meet, if everybody
3 can, I would like to meet the morning of the
4 23rd at nine o'clock at the hotel in St. Louis.

5 Christine, do we have time to set that
6 meeting?

7 **DR. BRANCHE:** Yes, you do. Wait a minute,
8 excuse me. There is time for it based on some
9 of the information that I received from
10 various people with my question about whether
11 or not they wanted to go to Mallinckrodt. It
12 was not clear that everyone from NIOSH, and I
13 have no idea about the SC&A staff, were
14 necessarily going to arrive the evening before
15 they were going to come --

16 **MR. PRESLEY:** We're going to find that out
17 right now.

18 **DR. BRANCHE:** So you can have it either the
19 morning of or the afternoon of the 23rd.

20 **MR. PRESLEY:** I would rather have it in the
21 morning if we possibly can, and I'll tell you
22 why. Everybody's going to be fresh. If we go
23 out and go through the Mallinckrodt thing,
24 they may be hot and sweaty, and everybody may
25 be tired by then. I would like to have it at

1 nine o'clock in the morning where everybody's
2 fresh; we've got at least four hours to
3 discuss this thing, and then if something,
4 that don't work, then we've got that night to
5 come back together again.

6 **DR. BRANCHE:** Unless somebody else wants a
7 work group --

8 **DR. ROESSLER:** That's motivation.

9 **MR. PRESLEY:** Arjun.

10 (no response)

11 **MR. PRESLEY:** Arjun.

12 **DR. MAKHIJANI (by Telephone):** Yes, Mr.
13 Presley.

14 **MR. PRESLEY:** Can you make it on the morning
15 of the 23rd?

16 **DR. MAKHIJANI (by Telephone):** Yes, I
17 believe I can do that.

18 **MR. PRESLEY:** All righty.

19 How's SC&A's -- I mean, not SC&A,
20 NIOSH?

21 **MR. ROLFES:** As far as I'm aware I'll
22 certainly be able to make myself available for
23 the meetings.

24 **MR. CLAWSON:** Larry just said you would.

25 **MS. MUNN:** Bright and early Monday morning.

1 **DR. BRANCHE:** Monday, June 23rd.

2 **DR. MAURO:** We will be wherever you want us
3 to be.

4 **DR. BRANCHE:** And I already know the court
5 reporter will be there.

6 **MR. CLAWSON:** Bob, may I offer a suggestion,
7 too. If this is the case, and as we go
8 through this, you need to give yourself some
9 time to be able to present this to the rest of
10 the Board members.

11 **MR. PRESLEY:** We have to do that.

12 **MR. CLAWSON:** I realize that but not five or
13 ten minutes because there's going to be --

14 **MR. PRESLEY:** I'll tell you what I'm going
15 to do. I plan on writing some type of a draft
16 presentation that says we accept or we don't
17 accept. If we don't accept, it will deal with
18 that. If we accept then we go through. But I
19 plan on writing the draft and trying to get it
20 to you all before we ever go to St Louis.

21 **MR. CLAWSON:** And I realize that. I just, I
22 know that lots of the other Board members have
23 asked numerous ones of us, because it's on any
24 site profile and so forth like that, you know,
25 questions of how are you guys addressing this

1 or so forth. And so these things come up. I
2 just want to make sure you have adequate time
3 to do it.

4 **MR. PRESLEY:** Yes.

5 **DR. BRANCHE:** And let me ask this because I
6 think Brad raised it. He anticipated,
7 certainly, my question. As you know there is
8 a work group update, that there is a provision
9 available. And Ms. Munn did this at that
10 Tampa meeting where a specific time was set
11 aside for her with Kathy Behling to go over
12 specific issues in an isolated timeframe to
13 deal only with Procedures.

14 Now is the time to tell me if you
15 would like to have a special set-aside time to
16 present to the Board. Do you want to use
17 PowerPoint, that kind of thing, do all of
18 that. I mean, I think this is a good
19 recommendation. You can do it in 30 minutes.
20 You can do it in 45 minutes. You can tell me
21 how much time. But now is the time to tell me
22 as I'm preparing the agenda.

23 **MR. PRESLEY:** I don't have PowerPoint. I'll
24 have to make my notes up and give them to Gen,
25 and Gen can -- if she doesn't mind doing that.

1 **DR. ROESSLER:** We could change it that day
2 if we wanted to.

3 **MR. PRESLEY:** Yes.

4 **DR. BRANCHE:** So you want, that's fine. We
5 can make provision for PowerPoint. Now the
6 question is do you want 30 minutes, 45 minutes
7 or an hour?

8 **MR. PRESLEY:** Why don't we shoot for 45
9 minutes?

10 Now, somebody said that they were not
11 going to be there on some certain days. Is
12 that a figment of my imagination or did
13 somebody say --

14 **MR. CLAWSON:** I leave the very last day.
15 I've got to leave by 12:30.

16 **DR. BRANCHE:** Oh, we wouldn't have this on
17 the last day.

18 **MR. PRESLEY:** That's what it was. I'm
19 sorry. So we need to make sure that Brad is
20 there.

21 Now, the other thing was, Mark, if
22 you're going to be there Monday, is there any
23 way, do you have anything to do, anything
24 coming up Tuesday?

25 **MR. ROLFES:** I'd have to check my calendar

1 back at work but off the top of my head I
2 don't have anything that I'm aware of.

3 **MR. PRESLEY:** What I'm trying to say is, you
4 know, other than hold Mark and other people,
5 if we could have this thing, we're having our
6 meeting on Monday, and then go into this
7 Tuesday, then that would give Mark a chance to
8 go home Wednesday.

9 **MR. ROLFES:** Don't worry about me.

10 **DR. BRANCHE:** I have to work with many
11 issues.

12 **MR. PRESLEY:** That's an issue that's Larry's
13 group.

14 **DR. BRANCHE:** Yeah, I can understand that,
15 but there are a number of pushy people to get
16 their stuff on the agenda when they want it.
17 So I'm just going to -- but you know I love
18 you, Bob, so -- actually, I love his wife,
19 too, so that could help. But let me just make
20 sure I'm understanding, Monday the 23rd you
21 want to begin at 9:00 a.m., but how much time
22 do you think they'll need? I'm looking for us
23 to leave around 12:30 or 1:00.

24 **MR. PRESLEY:** That's what I was going to
25 say. Why don't we go from 9:30 'til 11:00?

1 **DR. BRANCHE:** Nine to 11:30 or 9:30 to
2 11:00?

3 **MR. PRESLEY:** Nine to 11:30.

4 **DR. BRANCHE:** Yeah, that way people can grab
5 some lunch.

6 **MR. PRESLEY:** And that will give us an hour
7 and a half to grab lunch and get ready to go
8 on the tour.

9 **DR. BRANCHE:** Okay, that'll be good.

10 **MR. PRESLEY:** And as I understand it the
11 tour is going to be a facility tour also. Is
12 that correct?

13 **DR. BRANCHE:** It should take one hour to do
14 everything that we've been told is available
15 to us.

16 **MS. ADAMS:** There's not a facility per se.

17 **DR. BRANCHE:** There's a museum center thing,
18 but it's not a site tour like --

19 **MR. PRESLEY:** Right, right, I understand
20 that. But somebody's going to explain what --

21 **DR. BRANCHE:** I'm trying to get all the
22 particulars on that even today.

23 **MR. PRESLEY:** It's 20 minutes until 3:00.
24 We have some people that have to catch planes.
25 We have SC&A's working draft and Arjun has

1 just stated that he would like to go through
2 what OCAS sends us and then come up with more
3 comments. What I'm thinking about is let's
4 not start into these SEC petition comments
5 now, but wait until SC&A has had time to
6 comment this and that the working group has
7 had comment time to look at the information
8 that we're going to get, and we will start on
9 the SEC fresh down the road.

10 **MR. CLAWSON:** Well, that brings up a
11 question. As we go from the site profile to
12 the SEC, are we going to keep the same report
13 group people?

14 **MR. PRESLEY:** Well, my understanding, yes.

15 **DR. BRANCHE:** We made that decision at the
16 Board meeting when this work group was
17 created. It was agreed at that time, yes.

18 **MR. CLAWSON:** I just want to make sure.

19 **MR. PRESLEY:** Everybody's got too much up
20 here to stop and start all over again.

