

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

MEETING FIFTY-SIX

ADVISORY BOARD ON  
RADIATION AND WORKER HEALTH

VOL. III

DAY THREE

ABRWH BOARD MEETING

The verbatim transcript of the  
Meeting of the Advisory Board on Radiation and  
Worker Health held at the Millennium Hotel,  
St. Louis, Missouri, on June 26, 2008.

STEVEN RAY GREEN AND ASSOCIATES  
NATIONALLY CERTIFIED COURT REPORTERS  
404/733-6070

C O N T E N T S

June 26, 2008

WELCOME AND OPENING COMMENTS	7
DR. PAUL ZIEMER, CHAIR	
DR. CHRISTINE BRANCHE, DFO	
SEC PETITION STATUS UPDATES:	7
BLOCKSON, MS. WANDA MUNN	7
ROCKY FLATS PLANT, MR. MARK GRIFFON	63
CHAPMAN VALVE, DR. JOHN POSTON	65
TEXAS CITY CHEMICALS, DR. PAUL ZIEMER	97
AREA IV OF SANTA SUSANA FIELD LABORATORY	115
MR. MICHAEL GIBSON	
CONGRESSIONAL LETTERS	117
MR. JASON BROEHM	
SUBCOMMITTEE, WORK GROUP REPORTS	129
WORK GROUP CHAIRS	
BOARD WORKING TIME:	
STATUS OF SELECTION OF BOARD CONTRACTOR	171
DR. CHRISTINE BRANCHE, NIOSH	
TRACKING STATUS OF TRANSCRIPTS AND MINUTES	173
DR. CHRISTINE BRANCHE, NIOSH	
FUTURE PLANS AND MEETINGS	173
DR. PAUL ZIEMER, CHAIR	
RESPONSIBILITIES OF BOARD'S REPRESENTATIVE TO DOE	180
COURT REPORTER'S CERTIFICATE	193

### TRANSCRIPT LEGEND

The following transcript contains quoted material. Such material is reproduced as read or spoken.

In the following transcript: a dash (--) indicates an unintentional or purposeful interruption of a sentence. An ellipsis (. . .) indicates halting speech or an unfinished sentence in dialogue or omission(s) of word(s) when reading written material.

-- (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)

CHAIR

ZIEMER, Paul L., Ph.D.  
Professor Emeritus  
School of Health Sciences  
Purdue University  
Lafayette, Indiana

DESIGNATED FEDERAL OFFICIAL

BRANCHE, Christine, Ph.D.  
Principal Associate Director  
National Institute for Occupational Safety and Health  
Centers for Disease Control and Prevention  
Washington, DC

BOARD MEMBERS

BEACH, Josie  
Nuclear Chemical Operator  
Hanford Reservation  
Richland, Washington

1 CLAWSON, Bradley  
2 Senior Operator, Nuclear Fuel Handling  
3 Idaho National Engineering & Environmental Laboratory

GIBSON, Michael H.  
President  
Paper, Allied-Industrial, Chemical, and Energy Union  
Local 5-4200  
Miamisburg, Ohio

GRIFFON, Mark A.  
President  
Creative Pollution Solutions, Inc.  
Salem, New Hampshire

1           LOCKEY, James, M.D.  
2           Professor, Department of Environmental Health  
3           College of Medicine, University of Cincinnati

MUNN, Wanda I.  
Senior Nuclear Engineer (Retired)  
Richland, Washington

POSTON, John W., Sr., B.S., M.S., Ph.D.  
Professor, Texas A&M University  
College Station, Texas

PRESLEY, Robert W.  
Special Projects Engineer  
BWXT Y12 National Security Complex  
Clinton, Tennessee

ROESSLER, Genevieve S., Ph.D.  
Professor Emeritus  
University of Florida  
Elysian, Minnesota

SCHOFIELD, Phillip  
Los Alamos Project on Worker Safety  
Los Alamos, New Mexico

AUDIENCE PARTICIPANTS

ADAMS, NANCY, NIOSH  
BREYER, LAURIE, NIOSH  
BROCK, DENISE, NIOSH  
BROEHM, JASON, CDC  
DEGARMO, DENISE, SIUE/DOW  
HANSON, JOHN, SIUE/DOW  
HINNEFELD, STUART, NIOSH  
KOTSCH, JEFF, U.S. DOL  
LORD, DAN  
MAHATHY, MIKE, ORAU  
MARTINETTE, JANICE W., HONEYWELL  
MAURO, JOHN, SC&A  
MCFEE, MATTHEW, ORAU  
MCGOLERICK, ROBERT, HHS  
MCKEEL, DAN, SINEW/VI NEWS  
VOLSCH, JOE, SIUE/DOW  
ZIEMER, MARILYN

**P R O C E E D I N G S**

(8:30 a.m.)

**WELCOME AND OPENING COMMENTS****DR. PAUL ZIEMER, CHAIR****DR. CHRISTINE BRANCHE, DFO**

1       **DR. ZIEMER:** Good morning, everyone. We're beginning  
2                   day three of the Advisory Board on Radiation  
3                   and Worker Health meeting here in St. Louis.  
4                   We are pretty much on schedule as far as the  
5                   agenda is concerned. I am hopeful that we may  
6                   be able to get through all of our items very  
7                   close to noon, although I can't guarantee that  
8                   in advance, but we do ask everyone to move  
9                   along efficiently, if possible.

**SEC PETITION STATUS UPDATES**

10                   We're going to begin this morning with a series  
11                   of SEC petition status updates, which will  
12                   include reports from some of the workgroup  
13                   chairs, and also in some cases opportunities  
14                   for petitioners to make comments if they are  
15                   present on line.  
16

**BLOCKSON, MS. WANDA MUNN**

17                   Our first one is the Blockson SEC petition.  
18                   The workgroup chair is Wanda Munn. Wanda, we'd  
19                   be pleased to hear your report.  
20

1           **MS. MUNN:** All right, thank you.

2           **DR. ZIEMER:** I should check and see if any of  
3 the Blockson petitioners are on the line this  
4 morning.

5           **MR. GRIFFON:** Paul, also, I don't know if Jim -  
6 - is Jim on the line?

7           **DR. ZIEMER:** Is Jim Melius on the line?

8           **MS. PINCHETTI:** This is Kathy Pinchetti.

9           **DR. BRANCHE:** She's a petitioner --

10          **DR. ZIEMER:** Thank you.

11          **DR. BRANCHE:** -- or an authorized rep.

12          **DR. ZIEMER:** Thank you, Kathy. We'll give you  
13 an opportunity to speak in a moment.

14          **MS. MUNN:** A quick review of where we are with  
15 Blockson, the members of the workgroup are  
16 myself, Mike Gibson, James Melius, Genevieve  
17 Roessler, and Brad Clawson is our alternate.  
18 Blockson had two SEC petitions and qualified in  
19 2006. The Technical Basis Document which  
20 serves as the site profile was written --  
21 completely rewritten after the first one, as  
22 was pointed out to you earlier by the NIOSH  
23 presentations with respect to Blockson. Our  
24 technical contractor, SC&A, reviewed the site  
25 profile, the SEC petition and the evaluation



1 report. Following that they issued seven  
2 findings which the Board undertook to resolve.  
3 Those findings -- these are -- were  
4 considerably more lengthy than this. They  
5 involved the default upper bound of the uranium  
6 inhalation rate, the thorium-232 enrichment  
7 ratio in the process stream, the thorium-230  
8 that wasn't included in the exposure matrix,  
9 the possible thorium raffinate stream hadn't  
10 been addressed. There was a concern about  
11 additional data being needed to support radon  
12 values, and there's a -- wanted to verify  
13 possible exposure from the tailings of that  
14 operation, also concern about the trace level  
15 of radium-226 and its progeny.

16 The behind-the-scenes workgroups went to work  
17 almost immediately in 2006. Our workgroup did  
18 not have its first official meeting until later  
19 in 2007, but as I pointed out initially, the  
20 entire site profile had to be rewritten and the  
21 technical teams were working behind the scenes  
22 all that time. We also had several meetings  
23 with the workers to discuss as much information  
24 as they could recall -- they were extremely  
25 helpful, as a matter of fact. The workers at

1           Blockson had good memory of what the processes  
2           were like and what the structures -- how the  
3           structures were arranged, so it was very  
4           helpful for us.

5           Each time that we identified information that  
6           was going to bring one of the issues to closure  
7           or would have some major bearing on our  
8           decision, we tried to see that a white paper  
9           was generated so that we would have a long-term  
10          record of what had been found there. We were  
11          very pleased when each one of the seven  
12          findings that SC&A had presented to us were  
13          resolved to the satisfaction of both NIOSH and  
14          the technical contractor, and the chair had  
15          hoped that that would resolve the major issues.  
16          We had addressed additional questions of detail  
17          as they had arisen -- hold on just a moment;  
18          there's someone on the line.

19          **DR. BRANCHE:** Yes. We ask that all phone  
20          participants mute their lines. If you do not  
21          have a mute button, then please use star-6.  
22          When you are ready to speak, then please use  
23          the same star-6 to unmute your line. But we do  
24          ask respectfully that you mute your phone until  
25          you are ready to speak. It's important for all

1 phone participants to do so.

2 Also, if you must leave the line, please do not  
3 put us on hold but rather hang up and dial back  
4 in. Please do not put us on hold. Thank you.

5 Ms. Munn?

6 **MS. MUNN:** As we identified additional issues  
7 that were of concern, we made every effort to  
8 try to address them in a technical manner. In  
9 January I brought this very briefly to the  
10 Board's attention. I had hoped at that time  
11 that we would be able to have the Board address  
12 it. But that attempt was not successful.

13 There were two additional actions that were  
14 brought at that time. Jim Melius had concerns  
15 about the quality of the data, and indicated  
16 that Mark Griffon also continued to have  
17 concerns with respect to the radon that was  
18 involved on this particular site. So we went  
19 back to the workgroup and undertook to address  
20 those items again and in greater detail.

21 We had a workgroup meeting earlier this week  
22 with the hope that we could cover all of the  
23 materials that were of concern to those two  
24 issues, because in the workgroup that we had  
25 had subsequent to the January meeting, we went

1           in with two issues and came out with five. We  
2           had addressed those off-line during the interim  
3           and had responses, we thought, to most of it as  
4           we came into this meeting. At this meeting we  
5           only had four of our five workgroup members  
6           present; Jim Melius was not here. Fortunately,  
7           Mark Griffon had joined us as a non-participant  
8           in the workgroup to help address the issues  
9           that he had with respect to radon so that those  
10          could be discussed with the technical people  
11          who were present at the workgroup meeting.  
12          We were not very successful in getting to where  
13          the chair had hoped we would be. We had the  
14          SC&A review before us. We had the NIOSH SEC  
15          report and we had the site profile, all of  
16          which we were attempting to address. At the  
17          close of our meeting -- which we actually had  
18          to split into two different segments because of  
19          some concerns with respect to the ventilation  
20          of the building in question; we were  
21          specifically zeroed in on Building 40 at that  
22          time -- I asked three questions of the  
23          workgroup, which were the focus of the work we  
24          were expected to do.  
25          The questions that I asked first were that SC&A

1 has identified seven findings of significance  
2 in their review of this site. Following  
3 detailed technical investigation and  
4 interaction with experts and workers, they  
5 report all issues resolved. Do you accept this  
6 report?

7 I asked for an individual vote from each of the  
8 workgroup members, yes or no. I had four yeses  
9 with respect to accepting the report of SC&A  
10 regarding those seven findings.

11 The next question I asked was: NIOSH has  
12 sought information in depth for all activities  
13 on this site and has reported they have  
14 adequate data to reconstruct or bound radiation  
15 dose for Blockson workers. Do you accept this  
16 report?

17 The response was two of our members voted yes;  
18 two of our members voted no.

19 The third question I asked was: The site  
20 profile has been completely rewritten, reviewed  
21 and revised at length. Do you accept the  
22 current site profile?

23 Two members voted yes; two members voted no.  
24 Mr. Griffon had additional information that he  
25 wanted to address. I requested that he not

1 attempt to address it at this workgroup  
2 meeting; that instead he wait until this  
3 current meeting today and address it as a full  
4 Board member, as I would expect anyone else who  
5 had not been privy to our workgroup sessions.  
6 Because it seems unlikely that additional  
7 information can be brought to bear, because we  
8 have made every effort to interview the workers  
9 and outside experts with respect to this  
10 process and what had transpired there -- you  
11 recall this is a phosphate plant.  
12 It is the -- the chair is taking as her  
13 prerogative to bring to you today the question  
14 which the full Board is going to need to  
15 resolve, one way or another. You've seen the  
16 three questions that have been asked. My  
17 recommendation would have been that we accept  
18 the NIOSH position, because adequate data  
19 exists to reasonably bound with sufficient  
20 accuracy any radiation exposure which should  
21 have resulted from employment at Blockson  
22 Chemical Company during its contract period as  
23 an Atomic Weapons Employer. I bring this to  
24 you with your full knowledge that the workgroup  
25 is divided on this issue, but it needs to be

1 brought to the Board. I would like to make  
2 this in the form of a motion so that it can be  
3 open for debate and that we can bring a  
4 recommendation to the Secretary, if at all  
5 possible.

6 That's all I have.

7 **DR. ZIEMER:** Okay, would you state your motion  
8 again then?

9 **MS. MUNN:** My motion is that we accept the  
10 NIOSH position that adequate data exists to  
11 reasonably bound with sufficient accuracy any  
12 radiation exposure which could have resulted  
13 from employment at Blockson Chemical Company  
14 during its contract period as an Atomic Weapons  
15 Employer, and therefore that the SEC that is  
16 before us be denied.

17 **DR. ROESSLER:** I second it.

18 **DR. ZIEMER:** Since this is not a recommendation  
19 of the workgroup but rather is your own motion,  
20 that --

21 **MS. MUNN:** That's correct.

22 **DR. ZIEMER:** -- does require the second; it has  
23 been seconded.

24 Now before we have discussion I want to allow  
25 the petitioner a chance to make comments.

1 Now who's on the line?

2 **DR. BRANCHE:** She said her name when you asked  
3 -- Kathy --

4 **MS. PINCHETTI:** I have nothing.

5 **DR. ZIEMER:** Kathleen, are you on the line?

6 **MS. PINCHETTI:** I'm on the line.

7 **DR. ZIEMER:** Yes, do you have some comments for  
8 us at this point?

9 **MS. PINCHETTI:** No, I think I've -- I've said  
10 everything I needed to say.

11 **DR. ZIEMER:** Okay, thank you very much,  
12 Kathleen.

13 Okay, this motion is open for discussion. Any  
14 -- anyone wish to speak for or against the  
15 motion? Or are you ready to vote? The -- the  
16 motion is basically to accept the NIOSH report  
17 that they can do dose reconstruction, and to so  
18 report. This would be a -- would be so  
19 reported to the Secretary.

20 No discussion --

21 **MR. GRIFFON:** I...

22 **DR. ZIEMER:** Mark?

23 **MR. GRIFFON:** You know. I -- I did want to  
24 discuss some of the -- the technical details  
25 yesterday in the workgroup level, but that's



1 fine. It's -- it's fine to discuss it here.  
2 I'm -- I'm going to have to vote -- I'm going  
3 to have to speak against the motion right now,  
4 and I -- I -- I say that -- I -- I sort of have  
5 some -- some problems with that myself because  
6 I think we're getting close and I'm getting  
7 close on the radon thing. This radon model --  
8 or this radon -- some more assessment on the  
9 radon issue was brought to bear -- you know, I  
10 received this pretty technical analysis of the  
11 radon issue based on source term data and  
12 stuff, and variations and (unintelligible). I  
13 mean we looked at some of the stuff, but it was  
14 all brought to us, you know, yesterday or  
15 whatever -- I'm mixing up the days now, but we  
16 received it at this Board meeting and -- and  
17 some of it depends on -- there's a 1983  
18 Blockson survey. It's a 3-page memo re-- you  
19 know, when you start to peel the layers away a  
20 little bit is where I have some concerns, so  
21 you look at a 1983 study. It was a -- a memo.  
22 There's no real -- there -- there's some  
23 assumptions on how the individual went from  
24 counts to working level. There's one working  
25 level reported. We ratioed (sic) them to get

1 the other working levels; that part's fine.  
2 But I just wonder if -- you know, the -- the  
3 pedigree on that -- that study is suspect.  
4 That's one -- that's one part of it for me.  
5 The other part is if I look at the source term  
6 information and -- and I have several questions  
7 on the -- on the -- the picocuries per liter of  
8 radon that could be in the air in this --  
9 particularly in the work spaces where they --  
10 where they would likely have been working, and  
11 there's some assumptions in the model that I --  
12 I have some questions on. Now at the end of  
13 the discussion, you know, people were telling  
14 me well, this mod-- and -- and even further  
15 than that, the -- this SC&A draft that was  
16 given to me, the -- there's a first -- you  
17 know, you walk through the report and there's  
18 some numbers that I can't even corroborate. I  
19 -- I used their on-line tool that they've --  
20 gave me access again yesterday, and there's  
21 some numbers that I can't corroborate and, you  
22 know, I'm being told well, forget about all  
23 that; really you want to see if it's a factor  
24 of five different than this '83 survey and if  
25 it -- if it isn't, if the ventilation can't

1           affect it by that much, our approach is still  
2           bounding. Well, then you go back to this '83  
3           survey and I say boy, this memo report where  
4           the guy doesn't even describe his method and  
5           has some concluding remark about a working  
6           level, that's what I'm hanging my hat on, so  
7           I'm a little bit -- you know, I know we've been  
8           at this a long time, and I'm not even on the  
9           working group and I've been at it a long time,  
10          but I -- I feel like, you know, to -- to not  
11          take this to the end -- I also think I -- I  
12          have just -- you know, have had discussions  
13          with the contractor and they're -- SC&A and  
14          they're -- they're telling me that well, you  
15          know, reasonably, even if we use this and --  
16          this or this approach, you know, the highest  
17          value we're probably going to get is 20, 25  
18          picocuries per liter. Right now the 95th  
19          percentile is at 2.3, so that -- that's  
20          different, you know, and -- that's quite a bit  
21          different in my eyes, and that's not on the  
22          table. So I -- I just feel like, you know, why  
23          this -- this -- over a very -- a pretty  
24          technical issue, why this -- this -- you know,  
25          I -- I think I'm cl-- I think we're close and I

1           would rather see it resolved than just to --  
2           you know, I guess that's all I have to say. I  
3           would rather see that part resolved.

4           The other part is that I, in part, presented I  
5           think what were some of Jim Melius's issues,  
6           but I don't think I presented exactly what he  
7           had asked about at the last workgroup level, so  
8           I'm not sure we've really answered his  
9           questions. I know he's not here. I know --  
10          you know, but --

11          **MS. MUNN:** Well, I do have to object to --

12          **MR. GRIFFON:** Yeah.

13          **MS. MUNN:** -- one thing. Almost immediately  
14          following our -- our preceding workgroup, I  
15          sent out an e-mail to everyone involved with  
16          the identification of my interpretation of what  
17          the questions were that were raised. When I  
18          said we went in with two questions, we came out  
19          with five. I sent a brief resume of what those  
20          were and asked anyone who had any interest in  
21          these particular items to please be working on  
22          them. So we made every effort to do that and I  
23          believe that all of the people who were  
24          involved received that message. A great deal  
25          of work was done in the interim.

1           It is true that we did -- obviously I failed to  
2           incorporate you in the discussion that we had  
3           with the workers in the interim. We did have  
4           three different workers that we talked with who  
5           were very helpful with respect to the layout of  
6           the building and to the process and what the  
7           atmosphere was in the building, all of which  
8           fed into the report that we gave. But we made  
9           every effort to cover and to establish that  
10          these were the questions we were going to  
11          attempt to answer.

12          If those were not the -- correct, if those were  
13          not the correct questions, then we certainly  
14          should have been notified, well in advance of  
15          this immediately-preceding workgroup meeting,  
16          that those questions were not properly couched.

17          **MR. GRIFFON:** Yeah, I -- I -- and I -- I don't  
18          know that they weren't properly couched, Wanda.  
19          I'm just saying that -- that a couple of those  
20          I think were Jim's issues and -- I know he  
21          wasn't here, but -- you know, he wasn't here to  
22          discuss them, either, so that was all I was  
23          saying.

24          **MS. MUNN:** That's true. We did -- however, he  
25          sent me an e-mail with two questions that he

1 had on it. I read those questions to the  
2 workgroup at our meeting and they were  
3 discussed there.

4 **MR. GRIFFON:** That's true.

5 **DR. ZIEMER:** Jim Lockey?

6 **DR. LOCKEY:** The bounding for the radon, I hear  
7 two and I hear 20. Has that been resolved?

8 **MS. MUNN:** Please, John, Jim, either of you --

9 **DR. ZIEMER:** John Mauro?

10 **MS. MUNN:** -- would you address that?

11 **DR. MAURO:** Yes. The discussions we had had to  
12 do with modeling the ventilation. There was  
13 some technical debate amongst the SC&A  
14 personnel at the first meeting. We had an  
15 opportunity to work through it, and we came  
16 down -- unanimous agreement, yes, the model is  
17 valid. And if you use the bound-- most  
18 (unintelligible), the model holds.

19 Now the question becomes what input parameters  
20 do you use for the model, and the -- and there  
21 are a range of plausible values one could use.  
22 If you select those input values that would  
23 drive the numbers to the highest plausible  
24 value, you come in with numbers around 20  
25 picocuries per liter. If you move in the other

1 direction, you get much closer to the two  
2 picocuries per liter.

3 So the way we see it is, that -- that's a -- in  
4 effect, the way we -- way we came out is well,  
5 we have three pieces of information. We have  
6 the Florida information on what the radon  
7 levels were in Florida. We have these  
8 measurements, which have certain weaknesses to  
9 them, as a surrogate. We have certain  
10 information in the 1983 measurements that have  
11 certain weaknesses with them, and in fact, one  
12 of the reasons we went with the model approach  
13 -- we says well, how do we come at this? So we  
14 did develop a model, which SC&A stands behind  
15 unambiguously, and that model, depending on -- on  
16 what range of plausible input parameters you  
17 put in, can give you radon concentrations --  
18 average radon concentrations in the building  
19 which could be as high as 20, but certainly  
20 could be two, also.

21 We also discussed the fact that -- and it was  
22 an important point brought up by Mark -- that  
23 well, listen, you know, the radon  
24 concentrations are not going to be uniform  
25 throughout the building, and -- because even

1           though you come up -- let's say you say 20 is  
2           an upper bound, but there could be locations  
3           within the building where it's higher and some  
4           locations where it's lower, just because of the  
5           way in which the -- the ventilation system  
6           works. You don't get instantaneous uniform  
7           mixing. So one of the questions then -- I  
8           don't know if you recall -- that I posed to one  
9           of the folks we interviewed --

10          **MS. MUNN:** One of the workers --

11          **DR. MAURO:** -- the workers --

12          **MS. MUNN:** -- actually two of them.

13          **DR. MAURO:** -- and I deliberately, 'cause I  
14          realized this could be important, is were there  
15          workers working in the same location all the  
16          time. And he said there were -- his exact  
17          answer was -- exactly as I recall, there were  
18          about six to 10 workers in the building at any  
19          given time, and they generally were in  
20          different locations at different times. So --

21          **MS. MUNN:** And this jives with information that  
22          we had from the workers in -- in the Blockson  
23          group meetings that we had there --

24          **DR. MAURO:** Right, so --

25          **MS. MUNN:** -- as well. They indicated that a



1 shift in that building was --

2 **DR. MAURO:** Right.

3 **MS. MUNN:** -- usually six people, sometimes --

4 **DR. MAURO:** Right.

5 **MS. MUNN:** -- as many as eight or nine.

6 **DR. MAURO:** So -- so when I hear that -- and we  
7 -- again, SC&A's -- yeah, when you hear that,  
8 that means okay, perhaps there is going to be  
9 some kind of gradient within the building by  
10 elevation, and maybe laterally. If the per--  
11 if people are more or less walking around,  
12 they're really going to experience, over the  
13 course of a year, something closer to the  
14 average than -- than let's say what might be  
15 the high end. So we come away with the sense  
16 that we -- we really can't nail down the exact  
17 right number, but -- but some number someplace  
18 between two and 20 seems to put the problem in  
19 a box as being pic-- the average picocuries per  
20 liter of radon that these workers might have  
21 experienced, and that's where SC&A comes in,  
22 and that's the level of precision that we're  
23 operating at.

24 **MS. MUNN:** Thank you, John. Jim, would --

25 **MR. GRIFFON:** Again, can I just --

1           **MS. MUNN:** -- would you --

2           **MR. GRIFFON:** -- can I just --

3           **MS. MUNN:** Yes.