21 **DR. BRANCHE:** Do you have any concerns or
22 objections you need to --

23 **MR. CLAWSON:** No, no, I just want to make --

24 **MR. PRESLEY:** No, let's don't do that.

25 Let's keep the same people.

1 Does anybody have anything for the
2 good of the work group?

3 **DR. MAKHIJANI (by Telephone):** I'd just like
4 to clarify -- this is Arjun. I just want some
5 clarification. As I said earlier everybody,
6 the working group members do understand that
7 we are proceeding, since my understanding and
8 John's was we were authorized to look at the
9 SEC. We've prepared the work plan, and we're
10 proceeding on some of the items, not all of
11 them.

12 But we are, for instance, putting a
13 lot of work on understanding Table 7-1,
14 compiling the data, seeing what internal
15 data's available and things like that. So I
16 just want to make sure that everybody
17 understands that and is okay with it because
18 otherwise things will get very dragged out.
19 And, of course, it's the pleasure of the
20 working group, but that's what we're currently
21 doing.

22 **MR. PRESLEY:** As I understand it, you all
23 were given permission to do that when we
24 decided to, after the working group.

25 **DR. MAKHIJANI (by Telephone):** And if anyone

1 has comments on that work plan in the interim,
2 therefore, you know, potentially ^ that they
3 might have.

4 **MR. PRESLEY:** Thank you, Arjun.

5 Anybody else have anything?

6 (no response)

7 **MR. PRESLEY:** Mel, we appreciate you all's
8 help very much.

9 **MR. CHEW:** You're very welcome.

10 **MR. PRESLEY:** Mark, all you do.

11 **DR. BRANCHE:** We didn't deal with this in
12 the meeting today, but your write up of your
13 work group that Dr. Ziemer requested, I
14 believe that what has been requested, this is
15 going to go on the website. So I would
16 actually suggest something more along the
17 lines of a paragraph to a half a page
18 description of what the charge is and not so
19 much what your history of working together is.

20 **MR. CLAWSON:** It's hard to believe Dr.
21 Ziemer asked for three or four lines.

22 **MS. MUNN:** My instructions were three
23 sentences.

24 **MR. PRESLEY:** We'll say what Wanda said,
25 three lines, no more.

1 **DR. BRANCHE:** Are you finished, Mr. Presley?

2 **MR. PRESLEY:** Has anybody else got anything
3 else?

4 (no response)

5 **MR. PRESLEY:** One thing I'd like to say is
6 when we come together remember that this is a
7 living document. When we come together on the
8 23rd if the issues, make sure that they pertain
9 to what we are doing. I don't want to come in
10 on the morning of the 23rd and there'll be 15
11 or 20 more issues and we just have to stop and
12 beat the bushes on.

13 Yes, sir, Gene.

14 **MR. ROLLINS:** In regard to what you just
15 said, if there are issues, and I can't imagine
16 there wouldn't be some minor points of
17 discussion, will we have an opportunity to see
18 those prior to, I mean, the sooner that we
19 could see them the more expedient our
20 discussion would be.

21 **MR. CLAWSON:** Well, one of the issues is,
22 falls under the Department of Labor that we
23 kept hearing with Tonopah and other areas.
24 Those I'd really like to be able to see
25 something in writing that they explain, well,

1 that one's been taken care of. We've talked
2 about, you and I, but there's nothing been
3 official.

4 **DR. ROESSLER:** What was that, Brad?

5 **MR. CLAWSON:** One of the issues that came
6 out of this was in the earlier years at Nevada
7 Test Site, they used to take part of the
8 workforce and go to Tonopah, but also they
9 took some out to Area 51. As Area 51 doesn't
10 exist, become more nonexistent, that stopped.
11 But in the earlier years they were using
12 Nevada Test Site people to be able to help
13 perform a lot of the work and so forth out
14 there, same as Tonopah Test Site. And I sent
15 a letter to Jeff Kotsch on that. And he said
16 that he was going to look into that and would
17 get back with us. And I just wanted to make
18 sure that --

19 **MR. ELLIOTT:** There is a letter also from
20 Senator Reid's office to the Department of
21 Energy, the Department of Labor and to us at
22 NIOSH about this issue. And essentially,
23 we're waiting to see DOL's letter about the
24 facility coverage at Nevada Test Site. It's
25 DOL's responsibility to --

1 **MR. PRESLEY:** I understand that DOL has been
2 told to add the Tonopah facility, but that
3 Area 51 does not exist.

4 **MR. CLAWSON:** Right, and I just want to make
5 sure, you know, this is, to me this is a site
6 profile issue.

7 **MR. PRESLEY:** It is, but let me explain
8 something.

9 **MR. CLAWSON:** But it's also kind of --

10 **MR. PRESLEY:** Area 51 did not start off. It
11 was all the Tonopah Test Range there in the
12 early days. Area 51 really did not take off
13 and get its name until they started doing
14 classified --

15 **MR. CLAWSON:** The stuff we're not doing.

16 **MR. PRESLEY:** -- the stuff that they're not
17 doing up there. And then it came into being
18 an Area 51. In the early days, you know, to
19 me if somebody went to Tonopah and worked,
20 they could have been anywhere on the Tonopah
21 Test Range working.

22 And, Larry, if I'm not right there,
23 let me know.

24 **MR. ELLIOTT:** Well, I would just say that
25 what's pertinent here is to the site profile,

1 Brad, what's pertinent here for this working
2 group and its discussions about the site
3 profile is that our site profile has to pass
4 the covered facility designations. And that's
5 what we get done. That's what we're all
6 working toward a better version of. We cannot
7 step out of that and say, well, what are we
8 going to do about Area 51. What are we doing
9 about Tonopah? We can't touch those until
10 they become a legal covered facility
11 designation.

12 **MS. HOWELL:** It's a determination that can
13 only be made by the Department of Labor.

14 **MR. CLAWSON:** And through this process this
15 is how we have to get the Department of Labor
16 to make the determination. If not, we all
17 understand being with these different entities
18 is that problem. And it's hard for you guys
19 to be able to implement something and then
20 down the road, well, they might recognize
21 that. And I've seen some of the e-mails back
22 and forth. But that's just kind of some of
23 the stuff I wanted to make sure that, because
24 we've heard it so many times, I want the
25 petitioners to be able to understand that it

1 has been addressed by this group.

2 **MR. PRESLEY:** Very much so.

3 **FUTURE ACTIONS**

4 **MR. ELLIOTT:** What actions are owed here?
5 Did we commit anything from the discussion
6 earlier today that --

7 Gene, did you have any action items
8 that you committed to? I wasn't clear. You
9 were going to do --

10 **MR. ROLLINS:** Before they knew that they
11 were going to get a copy of the documents, we
12 were going to look at a few things.

13 But I think it's my concern for having
14 a structured back and forth dialogue would be
15 let them look at the documents which you have
16 now released. And then the concerns that they
17 have, if they can get those to me, if I can be
18 in a position to discuss those on the 23rd.

19 **MR. PRESLEY:** Well, that, too, or discuss
20 them prior to the 23rd and try to iron out
21 those issues so that when we get, you know, we
22 need to know what the issues were. I would
23 like for somebody to be able to say this is
24 what the issue is. We've ironed the issue
25 out. I don't want to get there on the 23rd and

1 find out that we're going to have to --

2 **MR. ROLLINS:** We need a dialogue prior to
3 the 23rd, and your response to the documents.
4 If they can get that back to us, then we can
5 start the dialogue.

6 **MR. ELLIOTT:** The actions owed here is NIOSH
7 to deliver the revised technical basis
8 documents and chapters that we have right now.
9 And then as soon as SC&A can identify any
10 issues that they still have with them, let us
11 know so that we can be prepared. And if not,
12 have already talked through some of them and
13 be able to express where we're at on those at
14 your meeting.

15 **MR. PRESLEY:** That's correct.

16 **MR. ELLIOTT:** And then I understood that
17 Arjun was going to take also the revised
18 chapters and rub them against his SEC profile
19 list and knock down what he could of, you
20 know, expand upon what he needed to.

21 **DR. MAKHIJANI (by Telephone):** I hope that I
22 can do that before the 23rd, but it depends on
23 how many revisions there are, and what I have
24 to do.

25 **MR. PRESLEY:** I have great faith in you,

1 Arjun.

2 MR. ELLIOTT: I think that's all that we --

3 MR. SCHOFIELD: Remember, you've got 24
4 hours a day to work.

5 MR. PRESLEY: Anybody else have anything?
6 (no response)

7 MR. PRESLEY: Thank you all for coming.
8 We'll see you, we'll see some of you up here
9 on the tenth.

10 DR. BRANCHE: Thank you very much. We're
11 adjourned.

12 (Whereupon, the work group meeting was
13 adjourned at 3:00 p.m.)

14

1 **LETTERS SUBMITTED INTO THE RECORD**

2 April 19, 2008, John Vance, Department
3 of Labor, EEOICPA, Washington, D.C.

4 Dear John,

5 In response to your e-mail request of
6 April 18, 2008, related to my issues with the
7 TBD and the site profile of Nevada Test Site
8 the following is the list of problems that
9 presently exist.

10 1) There is no site expert.

11 Information that was used to write the current
12 site profile was acquired from Mr. William J.
13 Brady, former head of RAD Safe NTS, from his
14 death bed. There were numerous other sources
15 that could have been used to obtain more
16 accurate and better information. However,
17 NIOSH chose to ignore those sources even
18 though I actively attempted to gather that
19 information for them. And even now it is only
20 through efforts by myself and Dr. Lyn Anspaugh
21 that this information is now being corrected
22 at personal expense to myself, which NIOSH was
23 paid handsomely to do.

24 2) Site profile fails to fully
25 articulate the many and varied types of

1 experiments that were conducted at Nevada Test
2 Site besides nuclear weapons testing there
3 were many many other types of research that
4 was conducted there, such as those tests at
5 the Nuclear Rocket Development Site, EMAD and
6 RMAD which was used for the purpose of
7 developing nuclear rockets, nuclear jets and
8 assorted types of nuclear reactor tests. Also
9 the weapons testing which involved underground
10 tunnel testing, underground shaft testing, and
11 down hole testing, stemmed and unstemmed which
12 pose all different problems. There were also
13 numerous above ground testing which also
14 created many re-suspension problems of above
15 ground contaminants (sic) which have not been
16 accurately addressed.

17 3) Site profile states there were no
18 bomb assembly activities or machining of bomb
19 components and parts. However, I have proven
20 there were numerous sites and places including
21 on-site bomb assembly and numerous locations
22 where machining did take place throughout the
23 testing period.

24 3a) The site profile states there were
25 RADX yards at various locations where RADX

1 procedures were done to the building and
2 equipment that were used for the testing.
3 However, I have produced scientists who used
4 those building and equipment who have
5 testified that no such procedures took place
6 or no such locations other than CP-6 and the
7 Mercury disposal yard were ever used in any
8 RADX purposes.

9 4) Site profile states that all
10 contaminated areas at the Nevada Test Site
11 were fenced and posted. However, I have
12 produced documentation from the DOE from as
13 late as 1996 that clearly states that no such
14 posting or fencing had been done anywhere on
15 the Test Site four full years after the
16 testing period.

17 5) Job classifications being used on
18 dose reconstructions are clearly dated post
19 1992, which was obviously not correct, as when
20 Bechtel took over for REECO many of the job
21 classifications had been changed and locations
22 of support areas had been changed and last of
23 all no weapons testing was done after 1992 as
24 well, so any reference to post 1992 job
25 classifications are totally inaccurate.

1 6) Site profile states that REECO
2 initiated a very aggressive and active BIO
3 ASSAY program and a medical full body count.
4 However, I have proven that BIOASSAY was
5 volunteer and only offered to those personnel
6 who were least likely to be exposed, and full
7 body count which was also volunteer was only
8 done to very few people who left employment at
9 the Test Site.

10 7) Site profile states that only those
11 people with Q- clearance worked in areas where
12 exposure was possible, however, I have proven
13 this also to be untrue, as I have produced a
14 REECO handbook which clearly states that red
15 and orange badges did work in all of the areas
16 along side Q- clearance badges as long as they
17 were escorted by a Q- cleared person.

18 8) Site profile does not fully address
19 areas of work and their importance in the
20 scope of man power that worked in these areas
21 examples: area 2 and area 3 shop areas, have
22 been minimized by describing them as two small
23 areas where a few butler buildings were
24 located, when in fact areas 2 and 3 each
25 encompassed over 80 acres a piece and had over

1 80 buildings each and was the daily work
2 location of over 700 people. Well 3 drilling
3 yard has not even been mentioned at all and
4 well 3 drilling yard encompassed over 60 acres
5 and was the work location of over 250 people.

6 9) Many areas such as the Tweezers,
7 Atlas and Super Kukla facilities are mentioned
8 by name in the site profile. However they are
9 not given any consideration in the tables
10 documents which the dose re-constructors use
11 to reconstruct dose.

12 10) The old site profile tells dose
13 re-constructors to ignore any neutron
14 radiation after 1962 because after open air
15 testing there were no sources of neutron
16 radiation, however, there were many sources of
17 neutron radiation after 1962, such as the BREN
18 tower and the HENRE Experiments after it was
19 relocated to area 25 and the BREN tower
20 experiments located in area 4 which was in
21 very close proximity to the Orange road which
22 was the original road to area 12 and beyond,
23 and was used daily by workers traveling back
24 and forth.

25 11) Original site profile states that

1 the soils on NTS were hard and rocky and
2 nothing grew there, however, the entire Yucca
3 flat is a very soft aluvia (sic) formation
4 that is soft enough to leave foot prints when
5 walked upon and hundreds of millions of sage
6 brush plants grow and are torn out of the
7 ground by high winds every day of the year,
8 which also contributes to the re-suspension.

9 12) Site profile does not address the
10 amount of construction activity that took
11 place on contaminated open air testing ground
12 such as the Yucca flats testing pads which
13 were all 30 acres a piece and usually 30 shots
14 per year not to mention the miles of access
15 roads and construction roads that were used in
16 the building of the pads it also does not
17 address the 1000 ton main drilling rig that
18 was 15 stories tall and dragged through the
19 desert by 6 bull dozers from one test hole to
20 the other test hole on a weekly basis which
21 required a 100 foot wide access roads to be
22 graded out in front of it for passage which
23 also contributed to the re-suspension.

24 13) Site profile describes post shot
25 in a very sterile and controlled manner where

1 state of the art radiation detection and the
2 extensive use of signs and in their
3 description of post shot recovery as a
4 singular one time only operation, when in fact
5 re-entry was actually done in numerous phases
6 as many as seven times. Example: 1st re-entry
7 was done for assessment of damage and
8 monitoring 2nd re-entry was done for quick
9 recovery of critical data 3rd re-entry was done
10 to stabilize building and leveling and total
11 recovery of data, 4th re-entry was done to
12 begin removing test buildings and trailers.
13 5th re-entry was done to set up post shot, 6th
14 re-entry was done to remove post shot, there
15 were no fencing other than the post shot drill
16 area and there were no state of the art
17 radiation detection until the post shot
18 operation was set up which usually took place
19 4-5 weeks after the original re-entry had been
20 done.

21 14) Site profile states that all the
22 radiation detection was done with state of the
23 art detection equipment however if you refer
24 to the YUBA incident you will find out that
25 the state of the art detection equipment was

1 actually broken and did not work and data had
2 to be brought into Las Vegas and be processed
3 through the EPA testing equipment to determine
4 what levels of radiation had taken place at
5 the NTS.

6 15) Site profile states that
7 information on film badge exposures was
8 unquestionable and accurate to a certainty.
9 However, former area 3 Manager, Glenn Claytons
10 [Identifying Information Redacted] upon
11 acquiring his records found very clearly in
12 writing on DOE and REECO documents that film
13 badge information had been extensively
14 modified to keep from laying people off from
15 over-exposures. This was not an isolated
16 event but had been a common on-going practice
17 with many employees as attested to by the
18 information she was given by the DOE.

19 16) Site Profile does not address the
20 numerous toxins and chemical exposures
21 employees were subject to as in example of my
22 case that was uncovered by the DOL where it
23 was discovered after 7 long years that I had
24 been telling the truth of my exposures to
25 Lithium Hydride, Mercuric Chloride, Arsenic,

1 Cyanide, Beryllium, Benzene and Asbestos based
2 products. Even though it was admitted by the
3 DOE that they had buried in the land fill all
4 of the MDSO sheets and information related to
5 the toxins and chemicals the site profile
6 fails to address these exposures which people
7 would have encountered in the work place.