4           **MR. GRIFFON:** -- say one thing to -- to --

5           **MS. MUNN:** Certainly.

6           **MR. GRIFFON:** -- Dr. Lockey's first question?

7           The model does not vary dependent on -- the  
8           model that we're considering on the Board does  
9           not vary depending on input parameters. It's a  
10          -- it's a distribution, so we're back to -- you  
11          know, we're back to Florida data in a  
12          distribution, with a 95th at 2.33 or something  
13          like that. We use these other things -- I  
14          agree with John, but we use the other models,  
15          and these are models based on through-put and  
16          building consideration, ventilation  
17          considerations, sort of as reality checks.

18          **DR. NETON:** Right.

19          **MR. GRIFFON:** And you know, we're -- that's  
20          where I'm hung up is that I'm concerned that my  
21          reality checks are not -- you know, and I --  
22          and I will admit that I'm -- that I'm, you know  
23          -- I th-- I thought we were getting close to  
24          there, but when I don't get numbers to add up,  
25          when I don't -- and when I had questions about

1           the '83 survey yesterday, you know, there was  
2           no time to get answers for -- I asked Chick  
3           Phillips on the side, and he was actually  
4           heading to the airport so the-- you know, there  
5           was just -- but when I saw that report, I -- I  
6           don't even see a method described in that  
7           report, and he's telling me it's a Kusnetz  
8           count technique, which given the table, it  
9           seems plausible that that's what they did. But  
10          again, there's no equations and there's --  
11          there's no -- nothing to show how they  
12          calculated from counts per five minutes to  
13          working level, and it's -- it's a 3-page memo  
14          report. And you know, that, along with the --  
15          this model that I was literally trying to run  
16          whi-- during the meeting yesterday and -- and  
17          look at the parameters and, you know, I have  
18          concerns about the -- the -- some of the  
19          baseline assumptions that SC&A offered when  
20          they ran that model and whether they are -- at  
21          least, you know, if I'm going to do something  
22          like that, there's so many variables in that --  
23          in that size building, I would think you'd want  
24          to pick a conservative assumption on the  
25          building volume and things like that, and --

1           and I'm -- I have a difference of opinion there  
2           I think than maybe some others, but there's  
3           where I -- I come down on it and I just wanted  
4           a little -- you know, I wanted to go through  
5           that and -- and come to grips with that before  
6           I had to vote on it.

7           **MS. MUNN:** Chick Phillips and Tom Tomes worked  
8           together at considerable length to produce that  
9           paper. Jim?

10          **DR. NETON:** I guess I come at this somewhat  
11          differently, although I come out with the same  
12          conclusion that SC&A has, in that originally we  
13          -- we had the 1983 data and that -- those data  
14          were low, and -- and Mark expressed some  
15          concerns that they were low, they were down  
16          around tenths of picocuries per liter, I  
17          believe, and -- and Mark said well, geez, it  
18          would be nice to validate that somehow with --  
19          with a source term model or something of that  
20          effect.

21          So fortunately we have good source term  
22          information here. We have the through-put of  
23          ore through the building. We know the  
24          concentration of radium in the ore, which is  
25          very low. One hundredth of one percent of that

1 ore is uranium, so it's a very, very low  
2 concentration. In my mind, that -- that  
3 indicates numbers should be low. We have the  
4 phosphate industry data which indicated it was  
5 very low. So SC&A developed this source term  
6 model. And in my mind, the way to look at this  
7 is -- given that model, with reasonable input  
8 terms into that model -- does that come into  
9 agreement with the data that we have in the  
10 measurements from 1983; and the answer is yes.  
11 You would have to put some values out of the  
12 norm to get -- well, if you -- you know, we  
13 didn't have to put values outside of what we  
14 believe to be normal operating conditions to  
15 match the values that were measured in the  
16 plant. I think that's an important point. You  
17 can -- you can get any number you want with  
18 this source term model because a lot of it  
19 depends, as Mark said, on the input parameters.  
20 But given the values that we have measured in  
21 1983, using reasonable values for the models,  
22 they match. And I think that, to some extent,  
23 helps validate that the numbers are going to be  
24 low.  
25 We believe two picocuries per liter is a

1 bounding value. However, certainly it's open  
2 for discussion. But I certainly believe we  
3 could bound -- it can be bound, given the  
4 source term and the other information that we  
5 have. And that's, I think, the relevant issue  
6 for a Special Exposure Cohort determination.

7 **DR. ZIEMER:** Jim?

8 **DR. LOCKEY:** John, go -- run through how you  
9 did this and why you think it's claimant  
10 favorable, would you?

11 **DR. MAURO:** It's -- the model -- do it by hand.  
12 For instance, it's not a complicated model, sit  
13 there right now and do it. It's a box model --  
14 this room. Here's the room. Let's make  
15 believe this is Blockson. It's probably about  
16 the height and perhaps twice the size. Okay?  
17 You got -- we know how many tons per day of ore  
18 is coming in that door.

19 **DR. LOCKEY:** What's the present--

20 **DR. MAURO:** Pardon me?

21 **DR. LOCKEY:** What would -- is this the  
22 equivalent to phosphate? Is that what you're -

23 -

24 **DR. MAURO:** Yeah, phosphate rock.

25 **DR. LOCKEY:** Okay.

1           **DR. MAURO:** Phosphate rock comes in. It's put  
2           in a big silo, and then it's brought in the  
3           door. Okay? I mean this is concep-- it's very  
4           conceptual.  
5           Now trapped inside that rock is the radon.  
6           Okay? It's brought in, it goes into the -- one  
7           end of the building is a grinder. It  
8           pulverizes, grinds the rock to a powder. At  
9           that point we're going to assume that all the  
10          radon now comes out of the rock -- okay? -- and  
11          becomes airborne, so all these atoms -- so for  
12          -- you know, all the tons are coming in. We  
13          know -- we -- we know the -- we know the -- the  
14          composition of the ore, how much uranium is in  
15          there. That means we know how much radium is  
16          there. We know how much radon is in there. We  
17          so know the number of atoms per second coming  
18          into this building. We're going to put all  
19          those atoms per second in the air. Okay? So  
20          it's entering the air, continuously. Okay?  
21          Now what -- it's a simple box model that we use  
22          all the time, and you're saying all right, we  
23          know the input. Okay? Well, we need two other  
24          pieces of information: The volume of the room  
25          and the air turnover rate. Okay? Now the

1 volume of the room is uncertain, but we did get  
2 some feedback that it's a two-story building, a  
3 little -- a little bit smaller than a football  
4 field, so it's a pretty big building. There's  
5 uncertainty there.

6 Also the radon coming in, we're saying well,  
7 we're going to put all those atoms in the air  
8 as they come in. Well, we know that -- there's  
9 a lot of literature on what's called the  
10 emanation coefficient. That is, when -- when  
11 the radium atom that's trapped in the particle,  
12 whatever the particle is, whether it's soil or  
13 -- the -- as soon as it decays, it turns from  
14 radium into radon. Not all of it leaves the  
15 soil matrix. It's sort -- the radi-- some of  
16 the radon is -- stays trapped inside this  
17 little particle and decays away and stays there  
18 and never becomes airborne. And the -- you  
19 look into the literature and that radon  
20 emanation coefficient -- a typical number, for  
21 example, for soil is about 30 percent, so only  
22 30 percent actually leaves the particle and is  
23 available to become airborne. But we said  
24 well, you know, we don't really know what the  
25 radon emanation coefficient might be for this,



1           and given that they're deliberately pulverizing  
2           this thing and grinding it down to a powder --  
3           'cause that's the form you need it to get into  
4           in order to digest it and get your -- get your  
5           phosphate -- let's go with 100 percent, so it  
6           can't be more than that.

7           So we're putting this in the air. All right?  
8           Now -- so we've got the volume of the building,  
9           more or less. We're using a bounding  
10          assumption regarding the rate at which the  
11          radon's going into this box, so you don't have  
12          -- you don't need this computer program, just  
13          do it by hand; it's  $I$  over  $\lambda$ , it's -- you  
14          know, it's equilibrium.

15          Now, what happens then is -- all right, we've  
16          got one more parameter, and this is the one  
17          that really troubled us, we didn't know -- is  
18          the air turnover rate, 'cause what is the air  
19          turnover rate? You know, turnover per hour.

20          When we first did it, and I was on the phone  
21          with Chick and Tom, I said listen, as a first  
22          cut, I could tell you that, from my experience  
23          in building air turnover rates, even a building  
24          without any ventilation, just a natural  
25          breathing -- you know, one air turnover per

1 hour. Let's just see what happens if we run  
2 that number.

3 So we ran it, and at tha-- under those  
4 circumstances and we said okay, so we're coming  
5 in with these assumptions on the order of about  
6 20 -- that's where the 20 comes. I call up --  
7 and I said listen, this thing hangs on this air  
8 turnover rate, and -- and if we're wrong on  
9 that by an order of magnitude, we're off the  
10 charts, throw it away.

11 So I instituted two steps. I said -- I asked  
12 one of our engineers to go into the literature  
13 on building ventilation -- old, large,  
14 industrial building ventilations. I didn't  
15 think he'd come back with anything, so I said  
16 go see what you can find on air turnover rates.  
17 So he runs off and does that.

18 Meanwhile I pick up -- I call Mort Lipman, my  
19 industrial hygiene professor at NYU, got him on  
20 the phone at NYU. And I said Mort -- he  
21 remembered me, remembered Jim, we both had him  
22 as a professor. I said listen, I've got a  
23 problem. I said -- I told him -- I told him my  
24 story, and I said I used one air turnover per  
25 hour. He goes it's much bigger than that.

1           It's got to be bigger than that. My experience  
2           is, that would place an upper bound, what -- in  
3           -- I said would you mind if I say this to the  
4           Board in public? He says absolutely.

5           So meanwhile, the other fella, [Identifying  
6           Information Redacted], who's looking into this,  
7           he comes back with a report -- on line, you  
8           could download it. There it is, a table of  
9           different vintage buildings of different --  
10          fundamentally different designs. The simplest  
11          and the worst design for a industrial building  
12          is the way they designed the Blockson building  
13          -- fans in the ceiling exhausting right at the  
14          ceiling without -- you know, not collection.  
15          Fans in the ceiling going out and air coming in  
16          through windows, either opened or closed. If  
17          they're closed, it's less; if it's open, it's -  
18          - you know, so you're sucking this -- so you --  
19          basically, air's coming in through the -- the  
20          walls where the windows are and going up and  
21          out.

22          The numbers that are in the report, two to four  
23          air turnovers per hour is the -- is the kind of  
24          numbers. So when I do this kind of work, I say  
25          okay, we got two to four out of the literature.

1 We got Mort Lipman, who I trust as be-- you  
2 know, from experience, says about one. My  
3 personal experience on air turnover in  
4 buildings for radon problems or private  
5 residences, one. So I said listen, let's --  
6 let's -- to -- to put this problem in a box,  
7 and this is how I come at everything, almost  
8 like a common sense thing, what have we got?  
9 Well, if you go with the 100 percent radon  
10 emanation, you go with a building size of about  
11 the size of a football field two stories high,  
12 and you go with one air turnover per hour, you  
13 get the -- you get the high end number around  
14 20.

15 Now built into that, of course, the air  
16 turnover rate may very well have been closer to  
17 two to three. The radon emanation coefficient  
18 may very well have been closer to 30 percent.  
19 So right off the bat, you know, we get about a  
20 six-fold effect there. You know, the size of  
21 the building, we might have been off by 30, 40  
22 percent, you know, so -- but that -- see, to  
23 me, now it becomes marginal. We -- you know,  
24 wouldn't -- now we're wor-- we're worried about  
25 orders of magnitude right now, factors of two

1 or three, not 20 percent, so this -- it -- it  
2 sounds so crude, but these kinds of problems  
3 you have to come at that way and say --  
4 And then you say okay, this is one way to come  
5 at it. And this is -- by the way, this  
6 approach is very consistent with the four-step  
7 approach for surrogate data because what really  
8 is happening here, remember, is we're using  
9 data from Florida that's ha-- that's -- has  
10 problems with it. In other words, it was  
11 collected in Florida in -- under their  
12 conditions, and the buildings that were there  
13 seem to be more or less open, where this  
14 building is closed. So you know, say hmm, it's  
15 got some weaknesses there. Then we're saying  
16 okay -- oh, no, but what about the da-- we have  
17 some measurements made in 1983. I asked Mort,  
18 I said by the way, if I had some radon  
19 measurements in '83 for the same process, would  
20 you think those radon measurements would be --  
21 given the same process -- applicable to an  
22 earlier building? 'Cause you know, a lot had  
23 happened between the '50s and the '80s in  
24 improving ventilation design, whether or not  
25 there were upgrades made. But there are

1 reasons to believe that maybe the numbers in  
2 '83 may have been -- well, perhaps higher or  
3 lower. Higher because the through-- apparently  
4 the through-put went up as time went on, they  
5 saw the process more. Okay? But apparently  
6 there was some ventilation system upgrades that  
7 went along with that.

8 So there -- so in other words -- so you got --  
9 so in effect what we have is three different  
10 sources of information, and I think that is --  
11 we got some measurements in '83 in Blockson.  
12 We got some measurements in Florida. And now  
13 we got this model.

14 The thing that brings me to where I am now is  
15 that I think we put the problem in a box. In  
16 other words, in the end I'd like to get to a  
17 point where I said I think I've got my arms  
18 around it. It's someplace -- yeah, it's less  
19 than 20. Is it two? Maybe not. Maybe two is  
20 good, maybe it's not good. But I could tell  
21 you that I -- right now I would say -- but we  
22 know it's le-- twe-- less than 20, you know.  
23 So that's the level of precision that we bring  
24 to the table and why SC&A is coming out where  
25 it's coming out. Where -- what the right

1           number is in that distribution -- you know, a  
2           lot of judgment there, and some -- and that's  
3           where the sensibility consensus has to find  
4           itself. But we believe you can put this  
5           problem in a box and place a plausible upper  
6           bound.

7           **DR. ZIEMER:** Thank you. Yes, Robert?

8           **MR. STEPHAN:** John, can you help us understand,  
9           for the benefit of the workers who may be on  
10          the phone, particularly [Identifying  
11          Information Redacted] (sic) who called in last  
12          night I think during the workgroup time, the  
13          issue of the air turnover? She was testifying  
14          that, having spoken to some of the workers -- I  
15          think her father being one of them -- that  
16          during the wintertime the vents were closed at  
17          the top of the building. So can you, you know,  
18          explain for us how that relates to your air  
19          turn-- turnover model?

20          **DR. MAURO:** A good way to think about it is one  
21          of the problems people have in their homes when  
22          you go in -- if you go into a radon test -- I  
23          do a lot of radon -- you go to a home, you do  
24          it on closed house conditions in the winter.  
25          You get the radon -- you get your detector, you

1 put it in the basement, you close up your house  
2 and -- and it's the wintertime, and it's under  
3 those circumstances that you have -- you have  
4 created a circumstance that will give you the  
5 highest levels of radon because you're  
6 minimizing the air turnover and -- because  
7 you've closed all the windows. And under those  
8 circumstances is when -- they do it on purpose,  
9 and that's when you get your about one air  
10 turnover per hour, you know. So what I'm  
11 saying is the one air turnover per hour is the  
12 natural breathing rate of a building when you  
13 really don't deliberately try to ventilate it.  
14 And so yes, when you close those windows in the  
15 winter -- and they did do that, they closed the  
16 windows -- that's going to reduce the air  
17 turnover rate. You open the windows, you get a  
18 little better turnover. But you know -- so  
19 that's why -- you know, as best I can, I -- I  
20 picked out one, you know, but --

21 **DR. ZIEMER:** Your one value is your worst-case  
22 value.

23 **DR. MAURO:** Yeah, I consider that to be your  
24 worst-case situation, yeah. That's it.

25 **DR. ZIEMER:** Robert?



1           **MR. STEPHAN:** And before you vote, for the  
2 benefit of the workers, can you explain the --  
3 the input scenario you were discussing was the  
4 ore coming in being crushed, and then the  
5 workers would have a question about all of the  
6 yellowcake that was being hauled around in the  
7 barrels at different points in time, so just --  
8 just discuss for us your -- your thoughts and  
9 maybe NIOSH's thoughts on how that relates to  
10 the scenario you just discussed. Thank you.

11           **DR. MAURO:** We're talking about Building 40 --

12           **MS. MUNN:** A single building.

13           **DR. MAURO:** -- where the rad-- not -- not  
14 Building 55. Think of it like this. All of  
15 the radium and the radon, its -- its problem is  
16 in Building 40. One -- once -- once that phos-  
17 - the -- the liquor is produced, what -- you're  
18 at the point now where the -- the radium is not  
19 in there anymore, so the -- what's going off  
20 with Building 55 is this monosodium phosphate  
21 liquor that has the radium and has the thorium  
22 and doesn't have the ra-- did I say radium?  
23 I'm sorry -- it has the uranium and the  
24 thorium. The radium, which is the source of  
25 the radon, that's left behind in Building 40.

1           It's -- and/or the stacks, the phosphogypsum  
2           stacks. So Buil-- so Building 55 -- you're not  
3           going to expect to see very much radon there.  
4           You're going to get uranium and you're going to  
5           ha-- that's -- that's going to be your problem.  
6           But the radon problem is not in Building 55.  
7           The radi-- the ura-- the uranium issue is  
8           Building 55, but you certainly have the  
9           potential for a radon problem in Building 40,  
10          so -- so that's why they separate.

11          **MR. STEPHAN:** Thank you.

12          **DR. ZIEMER:** Other comments, Board members?

13          **MS. MUNN:** I just need to point out to the  
14          Board that this is one of the few instances we  
15          have seen where both the agency and our  
16          contractor agree that this is not an  
17          intractable situation, that it can be bounded.  
18          In many cases it can be accurately assessed for  
19          an individual. At the very least, it can be  
20          bounded and well-bounded. It's rare that we  
21          get that kind of agreement from the experts  
22          both in NIOSH and in SC&A.

23          **DR. ZIEMER:** Thank you. Jim, another comment?

24          **DR. LOCKEY:** John, I appreciate your comments.  
25          My concern, as I -- I think the -- the Board is

1 concerned, is that we -- we have to make sure  
2 that we're claimant favorable. And it sounds  
3 like one exchange is a -- at a level of 20  
4 picocuries, that that's what every -- is said  
5 is a -- is a claimant-favorable position to  
6 take on this upper bounding. Based on the  
7 award rate for cancer in this program, which is  
8 about 34 percent, when you compare that to the  
9 British results -- which is about ten percent -  
10 - and you compare that to the medical  
11 literature in relationship to cancer mortality  
12 in uranium workers, I think we are very  
13 claimant favorable and that's the proper  
14 approach and we should always continue to do  
15 that. And I think -- that's why I was  
16 concerned is that you -- you sort of took the  
17 worst-case situation for that building, and --  
18 and -- and they can be bound. Thank you.

19 **MR. GRIFFON:** But -- but again, I -- and Jim'll  
20 probably speak to this, too, but that's --  
21 that's not the model before us, you know, so --  
22 the 20 is not on the table as far as --

23 **DR. NETON:** Well --

24 **MR. GRIFFON:** -- this decision.

25 **DR. NETON:** I think it's -- it's not on the

1           table currently, but again, that could become a  
2           site profile issue. I mean we've done this in  
3           the past where if there's disagreement between  
4           NIOSH and SC&A as to what the exact value is,  
5           yet we both believe that it's a tractable  
6           problem, then we can come to some consensus  
7           eventually. And I think that's where we're at  
8           with this.

9           Speaking to the cancer -- lung cancer issue, I  
10          would point out, and this is interesting, in  
11          the Blockson case that the concentration of  
12          radon that's assigned to the workers at  
13          Blockson Chemical will have very little bearing  
14          on the compensability of any cancers at  
15          Blockson. That's because the uranium  
16          inhalation model that we've developed for the  
17          workers -- that everyone gets assigned, whether  
18          they worked in Building 55 or not -- creates an  
19          extremely high compensability rate for lung  
20          cancers to start with.

21          In other words, if you have lung cancer and  
22          worked any appreciable extent of time at  
23          Blockson Chemical, you're very likely to be  
24          compensated under this program, purely from the  
25          uranium exposure. So whether radon is two or

1           20, in my opinion it will make an extremely  
2           small difference in the compensability. It's  
3           not really a consideration, but just an  
4           interesting site fact.

5           **DR. ZIEMER:** Other comments, pro or con?  
6           Anyone wish to speak against the motion, or for  
7           the motion?

8           **MR. GRIFFON:** I -- I mean I think -- I don't  
9           disagree with Jim's last point, but as he said  
10          at the end, it's irrelevant. I mean this is a  
11          Special Exposure Cohort, so we're not looking  
12          at disease cohorts here, so -- but -- but it is  
13          what sort of drives me to want to close this  
14          radon issue out because, you know -- just  
15          because of what he stated. I mean it's -- it's  
16          a lung cancer issue only and -- and I -- and I  
17          -- just one word to what Wanda said. I mean I  
18          know we have agreement with the contractor and  
19          NIOSH, but I think you said yesterday -- you  
20          know, we have to keep in mind that SC&A is our  
21          contractor and we -- we are doing the review.  
22          The Board is tasked -- or, you know, authorized  
23          under the legislation to do this. And you  
24          know, I just think that to get this model --  
25          again, I'm not getting the numbers. We hear

1 statements made on -- on the mike here that we  
2 can bound it with 20, but it's not on the  
3 table. The '83 study -- you know, I -- maybe I  
4 should have looked at that earlier. I was  
5 taking those numbers and -- and looking on the  
6 other end and -- and hadn't saw the source  
7 documents so I -- my apologies there, but  
8 there's a lot of documents to look at. And  
9 then you compare -- the only other thing I'll  
10 say is I -- I look at '83, this 1983 study,  
11 which I -- you know, suspect -- or -- or at  
12 least not many details in the -- in the memo  
13 report, and compare that to a -- I believe a  
14 later survey in Building 55, I -- somebody can  
15 correct me if I'm wrong, but there was a buil--  
16 a survey in Building 55 and the radon con-- and  
17 we just heard how -- from John that the -- 55  
18 wasn't an issue as far as radon. Radon levels  
19 were slightly higher in that building on the  
20 survey than in Building 40 on this 1983 survey.  
21 So I guess someone can say well, they're all  
22 seven-year background, that's reality, you  
23 know. But when I'm -- you know, when I get  
24 this -- this last source term model to sort of  
25 do a reality check and I have some differences

1 of opinion on -- and I mean I'm not even -- I'm  
2 not even saying that it necessarily can be  
3 bounded, but I'm saying that I've got these  
4 three final factors basically to corroborate  
5 the model and -- and I'm not getting numbers  
6 that jive with what our contractor or NIOSH  
7 have gotten, then -- you know, even this  
8 printed report -- I mean I -- you know, John  
9 did say -- I mean the -- there's a couple of  
10 different sections to this so maybe I -- but  
11 the initial parameters that I was running some  
12 calculations on show a release fraction of .3.  
13 I think he examined different release fractions  
14 so that might be what he's talking about with  
15 the one, but it -- it didn't always assume 100  
16 percent -- you know, he looked at different  
17 parameters, which is fine; that's the way I  
18 would have done it. But it also shows a  
19 production rate, which I had some questions  
20 about, that assumes 6,000 pou-- pou-- tons per  
21 week, equally distributed, assuming 24-hour  
22 operation. And I don't know, was -- if it was  
23 24/7 days, if that was necessarily -- averaging  
24 over the year, it may not even impact it. But  
25 that's a question -- but then when I take these

1 parameters and I run them in -- in this first  
2 little -- you know, do the first thing, which  
3 is to generate the -- the radon per second, I'm  
4 getting different numbers than in this re-- in  
5 this report that was handed out to me  
6 yesterday. So I'm trying to cor-- you know, I  
7 -- I do want to -- to see an end to this, but  
8 when I'm not getting numbers to add up and I  
9 have questions on parameters, I just feel like  
10 I'm not -- I'm not there yet and I -- so that's  
11 why I'm speaking against the motion.

12 **DR. ZIEMER:** Okay, any others? Yes, Brad.

13 **UNIDENTIFIED:** Hello?

14 **DR. ZIEMER:** Go ahead, Brad.

15 **MR. CLAWSON:** Okay. One of my things that I  
16 look at on this, and I'm looking at this as if  
17 I was a individual that was at Blockson or  
18 whatever, and I'm sitting there listening to  
19 how they've reconstructed my building and so  
20 forth like that, and -- and it's a wonderful  
21 thing, it's wonderful science. But it's a --  
22 what we call in the science also kind of a  
23 slag.