8 17) Site profile fails to articulate
9 the size and scope in acreage or square miles
10 the size of the NTS, or the amount of testing
11 that took place there. Examples: site
12 profile does not mention area 2, area 3, area
13 12 and area 6 however they fail to fully
14 explain how these four areas also encompassed
15 the rest of the site which would have included
16 area 5, 4, 1, 7, 8, 9, 10, 19, 20, 17, 15, 25,
17 and 27 in all the areas not listed. Which are
18 areas that nuclear testing also took place.

19 18) Information used by does re-
20 constructors from the site profile also uses
21 employee time cards, which do have an area of
22 the card that denotes location of work.
23 However, NTS has always used the positive cash
24 flow system which ear marks funds to each
25 individual test and using these time cards as

1 a source of location of employees work would
2 be sufficient provided the work was done to
3 perfection, but this was not the case.

4 Example: If a drill rig in the course of
5 drilling the main hole was to encounter what
6 is termed a dog-leg or a bend in the hole this
7 would require the drill rig to remain over the
8 hole for an additional 2-3 weeks reaming out
9 the hole so that the 160 foot rack could get
10 by the dog-leg, if a drill was to remain on a
11 hole 3-4 weeks past the allocated time period
12 it would exhaust the funds for that test and
13 the test would continue to go on, however it
14 would be necessary to take money allocated
15 from other tests and use it to conduct work on
16 that site which would show an employee working
17 at the site of the money rather than the site
18 of where he was actually working. So in
19 closing it is better said that a time card
20 does not denote where an employee worked but
21 rather the source of the money. Even in the
22 tunnels there were many cases where tunnel
23 shots went broke and funds were borrowed from
24 the Yucca flats tests to finish the project.

25 19) Site profile on one page states

1 that tunnel environment was very dry so
2 therefore no consideration should be taken for
3 Tritiated water however four pages later when
4 addressing the possibility of suspended
5 radionuclides, the tunnels are described as
6 very wet and water being used very liberally.
7 These two statements are very conflicting in
8 themselves and make no sense whatsoever.

9 20) Site profile describes the tunnels
10 as mining operations and the employees there
11 as all miners. (Facts) of what the tunnel
12 environments really were the tunnels were only
13 a mining operation when being constructed and
14 when the test drifts were being mined out.
15 The underground tunnels other than the test
16 drifts were in fact underground laboratories,
17 the main tunnel which was approximately 30
18 feet in diameter and the alcoves which could
19 be 60 feet in diameter were used over and over
20 again. The tests drifts which were run off of
21 the main drift were used only once but the
22 main tunnels and the main alcoves were used
23 over and over again as many as 20 times. Site
24 profile fails to articulate what the tunnels
25 really were or what was type of people who

1 worked there which were in fact more than just
2 miners, in fact there were Pipe Fitters, Sheet
3 Metal Workers, Lineman, Electricians,
4 Carpenters, Laborers, Operating Engineers, Set
5 Up Men, Scientists, RAD safe personnel,
6 Hygienists, Mechanics and many other personnel
7 which would better be referred to as
8 underground workers and not necessarily just
9 miners which in fact were a minority of those
10 personnel who worked underground.

11 21) Site profile does not address the
12 practice of re-use of equipment and material
13 which was re-used over and over as long as
14 they would last until broken. And in some
15 cases this equipment and material became
16 contaminated with radiation or toxins, but
17 were still used.

18 22) Site profile does not address the
19 environmental dangers one might have been
20 exposed to such as the raw diesel exhaust put
21 off by diesel motors used underground prior to
22 1988 that were not equipped with catalytic
23 converters which would have abundantly
24 contaminated the air with Benzenes and Carbon
25 Monoxides as well as the extensive use of PCB

1 for electrical transformers. Which some times
2 exploded and the use of PCB in hydraulic
3 systems where they were used. As well as the
4 extensive use of Arsenic treated woods and
5 Mercuric Chloride treated canvases and the
6 wide use of Asbestos products and other
7 substances such as Vistanex and unlabeled
8 Beryllium alloyed metals and light bulbs.

9 23) Site profile does not address the
10 time periods that people spent on-site.
11 Examples: a tunnels test where people were
12 often required to work double and triple
13 shifts and this extra time was not taken into
14 consideration for exposure times.

15 24) Site profile does not fully
16 address the various noble gases that employees
17 may have come into contact with nor the
18 possibilities where noble gases might have
19 been present. Such as Krypton, and Xeons
20 which would have been near the floor of the
21 tunnels because they are heavier than air and
22 would not have been purged because the gas
23 seal plugs has to be removed before the air
24 supply lines that supplied the air used to
25 purge the tunnels could be reconnected as the

1 air supply lines were disconnected by any
2 where the gas seal plugs were located.

3 25) Site profile clearly states that
4 no employees from Culinary or Clerical types
5 could have encountered exposure, (Facts)
6 Clerical types from Holmes and Narver and
7 REECO and DNA and DOE and from assorted test
8 labs often sent clerical types into the
9 testing areas to deliver documents or forms
10 and the NTS collective bargain agreement
11 clearly stated that in the event any employee
12 who was required to work in excess of 5 hours
13 without a break would be served a hot lunch in
14 place delivered and served by culinary
15 personnel.

16 26) Site profile fails to address
17 employees who worked in area 51 (the site that
18 does not exist) however area 51 does exist and
19 was part of the NTS until 1999 when the land
20 realignment agreement changed the boundaries
21 of the NTS which excluded area 51 All of the
22 personnel working in area 51 were hired by
23 REECO and were processed through Mercury and
24 they wore DOE badges for two to three months
25 before their area 51 clearance was granted.

1 They came and went to area 51 through the
2 Mercury gate just like every one else, their
3 paychecks were REECO paychecks funded by DOE
4 appropriations funds and all the equipment
5 used in area 51 was DOE REECO equipment and
6 the general contractor for area 51 was REECO,
7 and the General Managers name was [Identifying
8 Information Redacted] who was a REECO general
9 Manager who worked under [Identifying
10 Information Redacted] and [Identifying
11 Information Redacted] just like all the other
12 area managers did. So therefore area 51 was
13 very much a part of NTS and funded and
14 operated by the DOE and REECO just like the
15 rest of the NTS and therefore should be
16 included in the EEOICPA.

17 27) Site profile lists ten tests that
18 were known to vent but for some unexplained
19 reasons are not allowed. I know for a fact
20 that some of these tests are listed as
21 incidents under investigation and I can
22 understand in a court of law that no
23 conclusion can be brought from an incident
24 under investigation, however we are not trying
25 to resolve an incident closure but we are

1 concerned about contamination and
2 contamination was caused by these ten tests
3 not listed. The site profile cannot be
4 accurately built as long as these ten tests
5 are not allowed. It is understandable that
6 the results responsibilities cannot be
7 determined at this time of who is at fault but
8 we feel that any contamination of
9 radioactivity should be allowed on the site
10 profile in order for it to be totally
11 accurate. So we would request that the
12 exposures from these ten tests be included in
13 the site profile.

14 28) Site profile has in various
15 locations had drawings taken from billboards
16 on the NTS that were not drawn to scale,
17 however NIOSH has introduced to these drawings
18 the scale to be used by dose re-constructors
19 which are severely flawed because the drawings
20 were not drawn to scale in the first place.

21 29) Site profile does not explain or
22 understand the mechanics of the tunnel air
23 supply, the air supply in the tunnels was
24 unique in the fact that it is used no where
25 else in the world other than the NTS. The

1 original air supply blowers on top of the Mesa
2 were originally designed for a mile deep
3 tunnel, however over the course of the years
4 the tunnels expanded into many miles and the
5 air supply was never up graded and as the
6 tunnels became larger the air supply became
7 less adequate and it would be a stretch to say
8 that three air changes a day took place. The
9 system used on these tunnels was the supply
10 source pumped air to the back side of the
11 drift forcing the air to migrate back out
12 through the portal which as I said was done no
13 where else other than the NTS.