24 We -- we are using an awful lot of speculation,  
25 and I realize that that's what we have to be



1           able to do. But before we ever put our name  
2           onto it, we -- or I need to always feel that I  
3           have made this as claimant favorable as  
4           possible. I think as if I had a child or a  
5           mother or a father that's in this building.  
6           And the petitioners have brought up so many  
7           times well, these vents were closed, this was  
8           that, the information you're using is from a  
9           completely different state, the facility was a  
10          little bit different. Well, you have a little  
11          bit of magic here and a little bit of smoke and  
12          mirrors here, you can -- you can come up to a  
13          fairly close one. But my thing is is I don't  
14          think that we have fully addressed all the  
15          issues and really looked at it and made it the  
16          -- as claimant favorable as possible because we  
17          are using a lot of speculations.

18         **DR. ZIEMER:** Okay, thank you. Jim, another  
19         comment?

20         **DR. LOCKEY:** Brad, maybe I can address that.  
21         Based on what John has said, he's taking an ore  
22         that has very low radon content. He's assuming  
23         100 percent release, which you don't get -- you  
24         don't get. And he's assuming essentially no  
25         air exchange in the building. You can't get

1           any more conservative than that. I mean that -  
2           - that probably is over-estimating the  
3           exposures by a factor of ten to 20, but it is a  
4           very claimant-favorable approach. It really  
5           is. I mean it is -- it is, from what I'm  
6           hearing anyway, and that's why I was asking the  
7           question how -- how did he come up with that  
8           model. And if you take a box model with no air  
9           exchange --

10          **DR. MAURO:** No, one air exchange.

11          **DR. LOCKEY:** -- one air exchange and an ore  
12          where you're -- you're not going to get 100  
13          percent radon release unless you grind it into  
14          a fine powder, that -- that's a pretty  
15          conservative approach.

16          **DR. ZIEMER:** Okay, Gen and then Mike.

17          **DR. ROESSLER:** I think I would question the use  
18          of your word "speculation". This really is not  
19          speculation. That makes it seem like you're  
20          just pulling everything out of the air.  
21          They're starting with facts, pretty solid  
22          facts, and from that point trying to put  
23          together perhaps what you would call a worst-  
24          case scenario, so it's not speculation.

25          **DR. ZIEMER:** Okay. Michael?

1           **MR. GIBSON:** Someone correct me if I'm wrong,  
2           but the numbers on the report are looking like  
3           30 percent of the radon -- if -- if we're going  
4           to talk these numbers of -- bounding limit of  
5           20, then that's when you're talking about one  
6           air turnover per hour and a hundred -- a  
7           hundred percent resus-- yeah.

8           **MR. GRIFFON:** Release fraction.

9           **DR. ZIEMER:** John?

10          **DR. MAURO:** If I may try to hel-- it's -- it's  
11          -- the report you -- you're seeing, in the  
12          first case, was -- okay, let's go with the 30  
13          percent because that's sort of conventional,  
14          not bad. But at the same time, the re-- so we  
15          looked at that and varied some parameters and  
16          see what happens when you use that as your --  
17          the starting point, the 30 percent radon  
18          emanation coefficient. But then we said but  
19          wait a minute, you know, we are -- there are --  
20          are aggressively -- it's not like we're talking  
21          about soil now, soil sitting there. We're  
22          going to take this stuff and we're going to  
23          grind it and pulverize it and make it into a  
24          powder. I don't know what the radon emanation  
25          coefficient is for that, so I say let's do

1 another case. Let's go with 100 percent, so  
2 this -- and could -- maybe it was, I don't know  
3 -- it has a factor -- it's proportional. You  
4 know, it -- air turnover -- everything is  
5 proportional, so it's -- you know, so you want  
6 to -- if you want to go from, you know, 30  
7 percent to 100 percent -- well, it's a factor  
8 of three. Air turnover rates, if you want to  
9 go one air turnover rate -- no, we want to go  
10 with two, it's a factor of two. So in other  
11 words, it's all multipliers. So you could see  
12 -- when we come up with the 20, I -- someone  
13 sa-- and that was on one air turnover. If I  
14 say no and now I want to go with two, all  
15 right, it's ten. Well, wait a minute, I don't  
16 want to go -- I want to -- I -- you know, I  
17 want to go with 30 percent, divide that by  
18 three. Now we're down -- which may be the  
19 realistic one, you know. You know where we  
20 are? We're right around three, which is the  
21 number that -- so you know -- you see how I get  
22 -- how I get there.

23 **DR. NETON:** I'd also like to just point out one  
24 thing that I remembered, is that the location  
25 where SC&A assumes there was a 100 percent

1 release of the radon from the ore in the  
2 grinding operation, we've interviewed a number  
3 of people and everyone we've interviewed that's  
4 talked about it has indicated that there was  
5 local exhaust ventilation directly over the  
6 grinding operation because it was kind of a  
7 dusty operation. So that in itself had its own  
8 capture velocity to ventilate the radon out of  
9 the building itself. So that -- that would  
10 even make the model slightly more conservative  
11 than it really is.

12 **DR. ZIEMER:** Michael, another comment?

13 **MR. GIBSON:** Let me restate my question. The  
14 numbers that are on the table that we're going  
15 to be considering, or that we are considering,  
16 is two, not 20. Is that correct?

17 **DR. NETON:** That's currently what is in our  
18 site profile.

19 **MR. GIBSON:** Okay.

20 **DR. NETON:** But again, this is an SEC  
21 evaluation and the determination is whether or  
22 not it could be adequately bounded.

23 **DR. ZIEMER:** Robert?

24 **MR. STEPHAN:** John, can you just submit  
25 something for the record -- a source, you know,

1           some piece of literature; I'm sure you have  
2           plenty -- that relates to the one turnover per  
3           hour? You know, af-- after the fact.

4           **DR. MAURO:** Yes, I can. I have --

5           **MS. MUNN:** Thank you.

6           **DR. MAURO:** I brought it with me. It's a page  
7           out of a report that's on the web. What --  
8           unfortunately, what you have is a handout, this  
9           report. That -- first of all, it shouldn't be  
10          distributed. It was something that was  
11          produced on Friday. We weren't going to hand  
12          it out. A request was made by one of the Board  
13          members would like to look at it. This was our  
14          internal work and it's really --

15          **DR. ZIEMER:** It's not an official SC&A --

16          **DR. MAURO:** It's not an SC-- it's not an  
17          official SC&A deliverable. I checked it, what  
18          numbers were done, and then I did a hand cal to  
19          -- we normally do more than that. It does have  
20          the literature behind it. I -- I saw the  
21          citation as I -- other words, so -- what I'm  
22          getting at is, in effect, you're looking at a  
23          work product that is not an official SC&A  
24          deliverable. It was produced for the purpose  
25          of helping me come to the table with some -- of

1           -- information of value that could be useful to  
2           the Board, but it's not -- so what I would like  
3           to do, given the weight apparently that this is  
4           starting to take, is to turn it into a  
5           deliverable that can be put on the web, with  
6           all the citations, so that anyone could go in  
7           and check the numbers and convince themselves  
8           that the values are --

9           **DR. BRANCHE:** That would be appropriate.

10          **DR. MAURO:** -- correct. I think that's -- yeah  
11          -- so -- yeah, I think that's very important  
12          because really it has not received your -- it  
13          has not received official SC&A peer review.  
14          The review it got was when Chick finished it,  
15          wrote it up -- again, I -- and in fact, I  
16          originally started by doing my own hand cal.  
17          Then I brought it to Chick's attention. Chick  
18          did it a little bit more sophisticated, doing a  
19          parametric analysis.

20          **DR. ZIEMER:** Okay. Thank you.

21          **DR. BRANCHE:** Do you want to collect the copies  
22          that have been distributed back?

23          **DR. MAURO:** I'd like to do that, yes. Thank  
24          you. Thank you.

25          **DR. ZIEMER:** Josie?

1           **MS. BEACH:** I personally would like to see this  
2           tabled until the next meeting to give a chance  
3           for this new information and some of the other  
4           -- the other topics we're discussing this  
5           morning time to -- for all of us to understand  
6           what the issue is, so...

7           **DR. ZIEMER:** Are you making a motion to table?

8           **MS. BEACH:** I would like to table. I don't  
9           know if I can make a motion to do that.

10          **DR. ZIEMER:** Sure, you can make a motion to do  
11          that.

12          **MS. BEACH:** Then I would like to make a motion  
13          to table this until our next --

14          **MR. SCHOFIELD:** Second.

15          **MS. BEACH:** -- meeting.

16          **DR. ZIEMER:** It's been seconded. This is not a  
17          debatable motion. We will immediately vote.  
18          It takes a majority to table. We'll take a  
19          roll call vote.

20          **DR. BRANCHE:** Roll call vote? This is for the  
21          motion to table.

22          Ms. Beach?

23          **MS. BEACH:** Yes.

24          **DR. BRANCHE:** Mr. Clawson?

25          **MR. CLAWSON:** Yes.



1 DR. BRANCHE: Mr. Gibson?

2 MR. GIBSON: Yes.

3 DR. BRANCHE: Mr. Griffon?

4 MR. GRIFFON: Yes.

5 DR. BRANCHE: Dr. Lockey?

6 DR. LOCKEY: No.

7 DR. BRANCHE: We'll have to get Dr. Melius's  
8 vote, I guess --

9 DR. ZIEMER: No, you don't.

10 DR. BRANCHE: Not for this one. Ms. Munn?

11 MS. MUNN: No.

12 DR. BRANCHE: Mr. Presley?

13 MR. PRESLEY: No.

14 DR. BRANCHE: Dr. Poston?

15 DR. POSTON: Yes.

16 DR. BRANCHE: Dr. Roessler?

17 DR. ROESSLER: No.

18 DR. BRANCHE: Mr. Schofield?

19 MR. SCHOFIELD: Yes.

20 DR. BRANCHE: Dr. Ziemer?

21 DR. ZIEMER: The Chair votes no. So what --  
22 what's the...

23 DR. BRANCHE: I think it's a tie. One second.

24 (Pause)

25 No, it can't be a tie 'cause Dr. Melius is not

1 here.

2 **DR. ZIEMER:** It can't be a tie.

3 (Pause)

4 I think the no -- or the yeses have it.

5 **DR. BRANCHE:** The yes to table have it by one.

6 **DR. ZIEMER:** Okay. The -- the motion to table  
7 is successful, and that then ends this  
8 discussion.

9 **DR. BRANCHE:** I have a question, though, one --

10 **DR. ZIEMER:** John Poston.

11 **DR. POSTON:** Well, you beat me to it, but I  
12 voted in favor of the motion, with the  
13 understanding that we were all going to see  
14 this report. None of us -- I haven't seen it,  
15 so I couldn't make a -- you know, I understand  
16 and was certainly inclined to vote to deny the  
17 SEC, but I haven't seen the report. I can't  
18 make -- you know, I --

19 **DR. ZIEMER:** That's fine.

20 **DR. POSTON:** -- and so I assume that this  
21 action that's -- follows this vote is that  
22 we're going to see that report.

23 **DR. ZIEMER:** I think the commitment has been to  
24 turn the -- the unofficial document into a  
25 deliverable, and can we so task him to do that?

1           **DR. BRANCHE:** Yes. My question, Dr. Ziemer, is  
2 is this being tabled until the telephone  
3 conference call in August, or the face-to-face  
4 Board meeting in September?

5           **DR. ZIEMER:** The motion had no date associated  
6 with it. It comes off the table when someone  
7 moves to remove it from the table.

8           **DR. BRANCHE:** Thank you.

9           **DR. ZIEMER:** That can occur at the next  
10 meeting. It can occur a year from now. But I  
11 think in principle this is going to have to be  
12 like any others, we've got to move forward on  
13 this. We cannot keep tabling things  
14 indefinitely.

15           Yes, Mark.

16           **MR. GRIFFON:** Can I ask -- just a -- this may  
17 be -- just to clarify. This -- this  
18 deliverable for SC&A -- I know we've had  
19 discussions before on what SC&A's work and  
20 tasks should be, and what they are not. And  
21 this is a -- a analysis to demonstr-- to sort  
22 of confirm the model in the ER report, or to  
23 val-- you know, to substantiate, I guess is a  
24 better word. I'm not sure it's not -- it  
25 shouldn't be a NIOSH work product. It's

1           defending their position of -- and I know that  
2           -- that -- I think SC&A and NIOSH, Tom Tomes,  
3           sort of collaborated on this, but I'm not sure  
4           who should pro-- you know, it might be a small  
5           point, but I think it might be important.

6           **DR. ZIEMER:** Well, I think what happened here  
7           was a document, which I guess was like tabletop  
8           scratchings at the workgroup, took on a life of  
9           its own and ended up here. I've not seen the  
10          document that's being discussed myself, but it  
11          -- it has become a focus of discussion because  
12          it apparently helped capture the thought  
13          process for how one can approach the radon  
14          issue. So in that sense, I think all we're  
15          asking John to do is put this in a form that  
16          everybody -- I mean the work has been done, so  
17          we're asking for a copy of that and the  
18          citations and official delivery to the Board  
19          through the normal channels.

20          **DR. MAURO:** If you give me a week I'll get it  
21          to everyone electronically. We could even get  
22          it PA reviewed if it could be -- it's very  
23          short.

24          **DR. BRANCHE:** It should be PA reviewed.

25          **DR. MAURO:** It's very short.

1           **MS. MUNN:** It's only two pages and -- and the  
2           citations, and it's already in a deliverable  
3           form in terms of format. The only thing that  
4           is lacking is it was not PA reviewed. It was a  
5           late-breaking document.

6           **DR. NETON:** I have a process question. Does  
7           this report then be-- is it distributed to the  
8           full Board and then it will take up the issue  
9           again at the Board meeting, or does this go  
10          back to the working group for further  
11          deliberations?

12          **MS. MUNN:** That was going to be my question,  
13          Jim. I wanted to make very sure that there's  
14          no instruction being given to the workgroup.  
15          And if there is, what is that instruction, and  
16          whether there is any subsequent --

17          **DR. ZIEMER:** Well, it seems to the Chair that  
18          this issue has been vetted before the Board now  
19          and people are asking to see the -- the  
20          underlying document, so certainly this is a  
21          Board issue at this point.

22          Now since the tabling has occurred, I -- I  
23          recognize that that gives -- Mark, it gives you  
24          the opportunity to try to come to closure on  
25          some of your issues and that may be something

1           you need to do yourself. Do you need the help  
2           of the workgroup on -- on that or is it a  
3           matter of --

4           **MR. GRIFFON:** No.

5           **DR. ZIEMER:** -- being able to look at the --  
6           the documentation --

7           **MR. GRIFFON:** Yeah, I don't -- I don't -- I  
8           don't think so, no -- no.

9           **DR. ZIEMER:** So the Chair would ask, in that  
10          case -- and if there are others who have those  
11          concerns that Mark articulated, to be sure to  
12          work with him, and please seek whatever  
13          clarification you need from either NIOSH or  
14          SC&A to make sure that -- that we're on the  
15          same page there as far as interpreting and  
16          collaborating on that data.

17          **DR. BRANCHE:** One additional point of order.  
18          You did hear the discussion that Dr. Mauro  
19          would like those draft copies back. It is --  
20          it requires more than simply returning it. You  
21          said it was some scratch notes for your own  
22          use, and we really don't need to have that  
23          interim document that was distributed to the  
24          workgroup members treated as if it were tru-- a  
25          true deliverable from SC&A. So if -- if you

1 would please re-- turn those back in to Dr.  
2 Mauro or a member of his team, I'd appreciate  
3 it. Thank you.

4 **DR. ZIEMER:** So unless the Board believes that  
5 there's additional work for the workgroup to  
6 do, I -- I believe it's a matter of getting  
7 this documentation to the Board members for  
8 their perusal. And if that comes in a timely  
9 fashion, then I -- I would hope we could do --  
10 do the vote at our next meeting, but it would  
11 require a vote to remove it from the table, and  
12 then action on the original motion, which is  
13 the motion to con-- to -- the motion was to  
14 support the NIOSH position.

15 **MS. MUNN:** The workgroup chair will be more  
16 than happy to take the responsibility to see  
17 that it's removed from the table at the next  
18 meeting.

19 **DR. ZIEMER:** Thank you.

20 **ROCKY FLATS PLANT, MR. MARK GRIFFON**

21 Next on our agenda is the Rocky Flats plant  
22 then. Mark, do you have some items to report  
23 to us there?

24 **MR. GRIFFON:** Yeah, the -- the only -- we had a  
25 workgroup call. I -- I am at a loss to

1 remember when, it was recently. And really  
2 what we had at that workgroup call was a  
3 presentation from --

4 **DR. BRANCHE:** The 17th of June.

5 **MR. GRIFFON:** -- 17th of June, thank you. We  
6 had a -- a presentation from the Department of  
7 Labor on the implementation of the SEC class at  
8 -- at Rocky Flats, particularly related to the  
9 -- how were neutron workers identified. And at  
10 that point -- at the end of the meeting I  
11 agreed that I would write a -- a draft memo and  
12 run it by the workgroup first, and then bring  
13 it back to the Board. I haven't had a chance  
14 to do that yet, and I still want to -- I'm  
15 actually in the process of collecting more  
16 facts on this, quite frankly, before I put a  
17 memo together. My -- I had a question to  
18 Department of Labor during the meeting and I've  
19 talked to Jeff a little bit off line about  
20 this, but it -- it appears that -- that the  
21 implementation of this -- that the cases that  
22 are sort of not being included in the class are  
23 -- are ver-- based on the neutron worker  
24 criteria, anyway -- if they fit in the years  
25 and everything else, based on that criteria



1 alone, it seems like a very limited number of  
2 cases. And I guess there's been some  
3 discussions about the nature of those  
4 particular cases and so -- so I -- I don't want  
5 to -- you know, it -- it may be that I need to  
6 just get some more of those facts before I put  
7 any memo before the Board, you know, 'cause I  
8 don't know that we need an action and I want to  
9 make sure before we do anything that -- I have  
10 all the facts, so...

11 **DR. ZIEMER:** Board members, do you have any  
12 questions on this issue with Mark?

13 (No responses)

14 And the petitioners in Rocky Flats are being  
15 kept apprised of -- of what's going on there, I  
16 assume. I know they were concerned there about  
17 how the -- the class was being implemented and  
18 so on.

19 **MR. GRIFFON:** Right, and --

20 **DR. ZIEMER:** Right.

21 **MR. GRIFFON:** -- I believe the petitioners have  
22 been represented on the workgroup calls, so  
23 they've been following the process, yes.

24 **CHAPMAN VALVE, DR. JOHN POSTON**

25 **DR. ZIEMER:** Okay, let's move on to Chapman

1 Valve and Dr. Poston.

2 **DR. POSTON:** Thank you, Mr. Chairman. I -- I  
3 bring you sort of the same problem that Ms.  
4 Munn presented --

5 **UNIDENTIFIED:** We're on Chapman. Yeah, I  
6 picked it up just so I could --

7 **DR. BRANCHE:** If all participants by phone  
8 would please mute your line.

9 **MR. GRIFFON:** I think that's Jim Melius.

10 **DR. BRANCHE:** Dr. Melius, is that you?

11 (No responses)

12 **MR. GRIFFON:** No.

13 **DR. BRANCHE:** If all participants participating  
14 by phone would please mute your line. If you  
15 do not have a mute button, then please use  
16 star-6. Also, I ask all phone participants, do  
17 not put this line on hold. If you must leave  
18 the line, then please hang up and dial back in,  
19 but do not put us on hold. It makes for a lot  
20 of unnecessary noise on the line, disturbing  
21 every-- disrupting everyone's ability to be  
22 able to hear. Thank you.

23 **DR. POSTON:** Our most recent face-to-face  
24 meeting was May 1st in Cincinnati. At that  
25 time we put together some questions that were

1 transmitted to the Department of Energy for  
2 answer, and we also asked Dr. Neton to continue  
3 with an initiative that he had started in  
4 contacting the -- the folks at Oak Ridge  
5 National Lab regarding the one sample at  
6 Chapman Valve that was slightly elevated -- I  
7 believe it was on the order of two percent  
8 enriched uranium.

9 We also at that meeting decided that we needed  
10 to request removal of the Dean Street facility  
11 from our consideration because we were unable  
12 to find any information on -- on that facility  
13 that would allow us to do anything. And that  
14 subsequently was a motion that I -- or a  
15 request that I made in our telephone confer--  
16 conference call that we had after that May 1st  
17 face-to-face meeting.

18 Most recently we met yesterday to discuss these  
19 issues. We have a lengthy letter from Mr.  
20 Folle\* from Oak Ridge National Laboratory  
21 regarding the -- the sample. He basically has  
22 confirmed that the sample, as far as he can  
23 ascertain, was an actual sample of two percent.  
24 I don't think I'm mischaracterizing his -- his  
25 position that he didn't have an explanation for

1           it, although he did speculate in his letter  
2           that there was some Department of Defense work  
3           that occurred at Chapman Valve associated with  
4           the Nautilus program. No date was assigned,  
5           but that was roughly in the -- in the late  
6           '50s. The Nautilus went to sea in 1957, as I  
7           recall -- '57/'58 -- which is outside of the  
8           time frame considered. So -- so we have this  
9           one sample which indicates there was some  
10          activity going on site at the -- during some  
11          undefined period in which there was slightly  
12          enriched uranium where --

13          So the response from DOE which we received the  
14          day -- the evening before our workgroup meeting  
15          basically provided no new information, and so  
16          we were left with Mr. Folle's letter confirming  
17          the sample and the situation, in which we  
18          basically I think never disagreed, that the  
19          external dosimetry could be done by NIOSH, but  
20          the major contention was the internal  
21          dosimetry.

22          So the committee is -- or the workgroup, I'm  
23          sorry, is somewhat split. We were able not to  
24          -- we were not able to reach an agreement on  
25          the internal dose. NIOSH is proposing what

1           could be considered a very, very conservative  
2           bounding of the internal dose.  The -- if we  
3           even bring into the equation consideration of  
4           enriched material, we'd perhaps double the  
5           dose, but that would still provide an upper  
6           bound for the dose.

7           But this is a troubling situation and -- and  
8           members of the workgroup felt that it was -- it  
9           was just too much of uncertainty to recom-- or  
10          to have a recommendation to the Board, and so  
11          we basically did not have a motion of any  
12          action to bring to you.  It's an -- I hate to  
13          lay this at your feet, but this is the  
14          situation where basically we're not -- want to  
15          reach an agreement, based primarily on our  
16          uncertainties associated with this enriched  
17          uranium.  And I would ask, if I haven't  
18          characterized that correctly, that members of  
19          the workgroup who want to certainly correct it.  
20          I -- I think I did a reasonable job of...

21          **DR. ZIEMER:**  Let me ask this question, based on  
22          your statement that it was indicated to you --  
23          apparently by NIOSH -- that one possibility  
24          would be to include the U-235 in the bounding  
25          calculations.  And was this discussed by the

1 workgroup and, if that were done, does the  
2 workgroup agree that bounding can occur?

3 **DR. POSTON:** It was -- it was only part of the  
4 conversation. It was -- we didn't ask NIOSH to  
5 do that. It was an estimate by those of us who  
6 knew something about internal dose -- Jim Neton  
7 and so forth -- and we speculated that -- that  
8 it would increase the dose, perhaps as much as  
9 a factor of two. So -- but we -- we didn't do  
10 those calculations, no. And we basically --  
11 gee, whiz, I just had a senior moment. I  
12 forgot the rest of your question.

13 **DR. ZIEMER:** Well, I -- what I was wondering  
14 was was there any agreement in the workgroup  
15 that bounding could occur with the inclusion of  
16 U-235, if that was the issue. Jim?

17 **DR. POSTON:** Oh, no, the -- there was no  
18 agreement. In fact, the -- again, we were in a  
19 same situation as Ms. Munn's -- half and half  
20 basically saying we could and the other half  
21 said they were concerned about -- I think the  
22 word that was used was "speculation."

23 **DR. ZIEMER:** Okay. Jim?

24 **DR. NETON:** Yeah, I -- I agree with Dr. Poston.  
25 It was discussed whether -- you know, if -- if

1 we were to assume that the uranium that was  
2 processed in -- in Building 23 were two percent  
3 enriched, the doses would approximately double.  
4 But I think the central question is, is it  
5 likely that two percent enriched uranium was  
6 even processed in Building 23 in '48 and '49,  
7 and I -- it's NIOSH's position still that --  
8 that that's very unlikely. But it is true that  
9 if it were two percent enriched uranium, it  
10 would double the dose. We see no evidence that  
11 any enriched uranium at all was handled in --  
12 at -- at Chapman Valve in 1948 and '49.

13 **DR. POSTON:** I failed to --

14 **DR. ZIEMER:** Do we have a phone person?

15 **DR. BRANCHE:** You can ask. There might be.