14 30) Site profile does not take into
15 consideration any possibilities of radiation
16 exposure by way of air conditioning systems on
17 the NTS, noble refrigeration gases are known
18 gases that can become contaminated and could
19 create exposure problems such as those
20 discovered in the dismantling of Super Kukla.

21 In conclusion, I have attempted on
22 numerous occasions from the beginning of
23 EEOICPA program to bring this information to
24 the attention of DOL and NIOSH during my
25 interviews and numerous conversations by

1 telephone and in person to various personnel
2 from the numerous entities involved in EEOICPA
3 to no avail because no one really seems to
4 want to resolve these errors and flaws in the
5 Site Profile. Only recently has the
6 Presidential Advisory Board assigned a site
7 expert Dr. Lyn Anspaugh who I am presently
8 working with to resolve these numerous
9 problems contained in the Site Profile.

10 All of the above can be confirmed by
11 contacting Dr. Lyn Anspaugh at (801) 558-9489
12 or (702) 616-0914.

13 I have made two appearances before the
14 Presidential Advisory Board here in Las Vegas
15 and one appearance before the NTS working
16 board and attempted to resolve the issues I
17 have mentioned, I have also sent letters and
18 e-mails to Mr. Larry Elliott and have had
19 articles in the Las Vegas Review Journal and
20 have informed Nevada Senator Harry Reid.
21 However, I have not been able to have these
22 changes made in the Site Profile and TBD, even
23 though all of the above has been proven and
24 verified as fact.

25 All of the present applicants for

1 compensation under EEOICPA for dose
2 reconstruction are being done based on the
3 flawed information that presently is the Site
4 Profile and TBD documents and unless these
5 changes are not corrected these dose
6 reconstructions will most assuredly have to be
7 done many more times.

8 When Congress passed the EEOICPA Bill
9 there was a spirit of good intent and fairness
10 however, NIOSH has from the beginning been
11 very mean spirited and possibly even criminal
12 in their approach to doing dose reconstruction
13 as attested to by the Shelby Hallmark E-mails
14 between his office and the OMB where active
15 discussions were carried out on how to stifle
16 the process and delay payments as attested to
17 by the hearings held by former Congressman
18 Hostettler immigration and border security
19 hearings where Shelby Hallmark explained away
20 the discussions as brain storming rather than
21 a real attempt at stopping payments to well
22 deserving claimants.

23 John, I sincerely hope that you and
24 Pete Turcic really want to get to the bottom
25 of the problems that are presently delaying

1 the process of an accurate dose reconstruction
2 of former Nevada Test Site applicants for
3 compensation under EEOICPA and I thank you and
4 Pete for the opportunity to bring these
5 problems of the Site Profile to your attention
6 and hopefully resolve this on going problem.

7 Sincerely, [Identifying Information
8 Redacted] Representing claimants of Nevada
9 Test Site.

10 (Whereupon, the second of four letters was
11 entered into the record:)

12 April 27, 2008, John Vance, Department
13 of Labor, EEOICPA, Washington, DC.

14 Dear John, Here are some more issues
15 with the site profile of the Nevada Test Site.

16 31) 4 issues.

17 (a) Employee risk levels are not
18 addressed -- EXAMPLE -- First responders like
19 Fire fighters, paramedics and Guards,
20 industrial hygienists, and Rad-safe safety
21 inspectors all had open badges and were
22 cleared to access any and all areas. Areas of
23 worker access is not addressed.

24 (b) There is a difference of risk
25 level difference between people who worked in

1 Mercury opposed to those who worked in the
2 forward operations areas.

3 (c) There is even a risk level
4 difference between support personnel like
5 culinary and clerical who worked in Mercury
6 and those who worked in area 12 facility doing
7 the same jobs.

8 (d) There is a different risk level of
9 clericals who worked in area 2 and area 3
10 between REECO and H&N and Lab personnel.

11 (e) There is even a difference between
12 the crafts such as sheet metal and other
13 crafts, because in the case of sheet metal.
14 They had one shop to cover the entire site
15 where as other crafts had dedicated shops for
16 each area.

17 In short all test site employees need
18 to have an assigned risk level based on areas
19 of access and areas of work and possibilities
20 of exposure based on location and travel that
21 was required to arrive at their location of
22 work.

23 32) Waste disposal and storage has not
24 been fully addressed. There were numerous
25 burial pits and waste storage areas that pose

1 environmental and health hazards that have not
2 been fully identified by location or what risk
3 they pose to workers.

4 33) 4 issues

5 The use of coworkers records to do
6 DOSE where no records of worker exist is
7 flawed as

8 (a) the coworkers name and job
9 classification has been redacted from the
10 individuals DOSE report. QUESTION--What
11 defines a coworker?

12 (b) any one who comes through Mercury
13 gate regardless of job classification?

14 (c) Some one who might have worked in
15 the area regardless of job classification?

16 (d) Another worker from the same
17 craft?

18 (e) The work partner of the worker?

19 All of these scenarios are flawed.

20 REASON-- None of these scenarios are
21 acceptable unless the physical location of
22 work is identified as each area such as 2 and
23 3 and 12 had ongoing test areas other than
24 just 2 and 3 and 12, some times as many as 5
25 and 6 different test at different locations at

1 any given time In many areas other than area 2
2 or 3 or one tunnel. Posing different Risk
3 levels. So how can NIOSH use coworkers
4 records when it would require a perfect
5 scenario of a full time partner from the same
6 craft working in exact areas at the exact same
7 time doing the exact same thing? Without such
8 perfect scenario, any coworker information is
9 strictly speculation.

10 34) True re-suspension risks. SC&A
11 site review identifies many areas of the site
12 to have higher levels of contamination than
13 other areas. EXAMPLES--Area 2 and 3 shop
14 areas show high levels of Cesium pools from
15 open air testing. The site profile does not
16 fully address the risk level of employees who
17 worked in this highly radioactive area opposed
18 to those who might have worked in cleaner
19 areas such as Mercury camp.

20 35) 4 issues

21 Site description does not assign risk
22 levels to employees of the Nevada Test Site.

23 EXAMPLES (a) Employees who worked in
24 the Operations and NRDS areas were most
25 assuredly at more risk than those who worked

1 in camp Mercury.

2 (b) Those culinary and Clerical and
3 support personnel who worked carrying out the
4 actual test.

5 (d) RESEARCH AND DEVELOPMENT SECTION--
6 Labbs (sic) such as LLL, LANAL, SANDIA, GE,
7 WESTINGHOUSE, JAYCORE, DNA, DOE, EG&G and PAN
8 AM. All of the above mentioned sectors should
9 have dedicated risk levels, however even this
10 might be difficult as some workers from the
11 identified sectors often cross over to other
12 sectors in the course of their duties.

13 37) 5 issues--Environmental risks are
14 not fully identified

15 EXAMPLES (a) The test site had many
16 wells which were used for what ever water
17 needs that were necessary from potable
18 drinking waters to water needed for
19 construction needs.

20 (b) Evaporator ponds were on site used
21 to evaporate away tritiated contaminated
22 waters, mostly from draining the tunnels

23 (c) Rain fall, snow and wind erosions
24 have not been fully addressed as well as
25 possible contributors to contamination.

1 (d) Problems of contamination that
2 exist on dry lake beds which become unstable
3 during the dry season have not been addressed
4 in re suspension activities. Dry lake bed in
5 area 5 was site of some above ground test.

6 (e) Animal studies from cattle such as
7 cows and horses and wild life are not
8 addressed, or reports included in site profile
9 on animal Biological Studies that were done on
10 site.

11 (f) Radiation hazards from grass fires
12 such as polonium which is known to happen when
13 plants of alkaloid species burns. All Nevada
14 Test Site plants are of the alkaloid species,
15 and when burned during grass fires they emit
16 polonium contaminations. As well as very
17 active re-suspensions of Plutonium and other
18 radioactive Alpha and Beta solid particulates
19 which could have been a hazard to those who
20 were charged to bring them under control. Such
21 as firemen.

22 38) Many types of operations have not
23 been addressed or the risk they posed--

24 EXAMPLES

25 (a) Pulling the pig--where LANAL used

1 a special device to pull the rack cables out
2 of the test hole after the shoot, these cables
3 were highly radioactive and required the
4 services of people to cut them into lengths
5 and box them up to ship to lab, the time one
6 was allowed to work in this area was 2
7 minutes.