16 **DR. POSTON:** I failed to mention that one of  
17 the things that I think -- I'm speaking  
18 personally. One of the things that I hung my  
19 hat on was there's this huge report from H.K.  
20 Ferguson regarding the -- the activities at  
21 Chapman Valve during this period, it's  
22 extremely detailed, and -- about everything  
23 that we assumed was going on there originally -  
24 - and there's no mention of any activities or  
25 any elevated concentrations of uranium. It was

1 all associated with machining the rods for the  
2 Brookhaven reactor.

3 **DR. ZIEMER:** Thank you. I -- I'm nonetheless  
4 going to call for a motion in just a moment. I  
5 want to determine whether any petitioners are  
6 on the line.

7 **DR. POSTON:** Mike has a --

8 **DR. ZIEMER:** Hang on, Mike, let's see if  
9 there's a petitioner on the line, then we'll --  
10 are there any petitioners on the line from  
11 Chapman Valve?

12 (No responses)

13 Apparently not. Okay, Michael.

14 **MR. GIBSON:** Just as a member of the workgroup,  
15 you know, one of the concerns was not only the  
16 one sample, it was the lack of the origin of  
17 that sample and the history thereof, and what  
18 other operations may have went on. So it's --  
19 it's not just including that one sample, in my  
20 opinion.

21 **DR. ZIEMER:** Brad? Hang on -- yes?

22 **MR. BROEHM:** Dr. Ziemer, I just wanted to  
23 remind you that Sharon Block from Senator  
24 Kennedy's office is on the phone and I think --

25 **DR. ZIEMER:** Oh, she is on the line, okay.



1           **MR. BROEHM:** -- wants to make a statement.

2           **DR. ZIEMER:** Let-- let's hear from Sharon if  
3 she's on the -- Sharon, are you there?

4           **MS. BLOCK:** I am.

5           **DR. ZIEMER:** Oh, would you have some comments  
6 for us?

7           **MS. BLOCK:** Yes, and -- and thank you for  
8 recognizing me. I mean Senator Kennedy's, you  
9 know, position on this has been clear  
10 throughout and I think he -- he continues to  
11 believe that the petition should be granted,  
12 that, you know, too much time has passed and it  
13 -- it's time to give some, you know,  
14 compensation and closure to the -- to the  
15 workers of Chapman Valve. The program -- and  
16 he knows, since he was there when the program  
17 was designed, was supposed to make timely  
18 decisions. But if today the Board isn't  
19 prepared to grant the petition, you know, we  
20 think it's really important that the Board take  
21 the time, even if it means more time, to make  
22 the right decision. And -- and one thing that  
23 -- that our office has been very concerned  
24 about is that the petitioners and -- and our  
25 office have not been getting information in a

1           timely manner. We saw the Folle report that --  
2           that was just being discussed just last night  
3           and my understanding is that the petitioners  
4           didn't get it really until later last night and  
5           that -- that has been a pattern and -- and it's  
6           a concern because I think it goes to the  
7           confidence that especially the petitioners have  
8           in this process where they, you know, feel that  
9           they've been left out of some of the  
10          information. So to -- to have had that  
11          information circulated so -- so recently and  
12          then to have, you know, an ultimate vote on the  
13          petition I think would be very troubling for  
14          them, especially considering, as -- as the  
15          Board was just discussing -- how much  
16          uncertainty there is around what happened at  
17          Chapman Valve. So Senator Kennedy's position  
18          has remained consistent. He thinks it's time  
19          to have the petition granted, but if that's not  
20          going to happen, then there needs to be, you  
21          know, some -- some feeling of resolution and  
22          confidence for the petitioners in -- in the  
23          Board's decision, and that can only happen if  
24          there is some resolution of this uncertainty.  
25          I thank you for the opportunity.

1           **DR. ZIEMER:** Okay, thank you for your input on  
2           that.

3           Let's see, we have a comment from Brad Clawson  
4           and then from John Poston.

5           **MR. CLAWSON:** Every time we start talking about  
6           this, and -- and me and John's had some very  
7           heart-to-heart talks on this, one of the things  
8           is I like to use a percentage instead of just  
9           one or two samples because what we've got to  
10          realize is this one sample is 50 percent of  
11          what we have for our data. It has been proven  
12          by the Folle letter. It's gone through all  
13          this, and I just -- yes, I'm the one that used  
14          the term "speculation" and maybe that wasn't  
15          the best words, but the thing is is we cannot -  
16          - we cannot just discard this sample, and this  
17          has always been a big issue. We -- we came up  
18          with the Dean Street, and as many of these  
19          sites that we have found, we have ended up with  
20          finding that we -- we can't get all the  
21          information for it, and -- and I realize that.  
22          But we just can't discard this sample, either.

23          **DR. ZIEMER:** John, and then Jim.

24          **DR. POSTON:** Yeah. Well, Brad, that -- what  
25          you say is true, if you regard the samples that

1           were taken outside the building. But that's  
2           not true in terms of the external dosimetry,  
3           it's not true in terms of the internal  
4           dosimetry 'cause we have plenty of air  
5           monitoring results and so forth, which were the  
6           basis of the -- of the NIOSH evaluation for the  
7           intakes associated with the workers. We're  
8           talking about the workers that are inside the  
9           building, and that's what we're trying to  
10          assess, their dose. The sample was not inside  
11          the area that we're concerned about. And you  
12          know, the speculation -- regardless of what it  
13          is, the speculation is that it probab-- it came  
14          from the DOE -- DoD operations at a time period  
15          well after the -- the period of time in  
16          consideration.

17          I'm going to do what Ms. Munn did and I'm going  
18          to make a motion so that we can discuss this  
19          further. I would move that -- as a -- as an  
20          individual; this is not a workgroup motion. I  
21          would move, as I did before, that based on the  
22          information that the workgroup -- that we have  
23          reviewed, that it's my opinion that we should  
24          deny the petition -- the SEC petition.

25          **DR. ZIEMER:** And that is your motion?

1           **DR. POSTON:** That's the motion.

2           **DR. ZIEMER:** And is there a second?

3           **DR. ROESSLER:** I second that.

4           **DR. ZIEMER:** And seconded. This motion is now  
5 open for discussion. And Jim, you were at the  
6 mike a moment ago. Did you have a comment  
7 or...

8           **DR. NETON:** I think Dr. Poston substantively  
9 addressed what I was going to say, which is  
10 that the -- the 50 percent issue has been  
11 raised, but the one sample that was taken near  
12 the loading dock that was enriched was not in  
13 the -- necessarily in the workplace. And the  
14 fif-- the other sample that was taken in the  
15 workplace was natural uranium. And every  
16 indication we have from every report that we  
17 have for -- for Chapman Valve indicates that it  
18 was natural uranium that was sent over to  
19 Brookhaven and processed. So I think that's  
20 pretty well substantiated.

21           **DR. ZIEMER:** Thank you. Gen Roessler?

22           **MR. GRIFFON:** The enriched sample was -- was  
23 outside the building, Jim?

24           **DR. NETON:** No, it was -- it was near the  
25 loading dock, just inside the door.

1           **MR. GRIFFON:** But it was in the building.

2           **DR. NETON:** It was in the building, right, but  
3 not in the work processes where the -- the  
4 grinding and the machining and the milling  
5 operations took place. And if you read the  
6 Folle report carefully, the reason they took  
7 the one sample near the loading dock is because  
8 it had some unusual characteristics -- some  
9 unusual beta-to-gamma ratios. I think it was  
10 elevated differently than what they saw in the  
11 -- in the rest of the building, or what they  
12 expected. That's why they took the one sample.  
13 And the other sample they took in the workplace  
14 they took to confirm that it was natural  
15 uranium, which is what they expected and is  
16 what they found.

17           **MR. GRIFFON:** Right.

18           **DR. ZIEMER:** Thank you. Gen Roessler?

19           **DR. ROESSLER:** Since we talk a lot about weight  
20 of evidence, I'd just like to read a couple of  
21 sentences out of the Folle report because we're  
22 -- we're trying to determine what that sample  
23 meant. And in this report he says -- just  
24 putting the whole thing in perspective, I think  
25 -- (reading) It is highly unlikely that any

1 work with enriched uranium could have taken  
2 place at this site without leaving a paper  
3 trail. There was very little of this material  
4 available at the time this work was done at  
5 Chapman. It is also unlikely because of  
6 security concerns. Few, if any, private  
7 companies would have been allowed to work with  
8 enriched material because, as far as I know,  
9 only government facilities were allowed to  
10 handle it.

11 **DR. ZIEMER:** Thank you. Other comments? We're  
12 -- we're discussing now the motion that's  
13 before us. Yes, Mark?

14 **MR. GRIFFON:** Just a -- I -- I mean I just  
15 wanted to remind us all that -- and this was  
16 true for the Blockson case, but it's also true  
17 here -- that -- Paul, you asked the question  
18 about did we consider, if the two percent were  
19 used, could we bound. And -- and NIOSH  
20 responded correctly. NIOSH's criteria is to  
21 demonstrate that they have sufficient  
22 information to bound doses. But we as a Board  
23 put in place procedures that said we want to  
24 see example dose reconstructions that show that  
25 they can bound. And so therefore these models

1           and this -- this discussion of 20 picocuries  
2           per liter for the radon or, in this case, you  
3           know, using two percent, are not on the table,  
4           in my opinion. I mean -- well, in reality,  
5           they're not on the table. So you know, that --  
6           that's just one thing for people, to remember  
7           our own procedures. We -- we've asked that in  
8           this SEC process we get examples and -- and  
9           have demonstration that -- and it's a -- I  
10          agree, it's above and beyond the criteria  
11          established for NIOSH, but we've set that in  
12          place for ourselves.

13          The second comment is that I think when -- when  
14          John presented -- and I think we -- we have  
15          all been using that word a little bit, that  
16          "speculation", and I think John presented --  
17          which I think is true, as well, Folle  
18          speculates, I think you -- you said in your --  
19          in your presentation, that it could have been  
20          from Naval operations after. I mean there --  
21          there's a bunch of -- of theories we've had  
22          discussed around the workgroup and speculation  
23          on how this sample might get there. The one  
24          reality now at this point I think we -- we can  
25          all come to a conclusion on is that it is an



1 enriched sample, so it came from somewhere  
2 else. And was it likely during that time  
3 period? You know, I -- I think it's less  
4 likely, for sure. I will agree to that. But  
5 we don't have an answer on where it could have  
6 come from and I'm a little uneasy to vote on --  
7 on speculation at this point that -- and also  
8 the fact that we haven't had another proposal  
9 of well, it's a real piece of data, maybe we  
10 need to reconsider that in the way we bound our  
11 doses. That hasn't been offered. So for those  
12 two reasons, I'm -- I'm voting against the mo--  
13 or I'm speaking in -- in -- against the motion.

14 **DR. ZIEMER:** Okay. Wanda, and then Brad.

15 **MS. MUNN:** I think Brad was up first.

16 **DR. ZIEMER:** Oh, Brad first? Okay.

17 **MR. CLAWSON:** Well, I'm going to fin-- finish  
18 the rest of the statement that Guinevieve (sic)  
19 started. (Reading) And other Massachusetts  
20 sites were surveyed, forerunners of the MAD  
21 group. This site was found to have various  
22 uranium enrichments. This was a  
23 (unintelligible) landfill, I believe  
24 (unintelligible) was an individual. The report  
25 was published on the landfill, but I do not

1 know the actual title of the report. I don't  
2 know of any conditions between facilities, but  
3 it does indicate that other contamination  
4 sources are present in the general area.  
5 I can tell you today that I have product from  
6 other facilities that you would never find a  
7 paper trail. The only thing it shows up on is  
8 my criticality controls because I don't own  
9 that product, but I am storing it. So you  
10 cannot tell me that there couldn't be something  
11 else that could have come in there or anything  
12 else. This is pure speculation. Now -- and we  
13 can say everything we want, but you know as  
14 well as I do that all of these DOE sites, from  
15 one site to the other, shared different stuff,  
16 research, everything else like that, and the  
17 paper trails, as we have seen in many things,  
18 is not the best. And that's why -- that's why  
19 I can't accept it and that's why I'm voting  
20 against it.

21 **DR. ZIEMER:** Wanda Munn?

22 **MS. MUNN:** I just had a -- a thought with  
23 respect to something that Mark said. My memory  
24 -- which is not always perfect, unfortunately -  
25 - led me to believe that we had been speaking

1 of a specific site when we had asked for NIOSH  
2 to demonstrate that they could or could not do  
3 something or -- I didn't realize that we had  
4 adopted that as --

5 **MR. GRIFFON:** It's in our procedure.

6 **MS. MUNN:** -- as a procedure for the Board. We  
7 -- we have done that?

8 **MR. GRIFFON:** Yes, yes.

9 **MS. MUNN:** I need to go back and reread that.  
10 I had thought that we had been working with a  
11 specific site at that time.

12 **DR. ZIEMER:** Jim -- Jim can speak to that  
13 issue.

14 **DR. NETON:** I think Mark's -- Mark's correct on  
15 that, but I want to reiterate that NIOSH has  
16 not indicated that we would double these doses.  
17 We have indicated that if it were two percent  
18 enriched uranium and determined to be two  
19 percent enriched uranium, then the dose would  
20 double. But we're not suggesting that we're  
21 going to double the doses to two percent in the  
22 --

23 **MR. GRIFFON:** Well, I'm just saying I hear that  
24 discussion around the table. I'm not saying  
25 you -- you know, but I'm saying I hear that as

1           --

2           **DR. NETON:** Yeah, agreed.

3           **MR. GRIFFON:** -- you know, if this was done,  
4           couldn't it be bounded and --

5           **DR. NETON:** Right, but I just want to make  
6           clear, we're not suggesting at this point that  
7           we would double the doses merely to make this  
8           problem go away. That's not the situation.

9           **MR. GRIFFON:** Okay.

10          **DR. ZIEMER:** Okay, other comments, pro or con,  
11          supporting or against the motion? Or are you -  
12          - okay, Phil?

13          **MR. PRESLEY:** Paul, can I speak?

14          **DR. ZIEMER:** Yeah, Robert, then Phil.

15          **MR. PRESLEY:** We're talking about enriched  
16          uranium, and at the time that this was  
17          supposedly to have happened, this country was  
18          just beginning to enrich uranium. And every  
19          minute particle of enriched uranium that was  
20          produced was captured and the material that it  
21          was captured off of was washed and checked and  
22          cleaned and checked -- not to say that some of  
23          it got out, but at that time that we were  
24          producing that type of material, there were  
25          procedures in place because we were trying to

1 get every gram that we possibly could to make a  
2 weapon. And the possibility of something like  
3 that getting up there is very, very minute  
4 because of the procedures that were taken at  
5 Oak Ridge to capture all of the material that  
6 they could make just as fast as they could make  
7 it. And that's -- that's a little history.

8 **DR. ZIEMER:** Okay. Phil?

9 **MR. SCHOFIELD:** I just -- until that issue is  
10 completely settled, I -- I still have a little  
11 heartburn because we're talking about the  
12 potential for increased dose to people who  
13 actually worked with the stuff on a daily  
14 basis. We're talking about real people here,  
15 we're not talking about air -- you know, the  
16 air or the ground contamination, but rather  
17 we're talking about potential for the people to  
18 ingest it or inhale it, which would make a  
19 difference in their -- whether they -- they  
20 could receive compensation or not.

21 **DR. ZIEMER:** Okay. Let's see, who was next?  
22 Jim, are you next?

23 **DR. LOCKEY:** Was there -- in the Ferguson  
24 report was there any mention of any process at  
25 this facility utilizing enriched uranium?

1           **DR. NETON:** No. No, there's a very detailed  
2 description of all the activities in Building  
3 23. It's a hundred-page report or so, and  
4 there's noth-- no indication that there was any  
5 enriched uranium in 1948 and '49 processed at -  
6 - at this facility. And DOE has searched their  
7 records quite a bit most recently and have  
8 found no contracts or any indication that  
9 anything other than this process occurred at  
10 Chapman Valve in those two years.

11           **MR. GRIFFON:** Ji-- Jim, it's a very -- you said  
12 of -- it's a very detailed description, which I  
13 will agree, of all the activities that went on  
14 in Building 23 during this time period? I  
15 think it's a very detailed description of this  
16 project that went on in Building 23.

17           **DR. NETON:** Well, yes, right. That's -- that's  
18 true. This -- this contract with the AEC to  
19 process these slugs in that time frame. But  
20 there is no indication that any other  
21 radiological activities occurred in that  
22 facility, and I think that's the central issue.  
23 This is what made this site an AWE in the first  
24 place, this operation, and we believe we've  
25 bounded the doses for this operation. We have

1 found no indication of any other radiological  
2 operation funded by the AEC in 1948 and '49,  
3 none. And the sample that was taken decades  
4 later, we have no idea where it came from.

5 **DR. ZIEMER:** Okay. John, then Josie.

6 **DR. POSTON:** I'd like to try to summarize again  
7 for -- for everybody. There -- there -- I  
8 don't think there's every be-- ever been any  
9 discussion or dissension that the external  
10 doses could be reconstructed because of the  
11 film badge data that's available for the site.  
12 The -- the approach taken by NIOSH to  
13 reconstruct the internal doses is what in our  
14 business we call conservative, but -- but it --  
15 it -- one could also characterize it as a huge  
16 overestimate, because what they did was they  
17 took the highest concentrations and assumed  
18 that those concentrations existed over the  
19 entire period of consideration, even though the  
20 operation, in my recollection, only lasted a  
21 couple of months.

22 So here we have these workers who are assumed  
23 to be chronically exposed at the highest level  
24 that was measured over this entire period. And  
25 as I told the workgroup, if the probability of

1           causation then doesn't exceed 50 percent, it  
2           will never exceed 50 percent, so that --  
3           regardless of what you do. And I understand we  
4           have this one sample. But again, it was not  
5           taken in the work area. The sample that was  
6           taken in the work area, if you want to say fif-  
7           - talk about percentages, Brad, the sample that  
8           was taken in the work area showed no enriched  
9           uranium. So -- I mean I -- I have concern,  
10          too, but it seems like we're just marching down  
11          this road. We -- we owe it to the folks to  
12          make a decision.

13         **DR. ZIEMER:** Josie?

14         **MS. BEACH:** Once again I would like to point  
15          out that we're discussing a document -- a six-  
16          page report that I just received this morning  
17          in its entirety and haven't really had a chance  
18          to look at. I would like to table this motion  
19          also.

20         **DR. ZIEMER:** Are you making a motion to table?

21         **MS. BEACH:** Yes.

22         **DR. ZIEMER:** There's a motion to table. Is  
23          there a second to the motion to table?

24         **MR. GIBSON:** I'll second.

25         **DR. ZIEMER:** It's been seconded. Okay, we will



1                   vote on the motion to table.

2           **DR. BRANCHE:** Ms. Beach? Regarding --

3           Regarding to table, Ms. Beach?

4           **MS. BEACH:** Yes.

5           **DR. BRANCHE:** Mr. Clawson?

6           **MR. CLAWSON:** Yes.

7           **DR. BRANCHE:** Mr. Gibson?

8           **MR. GIBSON:** Yes.

9           **DR. BRANCHE:** Mr. Griffon?

10          **MR. GRIFFON:** Yes.

11          **DR. BRANCHE:** Dr. Lockey?

12          **DR. LOCKEY:** No.

13          **DR. BRANCHE:** We'll get -- no. Ms. Munn?

14          **MS. MUNN:** No.

15          **DR. BRANCHE:** Mr. Presley?

16          **MR. PRESLEY:** No.

17          **DR. BRANCHE:** Dr. Poston?

18          **DR. POSTON:** No.

19          **DR. BRANCHE:** Dr. Roessler?

20          **DR. ROESSLER:** No.

21          **DR. BRANCHE:** Mr. Schofield?

22          **MR. SCHOFIELD:** Yes.

23          **DR. BRANCHE:** Dr. Ziemer?

24          **DR. ZIEMER:** No.

25          **DR. BRANCHE:** The noes have it.

1           **DR. ZIEMER:** Motion fails, so the original  
2 motion is back before us. Further discussion?

3           **MR. GRIFFON:** I just want to -- one thing that  
4 we had discussed a little bit at the workgroup  
5 meeting and now with Folle's letter, you know,  
6 it seems to have maybe added importance -- in  
7 my mind, anyway -- and -- and -- is this notion  
8 of the Naval operations which could have  
9 happened, which -- which are -- I -- just for  
10 everyone on the phone or in the room, I mean  
11 that wouldn't be covered exposures. So you  
12 know, if -- and -- and we -- I think we kind of  
13 dead-ended it at the workgroup that there --  
14 there'd be no way to -- to verify with the Navy  
15 or with DoD. It could end up, you know, being  
16 a lengthy process, but I don't know if -- if --  
17 is -- in -- you know, I've -- I've worked at  
18 several of these facilities and -- and I've  
19 seen this in more than one instance, and it  
20 wouldn't surprise me if this was a result of  
21 later operations in-- involved in the Navy.  
22 But again, I'm in this speculation situation  
23 and if -- if -- if there's any way -- I mean I  
24 don't know if NIOSH has made any -- I don't  
25 think we asked them to, but I don't know if

1           they have an opinion on that, on whether it  
2           would take months, years, it would take -- you  
3           know, if there were any way to follow up on --  
4           and Mr. Folle gave a little more precise  
5           information or -- or at least his memory was a  
6           specific submarine op-- you know.

7           I also did -- from correspondence with the Army  
8           Corps of Engineers on -- on the cleanup side, I  
9           -- I did also get some sense that there was  
10          some work for the Navy, but it didn't talk  
11          about any -- I was looking for some information  
12          that might have said they worked with nuclear  
13          fuels, but there was no indication of that, it  
14          was more valve work. But again, they could  
15          have been, you know, contaminated or whatever,  
16          so I -- let Larry respond.

17          **DR. ZIEMER:** Larry.

18          **MR. ELLIOTT:** We have not asked the Navy for  
19          any information about activities that were done  
20          for the Department of Defense under their  
21          auspices for this particular site, but we have  
22          for other sites. And we've -- in those  
23          instances, we've consistently received a lot of  
24          reluctance and reticence in our responses.  
25          There is no regulatory way that we have to



1 DR. BRANCHE: Mr. Gibson?  
2 MR. GIBSON: No.  
3 DR. BRANCHE: Mr. Griffon?  
4 MR. GRIFFON: No.  
5 DR. BRANCHE: Dr. Lockey?  
6 DR. LOCKEY: Yes.  
7 DR. BRANCHE: Ms. -- Doc-- Ms. Munn?  
8 MS. MUNN: Yes.  
9 DR. BRANCHE: Mr. Presley?  
10 MR. PRESLEY: Yes.  
11 DR. BRANCHE: Dr. Poston?  
12 DR. POSTON: Yes.  
13 DR. BRANCHE: Dr. Roessler?  
14 DR. ROESSLER: Yes.  
15 DR. BRANCHE: Mr. Schofield?  
16 MR. SCHOFIELD: No.  
17 DR. BRANCHE: Dr. Ziemer?  
18 DR. ZIEMER: Yes.  
19 DR. BRANCHE: And then we will correspond with  
20 Dr. Melius to get his vote.  
21 DR. ZIEMER: I believe the count at the moment  
22 is six in favor and five opposed, and since we  
23 lack one of the votes, there's a possibility  
24 for a tie vote here --  
25 DR. BRANCHE: That's true.

1           **DR. ZIEMER:** -- and so I cannot announce the  
2 outcome. We -- we will not know the outcome  
3 until we obtain Dr. Melius's vote. If Dr.  
4 Melius votes no, that would be a tie vote and  
5 the motion would be lost. If Dr. Melius voted  
6 yes, then the motion would carry. We will  
7 await that -- yes?

8           **MR. GRIFFON:** Can -- I just wanted to make a  
9 comment that if it does result in a tie vote, I  
10 -- I think -- you know, my sense, anyway, is  
11 that we're not -- it's not a lost cause here.  
12 I think this is as close as Blockson was, in my  
13 mind, and -- you know, we may -- there may be a  
14 way to resolve this, so I don't want -- just --  
15 just for the sake of the Board, I don't want --

16           **DR. ZIEMER:** I'd simply point out that --

17           **MR. GRIFFON:** -- everybody getting frustrated  
18 about this, you know.

19           **DR. ZIEMER:** -- if it's a tie vote, we have no  
20 recommendation --

21           **MR. GRIFFON:** Right.

22           **DR. ZIEMER:** -- to make to the Secretary. I --  
23 I guess I would need coun-- advice from  
24 counsel, and maybe from the Designated Federal  
25 Official, as to whether or not such an outcome

1 needs to be reported to the Secretary. We are  
2 -- we would not be making a recommendation  
3 because we would have none to make.

4 **MR. GRIFFON:** Did-- didn't we have a tie vote  
5 before on this? Yeah, so -- and you didn't  
6 report --

7 **DR. BRANCHE:** On this issue?

8 **MR. GRIFFON:** Yeah.

9 **DR. BRANCHE:** And you continued to -- your  
10 deliberations as a result.

11 **MR. GRIFFON:** We went back to the workgroup,  
12 yeah, which I don't know --

13 **DR. BRANCHE:** You certainly have that option.

14 **DR. ZIEMER:** Yeah, we had -- we had no -- we  
15 had no recommendation to make at that point.

16 **DR. BRANCHE:** Counsel's coming forward.

17 **MS. HOWELL:** Should the Board reach a  
18 determination that is a split vote and you do  
19 not believe that you can move forward and reach  
20 another determination -- I think in the  
21 previous instance you turned this back over --

22 **DR. BRANCHE:** To the workgroup.

23 **MS. HOWELL:** -- to the workgroup. Should you  
24 have a six-six vote and not believe that there  
25 are any outstanding issues and that there's no

1 further work that the Board can do to change  
2 the outcome, then you could report that to the  
3 Secretary in a letter.

4 **DR. ZIEMER:** Thank you. We will await the vote  
5 and, depending -- depending on that, if it ends  
6 up to be a tie there would possibly be an  
7 opportunity to pursue some additional matters,  
8 although it's not clear to the Chair at the  
9 moment whether or not there's anything even in  
10 this most recent letter that -- that helps us  
11 along the way, but we can determine that after  
12 we see where we are on the vote.

13 Let's see, Santa Susana -- well, let's get to  
14 Texas City Chemicals. Do we need to take our  
15 break?

16 **MR. GRIFFON:** Yeah, let's do --

17 **DR. ZIEMER:** Let's take a --

18 **MR. GRIFFON:** -- a break.

19 **DR. ZIEMER:** Try to keep it as concise as you  
20 can. Let's try to get it to ten minutes so we  
21 can move forward here rapidly -- ten-minute  
22 break.

23 (Whereupon, a recess was taken from 10:15 a.m.  
24 to 10:30 a.m.)

25 **DR. BRANCHE:** We're going to get started again,



1 and we're going to -- I'm going to ask the  
2 phone participants -- again, it is critical  
3 that everyone participating by phone mute your  
4 lines. As well, it is equally critical that  
5 you not put this line on hold if you have to  
6 step away. It is far better for you to hang up  
7 and dial back in than to put us on mute. Your  
8 putting us -- I'm sorry, your putting us on  
9 hold interrupts the entire line for everyone.  
10 Thanks for your cooperation.

11 (Pause)

**TEXAS CITY CHEMICALS, DR. PAUL ZIEMER**

12 **DR. ZIEMER:** Dan, are you going to go first for  
13 Texas City, or [Identifying Information  
14 Redacted]?

15 **DR. MCKEEL:** (Off microphone) (Unintelligible)

16 **DR. ZIEMER:** [Identifying Information Redacted]  
17 going...

18 **DR. MCKEEL:** (Off microphone) (Unintelligible)

19 **DR. ZIEMER:** Oh, okay.

20 **DR. MCKEEL:** (Off microphone) I think she  
21 (unintelligible) on the phone.

22 **DR. ZIEMER:** Yeah, she -- she --

23 **DR. MCKEEL:** (Off microphone) (Unintelligible)

24 **DR. ZIEMER:** Be what?

25 **DR. MCKEEL:** (Off microphone) (Unintelligible)



1           our assignment from the last meeting.  
2           I did have one question to just refresh me on -  
3           - and I can't remember, I know that the  
4           surrogate data group was going to look at this  
5           petition, but was SC&A tasked to do any sort of  
6           review? I --

7           **DR. ZIEMER:** You know --

8           **DR. MCKEEL:** -- that's a confusing --

9           **DR. ZIEMER:** -- Dan --

10          **DR. MCKEEL:** -- point in my mind.

11          **DR. ZIEMER:** -- I will have to check the -- I  
12          don't think they were, but I will have to  
13          double--

14          **DR. MCKEEL:** Okay.

15          **DR. ZIEMER:** I think we were -- I think Dr.  
16          Melius asked that the workgroup look at it  
17          first and determine what tasking was needed --

18          **DR. MCKEEL:** That's fi--

19          **DR. ZIEMER:** -- was my recollection.

20          **DR. MCKEEL:** That's fine.

21          **DR. BRANCHE:** It was -- it was the petitioner's  
22          request that they be assigned it, but --

23          **DR. ZIEMER:** No, but I -- I think we can check  
24          the minutes, but my recollection is that Dr.  
25          Melius didn't want to task SC&A until the

1 workgroup had a chance to look at it and define  
2 what the tasking would be.

3 **DR. MCKEEL:** Tha-- that's fine. Dr. Melius did  
4 write me an e-mail and let me know that at the  
5 -- I believe the last, or maybe the first,  
6 surrogate data workgroup meeting they had to  
7 spend the time on defining those criteria and -  
8 -

9 **DR. ZIEMER:** Right.

10 **DR. MCKEEL:** -- would not have time to get to  
11 Texas City, so we're all updated on that part.  
12 So in the meantime, I mention to all of you all  
13 that we were looking for a set of records that  
14 really fell into two categories: Permits and  
15 court records from two subsequent owners of the  
16 Texas City Chemicals site, Borden and the  
17 subsequent owner after that, Amoco. And Borden  
18 and Amoco were involved in a long-running  
19 lawsuit which started about the time that the  
20 plant itself was shut down in the late 1970s,  
21 somewhere around '78 the court suit started,  
22 ran at least until 1990. And so there are  
23 really quite a few documents related to that,  
24 and -- and the reason I thought getting those  
25 records was probably going to be germane to

1           what we're all working on is that the issue was  
2           contamination at the site, who would pay to  
3           have it removed. And so hopefully that --  
4           those records would get into radioactivity  
5           associated with the phosphogypsum piles related  
6           to the uranium recovery operations from the AEC  
7           back in the '50s when the recovery building was  
8           built and -- and used for that purpose.  
9           Subsequently there were a lot of interim  
10          negotiations, but Congressman Nick Lampson's  
11          office got involved and his staff person, Kathy  
12          Guillory -- and Ray, that's G-u-i-l-l-o-r-y --  
13          and they were really instrumental in talking to  
14          some of the legal counsel at I think British  
15          Petroleum now owns the site. Anyway, they were  
16          able to get a number of those court records.  
17          They sent me a copy and then I suggested that  
18          they forward all those court records to both  
19          NIOSH and the Board so you would also have  
20          them. And very recently I sent Dr. Ziemer a --  
21          an excerpt showing that in fact those records  
22          do contain radioactivity measurements that I  
23          think will be really helpful in bounding the  
24          dose at Texas City or -- or at least getting us  
25          farther along that -- that road.

1           As the Board well remembers, this is a really  
2           interesting site where basically there -- there  
3           is no real data of any kind. There's certainly  
4           no film badge monitoring, but no air sampling  
5           data, no -- no any-- no urin-- bioassay data,  
6           so -- so the doses which NIOSH says they can  
7           reconstruct are being constructed from models  
8           and from extrapolation of other sites, and  
9           that's why I think the Board felt like this  
10          would be a good case to send to the surrogate  
11          data group because it's a great test case.  
12          So anyway, that part of the data capture  
13          efforts was successful and -- and hopefully  
14          those documents will be useful.

15          The permits we were seeking were two in  
16          particular. One, the Department of Energy  
17          facility description ends the uranium residual  
18          period at 1977, and that date coincides with  
19          the date that a lot of workers really severed  
20          their relationships with the plant. We have at  
21          least three people who know the recovery  
22          building was still standing in 1977. What we  
23          have never elicited in any of the worker  
24          meetings down there, the town hall meetings or  
25          my interactions with the workers, is anyone who

1 knows precisely when that recovery building was  
2 torn down. Three people at least know that it  
3 was there in 1977. But we thought it would be  
4 useful to know when it was actually demolished  
5 and hauled away, as possibly a better end point  
6 for the residual period. So that was one  
7 permit or set of permits that we were looking  
8 for.

9 The other ones had to do with the phosphogypsum  
10 piles, and it was quite clear that when Borden  
11 bought the plant from Texas City Chemicals,  
12 Texas City went bankrupt, their first decision  
13 was -- they knew the -- they knew the -- the  
14 piles were radioactively contaminated beyond  
15 simply the -- the natural uranium from the  
16 uranium ore that's in phosphate rock. But this  
17 product had -- had extra radioactivity  
18 associated with it, so their first decision was  
19 they were going to store it -- I believe at  
20 first temporarily -- on-site. But you know,  
21 like those temporary storage things get to be,  
22 basically it got to be a permanent site on --  
23 on-site.

24 Then the subsequent owners -- I think it took  
25 them a while to get through the idea they --

1           they bought the site as-is, Borden did, and  
2           then they -- then -- now I'm not sure how much  
3           I -- I don't think they really knew very much  
4           at all about the uranium recovery AEC  
5           operations. But anyway, when Borden then sold  
6           it to Amoco, at least by that time they knew  
7           that there was radioactivity on-site that had  
8           to be cleaned up. And for reasons that aren't  
9           clear to me yet from reading those documents,  
10          Amoco decided to buy it anyway. Then they had  
11          second thoughts about it, they want-- oh, well,  
12          they wanted to build a coal-fired plant, and it  
13          was a consortium -- I can't remember, there  
14          were three companies involved -- and they were  
15          -- they had decided that the old TCC site was  
16          the place to build this large coal-fired plant,  
17          and so they were proceeding along and then they  
18          found out that the phosphogypsum piles and all  
19          that were going to be a problem. But the real  
20          problem was the plant cost too much. The cost  
21          doubled or tripled. They abandoned that, and  
22          then they were left with no -- no site for the  
23          coal plant, but all this radioactive material  
24          that they wanted to get off-site, so they sued  
25          each other about who -- who was supposed to pay



1           in that. So anyway, that's where that goes.  
2           Now what we do not have, though -- and yet it  
3           may be in those court records, but I haven't  
4           found it -- is any information about when those  
5           piles were actually removed. And -- and we  
6           thought maybe the permits would have more  
7           information about the type of radioactivity --  
8           it might have a bearing on where they could be  
9           disposed of, for example.

10          So the first thing that Kathy Guillory and  
11          Congressman Lampson's office did was to go to  
12          the Texas Commission on Environmental Quality,  
13          TCEQ, who indicated at first that, among about  
14          1,000 records, they -- they thought they  
15          possessed those permits that we were interested  
16          in and -- but they wanted to charge a very high  
17          fee to get those copied and researched. So  
18          Kathy Guillory, trying to save the Texas  
19          taxpayer some money, then elicited the help of  
20          a state representative there, Craig Eiland, E-  
21          i-l-a-n-d, and his staff person, Amanda  
22          Hudgins, and they both then went to TCEQ. They  
23          got me to write an e-mail that defined exactly  
24          what we were looking for, and the end result  
25          was that TCEQ finally said well, they had some

1 records but they don't really think they have  
2 the relevant records that we're looking for.  
3 They then suggested that Representative Eiland  
4 pursue looking for the records at the Nuclear  
5 Regulatory Commission and the State Department.  
6 The latter I don't understand at all, but  
7 Representative Eiland's staff did inquired of  
8 NRC, and NRC said no, we were not the -- the  
9 right agency; you should look for those records  
10 at the Department of Energy. Which did at  
11 least make me smile slightly because that's  
12 where the facility description originated in  
13 the first place. So in fact that's what we  
14 will do is pursue that and see if those permits  
15 exist.

16 I'm not ready to give up. I think they -- they  
17 must -- there must be State of Texas permits.  
18 So that's basically, I think, where we stand  
19 right now, and I think that's about all that I  
20 have to report.

21 **DR. ZIEMER:** Thank you very much, Dan.

22 [Identifying Information Redacted], the  
23 petitioner, is also on the line and let's hear  
24 from her next. [Identifying Information  
25 Redacted], are you there?

1           **UNIDENTIFIED:** [Identifying Information  
2           Redacted] is not here. She's ill. We have  
3           some other representatives.

4           **DR. ZIEMER:** Was there someone else that was  
5           speaking in her behalf?

6           **UNIDENTIFIED:** Yes, sir.

7           **DR. ZIEMER:** Was that --

8           **UNIDENTIFIED:** (Unintelligible)

9           **UNIDENTIFIED:** I have (unintelligible) you  
10          about the pile that you was discussing.

11          **DR. ZIEMER:** Okay, can --

12          **UNIDENTIFIED:** His name is Mr. Watterback.

13          **DR. ZIEMER:** Okay.

14          **MR. WATTERBACK:** No, my name is Joe Watterback  
15          and I went to work there in January of 1957 and  
16          stayed through November of 1977. And if I  
17          understood Dr. McKeel correctly a while ago, he  
18          was saying that -- don't know when the piles  
19          were removed, what date. But as we speak right  
20          now, the gypsum piles and the piles are still  
21          there, have never been removed. There's about  
22          a 15-acre gypsum pile possibly 30 feet high  
23          that's still standing today, and that's about  
24          all I can tell you on that.

25          **DR. ZIEMER:** Okay, thank you for that

1 additional information.

2 Was there anyone else there that had comments  
3 on the phone line?

4 **UNIDENTIFIED:** Yes, sir, just one moment.

5 **MR. INGRAM:** My name's James Ingram. I left in  
6 1969 --

7 **DR. ZIEMER:** Give us your name again, please?

8 **MR. INGRAM:** James Ingram, that's I-n-g-r-a-m.

9 **DR. ZIEMER:** Thank you. Go ahead.

10 **MR. INGRAM:** I went to work there in 1957 and  
11 left in 1969, went to work for Amoco. Sometime  
12 during my tenure at Amoco I was called into the  
13 office and asked about the contamination at the  
14 Texas City Chemical plant. At that time I had  
15 no knowledge of anything of that nature even  
16 existed out there. In all the 12 years I was  
17 there, there was nobody ever mentioned it. I  
18 went into this building during that time and  
19 all this strange-looking equipment -- to me, it  
20 wasn't fertilizer-making equipment. I just  
21 wondered what it was. Nobody there got --  
22 questions I asked was what do they do there?  
23 Nobody knew at this time. Nobody was told  
24 anything.

25 That's about all I can tell you about that

1 part.

2 **DR. ZIEMER:** Okay, thank --

3 **MR. CELESTINE:** This is Frank Celestine and I  
4 worked out there from 1956 until 1970.

5 **DR. ZIEMER:** Could you spell your last name for  
6 us, please?

7 **MR. CELESTINE:** C-e-l-e-s-t-i-n-e.

8 **DR. ZIEMER:** Okay.

9 **MR. CELESTINE:** There are a lot of things out  
10 there -- according to what I heard on this  
11 (unintelligible) this morning, there a lot of  
12 things so out of date don't even come up to  
13 what we know as employees out there. Things  
14 happened out there I haven't even heard  
15 anything about in a meeting. But we just need  
16 to get to the fellas that worked out there that  
17 are still alive and can really give you  
18 accurate information. All of this information,  
19 to me, seems nothing but speculation or  
20 somebody trying to give us the runaround in  
21 some kind of way. I -- I can't understand  
22 that. This thing's been going on long enough  
23 to bring it to a conclusion. It looks like  
24 every time somebody started in the right  
25 direction, another person come up with a motion

1 to table. You keep table that thing you will  
2 never get to the bottom of it. You'll never  
3 bring it to a conclusion. Now I don't know how  
4 many meetings there's been on this subject  
5 matter, but I'll tell you a lot of people are  
6 getting tired.

7 **UNIDENTIFIED:** And a lot of them are dying.

8 **MR. CELESTINE:** And a lot of them are dying.  
9 There are too many people dying with the same  
10 complaint that worked out there to say that we  
11 weren't contaminated or there was nothing out  
12 there to cause their health to deteriorate and  
13 come up with the same complaint, all of them  
14 dying from cancer. And the two or three that's  
15 left don't know how much time they have left  
16 'cause they have cancer. Whoever is trying to  
17 produce this -- or simulation of production  
18 (unintelligible), you will never do that. We  
19 worked there and there was giant fans to blow  
20 all of that dust-like material out of there.  
21 Sometime it was yellow, sometime it was gray,  
22 and God knows whatever color or form it may  
23 have taken. And they had all these big ol'  
24 fans to keep us -- and still we was full of  
25 that stuff. And many times we'd take off our

1 respirator or whatever we wore, it was just  
2 clogged with that stuff. We'd have to go and  
3 get another one and change the filter in  
4 (unintelligible) often. I -- I see why  
5 everybody's dying of cancer, 'cause they all  
6 got, you know, this material out there that's  
7 related to it. Thank you.

8 **DR. ZIEMER:** Okay, thank you. Anyone else  
9 there?

10 **MR. WATTERBACK:** Yes, this is Joe Watterback  
11 again.

12 **DR. ZIEMER:** Yes, Bill (sic)?

13 **MR. WATTERBACK:** I was one of two people that  
14 was left out there with Borden after they shut  
15 the plant down. I was maintenance supervisor  
16 and my immediate boss was the superintendent  
17 there, and we were in charge of the contractor  
18 that was removing equipment from the plant to  
19 put on railroads and (unintelligible) to send  
20 to Norfolk, Virginia. And at that time the  
21 recovery building was still standing when I  
22 left there in November of 1977, and the  
23 contractor -- I don't believe the contractor  
24 was in there doing the removal work also tore  
25 the building down. Someone else, I believe,

1           tore the building down but I cannot confirm  
2           that. But the building was still there in  
3           1977.

4           **DR. ZIEMER:** Okay, thank you.

5           **MR. WATTERBACK:** That's all -- all I have.

6           **DR. ZIEMER:** Dr. McKeel here has an additional  
7           comment.

8           **DR. MCKEEL:** Just to summarize, I think the  
9           information you've just heard is basically  
10          what's in the worker transcripts, and that's  
11          basically our departure point for the  
12          subsequent studies. And the real question  
13          about the phosphogypsum piles is -- the plant  
14          continued to make fertilizer for a long time  
15          after the AEC operations stopped, so they were  
16          generating phosphogypsum. The point I'm trying  
17          to find out, and I think is relevant to what  
18          we're doing here, is -- is specifically the  
19          phosphogypsum waste that was left over that was  
20          really associated with the '52 to '56 period of  
21          the SEC. So we're trying to see if that's --  
22          was segregated and if we can track that  
23          separately --

24          **DR. ZIEMER:** Very good.

25          **DR. MCKEEL:** -- in any way. Right.



1           **DR. ZIEMER:** Okay, thank you very much. And  
2 thank you folks on the line. Anyone else on  
3 the line had an additional comment?

4           **UNIDENTIFIED:** Yes, one more thing. When the  
5 plant went from Texas City Chemical, it went to  
6 Smith Douglas --

7           **DR. ZIEMER:** Yes.

8           **UNIDENTIFIED:** -- and then to Borden.

9           **DR. ZIEMER:** Yes, and who --

10          **UNIDENTIFIED:** Okay.

11          **DR. ZIEMER:** -- who was speaking there? Could  
12 you identify --

13          **MR. WATTERBACK:** Joe Watter-- Joe Watterback.

14          **DR. ZIEMER:** Yes, okay, thank you. Okay,  
15 appreciate that additional clarification.  
16 Okay, I think that -- Board members, do you  
17 have any questions on Texas -- John Mauro here  
18 has a comment on Texas City Chemical.

19          **DR. MAURO:** Dr. Ziemer, during the April  
20 meeting in Tampa SC&A was, according to my  
21 notes, given direction to begin a focused  
22 review of the SEC, with emphasis on the  
23 surrogate data strategy where we marry our  
24 typical review with the guidance that the  
25 working group drafted on the four-step

1 criteria. So yes --

2 **DR. ZIEMER:** Okay.

3 **DR. MAURO:** -- we have underway a review -- a  
4 focused review.

5 **DR. ZIEMER:** Thank you for clarifying that,  
6 John. Dr. McKeel?

7 **DR. MCKEEL:** Just one final comment about Dr.  
8 Mauro's idea. I understand that the four  
9 criteria are a Board working document and  
10 probably not in a releasable form, but I would  
11 still ask -- it certainly would help me to  
12 understand the process -- if there's any way to  
13 get a version of that document that -- I  
14 underst-- just -- I'm interested in seeing it  
15 when it can ever be --

16 **DR. ZIEMER:** Actually --

17 **DR. MCKEEL:** -- released.

18 **DR. ZIEMER:** -- I think what needs to be done  
19 here is to make sure that you are plugged into  
20 the workgroup's activities so you can  
21 participate, and any working documents that  
22 they have in those workgroup meetings can  
23 certainly be made available, I believe. I'm --

24 **DR. BRANCHE:** Tha-- that --

25 **DR. ZIEMER:** I -- I'm not sure what's -- what

1 the workgroup even has at this point.

2 **DR. MCKEEL:** Yes, I understand.

3 **DR. BRANCHE:** But because, Dr. McKeel, you are  
4 a co-petitioner --

5 **DR. MCKEEL:** Uh-huh.

6 **DR. BRANCHE:** -- so in that capacity you would  
7 also get information --

8 **DR. MCKEEL:** That would --

9 **DR. BRANCHE:** -- as it becomes available, as  
10 all petitioners do.

11 **DR. MCKEEL:** That would be wonderful.

12 **DR. BRANCHE:** Of course it would be Priva-- you  
13 would receive it after it's Privacy Act  
14 cleared, but --

15 **DR. MCKEEL:** Yes, I understand.

16 **DR. BRANCHE:** -- that -- but you -- that's --  
17 you would receive it as a -- as a co-  
18 petitioner.

19 **DR. MCKEEL:** I understand. Thank you.

20 **DR. ZIEMER:** Thank you. Okay, Board members,  
21 any questions on that site?

22 (No responses)

**AREA IV OF SANTA SUSANA FIELD LABORATORY**  
**MR. MICHAEL GIBSON**

23 Okay, let's move on quickly to the Santa Susana  
24 Field Lab. There's not going to be very much

1 to report here, but let me also check to see if  
2 we -- we may have someone on the line, but let  
3 me start with Mike Gibson, who's the chair, and  
4 then Mike -- we'll hear also maybe from one of  
5 the petitioners.

6 **MR. GIBSON:** Yeah, Santa Susana site SEC  
7 petition 93 was qualified in October. NIOSH  
8 presented their evaluation report to us in  
9 April. SC&A is currently looking over the site  
10 profile, and the working group members are  
11 circulating some dates, trying to get a -- a  
12 meeting together.

13 **DR. ZIEMER:** Okay, thank you very much. And  
14 let's see if we have one of the petitioners on  
15 the line. LaVonne --

16 **MS. KLEA:** Yes, I'm here. Can you hear me?

17 **DR. ZIEMER:** Yes, very well.

18 **MS. KLEA:** This is LaVonne Klea. I just would  
19 like to give you a brief update on what's going  
20 on. I sent you a copy of a lawsuit that was  
21 taken by the City of LA National Defense  
22 Counsel and Committee to Bridge the Gap against  
23 the DOE, requiring them to perform an  
24 environmental impact statement. While they've  
25 done an 800-page data gap analysis, which has

1           been rejected by the federal judge because they  
2           used all the Boeing monitoring data and it's  
3           been rejected because they falsified their data  
4           by incinerating the samples. And so I'm going  
5           to a meeting tonight, a follow-up meeting on  
6           that issue of the rejection of their 800-page  
7           preliminary data gap analysis.

8           **DR. BRANCHE:** Ms. Klea.

9           **DR. ZIEMER:** Okay, tha--

10          **MS. KLEA:** And that's all I have to report for  
11          now.

12          **DR. ZIEMER:** Thank you. I'm -- I'm not sure if  
13          we have a copy of what you referred to. Do we?

14          **DR. BRANCHE:** Ms. Klea, this is -- this is Dr.  
15          Branche, could -- I'm not able to put my hands  
16          on a copy of the lawsuit that you sent -- you  
17          sent -- you said you sent copies of?

18          **MS. KLEA:** Yes, I did send a copy with my  
19          petition. It's a --

20          **DR. BRANCHE:** Oh, it's with your petition,  
21          okay.

22          **DR. ZIEMER:** Oh, with the petition, yes, yes --

23          **DR. BRANCHE:** I understand now. Thank you.

24          **DR. ZIEMER:** Yes, okay, we thought this was  
25          something more recent. Okay, thank you very

1 much for clarifying that.

2 Board members, again, any comments or questions  
3 on Texas City Chemicals (sic)?

4 (No responses)

5 **CONGRESSIONAL LETTERS**

6 Okay. Now a couple of letters we want to move  
7 ahead on.

8 **DR. BRANCHE:** Jason.

9 **DR. ZIEMER:** Jason has a couple of letters I  
10 think to read into the record regarding various  
11 sites. Jason, what, two Congressional letters?