8 (b) Replacing truck beds that were
9 used to transport radioactive drilling bits.

10 39) 2 issues

11 Waste storage burial or management
12 sites not fully addressed or identified.

13 EXAMPLES--

14 (a) Old craters used as storage sites
15 for contaminated materials.

16 (b) Storage yards for set up materials
17 like cable storage and stairs landings and
18 security screens, mud boxes, drilling bits for
19 drilling both new drill sites and post shoot
20 equipment set up.

21 40) Reuse of equipment and materials
22 such as shock mounting alpha stations test
23 trailers generators, Portable AC units, water
24 tankers and rack assembly towers. NIOSH has
25 disputed this risk based on information

1 provided by Martha DeMarre, who provided
2 information that such equipment and materials
3 were processed through nonexistent RADAX
4 yards.

5 LANAL setup scientist Ron Sharp and
6 REECO supervision who actually did the work
7 and are testifying from first hand experience
8 rather than archived library second hand
9 information, have all testified that the ALPHA
10 station and materials and test set up
11 equipment was simply moved from one test area
12 to the other without being processed through
13 the RADAX yards claimed to exist by Martha
14 DeMarre from the DOE library of records.

15 As required by EPA and DOE any RADAX
16 yard requires a concrete slab with drains to a
17 holding tank to collect and dispose of
18 contaminated particulates and granules. Area
19 6 does have such a facility, but was never
20 used for Yucca Flats down hole test trailers
21 and ALPHA stations. One main reason being is
22 that the door height to the facility was 12
23 feet. And the bay was barely 16 feet wide.
24 ALPHA stations were 20 feet high and 20 feet
25 wide which would have been impossible to pass

1 through such a bay. And there were no slabs
2 or holding tanks in area 3 where RADAX could
3 have been done in the area of area 3. Test
4 set up buildings and equipment were simply
5 moved from one site to the other. Shock
6 mounting electromagnets pulse shields tie down
7 ropes were moved back to the Carpenter shop.
8 Stairs landings security screens and cable
9 boxes were sent to the storage yard. Assembly
10 towers were sent to the tower storage yard.
11 ALPHA stations and test trailers were sent to
12 their storage areas when not in use--which was
13 rare--and none of them were ever RADAXED in
14 any of these storage areas as their (sic) was
15 no way to collect the contaminates. No RADAX
16 was done on the test pads either---If it had
17 been done it would have been an EPA violation.
18 As post shoot would have had to walk through
19 the contamination to perform their work.

20 41) 4 issues

21 Site history and different types of
22 Nuclear bomb and reactor tests not fully
23 identified--EXAMPLES

24 (a) Atomic Bomb, Hydrogen Bomb, or
25 Neutron Bomb.

1 (b) Down Hole steamed, Down hole un-
2 steamed.

3 (c) Pipe shot, Rack shoots, Shaft
4 shoots or tunnel shoots from outside of
5 mountain or from alcove inside of mountain.

6 (d) Atomic Jet reactor test, atomic
7 rocket reactor test of bare and shielded
8 reactor test, all of these types of reactors
9 posed different challenges and created very
10 different types of exposure risk.

11 42) 3 issues

12 Some tests like Tweezers, Super Kukla
13 and HENRE test are mentioned by name only, But
14 are not listed in the tables as to their risk
15 value or what type of radiation they put off.

16 It was explained to me that the site
17 profile and TBD was the base of information to
18 do the DOSE reconstruction.

19 It stands to reason that the DOSE Re-
20 constructors would use the tables within the
21 documents to arrive at the total DOSE of an
22 applicant.

23 The mere mention of a site by name
24 only without supporting information does not
25 provided (sic) the person doing DOSE any

1 tangible information to do DOSE reconstruction
2 without supporting information within the
3 tables that list such exposure information and
4 value of Risk involved.

5 43) 3 issues

6 Tunnel and shaft descriptions are
7 flawed, and very incomplete.

8 EXAMPLES-- (a) Shafts were sometimes
9 in granite formations as opposed to volcanic
10 formations such as the tunnels in area 12.

11 (b) some tunnels like "T" tunnel were
12 very wet as opposed to "P" tunnel which might
13 be described as very dry. Or "N" tunnel which
14 had both wet and dry areas, depending what
15 part of the tunnel you were in, and what time
16 of the year you were there.

17 There is no one size fits all
18 description when addressing the environs and
19 water problems or re-suspension of radio-
20 nuclides when doing DOSE Reconstruction for
21 underground workers.

22 (c) The assay reports of the minerals
23 of the shafts and tunnels are also missing
24 such as volcanic of limestone or sandstone.

25 COMMENT--Each of the listed minerals

1 and earth substances react differently to
2 radioactivity and each pose different types of
3 problems such as volcanic ash containing
4 levels of Beryllium and Asbestos which both
5 pose additional problems along with
6 radioactivity.

7 44) 3 issues

8 Radioactive hazard sites in Mercury
9 have not been fully addressed such as:

10 (a) Replacement repair and disposal
11 yard--Some times referred to as the REPO
12 Depot--where equipment was refurbished sold or
13 destroyed. This location would have been
14 where dust particulates and granules would
15 have been washed off the materials and
16 equipment and where RADAX would have been
17 carried out.

18 (b) The samples Building where core
19 samples were brought and studied in Glove
20 boxes and stored for records.

21 (c) There were also machine shops run
22 by various labs in Mercury where Bomb and
23 reactor repair and parts replacement were done
24 and other machining of Nuclear Research and
25 development metals was done.

1 45) The risk of Alpha and Beta has
2 been severely minimized by explaining a thin
3 piece of paper was sufficient to protect one
4 from exposures from alpha and beta radiation.
5 The statement that one could protect
6 themselves from Alpha and Beta radiation with
7 some thing as simple as a piece of paper
8 grossly underscores the real risk of alpha and
9 Beta radiation particles. True that the paper
10 would be possibly sufficient shielding to one
11 skin, but hardly addresses the risk of an oral
12 intake of those same particles. If one was to
13 breath into their lungs or ingest through the
14 mouth to ones stomach of Alpha or Beta
15 particles.

16 There was a very high risk of
17 ingesting such radio-nuclides at the Nevada
18 Test Site from re-suspended particles from
19 wind and air lines and while eating ones lunch
20 or even drinking the water from the water
21 cans. The dangers of Alpha and Beta or
22 tritted water have not been fully addressed
23 in the site profile.

24 (14 principals (sic) which explain 46
25 issues this letter)

1 Thank you signed [Identifying
2 Information Redacted].

3 (Whereupon, the third of four letters was
4 entered into the record:)

5 May 6, 2008, John Vance, Department of
6 Labor, EEOICPA, Washington, DC.

7 Dear John, This is the last of the
8 principle (sic) issues and will be following
9 up in the future after Sanford and Cohens
10 final report providing you with the technical
11 issues.

12 46) Maps--Site profile and TBD does
13 not have adequate maps to show the
14 contaminated areas of site. SC&A has such
15 maps contained in the 153 page overview they
16 did, there are many very contaminated areas on
17 the site where one could get much higher
18 background readings. In order for the site
19 profile to be accurate the maps should be part
20 of the DOSE reconstructions process,
21 especially where the base camps are located in
22 such contaminated areas.

23 47) 4 issues--People Living on site,
24 Site profile does not explain how many people
25 lived on the site full time, their (sic) were

1 full time residences at (a) Mercury camp. (b)
2 Area 12 camp (c) Tonopah Rocket test range and
3 (d) Area 51. Addressing this would be a more
4 accurate reading especially for those who
5 resided at Area 12 where air born (sic) radio-
6 nuclides would have been greater than Camp
7 Mercury or radio-nuclides that would have been
8 greater at Area 51 than Camp Mercury or radio-
9 nuclides that would have been greater at Camp
10 Mercury than the TTRTR site.

11 48) Weather conditions on the Nevada
12 Test Site. Site profile does not have an
13 accurate report of the rain fall snow fall
14 temperatures (sic) or wind conditions of the
15 sit by site or by areas with in the site, this
16 would address the problems that are caused by
17 erosion from wind and rain and melting snow
18 which could disturb contamination left behind
19 by open air testing.

20 49) Schematic and Drawings. Site
21 profile has some schematic drawings, but these
22 drawings are lacking in scale and accuracy,
23 unless drawings are to scale and accurate,
24 they should not be used by DOSE re-
25 constructors.

1 50) 3 issues--List of Rad safe staff,
2 (a) Site profile and TBD does not have a
3 roster of rad safe personnel or (b) their
4 classifications such as fully qualified rad
5 safe person or trainee rad safe personnel. Or
6 (c) the amount of man power by numbers or a
7 list of their duties and responsibilities on a
8 day by day basis. This is necessary to prove
9 REECO had the man power to do all they said
10 they did on a day to day basis.

11 Nevada test site is almost as big as
12 Rhode Island in size and would require a
13 substantial force of man power to accomplish
14 the daily operations of Rad safe that REECO
15 claims they did, especially when 8 to 10 tests
16 were going on simultaneously, not to mention
17 the daily back ground reports that were
18 required of the over all site conditions.

19 51) Open air Testing debris like
20 towers and bunkers--Site profile does not
21 address the amount of open air testing debris
22 like towers and tower foundations, these areas
23 are contaminated and people worked on clean up
24 of these locations. This type of work did
25 pose a risk and had time limits as to how long

1 you could work in area.

2 52) 3--issues--Tunnel drawings and
3 schematics, Site profile and TBD does not have
4 tunnel schematics, these are important as they
5 explain just exactly what tunnels are and give
6 an idea as to the threats of exposures like
7 (a) tritiated water and (b) Nobel (sic) gases
8 during reentry, visual schematics are much
9 better than written explanations as it will
10 show how many (c) radiation gas seal plugs
11 were used and where they were located in the
12 tunnels. These drawings should also show the
13 air supply migration routes from supply exit
14 to the portal which would better explain the
15 Purging capabilities of the air supply system.

16 53) 2 issues--Site Profile does not
17 have a foot print drawing of down hole
18 testing, this is important because it will
19 show (a) the amount of ground that was
20 disturbed during grading and what part was
21 fenced during the post shot and (b) what part
22 was fenced in general. It would also most
23 important show the acreage and size of test
24 pads. The generalized description of a couple
25 graded off areas is totally false and very

1 misleading that exist in the site profile.

2 54) 2 issues--Site profile does not
3 have any chronology on down hole tests and (b)
4 It also has no chronology on shaft and tunnel
5 tests as well. All three chronologies would
6 address the time span and identify risk time
7 points as well as to risk locations of
8 exposure possibilities. Site profile is
9 totally lacking in its description of what
10 actually took place and exactly how it was
11 accomplished.

12 55) 4 issues--Site profile (a) has no
13 schematics on the tunnel and shaft air supply
14 system. This is important because it will
15 explain how the tunnels and shafts were purged
16 and when the main air lines were disconnected
17 and reconnected, and what the main air supply
18 equipment capabilities were related to air
19 changes.

20 Site profile explains how the tunnels
21 and shafts were purged by stating that they
22 were purged by the air supply system, (b) But
23 do not give details about the capabilities of
24 the sir (sic) supply system or what its cubic
25 per minute were nor the amount of cubic

1 displacement the tunnels actually had.

2 (c) Site profile is severely lacking
3 in details about tunnels environments as well
4 as space they occupied. (d) Or exactly how
5 water was removed that came through the roof
6 and side walls and floors of tunnels.

7 56) Site profile does not have any
8 drawings showing the foot print of a post shoot
9 and what parts were fenced and what parts were
10 not fenced or where RADAX entry and exit
11 change station were located or how they worked
12 related to the mud box area and the change
13 shacks and tool cribs and sleeping quarters
14 and lunch room which was always on post shoot
15 because post shoot was a 24/7 operation from
16 start to completion. Post shoot operations
17 were 24/7 and people worked sleep and ate from
18 start to finish regardless of date, day, week
19 or month, otherwise holidays included.

20 57) Site profile does not address the
21 Evaporator ponds where tritiated water was
22 sent to be evaporated off into the air and
23 prevented from getting into the water table or
24 how many and what acreage they encompassed.

25 58) 2 issues--Site profile does not

1 have any drawings on gas seal plugs, these are
2 important because they will show (a) if any
3 noble gases could have been trapped behind
4 them and (b) just when they were purged from
5 the tunnels. They will also show the height
6 of the crawl tubs related to the floor
7 elevation of the tunnel which would be an
8 obstacle for heavier than air Nobel (sic)
9 gases to be purged from behind the gas seal
10 plugs and fully explain just when Nobel (sic)
11 gases might have been able to move.

12 59) 4--issues--Test site Fires--(a)
13 Site profile lacks any reference to radiation
14 hazards from assorted fires such as Machine
15 shop and building fires (b) Records library at
16 DOE indicate that records about building fire
17 incidents are missing and all grass and forest
18 fires only address the environmental aspects
19 and (c) no reports of radiation monitoring
20 were ever filed where grass and forest fires
21 took place, even in areas known to be highly
22 contaminated.

23 (d) Firemen who responded to these
24 fires would have been exposed in both grass
25 forest and Building fires, especially machine

1 shops and samples storage areas. (e) some
2 firemen bio assay records are non-existent and
3 some full body scans are missing even though
4 their records claim they had full body scans
5 and Bio Assays.

6 60) Site Profile and TBD documents do
7 not have an information about drinking water
8 supplies or reports on the wells and lagoons
9 and ice houses that used local well water from
10 the site wells.

11 61) Site profile does not address the
12 open air site clean up of open air testing or
13 why it was even attempted, although an attempt
14 was made to clean up grounds soils--sand clay
15 and loose rock--where open air testing took
16 place, there is no report as to the findings
17 of such an effort. Special equipment was
18 developed to accomplish this task.

19 62) Special radiation clean up
20 equipment. Site profile does not explain for
21 what purpose the test site had remote control
22 scoop equipped tractors at CP 6 or why they
23 were necessary to have at all. Such equipment
24 did exist it was remote control metal track
25 like a bull dozer and had a television mounted

1 in the drivers window and was driven and
2 controlled by remote control from a safe
3 location. They were all painted white in
4 color.

5 63) Crafts equipment and materials not
6 under control of Radax procedures. Site
7 profile does not address the equipment and
8 materials provided by crafts.

9 EXAMPLES--Shock mounting material like
10 Hexhale an aluminum alloy material that was
11 originally designed as air craft fuel tank
12 baffles was used as a shock absorber, 1-1/4
13 nylon inch rope used to tie down buildings and
14 equipment, Visqueen covered 3/4 inch plywood
15 that was laid on the ground under shock
16 mounting as a shield against electro magnetic
17 pulse put off by bomb when it went off. All
18 of this material was brought to and removed by
19 the Carpenters, and it was refurbished and
20 stored in the Carpenter shops and was never
21 radsafed or even checked. As it was the first
22 thing to be removed from the test pad after
23 the test.

24 Other things that were brought on
25 station and removed by crafts were portable AC

1 units used for the Alpha stations and test
2 trailers, portable generators, air
3 compressors, water tank--old gas tractor
4 trailer--Porta-potties and step down station
5 trailers used as step down stations and 440
6 switch gear electrical transmission lines used
7 on step down trailers as well as what ever
8 Coaxial and fiber optics that could be reused.

9 All of the items listed were brought
10 to the test pad by the crafts and removed and
11 stored by the crafts such as operating
12 engineers sheet metal and pipe fitters
13 specialty services and Carpenters shops. Many
14 of these items had been contaminated and were
15 removed and stored at designated shops with
16 out been checked for contamination or cleaned.

17 64) Site profile and TBD documents
18 uses the metric units to describe lengths,
19 heights and distances. The Nevada Test Site
20 prior to 1992 never used the metric unit for
21 the following reasons, all units of
22 measurements used prior to 1992 were the
23 standard 12 inch unit foot and 16 unit inch,
24 all survey and elevations and distances were
25 surveyed in using the 10 units of a foot with

1 10 units of the 1/10 of a foot known as
2 engineer scale--Example a foot and a half
3 using standard English measure of a foot and a
4 half were written down as 1 and ½ foot or one
5 foot six inches (1 ft 6 in), engineer scale
6 would write the same distance down as 1.5==one
7 and a half foot or 1.50 one foot six inches =
8 or 1.500.==one foot and 5/100's of a foot.
9 However, when you write down a meter and a
10 half it is also written down as 1.5 (one and a
11 half meter) 1.50 (one meter and 50 centimeters
12 (sic)) or 1.500. (one meter and 500 milli
13 meters (sic)) because these units of measure
14 (engineer scale and metric) are all written
15 down exactly the same, this causes a lot of
16 very big mistakes, especially when you
17 consider one and a half foot in engineer scale
18 = 18 inches and one and a half meters == 56
19 inches, over triple the distance.