12 **MR. BROEHM:** Yes, two of these that I got last  
13 night from Senator Schumer's office.

14 **DR. ZIEMER:** Okay.

15 **MR. BROEHM:** The first one is on Linde  
16 Ceramics.

17 (Reading) Many thanks again to the Board for  
18 affording me this opportunity to discuss Linde  
19 Ceramics' application to have an extended time  
20 frame at their site added to the Special  
21 Exposure Cohort. I understand that these  
22 meetings are very long and I appreciate how  
23 accommodating the Board has been in allowing me  
24 to offer my support for this important  
25 allocation.

1 I'm extremely supportive of the Linde SEC  
2 petition, and I respectfully urge you to  
3 recommend adding the extended time period at  
4 this facility to the SEC. The Linde Ceramics  
5 facility, located in Tonawanda, New York,  
6 produced fuel for the Department of Energy for  
7 years. In the process, many employees, both  
8 during those years and in the residual period,  
9 were exposed to toxic and radioactive uranium.  
10 The site profile for this facility does not  
11 adequately take into account a number of  
12 factors, and there is strong reason to believe  
13 that it will underestimate applicants' exposure  
14 and thus the probability of causation. To risk  
15 uniformly and consistently underestimating the  
16 probability of causation at a site violates the  
17 statutory requirement of a claimant-favor--  
18 claimant-friendly process. In a case such as  
19 this, it is imperative that the Board  
20 acknowledge the shortcomings of the available  
21 information and recommend adding the site and  
22 time in question to the SEC, especially in  
23 light of the fact that there is already a class  
24 of the SEC at this site.  
25 It is readily apparent to me and to many of my

1 colleagues that there is simply a paucity of  
2 reliable information for this location. It is  
3 unacceptable to delay adding these other time  
4 periods to the SEC as well.

5 Our country built its nuclear arsenal, and with  
6 it our global dominance, on the backs of Linde  
7 Ceramics plant -- plant's workers. And  
8 everything that our government has done to  
9 these men and women, after everything that they  
10 sacrificed for our continued safety, the --  
11 deserve compensation for their illnesses.  
12 Again, thank you for allowing me to submit  
13 testimony for your consideration. I  
14 respectfully request that you recommend  
15 granting this petition, and I thank you for  
16 your time and consideration.

17 And the second letter, also from Senator  
18 Schumer, is relating to the Bethlehem Steel SEC  
19 petition.

20 (Reading) Thank you for allowing me the  
21 opportunity to address the Board again on the  
22 important issue of the application for  
23 admission to the Special Exposure Cohort for  
24 Bethlehem Steel, located in Lackawanna, New  
25 York. As you all know, I have been strongly



1           advocating the creation of a class in the  
2           Special Exposure Cohort for Bethlehem Steel for  
3           several years now.

4           The veterans of this facility are sick, and  
5           unfortunately, many are dying. We owe it to  
6           them to recognize their service with admission  
7           to the SEC.

8           Today members of the Bethlehem Steel Action  
9           Group are here advocating for the site's  
10          admission to the SEC. I am very impressed by  
11          their tenacity and the self-sacrifice of their  
12          members in coming all the way from Lackawanna,  
13          New York. I hope that I and all of my  
14          colleagues in Congress who are supporting this  
15          application are able to live up to the high  
16          standard that these wonderful activists have  
17          set.

18          In constructing a site profile for Bethlehem  
19          Steel, NIOSH relied very heavily on data from  
20          Simonds Saw -- Simonds Steel in Lockport, New  
21          York to fill in the gaps in the available data  
22          for Bethlehem. In the years since the site  
23          profile was completed it has become apparent  
24          that the use of surrogate data in Bethlehem's  
25          site profile is much higher than in most other

1 profiles. Furthermore, the accuracy of the  
2 comparison between Bethlehem and Simonds has  
3 been challenged time and again by former  
4 workers.

5 In light of all the unknown variables at this  
6 site, I think it is only reasonable for the  
7 Board to acknowledge that the available data  
8 are not sufficient to create a workable profile  
9 that can live up to the statutory mandate of a,  
10 quote, claimant-friendly, unquote, assessment.  
11 The SEC is the only appropriate course of  
12 action in such a case. Its broad reach is the  
13 only tool that will guarantee former workers of  
14 Bethlehem Steel receive the claimant-friendly  
15 process that Congress has rightly deemed them  
16 to deserve. Please recommend adding a class to  
17 the SEC for this site as quickly as is  
18 reasonably possible.

19 The men and women who worked for Bethlehem  
20 Steel manufacturing fuel for the nation's  
21 nuclear weapons are truly veterans of America's  
22 brutal Cold War. Their sacrifices in building  
23 our nuclear arsenal created our country's best  
24 (unintelligible) work against armed conflict  
25 with Soviet Russia, and surely saved thousands

1           upon thousands of lives. These heroes deserve  
2           our gratitude and rightful compensation.  
3           With so many of these veterans aging and ill,  
4           it is imperative that this be done as quickly  
5           as possible.

6           Again, thank you for the chance to address you  
7           again today, and thank you for the careful  
8           consideration you give to this and all of the  
9           petitions you consider.

10          **DR. ZIEMER:** Thank you, Jason. Yesterday  
11          during the public comment period we had a  
12          comment by phone from [Identifying Information  
13          Redacted], Nevada Test Site, concerning a  
14          letter which he had but which Board members did  
15          not have. But that letter now will be made  
16          available to us, at least verbally.

17          Larry, are you prepared to provide -- this is a  
18          -- well, Larry, you describe the letter and --

19          **MR. ELLIOTT:** I hope this is the letter you  
20          want to have read into the record. This is a  
21          letter from Mr. -- or from Patricia Worthington  
22          at DOE to Mr. Pete Turcic at DOL.

23          (Reading) Dear Mr. Turcic -- and it's dated  
24          June 2nd, 2008. Mr. Turcic, this is in  
25          response to your letter of November 6, 2007

1            requesting information related to the Nevada  
2            Test Site, specifically Area 51. You stated in  
3            our response -- you stated our response will  
4            assist the Department of Labor in addressing  
5            questions related to the proposed Special  
6            Exposure Cohort under the Energy Employees  
7            Occupational Illness Compensation Program Act  
8            for former workers of Area 51. Your letter  
9            purports to extend coverage of the EEOICPA  
10           benefits to workers of Area 51 in Nevada.  
11           The referenced area is one that has  
12           historically been part of NTS. In 1958, under  
13           Public Land Order 1662, approximately 38,000  
14           acres, or 60 square miles of land, was  
15           administratively withdrawn by the Department of  
16           Interior for the use by the Atomic Energy  
17           Commission as part of its NTS. Following its  
18           designation as part of NTS, the area was then  
19           referred to as Area 51.  
20           At some point during its usage by AEC -- see  
21           the enclosed letter dated October 2nd, 1991 --  
22           from 1958 until 1999 when land was  
23           legislatively withdrawn for the use of  
24           Department of Defense under the Military Lands  
25           Withdrawal Act of 1999, Public Law 106-65, the

1 land was under jurisdiction of AEC and its  
2 successors, the Energy Research and Development  
3 Agency, and later the Department of Energy.  
4 During the period of AEC stewardship of the  
5 land it was used for at least one above-ground  
6 nuclear safety experiment by AEC. Subsequent  
7 environmental characterization activities, as  
8 well as continuing maintenance of utilities,  
9 were also undertaken by our agency. In  
10 general, DOE did not pursue any further  
11 mission-associated activities in that area. It  
12 is our understanding, however, that other  
13 federal agencies did utilize that property.  
14 With respect to AEC and its successor --  
15 successor's contractor employees, to the extent  
16 that those claimants reference having worked at  
17 Area 51, that would signify they had worked at  
18 NTS.

19 It is important to note that AEC and its  
20 successors utilized a unique management and  
21 operating contractor paradigm at its sites,  
22 whereby those management and operating  
23 contractors existed solely to undertake  
24 implementation of that specific AEC contract  
25 and were not allowed to enter into separate

1 contracts with other parties. Both the  
2 Reynolds Electric -- Electrical Engineering  
3 Company, and later, in 1990s, Bechtel Nevada,  
4 Incorporated, were such captive contractors  
5 which managed operations across NTS. Thus an  
6 NTS worker who was an employee of these  
7 entities necessarily accomplished such work  
8 for, or on behalf of, its contract with AEC or  
9 its successors.

10 To the extent that NTS subcontractors were  
11 employed as a result of a subcontract with  
12 those management and operating contractors,  
13 their employees would similarly have conducted  
14 work done under or on behalf of the AEC  
15 contract.

16 It should be noted that AEC and its successors  
17 also had prime contracts with other entities  
18 for conduct of its NTS activities, including  
19 EG&G; Energy Measurements, Incorporated; Holmes  
20 and Narver, Incorporated; and Wackenhut  
21 Services, Incorporated, among others.

22 As with all mission activities and contracts  
23 with DOE and its predecessors, there was  
24 associated documentation evidencing such work  
25 and related employment. Such documentation

1           would, of course, be subject to applicable  
2           management under records retention and  
3           destruction requirements, including those of  
4           the general records schedule and any further  
5           agency internal policies and guidance.  
6           With respect to activities conducted by another  
7           agency, however, any associated documents would  
8           necessarily be owned and managed by that  
9           agency. However, such documents would  
10          presumably evidence work conducted by or on  
11          behalf of that agency and not DOE or its  
12          predecessors.  
13          Nevertheless, workers accessing the area  
14          through NTS would have been subject to NTS  
15          requirements. Thus they would have had NTS  
16          badges and dosimeters.  
17          We hope this information has provided further  
18          clarification relevant to your needs. Should  
19          you have any additional questions or concerns,  
20          please contact me -- and it provides a number.  
21          Sincerely, Patricia R. Worthington, Ph.D.;  
22          Director, Office of Health and Safety -- Office  
23          of Health, Safety and Security.  
24          **DR. ZIEMER:** Thank you, Larry. I'm not sure  
25          what that clarified for me, but could you, in a

1 sentence or two, tell us what the impact of  
2 this is on any of our previous actions relative  
3 to that site or to NIOSH's actions relative to  
4 that site?

5 **MR. ELLIOTT:** Well, the salient points here are  
6 two, in my opinion. One, Area 51 is part --  
7 considered part of the Nevada Test Site during  
8 those years quoted in this letter. And two,  
9 the individuals who would access Area 51 would  
10 have been badged by the contractors at the  
11 site.

12 We know that we have claims, we have processed  
13 claims which had reported in their interviews  
14 that they did move into Area 51 and back out,  
15 and we have badge data for those individuals.  
16 To answer your other question, however, going  
17 to what this means toward the class that's been  
18 added at Nevada Test Site, we'll have to  
19 evaluate the period and the activities that  
20 were conducted in Area 51 against that class,  
21 and I think we'll have to report back --

22 **DR. ZIEMER:** Right, and if --

23 **MR. ELLIOTT:** -- perhaps we'll have to do an  
24 addendum to our evaluation report.

25 Additionally I think DOL will have to look at



1           maybe addit-- claimants that may have been -- I  
2           have to leave that to DOL. I don't know  
3           exactly what it means for them.

4           **DR. ZIEMER:** That gives me a feel at least for  
5           -- so we will await -- if something -- if you  
6           identify such issues, we will await then your  
7           actions on that. Thank you.

8           **SUBCOMMITTEE, WORK GROUP REPORTS**

9           I want to move quickly to the updates from the  
10          other subcommittees -- or other workgroups,  
11          rather. And we're not going to take workgroup  
12          reports from those workgroups that have already  
13          reported in this meeting, which are quite a  
14          number. But while we're doing this, I wanted  
15          to call attention to a draft which was  
16          distributed to you earlier in the week called  
17          "workgroup responsibilities", and you may  
18          recall that at our phone meeting -- which was -  
19          - well, whenever our last phone meeting was --

20          **DR. BRANCHE:** May 2nd.

21          **DR. ZIEMER:** -- I indicated to you that the  
22          head of NIOSH had requested that all of our  
23          workgroups have specific responsibilities  
24          identified and that we place this information  
25          on the web site. I did ask that all of the

1           workgroup chairs provide me with information on  
2           what they thought their responsibilities were,  
3           since in most cases we hadn't actually spelled  
4           them out in detail. That is, we didn't --  
5           described for workgroups what their charge was  
6           when they were -- when they were organized, but  
7           in most cases there was not a formal  
8           specification of their -- if you want to call  
9           it charter, but more informally, their  
10          responsibilities. And several of the chairs  
11          did respond to that, although I must tell you  
12          that most did not, which allowed the -- allowed  
13          the Chair of the Board to go ahead and tell you  
14          what your responsibilities are, and here they  
15          are.

16          Now we're not going to go through these and  
17          debate them. These are what they are. But I  
18          will -- and this is called a draft, and I will  
19          allow the workgroup chairs the prerogative of -  
20          - of editorializing a bit, if you wish, before  
21          this goes on the web site if you want to add  
22          anything that you think is pertinent.

23          **DR. BRANCHE:** You don't have to --

24          **DR. ZIEMER:** These are broadly general. They  
25          indicate cases where the workgroup is

1 responsible to, for example, review the site  
2 profile, to review the SEC petitions, to work  
3 with the contractor in resolving issues -- that  
4 sort of thing. So in general, they are  
5 somewhat generic, with specificity as needed  
6 from site to site. But if you wish to make  
7 changes, let me know, workgroup chairmen, and  
8 we will send the final copy to be put on the  
9 web site.

10 **MR. GRIFFON:** Paul, would it be possible to  
11 send this electronically? We can redline --

12 **DR. ZIEMER:** I will --

13 **MR. GRIFFON:** There's only one thing I -- I  
14 glance at it and see that Rocky Flats says  
15 Nevada Test Site underneath it.

16 **DR. ZIEMER:** Yeah, that's -- that's --

17 **MR. GRIFFON:** It's just a cut --

18 **DR. ZIEMER:** -- because of our cut and paste  
19 operation --

20 **MR. GRIFFON:** Yeah, right, right, but I mean --

21 **DR. ZIEMER:** -- probably, right. We don't want  
22 to get those two mixed up, but I -- I will  
23 commit to sending this out electronically when  
24 I get back home. Thank you.

25 So with that, let's -- and Larry.

1           **MR. ELLIOTT:** Before you start on that, I would  
2           just like to make one request. Since this will  
3           go on the web site and there is at least one  
4           working group here, I believe, that has  
5           completed its charge, I think it's important  
6           for us to -- when we post these on the web site  
7           we take note of those individual workgroups who  
8           have concluded their -- their efforts and the  
9           charge has been complete, and note that with a  
10          date.

11          **DR. ZIEMER:** Actually --

12          **MR. ELLIOTT:** And there's no --

13          **DR. ZIEMER:** -- each one of those is noted;  
14          perhaps the date is not there and --

15          **MR. ELLIOTT:** The date is not there.

16          **DR. ZIEMER:** -- and the chairmen can help me  
17          provide that date. But for example, Dr.  
18          Lockey, yours --

19          **MR. ELLIOTT:** The example would be Special  
20          Exposure Cohort petitions that did not qualify.

21          **DR. ZIEMER:** Yeah --

22          **MR. ELLIOTT:** It says completed, but I -- and I  
23          think it'd be important to have a date.

24          **DR. ZIEMER:** Have a date.

25          **MR. ELLIOTT:** Yeah, and I can help with the

1 date if -- if the chair needs it.

2 **DR. LOCKEY:** Would you then note the date that  
3 was?

4 **MR. ELLIOTT:** Yes, I will.

5 **DR. LOCKEY:** I'd appreciate it.

6 **DR. ZIEMER:** Thank you. So noted.

7 **DR. BRANCHE:** You could let me know, too. That  
8 would help.

9 **DR. ZIEMER:** So noted. Thank you.

10 **DR. BRANCHE:** You ready?

11 **DR. ZIEMER:** Yeah.

12 **DR. BRANCHE:** Fernald site profile and Special  
13 Exposure Cohort petition; Mr. Clawson, chair.

14 **MR. CLAWSON:** We've had two meetings. We've  
15 asked SC&A to do several things and we've got -  
16 - NIOSH is working on some things. We're  
17 looking at setting back up another workgroup  
18 meeting in the next two to three weeks.  
19 Everything is proceeding on and we're working  
20 issues out as we go.

21 **DR. BRANCHE:** Hanford site profile and Special  
22 Exposure Cohort petition. Dr. Melius is the  
23 chair, but there are other workgroup members  
24 who are here. Can they provide an update?

25 **DR. ZIEMER:** That workgroup has not met since

1           our last meeting, so there is nothing further  
2           to report. I think there --

3           **MR. CLAWSON:** Right, we --

4           **DR. ZIEMER:** Oh --

5           **MR. CLAWSON:** -- we did -- at that one meeting  
6           we selected a certain area that we had that was  
7           called out for a SEC that was accepted, and  
8           went from there. It was certain years.

9           **DR. BRANCHE:** Los Alamos National Laboratory  
10          site profile and Special Exposure Cohort  
11          petition; Mr. Griffon, chair.

12          **MR. GRIFFON:** Los Alamos is -- at this point I  
13          think -- I don't know if LaVon is still here,  
14          but I think we're still on course for probably  
15          having a workgroup meeting set for early in the  
16          fall of this year, 2008. We're waiting for a  
17          revised site profile, I believe, and -- and  
18          maybe a -- LaVon -- you might even gi-- okay.  
19          Anyway, that's where we stand. We haven't met  
20          since the last meeting, but we expect in the  
21          fall to have -- start on the process.

22          **DR. BRANCHE:** Linde Ceramics site profile?

23          **DR. ROESSLER:** Our assignment was to carry out  
24          a review of the site profile, along with NIOSH  
25          and SC&A. We had a first meeting in March of

1           2007. SC&A identified around 22 issues.  
2           Throughout the year we have worked through  
3           those. We had one issue that was still  
4           outstanding. We met on Monday and we took care  
5           of that issue. NIOSH and SC&A agreed on the  
6           approach. The workgroup -- we decided that we  
7           have fulfilled our charge, and at this point  
8           I'd like to move that the Board accept our  
9           report.

10          **DR. ZIEMER:** And your -- your motion -- this  
11          comes as a recommendation from your workgroup,  
12          as I understand it, that the workgroup agrees  
13          that --

14          **DR. ROESSLER:** The workgroup agreed that we had  
15          fulfilled our assignment and that every -- that  
16          NIOSH --

17          **DR. ZIEMER:** That all the issues of the --

18          **DR. ROESSLER:** All the issues were --

19          **DR. ZIEMER:** -- site profile have been  
20          resolved?

21          **DR. ROESSLER:** Right.

22          **DR. ZIEMER:** Okay. This -- this is not a  
23          recommendation to send anything to the  
24          Secretary or --

25          **DR. ROESSLER:** No, we just completed --





1 (No responses)

2 Motion carries. Thank you very much, and we  
3 can consider the work -- Larry, you have a  
4 comment then?

5 **MR. ELLIOTT:** I was just going to ask, is this  
6 workgroup's efforts completed then --

7 **DR. ZIEMER:** Yes, and --

8 **MR. ELLIOTT:** -- and would I note today as the  
9 date --

10 **DR. ZIEMER:** -- as of today, completed.

11 **DR. BRANCHE:** We did Nevada Test Site  
12 yesterday. Pinellas Special Exposure Cohort  
13 petition; Mr. Schofield, chair.

14 **MR. SCHOFIELD:** We've had our first meeting.  
15 There's a few outstanding issues.  
16 Unfortunately they could have got scrubbed off  
17 my hard drive so I've got to get those  
18 recovered. But once those issues are settled  
19 by -- we get a report back from SC&A, then  
20 we'll schedule another meeting.

21 **DR. BRANCHE:** Savannah River Test Site profile  
22 -- sorry, Savannah River site profile; Mr.  
23 Griffon, chair.

24 **MR. GRIFFON:** Savannah River has no update at  
25 this point since the last meeting.

1           **DR. BRANCHE:** Special Exposure Cohort issues  
2 group, including 250-day issue and preliminary  
3 review of 83.14 SEC petition; Dr. Melius,  
4 chair, but other member -- all other members of  
5 the workgroup are here.

6           **DR. ZIEMER:** Well, I can report that the  
7 workgroup has not met since our last meeting so  
8 there's no additional update to report.

9           **DR. BRANCHE:** Subcommittee on dose  
10 reconstruction; Mr. Griffon, chair.

11           **MR. GRIFFON:** The subcommittee -- yeah, we --  
12 we had a meeting on the 6th set and the 7th set  
13 of cases in Cincinnati. We went through -- we  
14 have -- I think we're very close to closure on  
15 almost all issues on the 6th set of cases --  
16 I'm trying to remember. I'm sorry, I should  
17 have pre-- prepared more for this report. The  
18 7th set was a -- a -- more of a preliminary  
19 run-through of the findings. Although, as you  
20 might imagine, we do have a lot of overlap with  
21 some findings from past cases, so we actually  
22 were able to get through -- I -- I think we got  
23 al-- we might not have made it through the  
24 entire 7th set of cases, but we put in a good  
25 solid 9:00 to 5:00 day on these -- on these

1 findings.

2 I -- I still -- I still -- the subcommittee

3 still has to produce a first-100-cases report.

4 We -- we have not run through that yet. I plan

5 to -- to have that for the next subcommittee

6 meeting, for discussion, to bring back to the

7 full Board.

8 And I think, Dr. Ziemer, we have a letter that

9 -- I just gave you some final edits for the

10 last review of the 4th and 5th set to get that

11 finally out to the Secretary, I believe. We

12 already voted and approved it --

13 **DR. ZIEMER:** The letter to --

14 **MR. GRIFFON:** Yeah.

15 **DR. ZIEMER:** -- the Secretary summarizing the

16 results of cases six-- 61 through 100 --

17 **MR. GRIFFON:** Right.

18 **DR. ZIEMER:** -- was approved by the Board at

19 our last meeting, subject to some polishing of

20 the presentation and some numbers that NIOSH

21 had to provide us for the report. And we now

22 have those and that should be ready to go in

23 within the next week or so.

24 **MR. GRIFFON:** Yeah.

25 **DR. BRANCHE:** Use of --

1           **MR. GRIFFON:** And I think that's --

2           **DR. BRANCHE:** I'm sorry.

3           **MR. GRIFFON:** I'm sorry. That's all I have to  
4 report. Sorry.

5           **DR. BRANCHE:** Sorry. Use of surrogate data;  
6 Dr. Melius, chair, but all other workgroup  
7 members are here.

8           **MR. GRIFFON:** As I recall, we did have a -- a  
9 phone meeting, didn't we? Yeah, we had one  
10 phone meeting, and I'm not sure where we --  
11 where we left things, but we had an initial  
12 draft -- right? -- to -- and I think Jim was  
13 going to incorporate some comments from that  
14 call, and some written comments that Wanda had  
15 provided, and revise the draft and send it to  
16 the workgroup again for a possible follow-up  
17 phone meeting, yeah, so --

18           **DR. LOCKEY:** That's correct.

19           **MR. GRIFFON:** -- we're moving ahead past the  
20 first draft.

21           **DR. BRANCHE:** Last but not least, worker  
22 outreach; Mr. Gibson, chair.

23           **MR. GIBSON:** We have not met since the last  
24 meeting. OCAS is continuing to work on and  
25 making progress on their new procedure and the

1 database to capture the information from worker  
2 comments, and we'll probably meet -- I would  
3 hope before the next Board meeting -- and have  
4 some response then.

5 **MS. BEACH:** Dr. Branche, you didn't call on  
6 Mound, but we --

7 **DR. BRANCHE:** I didn't call Mound?

8 **MS. BEACH:** No --

9 **DR. BRANCHE:** Forgive me.

10 **MS. BEACH:** That's okay. We have --

11 **DR. BRANCHE:** Ms. Beach, chair.

12 **MS. BEACH:** We have not had a workgroup meeting  
13 since our first one in April, although we do  
14 have a scheduled meeting at this time for July  
15 14th in Cincinnati.

16 **DR. BRANCHE:** Forgive me, I got so caught up  
17 with Linde -- I'm sorry, Josie.

18 **MS. BEACH:** That's okay.

19 **DR. ZIEMER:** Okay, thank you very much. You  
20 have at your places copies of the official  
21 wording of the two petitions that were acted  
22 on, the Y-12 petition and the Spencer Chemical  
23 Company petition. I would be pleased to have  
24 any editorial comments you may wish to make.  
25 Let me point out a couple of corrections at

1           this moment.

2           On the Y-12 petition, bullet number four, at  
3           the end of the line -- second line there should  
4           be a period rather than a comma.

5           **DR. BRANCHE:** That's for Y-12?

6           **DR. ZIEMER:** That's for Y-12, end of the --  
7           fourth bullet, end of the second line.