20 The rounded numbers used in the metric
21 and engineer scale can also cause confusion
22 when referring to distances of exposures as
23 well and should not be used in the site
24 profile and TBD documents. NIOSH has used
25 this confusion to distort the mental picture

1 of the site in the following manner--EXAMPLE--
2 NIOSH describes the burn out cavity of a
3 nuclear device as being 80 meters radius
4 severely minimizes the mental picture of 500
5 feet in diameter which is eccentrically the
6 same as 80 meters radius, 80 meters conjures
7 up a far less metal (sic) picture than 500
8 feet in diameter which is equal to the height
9 of a 50 story building, and many if not most
10 of the distances written down in reports in
11 engineer scale if misinterpreted as metric
12 would increase distances by nearly 300% of
13 what they actually were. If DOSE
14 reconstructions were to translate the numerals
15 in reports as metric instead of Engineer scale
16 which it always is--(Survey maps prove this).
17 Other distortion might happen in describing a
18 distance from a contaminated area--EXAMPLE--It
19 might say the distance from the contaminated
20 site was 4.5 kilo meters (sic) (which would
21 maximize the mental picture) when it should
22 say 2 and 1/2 miles (minimized numbers) which
23 would paint a better and much more accurate
24 mental picture.

25 NIOSH has used the metric units to

1 maximize the mental picture where needed and
2 minimize where it is also needed, and also
3 used the one foot measure unit where it is
4 useful. METRIC SCALE WAS NEVER USED PRIOR TO
5 1992 ANY WHERE I EVER WORKED, AND MY WORK
6 REQUIRED WORKING WITH MEASUREMENTS 100% OF MY
7 WORK DAY.

8 My work also required me to read the
9 blue prints and survey maps and I never seen
10 so much as one that was ever done in the
11 Metric scale during all my time on the Nevada
12 Test Site. All reports written were all
13 engineer scale which is written exactly like
14 metric so the accuracy of distances could be
15 grossly misread in almost all cases if metric
16 units were used instead of foot inches and
17 engineer survey scale. Distance is very
18 important in DOSE Reconstruction, So
19 interjecting unit of measure like metric only
20 adds more distortion to already existing
21 deliberate distortion of the facts done by
22 NIOSH.

23 18 principals (sic) and 33 issues for
24 a grand total to date 105 issues that need to
25 be addressed on the Nevada Test site Profile

1 and TBD documents. This does not include the
2 problems related to the technical problems
3 that exist with the site profile and TBD
4 documents.

5 [Identifying Information Redacted]

6 (Whereupon, the fourth of four letters was
7 entered into the record:)

8 Presidential Advisory Board NIOSH, May
9 12, 2008, Dear Nevada Test Site Work Group,
10 Recently John Vance assistant to Peter Turcic,
11 Director of DOL's EEOICPA office called me and
12 ask (sic) me why I have not made known to
13 NIOSH, The flaws contained in the site profile
14 and TBD documents. I explained to Mr. John
15 Vance that I have for the past 3 years made
16 numerous efforts to correct the mistakes as
17 SC&A and myself have uncovered them. Also by
18 addressing the board during open meetings,
19 through emails and letters and faxes. I
20 explained to Mr. John Vance that Mr. Larry
21 Elliott from NIOSH has ignored my issues and
22 explained them away as simple historical
23 inaccuracies by NIOSH, Editorial mistakes, or
24 insignificant and did not apply to DOSE
25 Reconstruction.

1 However, Whatever one chooses to label
2 these inaccuracies they are none the less
3 (sic) flaws, as to what value they have
4 related to DOSE reconstructions should best be
5 determined by more qualified personnel than
6 NIOSH office staff who are neither Site
7 literate, Qualified Hygienist or Nuclear
8 Health Physicists. EXAMPLES--such as my
9 encounter with a Mr. David Chatou an
10 unqualified and uncleared NIOSH office manager
11 who did one of my interviews.

12 NIOSH has had 5 long years with
13 unlimited manpower and unlimited funds to
14 correct these flaws and has done little of
15 nothing to correct these obvious flaws which
16 comprise 64 Principle subjects which contain
17 108 separate issues, and this does not include
18 the technical flaws contained in the site
19 profile and TBD documents which could be of
20 equal number of technical flaws if you include
21 past and further overview reports of SC&A.

22 In the past I have made these issues
23 known to the board and NIOSH by sending in the
24 information as I have uncovered it, and this
25 file now has a complete list of all the

1 Principle subject issues and I would like the
2 Board to make sure the PAB working board of
3 the Nevada test site addresses these issues in
4 the very next meeting.

5 As you are aware the site profile and
6 TBD document is supposed to be a living
7 document subject to change as inaccuracies are
8 uncovered, I have seen nowhere in the rules
9 where inaccuracies have to be DOSE related
10 only or a criteria of what determines what
11 information is significant or insignificant
12 related to DOSE reconstruction. Surely a US
13 107 page Government document written with
14 unlimited funds and manpower could be written
15 correctly in 5 long years with total accuracy
16 regardless of what classifications of subjects
17 and issues they address.

18 I would believe that NIOSH with 5 LONG
19 YEARS unlimited manpower, millions of dollars
20 in funding could do at least as good as I have
21 in correcting a simple 107 page document.

22 My efforts are limited to a 2 years a
23 couple volunteers, myself and my social
24 security check which compared to NIOSH's
25 budget could not even qualify as pocket

1 change. In fact my finding would not even
2 cover one second of NIOSH's expenses, let
3 alone the expense of ORAU, NIOSH, OCAS, CDC,
4 or DOL and the Presidential Advisory Board
5 which all Operate on DOL--EEOICPA
6 Appropriations. Surely all the entities
7 involved could at least match my
8 accomplishments if not surpass it In clearing
9 up the mistakes contained in the Nevada test
10 site Profile and TBD documents, I am sure OMB
11 and Congress would agree if they knew about
12 such efforts and flaws.

13 Regardless of what label NIOSH chooses
14 to label my issues the fact still remains the
15 site profile and TBD documents are flawed
16 Garbage. And when it's garbage in, It is
17 garbage out.

18 DOSE Reconstructions can not be done
19 using the existing site profile and TBD
20 documents, and as long as these inaccuracies
21 are not corrected I will continue challenging
22 the results of any final decisions of claims
23 that DOL sends out to claimants based on the
24 inaccuracies of the site profile and TBD
25 documents.

1 We would like to have this letter and
2 the 21 pages read into the record of the
3 Nevada Test Site working board meeting.

4 Thank you signed [Identifying
5 Information Redacted]

6 CC: Phillip Schofield, Bradley
7 Clawson, Paul Ziemer, James Lockey, James
8 Melius, Robert Presley, John Poston, Christine
9 Branche, Lew Wade, Wanda Munn, Genevieve
10 Roessler, Josie Beach, Michael Gibson, Mark
11 Griffin (sic)

12 CC: Pete Turcic Director of EEOICPA
13 DOL

14 CC: Nevada Test Site working Board

15 CC: Dr. (sic) Larry Elliott, CHP,
16 NIOSH

17
18 (Whereupon, all four letters are officially
19 entered into the record.)
20
21
22

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CERTIFICATE OF COURT REPORTER**STATE OF GEORGIA****COUNTY OF FULTON**

I, Steven Ray Green, Certified Merit Court Reporter, do hereby certify that I reported the above and foregoing on the day of May 21, 2008; and it is a true and accurate transcript of the testimony captioned herein.

I further certify that I am neither kin nor counsel to any of the parties herein, nor have any interest in the cause named herein.

WITNESS my hand and official seal this the 10th day of Feb., 2009.

STEVEN RAY GREEN, CCR, CVR-CM, PNSC**CERTIFIED MERIT COURT REPORTER****CERTIFICATE NUMBER: A-2102**