8           **DR. BRANCHE:** End of the second line.

9           **DR. ZIEMER:** There should be a period rather  
10          than a comma.

11          And then if you turn the page over, the very  
12          last paragraph, talking about this -- today's  
13          Board meeting, that should be 2008 instead of  
14          2005.

15          Likewise on the Spencer Chemical Company --  
16          clearly I was using the same template, but last  
17          paragraph of the Spencer should indicate the  
18          current date, 2008 rather than 2005.

19          I've asked Larry to look at the descriptions of  
20          the -- of the class in both of these cases and  
21          he's agreed that they are in accordance with  
22          the class, as described by NIOSH.

23          Do I need to read these formally into the  
24          record or can I -- can we agree simply to  
25          provide copies to the court reporter and ask

1           him to incorporate them into the record? Can  
2           we do that for -- to expedite?

3           **THE COURT REPORTER:** Is that okay with you?

4           **DR. BRANCHE:** Yeah, that's why I handed it to  
5           you.

6           (Whereupon, the exact wording of the referenced  
7           motions is attached hereto:)

8           Y-12 Petition

9           The Board recommends that the following letter  
10          be transmitted to the Secretary of DHHS within 21  
11          days. Should the Chair become aware of any issue  
12          that, in his judgment, would preclude the transmittal  
13          of this letter within that time period, the Board  
14          requests that he promptly inform the Board of the  
15          delay and the reasons for this delay and that he  
16          immediately work with NIOSH to schedule an emergency  
17          meeting of the Board to discuss this issue.

18          The Advisory Board on Radiation and Worker  
19          Health (The Board) has evaluated SEC Petition-00098  
20          under the statutory requirements established by  
21          EEOICPA and incorporated into 42 CFR Sec. 83.13(c)(1)  
22          and 42 CFR Sec. 83.13(c)(3). The Board respectfully  
23          recommends Special Exposure Cohort status be accorded  
24          to all employees of the Department of Energy (DOE),  
25          its predecessor agencies, and DOE contractors and

1 subcontractors who worked at the Y-12 Plant in Oak  
2 Ridge, Tennessee from March 1, 1943 through December  
3 31, 1947 for a number of work days aggregating at  
4 least 250 work days, occurring either solely under  
5 this employment, or in combination with work days  
6 within the parameters established for other classes  
7 of employees in the Special Exposure Cohort. This  
8 recommendation is based on the following factors:

9 The Y-12 facility during this time period was  
10 one of the earliest sites involved in the  
11 production of nuclear weapons and was  
12 constructed and operated during a time when  
13 radiation control and monitoring methods were  
14 still being developed.

15 Monitoring data as well as information on  
16 sources of radiation exposures and process  
17 information are insufficient for adequate  
18 individual dose reconstruction for the time  
19 period involved. In particular, information  
20 needed for dose reconstruction on the calutron  
21 operations, an important source of exposure, is  
22 incomplete.

23 A number of other radiological operations  
24 occurred at the Y-12 plant, and NIOSH does not  
25 have information that clearly describes all the



1 buildings where radiological operations  
2 occurred. Consequently, NIOSH is unable to  
3 determine if any specific group of employees  
4 was not potentially exposed to ionizing  
5 radiation.

6 Only a limited number of individual bioassay  
7 samples are available and NIOSH has concluded  
8 that available data are too limited to support  
9 internal dose reconstruction. Although some  
10 air monitoring data are available, not enough  
11 is known about those samples to support dose  
12 reconstruction.

13 NIOSH has not located any individual external  
14 monitoring results. In addition, NIOSH has not  
15 obtained any individual external monitoring  
16 data for this period and lacks source-term  
17 information about non-uranium radiological  
18 operations.

19 In its evaluation report, NIOSH has concluded  
20 that it is likely that radiation doses for this  
21 group of workers at Y-12 Plant during this time  
22 period could have endangered the health of  
23 members of this class. The Board concurs. The  
24 Board also notes that NIOSH is able to

1 reconstruct doses from medical X-rays by means  
2 of existing project technical documents.  
3 Based on these considerations, and on the  
4 discussions and deliberations at our June 24-  
5 26, 2008 Board meeting, the Board recommends  
6 that this Special Exposure Cohort petition be  
7 granted.

8 Enclosed is supporting documentation from the  
9 Advisory Board Meeting held June 24-26, 2008 in  
10 St. Louis, Missouri. This documentation  
11 includes transcripts of the deliberations,  
12 copies of the petition and the NIOSH review  
13 thereof, and related documents distributed by  
14 NIOSH. If any of these items are unavailable  
15 at this time, they will follow shortly.

16 Spencer Chemical Co.

17 The Board recommends that the following letter  
18 be transmitted to the Secretary of DHHS within 21  
19 days. Should the Chair become aware of any issue  
20 that, in his judgment, would preclude the transmittal  
21 of this letter within that time period, the Board  
22 requests that he promptly inform the Board of the  
23 delay and the reasons for this delay and that he  
24 immediately work with NIOSH to schedule an emergency  
25 meeting of the Board to discuss this issue.

1           The Advisory Board on Radiation and Worker  
2 Health (The Board) has evaluated SEC Petition-00089  
3 under the statutory requirements established by  
4 EEOICPA and incorporated into 42 CFR Sec. 83.13(c)(1)  
5 and 42 CFR Sec. 83.13(c)(3). The Board respectfully  
6 recommends Special Exposure Cohort status be accorded  
7 to all Atomic Weapons Employer employees of the  
8 Spencer Chemical Company/Jayhawk Works from January  
9 1, 1956 through December 31, 1961 for a number of  
10 work days aggregating at least 250 work days,  
11 occurring either solely under this employment, or in  
12 combination with work days within the parameters  
13 established for other classes of employees in the  
14 Special Exposure Cohort. This recommendation is  
15 based on the following factors:

16           Spencer Chemical Company/Jayhawk Works  
17 conducted chemical processes to produce uranium  
18 and thorium oxides and uranium carbides from  
19 other forms, including uranium hexafluoride.  
20 Physical forms of the material at the site  
21 included fused ceramic pellets and finely  
22 divided powder.

23           The facility processed several types of uranium  
24 bearing materials for use in the nuclear fuel  
25 cycle, including dissolution and purification

1 of metal scrap to recover uranium oxide; and  
2 hydrolyzation and purification of scrap uranium  
3 hexafluoride to recover uranium oxide. NIOSH  
4 does not have information about the nature of  
5 the thorium operations at the plant.  
6 Although documents from the period indicate the  
7 individuals were on a bioassay program, no  
8 individual bioassay records have been located.  
9 Although documents from the period indicate  
10 that workers wore dosimeters, no dosimetry  
11 records have been discovered other than a  
12 single record for one individual. The lack of  
13 external monitoring records prevents NIOSH from  
14 reconstructing total external dose, although  
15 doses from uranium can be reconstructed from  
16 project technical documents by means of the  
17 procedures set forth in NIOSH Technical  
18 Bulletin TBD-6000.  
19 Although documents from the period indicate  
20 that air monitoring, radiation surveys, and  
21 contamination surveys were conducted, results  
22 from such surveys have not been located.  
23 The lack of information on thorium operations  
24 prevents NIOSH from reconstructing doses from  
25 thorium.

1           In its evaluation report, NIOSH has concluded  
2           that it is likely that radiation doses for this  
3           group of workers at Spencer Chemical Co. during  
4           this time period could have endangered the  
5           health of members of this class. The Board  
6           concur. The Board also notes that NIOSH is  
7           able to reconstruct doses from medical X-rays  
8           by means of existing project technical  
9           documents.

10          Based on these considerations, and on the  
11          discussions and deliberations at our June 24-  
12          26, 2008 Board meeting, the Board recommends  
13          that this Special Exposure Cohort petition be  
14          granted.

15          Enclosed is supporting documentation from the  
16          Advisory Board Meeting held June 24-26, 2008 in  
17          St. Louis, Missouri. This documentation  
18          includes transcripts of the deliberations,  
19          copies of the petition and the NIOSH review  
20          thereof, and related documents distributed by  
21          NIOSH. If any of these items are unavailable  
22          at this time, they will follow shortly.

23          **DR. ZIEMER:** Are there any other very obvious  
24          editorial changes anyone wishes to make at this  
25          time on these? Otherwise, let me know. We

1           have -- in the next couple of weeks before I  
2           send it.  Actually I will distribute the -- the  
3           draft letters to you, as I normally do, so  
4           you'll have another chance to look at them --  
5           the draft letter to the Secretary -- or  
6           letters.

7           I want to move on to the Dow -- Dow Madison  
8           planning.  We have a couple of issues before  
9           us.  One was the issue of assigning tasks to  
10          our -- to our contractor.  The other was  
11          involving a workgroup.  I have gone back and  
12          checked our minutes from the meet-- the meeting  
13          in -- what's the date here on this meeting --  
14          it's the -- it's the January meeting when this  
15          was discussed.  And at that time -- and I think  
16          Dr. McKeel's memory was correct; he said he  
17          thought it had been assigned to the -- to the  
18          Melius workgroup on -- actually it was the --

19          **MR. GRIFFON:**  The SEC workgroup, right?

20          **DR. ZIEMER:**  It was the SEC workgroup, not --  
21          not the -- not the workgroup on surrogate data.  
22          It was the SEC workgroup.

23          **DR. MCKEEL:**  (Off microphone) (Unintelligible)  
24          never went to the surrogate data  
25          (unintelligible).

1           **MR. GRIFFON:** Right.

2           **DR. ZIEMER:** And Dr. Melius had volunteered to  
3 sort of monitor what was going on there, and so  
4 I'm going to confirm that that's where --  
5 that's where this activity will continue to  
6 reside and to charge that workgroup with  
7 monitoring activities related to Dow Madison.  
8 Now the other part of this was to define a path  
9 forward, and also to determine whether  
10 additional tasking was needed for the workgroup  
11 relative to the petition. I'd like to  
12 basically ask the Board members if you have  
13 recommendations on the path forward and the  
14 issues that you believe should be addressed by  
15 the workgroup, and possibly with the assistance  
16 of the -- the Board's contractor.

17           **MR. GRIFFON:** Yeah, I -- I think my -- the  
18 issue I presented yesterday -- I mean was the  
19 primary one I can think of, I -- other people  
20 may have other views, but the model for thorium  
21 and thoron during the residual period is -- is  
22 my -- the main issue I think that the workgroup  
23 should take, you know, to -- to review.  
24 Whether we need contractor support on that is  
25 another question, but...

1           **DR. ZIEMER:** Okay. And Jim?

2           **DR. LOCKEY:** Didn't that revolve about TIB-90,  
3 a technical document?

4           **MR. GRIFFON:** It did have a TIB, TIB-70, I  
5 thought.

6           **DR. LOCKEY:** TIB-70, and that, to me --

7           **MR. GRIFFON:** TIB-70, yeah.

8           **DR. LOCKEY:** -- I think that was -- that was  
9 what we were going to -- whether we need to get  
10 -- put together a separate workgroup to deal  
11 with TIB-70. I think that's what the issue  
12 resolved (sic) around.

13           **DR. ZIEMER:** TIB -- TIB-70 itself currently  
14 would fall under the procedures workgroup as a  
15 responsibility, and John, can you remind me  
16 whether or not TIB-70 has already been reviewed  
17 by --

18           **DR. MAURO:** No.

19           **DR. ZIEMER:** It has not been reviewed --

20           **DR. MAURO:** It's not on the list for review and  
21 it has not been reviewed.

22           **MR. GRIFFON:** They haven't been tasked with  
23 that.

24           **DR. ZIEMER:** All right.

25           **MR. GRIFFON:** So whether we want to -- I mean



1 we should probably decide it, I --

2 **DR. ZIEMER:** Well --

3 **MR. GRIFFON:** -- if we need to split that off  
4 into procedures and -- and...

5 **DR. ZIEMER:** Well, in the interest of time,  
6 rather than -- than wait for the workgroup to  
7 sort of decide that, it seems to me -- it  
8 certainly seems to the Chair that we've got to  
9 have the TIB-70 review regardless, and so I'm  
10 wondering if -- if it would be in order to task  
11 our -- our contractor to initiate that review  
12 and then, when it is completed, for the  
13 workgroup to pick that up and -- in a somewhat  
14 expedited way, realizing that --

15 **MR. GRIFFON:** That's the -- yeah.

16 **DR. ZIEMER:** -- we have -- we have this issue.  
17 But I -- I think that will be a little sort of  
18 easier to handle than the broad 6000/6001  
19 issues that -- that you now have given up. So  
20 the trade-off is that you would get this  
21 somewhat lesser task, I guess I'd describe it.  
22 Is there -- is there any objection to tasking -  
23 - and we would ask Christine, working with  
24 David Staudt, to make that tasking happen.

25 **DR. MCKEEL:** Well, may I make a comment --

1           **DR. ZIEMER:** You certainly may.

2           **DR. MCKEEL:** -- about tasking of the  
3 contractor? Just to refresh, SC&A did file a  
4 report on the initial NIOSH evaluation report.

5           **DR. ZIEMER:** That's correct.

6           **DR. MCKEEL:** But they did not -- and in that  
7 report, interestingly, they did evaluate worker  
8 testimony that covered the residual period.  
9 And they really did provide some very valuable  
10 kind of independent assessment of what the  
11 workers said about the activities that went on  
12 there and -- and what I characterize as at  
13 least evidence that the thorium operations  
14 period continued on much longer than the  
15 uranium operations, and then what kind of  
16 activities were going on during the residual  
17 period. But what they did not do was to look  
18 at thorium calculation of internal and external  
19 doses in any form or way.

20           Then evaluation -- the addendum one came out  
21 from NIOSH and of course this month the  
22 addendum two, and I would just ask please for  
23 the Board to think about, along with TIB-70,  
24 that -- you know, my -- my question yesterday,  
25 what I tried to focus on, was whether the data

1           used for the air intakes and -- and general air  
2           samples and the breathing zone samples are  
3           really appropriately -- appropriate samples to  
4           apply to Dow Madison and -- and just the  
5           general way that NIOSH proposes that now they  
6           can calculate those doses but they couldn't  
7           before. I just think it leaves it very  
8           incomplete unless the contractor also looks at  
9           that question.

10          **DR. ZIEMER:** Thank you for --

11          **DR. MCKEEL:** It's just a comment.

12          **DR. ZIEMER:** -- that suggestion. Jim?

13          **DR. LOCKEY:** John, yesterday we were -- since  
14          TIB-70 is used in a lot of different -- it's  
15          not just for this, it's going to be used  
16          throughout -- I think we were -- we really  
17          wanted that looked at, and how soon can you get  
18          that done? How -- how fast can you move that  
19          up in your agenda?

20          **DR. MAURO:** We -- we could start working on it  
21          immediately, but I have to give it a read. I  
22          haven't read it. I don't know how complex it  
23          is, and so it's hard for me to say how long  
24          it's going to take to review. If you -- I  
25          could -- I just want to read -- give -- read it

1 cover to cover, get my mind around the problem  
2 and the right people to do the evaluation. I  
3 could get back to you in a matter of days with  
4 an answer to your question of when I might be  
5 able to have a report --

6 **DR. LOCKEY:** I think that --

7 **DR. MAURO:** -- into your hands.

8 **DR. LOCKEY:** -- would be helpful for the Board  
9 to --

10 **DR. MAURO:** Yeah, but I do --

11 **DR. LOCKEY:** We need to --

12 **DR. MAURO:** I haven't read it and I don't --

13 **DR. LOCKEY:** We need to keep the petitioners --  
14 we need to keep this on the --

15 **DR. MAURO:** Yes.

16 **DR. LOCKEY:** -- on the front burner.

17 **DR. MAURO:** Yeah, so if you just give me a few  
18 days just to read it and -- and I'm -- how best  
19 -- how best to -- so just e-mail the Board with  
20 my -- my --

21 **DR. BRANCHE:** Your estimated time.

22 **DR. MAURO:** -- prospective -- yeah.

23 **DR. ZIEMER:** Let's --

24 **DR. BRANCHE:** Yeah, I think that's --

25 **DR. ZIEMER:** Send -- send it to Christine and

1 we'll deter--

2 **DR. BRANCHE:** And then over to -- yeah.

3 **DR. ZIEMER:** -- we'll -- we'll get it to the  
4 Board, but I think -- just communicate --

5 **DR. BRANCHE:** I'll confer with Dr. Ziemer when  
6 you send your estimated time to me.

7 **DR. ZIEMER:** And then we'll provide that  
8 information for the workgroup and make sure the  
9 Board is aware of it.

10 **DR. BRANCHE:** Dr. Ziemer --

11 **DR. ZIEMER:** Christine has a comment here.

12 **DR. BRANCHE:** Well, actually I have a question  
13 to -- to you and to the rest of the Board  
14 members. And I understand about how the issues  
15 concerning the 250 days was assigned to the  
16 appropriate workgroup. But Mr. Griffon raises  
17 issues about modeling for thorium and thoride -  
18 - I may not have all the technical names  
19 correct -- correctly stated --

20 **DR. ZIEMER:** Thoron.

21 **DR. BRANCHE:** -- thoron -- thoron, thank you --  
22 but I am concerned that that may not be  
23 properly addressed by the 250-day workgroup, so  
24 is that going to be lost?

25 **MR. GRIFFON:** Well, I --

1           **DR. BRANCHE:** Is that the appropriate place?

2           **MR. GRIFFON:** I mean I think it's -- the same  
3           thing applies. It would have to be moved to  
4           the front burner on that group. That -- I  
5           think we -- we had an SEC/250-day workgroup --

6           **DR. BRANCHE:** Yes.

7           **MR. GRIFFON:** -- (unintelligible) --

8           **DR. ZIEMER:** The 250-day was --

9           **DR. BRANCHE:** Yeah, inclu--

10          **DR. ZIEMER:** -- one of their issues but not  
11          their only issue.

12          **MR. GRIFFON:** Yeah.

13          **DR. ZIEMER:** In that sense it was a somewhat ad  
14          hoc workgroup that was available --

15          **MR. GRIFFON:** Right.

16          **DR. ZIEMER:** -- and it may be --

17          **MR. GRIFFON:** That we need to --

18          **DR. ZIEMER:** -- that we would have to have a  
19          full workgroup just addressing this. But  
20          insofar as a lot of the -- you know, the -- the  
21          Dow issues, many of them have been addressed.  
22          We had the existing group already address -- it  
23          may be that this -- this workgroup can handle  
24          it, and they're not having to spend a lot of  
25          time right now on the 250-day issue anyway, so

1 I think --

2 **MR. GRIFFON:** Right.

3 **DR. ZIEMER:** -- I think they're in a position  
4 to -- to do the work.

5 **DR. BRANCHE:** And you're saying it's covered  
6 because it's also actually primarily supposed  
7 to be Special Exposure Cohort issues?

8 **DR. ZIEMER:** Yes.

9 **MR. GRIFFON:** Right. That was originally the  
10 way we --

11 **DR. BRANCHE:** Well, we'll have to --

12 **MR. GRIFFON:** -- defined --

13 **DR. BRANCHE:** We'll have to monitor and see. I  
14 mean I --

15 **MR. GRIFFON:** Yeah, yeah, yeah --

16 **DR. BRANCHE:** -- prove to me that that's  
17 actually going to hap--

18 **DR. ZIEMER:** Right.

19 **DR. BRANCHE:** -- be properly addressed,  
20 especially given that Dr. Melius isn't here.

21 **DR. ZIEMER:** But he -- he did volunteer to have  
22 his --

23 **MR. GRIFFON:** Yeah, yeah.

24 **DR. ZIEMER:** -- his group monitor this  
25 particular one at -- at the previous meeting,

1 so we give them the opportunity --

2 **MR. GRIFFON:** We'll certainly let him know and  
3 notify --

4 **DR. ZIEMER:** -- and if -- if he believes that  
5 they cannot do that, then we'll have to  
6 reassign it or re-establish another workgroup.  
7 Okay, so we have -- we have the -- I think we  
8 have agreement that the tasking for the -- for  
9 the procedure should be done. The -- Dr.  
10 McKeel has raised some issues. I'd like to get  
11 some feedback from Board members on that in  
12 general. This would require some additional  
13 tasking. Or we could await for the -- the  
14 committee -- the workgroup itself to make their  
15 preliminary evaluation and give them the auth--  
16 authority to request from Christine that the  
17 tasking be done. Any -- Jim, do you have a  
18 comment on this or --

19 **DR. LOCKEY:** Oh, I'm sorry -- no.

20 **DR. ZIEMER:** I take the silence as being  
21 uncertainty as to -- to what you think should  
22 be tasked. Let me ask Christine a question  
23 here -- and John, maybe also, you -- you might  
24 not have a feel for this, but as we do tasking  
25 is -- it's easy for us to sit here and do



1           tasking, but these things start to pile up and,  
2           as one thing comes into play, something else  
3           gets pushed down and so on. You -- you heard  
4           what Dr. McKeel described, and are you in a  
5           position right now to respond to that in terms  
6           of whether that would entail significant time  
7           and effort, to the extent that we're going to  
8           be pushing other priority items back down?  
9           Everything is fighting for priority, obviously.

10          **DR. MAURO:** No, in fact I would say that the --  
11          since TIB-70 is generic, it would be efficient  
12          to, while that person is reviewing TIB-70 -- or  
13          team -- in terms of -- I presume it's some type  
14          of model for -- for projecting exposures as a  
15          function of time and extrapolation, and then  
16          actually apply it and see how well it serves  
17          the -- the Dow use of that model. So I mean it  
18          would -- it would create a situation where we  
19          could sort of move the two of them together and  
20          actually make them linked, so -- so it -- it  
21          will not affect our ability to continue work on  
22          other fronts.

23          **DR. ZIEMER:** Thank you, that's helpful. Wanda?

24          **MS. MUNN:** Well, as chair of procedures, I have  
25          to weigh in on this, too, and remind the Board

1           that the fact that SC&A can produce their  
2           analysis means that they also are going to be  
3           producing findings. And when they produce  
4           findings, those findings must come to the  
5           procedures group, and it involves the staff at  
6           NIOSH at great length for us to work through  
7           those findings, some of which we can work  
8           through and some of which you reject even when  
9           we bring the resolution to you. Therefore, our  
10          concern -- or my concern, and the concern, I  
11          hope, of the other members of the procedures  
12          group -- is that -- first of all, somebody else  
13          is talking on the line, and if they will get  
14          off the line I will continue with what I'm  
15          saying. It is a very -- borders on the  
16          impossible for us to be able to say that the  
17          working group is going to be able to get  
18          through this in jig time.

19          One of the things we've been very concerned  
20          about, which I brought to you earlier today and  
21          -- not today, earlier this meeting -- is the  
22          backlog of items, which may not loom great but  
23          which are still awaiting any attention at all,  
24          simply because we've been focused on other  
25          things. One of the other generic procedures

1           that's on the front burner right now, I hope,  
2           is Proc-90, which has absorbed at least three  
3           of the other procedures that we were looking at  
4           and which now needs the attention of both the  
5           contractor and NIOSH in order to reach some  
6           agreement on fine points that need to be  
7           polished with that very large overarching  
8           procedure.

9           So I'm not trying to discourage this, I'm just  
10          trying to discourage the Board from putting  
11          unrealistic expectations on the contractor with  
12          respect to this single procedure. It's not  
13          just the contractor's weight to bear.

14         **DR. ZIEMER:** Right, thank you for that comment.  
15          In the case of the second part of this that you  
16          were addressing, I -- I would think that the --  
17          the workgroup -- the Dow -- Dow Madison group,  
18          which is the 250-day SEC workgroup, would have  
19          to address issues raised in the analysis of the  
20          Dow situation versus the findings for -- for  
21          the review of the procedures.

22         **DR. MAURO:** We have a very similar situation  
23          with regard to Pinellas and OTIB-66, I believe,  
24          whereby there's really -- the solution there  
25          was let's, as part of the closeout process --

1 we have a Pinellas review. We have a list of  
2 issues we're addressing. One of the issues  
3 deal with a very specific subject that has now  
4 been addressed globally by NIOSH in an OTIB --  
5 66. And the judgment was made that as part of  
6 the closeout process for that issue for  
7 Pinellas, we will review that TIB as applied to  
8 Pinellas. So we have a similar situation here.  
9 The alternative of course could have been,  
10 since it was a procedure we've never reviewed  
11 before, it could have fell -- so in effect, the  
12 review of OTIB-66 is part and parcel to the  
13 review -- the closeout process for Pinellas. I  
14 guess it's really the judgment of the Board.  
15 We could do a -- do it -- a similar approach,  
16 or -- whereby we would review OTIB-70 as part  
17 of the -- the review of the Dow issue, but --  
18 in this case of course tha-- this particular  
19 aspect of the Dow review has not been  
20 authorized --

21 **DR. ZIEMER:** Right.

22 **DR. MAURO:** -- so I mean -- but it -- we could  
23 -- we could do it either way, as a separate  
24 review, independent, and it would be a stand-  
25 alone work product, which would be a review.

1           And then subsequent to that or in parallel with  
2           that have a report, if you so choose, that  
3           would basically expand our current review of  
4           the Dow -- the 1957 to '60 time period and then  
5           add onto that -- okay, now let's -- let's look  
6           at the resid-- the period that follows. I mean  
7           ei-- either approach could be used. It's  
8           really your choice.

9           **DR. ZIEMER:** In my mind it's a parallel thing.  
10          I think the procedures have to go to Wanda's  
11          committee. I think the analysis of the Dow  
12          situation has to go to the other group. And  
13          obviously they're not being done in isolation,  
14          but I don't think we want to ask the procedures  
15          group to get involved specifically in the Dow  
16          issues.

17          **MS. MUNN:** I would hope not.

18          **DR. ZIEMER:** So -- but it also seems to the  
19          Chair that we -- we do need to task our  
20          contractor to get underway with this, being  
21          aware of all of the items and concerns that --  
22          that Wanda has raised because they're concerns  
23          not only for this task but for all of our  
24          tasks. And also reminding petitioners and  
25          others involved with them that this is a -- a

1 struggle that we have in terms of our own time  
2 commitments and -- and meeting those. And I  
3 know, Dan, you're aware of that 'cause you're -  
4 - you're here at our meetings. So we're trying  
5 to give priority, but also be fair to all of  
6 the groups that are needing attention. So we  
7 will -- will do the tasking for the contractor.  
8 We have the -- the one workgroup getting  
9 underway with the -- with the procedures that  
10 are related, the other workgroup to address the  
11 other issues, particularly the one that Mark  
12 raised and other issues that they can certainly  
13 identify based on the discussion that was had -  
14 - that was held earlier in the meeting.  
15 Josie?

16 **MS. BEACH:** And I -- sorry if I missed this --  
17 did we task SC&A to look at the addendum one  
18 and two of the Dow?

19 **DR. BRANCHE:** No. No, that has not -- that  
20 task has not been assigned.

21 **MS. BEACH:** Is that a task that we can assign  
22 at this time? SC&A looked at the original  
23 document.

24 **DR. BRANCHE:** But not the two addenda.

25 **MS. BEACH:** But not the two addendums (sic).

1           **DR. ZIEMER:** That's correct. In my mind that  
2 was sort of tied in with what we were talking  
3 about here. I think --

4           **MS. BEACH:** I thought so, but I wanted to make  
5 sure we were clear.

6           **DR. ZIEMER:** That was your understanding, I  
7 assume, John, as well. Right?

8           **MR. GRIFFON:** There are more parts to those  
9 addenda so I (unintelligible).

10          **MS. BEACH:** Yes.

11          **DR. MAURO:** My understanding right now is that  
12 SC&A has been tasked to review 70, and I will  
13 get back to you very shor-- shortly about how  
14 long that will take.

15          Right now it sounds to me that -- we have not  
16 been tasked to look at addendum one and two and  
17 that approach for doing dose reconstruction  
18 post-1960. We have not been tasked to do that  
19 and that -- and certainly the two will -- are  
20 inter-related and it --

21          **DR. BRANCHE:** They're related, but no  
22 assignment has been made yet.

23          **DR. MAURO:** But right now we have not been  
24 tasked to do that.

25          **MR. GRIFFON:** -- I thought we did, but

1           anyway...

2           **DR. ZIEMER:** Well --

3           **MS. BEACH:** It was not clear.

4           **DR. ZIEMER:** Okay, let's include that --

5           **DR. BRANCHE:** Let's make it clear.

6           **DR. ZIEMER:** -- include that, that's -- that's  
7           what we're -- partially -- partially what we're  
8           talking about when we're talking about that  
9           analysis, including with -- including the  
10          description that Dr. McKeel made there a moment  
11          ago.

12          We don't have a specific time line -- I don't  
13          think we can today. I think and I will state  
14          for the record and for the petitioners, for  
15          Robert, that we -- it is our intent to move  
16          ahead on these as rapidly as we can.

17          **DR. BRANCHE:** Okay.

18          **DR. ZIEMER:** Okay.

19          **MR. GRIFFON:** (Off microphone) Can we  
20          (unintelligible).

21          **DR. ZIEMER:** Huh?

22          **MR. GRIFFON:** I -- I know you're -- are we  
23          almost close to the end or can we take a break?

24          **DR. ZIEMER:** I'm going to suggest that people -

25          -



1           **DR. BRANCHE:** Go as they need.

2           **DR. ZIEMER:** -- take their own comfort breaks  
3 as their level of discomfort reaches a point --  
4 we're -- we're very close to the end, but we  
5 need to establish another workgroup and that is  
6 to address the issues of -- of OTIB-6000 and  
7 6001. I think we agreed earlier in the meeting  
8 that this should be done. That workgroup would  
9 have responsibility initially for those two  
10 generic OTIBs, plus Appendix BB right now.

11          **DR. BRANCHE:** That would be included.

12          **DR. ZIEMER:** Would be included. And in  
13 principle, all of the appendices, but right now  
14 Appendix BB is on the -- on the --

15          **DR. BRANCHE:** Okay.

16          **DR. ZIEMER:** -- screen. So I would -- I would  
17 hope that at least a couple of the individuals  
18 on this workgroup would be individuals --

19          **DR. BRANCHE:** From procedures.

20          **DR. ZIEMER:** -- who have been familiar with the  
21 6000 and 6001 work from procedures, so let me  
22 ask for volunteers and -- okay, we've got  
23 Josie. Who else?

24          **DR. BRANCHE:** Griffon.

25          **DR. ZIEMER:** Griffon. I'm going to volunteer

1 for this one.

2 **DR. BRANCHE:** Ziemer, that's two from  
3 procedures.

4 **DR. POSTON:** I'll volunteer.

5 **DR. BRANCHE:** Poston.

6 **DR. ZIEMER:** John Poston.

7 **DR. BRANCHE:** That's four.

8 **DR. ZIEMER:** We could have an alternate?

9 **MS. MUNN:** I wouldn't mind serving as the  
10 alternate as long as I didn't have major  
11 responsibilities for --

12 **DR. ZIEMER:** Munn as alternate.

13 **DR. BRANCHE:** And who will be the chair?

14 **DR. ZIEMER:** Well, let's see, John Poston, can  
15 you handle this as chair?

16 **DR. POSTON:** Sure.

17 **DR. ZIEMER:** I know you can handle it, in terms  
18 of ability. I'm really asking about time.

19 **DR. POSTON:** Well, it'd be better if someone  
20 else chaired it 'cause I'm on a National  
21 Academy committee right now and I just don't  
22 have time.

23 **DR. ZIEMER:** Okay. Josie?

24 **MR. GRIFFON:** What about you, Paul?

25 **DR. ZIEMER:** Huh?

1           **MR. GRIFFON:** How about you chair it? Can you  
2 chair this one? You can appoint yourself  
3 maybe.

4           **DR. ZIEMER:** Well, I can appoint myself.

5           **MS. BEACH:** I would agree with that  
6 appointment, Paul.

7           **DR. ZIEMER:** I've been outvoted. I will -- I  
8 will chair this, okay.

9           **DR. BRANCHE:** Okay.

10          **DR. ZIEMER:** I've been avoiding these.

11          **DR. BRANCHE:** I noticed.

12          **MS. MUNN:** Wisely so.

13          **DR. ZIEMER:** Okay, that will take care of that  
14 one.

**BOARD WORKING TIME:**

**STATUS OF SELECTION OF BOARD CONTRACTOR**

15                               Selection of Board contractor, status report.

16           **DR. BRANCHE:** There was a solicitation for --  
17 sorry, a synopsis of a solicitation -- that  
18 means an announcement letting people know that  
19 an announcement is about to come -- and that  
20 was issued on June 6th. I've checked in with  
21 David Staudt, hoping that he would be able to  
22 join us for the call, but he's unable to do  
23 that today. He has provided me with an update,  
24 and that is early next month all Board members  
25

1 will receive a draft. You all asked for an  
2 opportunity to review it. I suspect that you  
3 will not have very much time to review it.  
4 I've asked him to give you a hard deadline so  
5 that things can keep moving forward, but the  
6 announcement is expected to go out in July.  
7 The solicitation for the contractor is expected  
8 to go out in July, and that's my update.

9 **UNIDENTIFIED:** Thank you.

10 **DR. ZIEMER:** Okay.

11 **DR. BRANCHE:** I think I'm still on.

12 **MR. GRIFFON:** When you -- when you send that  
13 draft, is there any way you can send the  
14 previous version, just so we have side-by-side?  
15 Is that possible?

16 **DR. BRANCHE:** I have to --

17 **MR. GRIFFON:** 'Cause that -- I --

18 **DR. BRANCHE:** See, I have to work with David  
19 'cause I don't have a copy of the previous  
20 version. I can ask him. I --

21 **MR. GRIFFON:** Well, since there's a lot -- a  
22 lot of --

23 **DR. ZIEMER:** That would be helpful.

24 **MR. GRIFFON:** -- language --

25 **DR. BRANCHE:** I know it would be helpful.

1           **MR. GRIFFON:** -- similar --

2           **DR. BRANCHE:** Yeah, I just want to make certain  
3           that we honor the first request, which was to  
4           get it out to you. And that, in an attempt to  
5           get the other in detail, we don't delay getting  
6           the solicitation out 'cause time is ticking.

7           **MR. GRIFFON:** Yep.

8           **DR. BRANCHE:** I think I'm still on here, which  
9           is --

10          **DR. ZIEMER:** Yes, you've got --

11          **TRACKING STATUS OF TRANSCRIPTS AND MINUTES**

12          **DR. BRANCHE:** -- the tracking of minutes and  
13          transcripts. We are up to date, up to speed  
14          and -- as far as all the transcripts -- we are  
15          on time and on schedule. The one exception, I  
16          did-- I never said there would be a deadline  
17          for when we would get the application of the  
18          new redaction policy to those Board meetings  
19          that oc-- and -- and conference call--  
20          conference -- Board conference calls that  
21          occurred from May through the end of last year.  
22          It -- we have applied the new redaction policy  
23          to those transcripts, but we have not yet  
24          posted them. There's one more small step that  
25          has to happen before they're posted, and we

1           hope to have that happen soon -- hopefully  
2           before our early August Board conference call.

3           **FUTURE PLANS AND MEETINGS**

4           **DR. ZIEMER:** Thank you, Christine. Are there  
5           any changes in meeting plans in -- in future  
6           meeting plans --

7           **DR. BRANCHE:** No --

8           **DR. ZIEMER:** -- that we --

9           **DR. BRANCHE:** -- there are no changes in the  
10          dates. However, this is the time when we need  
11          to determine when our December meeting would  
12          occur -- excuse me, where our December meeting  
13          would occur. At this time our December meeting  
14          is scheduled for December 16th through 18th,  
15          and I recall a discussion about the fact that a  
16          few -- at least one Board member -- and it was  
17          Dr. Melius; he's not here -- asked that the  
18          location be east of the Mississippi River.

19          **MR. CLAWSON:** I take it'll not be in the  
20          Rockies.

21          **DR. BRANCHE:** Well, that's not east of the  
22          Mississippi, is it, Brad?

23          **MR. CLAWSON:** That's right. I know.

24          **DR. BRANCHE:** Geography was not your strong  
25          suit, but we still love you. And --

1           **DR. POSTON:** We've got to wait to see where the  
2 flood goes.

3           **DR. BRANCHE:** Yeah, we do -- no, we don't need  
4 to see where the flood goes, but I would say --

5           **DR. ZIEMER:** It may be in the Mississippi  
6 River.

7           **DR. BRANCHE:** -- but I would say that, in  
8 discussing some of this with NIOSH staff, it  
9 appears as if Savannah -- the Savannah River  
10 Site would be coming up for discussion at that  
11 meeting, and it might be a nice idea to have it  
12 -- to have the meeting located in or around  
13 that area, so Georgia or South Carolina.

14           **DR. ZIEMER:** The last time we met in the,  
15 quote, Savannah River area, we were down in  
16 Charleston. And that's really quite a ways  
17 from the site. It's alm--

18           **DR. BRANCHE:** No, I think we would go in--

19           **DR. ZIEMER:** -- it's almost too far. I don't  
20 know if Aiken is big enough to --

21           **MR. PRESLEY:** See? I don't know if  
22 (unintelligible).

23           **DR. BRANCHE:** Aiken -- Aiken --

24           **DR. POSTON:** (Off microphone) (Unintelligible)

25           **DR. BRANCHE:** Well, I mean if -- if you all ag-

1           - again, if you all agree to the general  
2           location, we will try to be sensitive to where  
3           the workers are located. I've al-- I've  
4           already heard about the fact that Charleston  
5           was too far.

6           **DR. POSTON:** Well, Augusta's nice.

7           **DR. BRANCHE:** So there's Augusta --

8           **DR. ZIEMER:** Augusta would be --

9           **DR. BRANCHE:** -- there's Aiken.

10          **DR. ZIEMER:** Augusta would be all right.

11          **DR. POSTON:** Augusta anyway.

12          **DR. ZIEMER:** It's got to be Augusta or Aiken as  
13          our choice for --

14          **DR. BRANCHE:** Well, if you'll give us -- again,  
15          if -- if we can agree on the location, we will  
16          work -- given the parameters of our -- of our  
17          meeting needs, with the -- with the specific  
18          location.

19          **MS. MUNN:** Let's try for Augusta.

20          **DR. BRANCHE:** Okay.

21          **MS. MUNN:** Sounds good.

22          **DR. BRANCHE:** Augusta, Aiken, someplace in that  
23          general area.

24          And then we have -- the next face-to-face  
25          meeting following that would be in February --



1 February 17th through 19th is the -- is the  
2 face-to-face meeting for which we've yet to  
3 select a location. If you have some general  
4 ideas, it would be helpful for Zaida and me to  
5 hear that now so we can at least begin to look  
6 at -- if you give us several locations, we can  
7 begin to look at --

8 **MR. PRESLEY:** Somewhere where it's warm.

9 **DR. ZIEMER:** Hawaii?

10 **MR. PRESLEY:** Don't put us in Boston.

11 **DR. BRANCHE:** Okay, somewhere where it's warm  
12 is not enough. I need a little bit more focus  
13 than that, Bob. I love you, too, but I need a  
14 little bit more focus than someplace where it's  
15 warm.

16 **DR. POSTON:** San Juan, Puerto Rico.

17 **DR. BRANCHE:** Yeah, uh-huh.

18 **DR. POSTON:** There is a site there, by the way.

19 **DR. BRANCHE:** I understand.

20 **MS. MUNN:** Are we in a position to second-guess  
21 where we are going to be with LANL and -- and  
22 the folks in New Mexico by that period of time?

23 **DR. BRANCHE:** Larry or a member of his staff  
24 might be able to respond to that question. I  
25 don't think he heard the question. Can we say

1 anything yet -- yet about Los Alamos or -- what  
2 was the other one, Wanda, New Mexico?

3 **MS. MUNN:** Sandia -- any of the --

4 **DR. BRANCHE:** If -- where NIOSH would be --

5 **MS. MUNN:** -- New Mexico sites by next February  
6 --

7 **DR. BRANCHE:** Is it too early to tell?

8 **MS. MUNN:** Is that a reasonable site?

9 **MR. ELLIOTT:** Sandia, I can't -- I can't answer  
10 that. We will be ready to present on Savannah  
11 River. That's our -- a goal, and I think it  
12 would be appropriate that we -- we have -- if  
13 you recall, the Board has met in Augusta and  
14 the Board has met in Charleston --

15 **DR. BRANCHE:** We're talking about February now.

16 **MR. ELLIOTT:** Oh, in February.

17 **DR. BRANCHE:** We've already agreed about  
18 Augusta --

19 **MR. ELLIOTT:** Oh, okay.

20 **DR. BRANCHE:** -- or Aiken for December.

21 **MR. ELLIOTT:** I'm sorry, I was in and out --

22 **DR. BRANCHE:** We're talking about the February  
23 meeting, I'm sorry.

24 **MR. ELLIOTT:** I can't speak to Sandia or Los  
25 Alamos --

1 DR. ZIEMER: It may be too early, but --

2 MR. ELLIOTT: -- at this point.

3 DR. ZIEMER: -- we might consider that as a  
4 possi-- possibility.

5 DR. BRANCHE: Okay, that -- that helps.

6 DR. ZIEMER: Would probably be Albuquerque or  
7 Santa Fe then, I suppose.

8 MR. CLAWSON: So for the September --

9 DR. BRANCHE: Santa Fe --

10 MR. SCHOFIELD: I would say that at that time  
11 of year there's a good chance there could be  
12 quite a bit of snow.

13 DR. ZIEMER: Yeah, that's a problem.

14 DR. BRANCHE: But you could have a barbecue for  
15 us if we come. Right?

16 MR. SCHOFIELD: (Off microphone)

17 (Unintelligible) would be the wiser choice.

18 DR. BRANCHE: Okay, so that would be for the  
19 February meeting.

20 DR. ZIEMER: That's probably --

21 DR. POSTON: Everybody's got to rent a car.

22 MR. SCHOFIELD: Yeah.

23 DR. ROESSLER: There are shuttles.

24 MR. CLAWSON: So Christine, for September we  
25 still are on for California --

1           **DR. BRANCHE:** Absolutely, the location has been  
2 selected.

3           **MR. CLAWSON:** Right, LA area. Correct?

4           **DR. BRANCHE:** Redondo Beach, I believe is the -  
5 - is that the right -- Zaida, Redondo Beach,  
6 the hotel's been selected, the contract's been  
7 signed. And I believe Zaida sent a message out  
8 to you with those -- with that information.

9           **UNIDENTIFIED:** Not yet.

10          **DR. BRANCHE:** Not yet? Okay, forgive me.

11          **DR. POSTON:** It would help to send out  
12 (unintelligible).

13          **DR. BRANCHE:** She -- she only last week signed  
14 the contract.

15          **DR. ZIEMER:** Okay, if you have other  
16 suggestions -- I don't think we need to decide  
17 today on --

18          **DR. BRANCHE:** We do not.

19          **DR. ZIEMER:** -- the other one.

20          **DR. BRANCHE:** Thank you.

21          **DR. ZIEMER:** Are there any other items that  
22 need to come before us today?

23           **RESPONSIBILITIES OF BOARD'S REPRESENTATIVE TO DOE**

24           **DR. BRANCHE:** There was one, Dr. Ziemer, and  
25 that was the responsibilities of the person who

1 would represent the Board to DOE. That was  
2 something that came up yesterday. In talking  
3 to our colleague-- my colleagues at DOE, you  
4 all wanted to know the roles for this  
5 particular contact person. They can provide  
6 information on the Board's approaches, the  
7 Board's handling of information and data, and  
8 how the Board assigns work to its contractors.  
9 The person can also serve as a conduit for  
10 Board -- for questions that would be from the  
11 Board back to DOE on DOE's procedures.

12 **DR. ZIEMER:** I -- I have a feeling that we --  
13 we left this a little bit fuzzy. It wasn't  
14 clear I think to all of us that we needed an  
15 official representative at this point. I'm  
16 wondering if we can operate under the following  
17 parameters, where at least for now --

18 **DR. BRANCHE:** Uh-huh.

19 **DR. ZIEMER:** -- where you would --

20 **DR. BRANCHE:** Right.

21 **DR. ZIEMER:** -- serve as the contact point  
22 where an issue arose.

23 **DR. BRANCHE:** Uh-huh.

24 **DR. ZIEMER:** And you would have a knowledge of  
25 the cleared individuals on the Board --

1           **DR. BRANCHE:** I'm getting that, yes. Uh-huh.

2           **DR. ZIEMER:** -- and would call on one or more  
3 of them to address whatever issues came up.

4           **DR. BRANCHE:** Well, let's do that for now, and  
5 if there --

6           **DR. ZIEMER:** If at some point we need --

7           **DR. BRANCHE:** -- ends up being a sticking  
8 point, we can revisit this.

9           **DR. ZIEMER:** Right, because we -- we talked,  
10 for example, about having a, quote, workgroup  
11 of those individual and -- and we don't want to  
12 sort of --

13           **DR. BRANCHE:** That's not going to work.

14           **DR. ZIEMER:** -- set them out and put targets on  
15 their backs. We -- we aren't' going to have a  
16 public list of our cleared people.

17           **DR. BRANCHE:** Right.

18           **DR. ZIEMER:** So as a practical -- and even --  
19 even identifying an individual as that point of  
20 contact may be a problem. Maybe not in a  
21 particular case, but in general 'cause it may  
22 not always be -- let's say it was -- we -- we  
23 had talked about Bob Presley, but what if it  
24 was somebody else? We -- we end up having to  
25 identify a cleared person, so I'm wondering if

1 we can do it this way where --

2 **DR. BRANCHE:** Let's at least try it.

3 **DR. ZIEMER:** -- where you would channel --

4 **DR. BRANCHE:** Uh-huh.

5 **DR. ZIEMER:** Josie, you have ano--

6 **MS. BEACH:** And will we have a clear  
7 description sometime soon?

8 **DR. BRANCHE:** A clear description of?

9 **MS. BEACH:** Of the responsibilities of that  
10 individual or those individuals?

11 **DR. BRANCHE:** I -- I think what Paul is  
12 suggesting is that we sort of hold off on that  
13 until -- and -- and I would serve as -- as this  
14 conduit for now, and if --

15 **DR. ZIEMER:** As issues arose and came in --

16 **DR. BRANCHE:** Right.

17 **DR. ZIEMER:** -- where we needed a cleared  
18 person to interact --

19 **DR. BRANCHE:** A specific Board person.

20 **MR. GRIFFON:** Can someone describe to me what  
21 are the -- what kind of issues? The doc-- the  
22 --

23 **DR. ZIEMER:** I don't know.

24 **MR. GRIFFON:** And -- but why -- why -- I don't  
25 understand the cleared individuals.

1           **DR. BRANCHE:** I --

2           **MR. GRIFFON:** Discussing in a -- in -- on the  
3 phone or an e-mail or anywhere else. It has  
4 nothing to do with cl-- you know, you can't  
5 discuss classified issues anyway.

6           **DR. ZIEMER:** No, if we need to have somebody go  
7 with Larry --

8           **DR. BRANCHE:** Or his staff.

9           **DR. ZIEMER:** -- or Larry's staff --

10          **MR. GRIFFON:** Yeah.

11          **DR. ZIEMER:** -- to observe something, I -- I  
12 mean I don't know the conditions under which we  
13 --

14          **DR. BRANCHE:** Right.

15          **DR. ZIEMER:** All I'm saying is I don't -- I  
16 don't think we need at this point a workgroup  
17 or an identified individual.

18          **DR. BRANCHE:** Right, we've don--

19          **MR. ELLIOTT:** Let me give you an example --

20          **MR. GRIFFON:** Things in the past where a few of  
21 us have gone --

22          **DR. ZIEMER:** Yeah, and -- and you found out  
23 about that because --

24          **DR. BRANCHE:** And we can -- on an as -- as  
25 need-to-know basis.



1           **DR. ZIEMER:** I'm saying let's remain on an ad  
2           hoc basis whereas that need arises --

3           **DR. POSTON:** Thanks for the reminder about  
4           (unintelligible).

5           **DR. ZIEMER:** -- Christine can call on the  
6           cleared individuals.

7           **DR. BRANCHE:** Uh-huh, yes.

8           **DR. ZIEMER:** Yeah. I think we're okay on --

9           **DR. BRANCHE:** Yeah, we're --

10          **DR. ZIEMER:** Okay. Larry.

11          **MR. ELLIOTT:** I could give you several  
12          examples, one of which might be that -- that  
13          the Board develops a document and DOE wants to  
14          review it and has some concerns or issues about  
15          it, and they need somebody that they can talk  
16          to in a cleared status. That might serve as  
17          one of the roles that not -- maybe Dr. Branche  
18          can't serve; a cleared Board member would have  
19          to serve in.

20          Dr. Ziemer's example of when we go out in the  
21          field or SC&A goes out in the field and we want  
22          a balanced perspective of cleared individuals  
23          involved is another perhaps possibility.

24          **DR. BRANCHE:** But at this poi-- at this time,  
25          we consult a list of cleared individuals to do

1           that.  And since these questions have come up,  
2           the interactions between DOE and me  
3           specifically, as it concerns cleared  
4           individuals, has improved.  Our list was not up  
5           to date, not theirs and not mine, and we've  
6           resolved that particular issue substantially  
7           over the last several weeks.  So Paul's  
8           suggestion of asking Board members, based on  
9           their clearance, to serve in this capacity on  
10          an as-needed basis as a way to proceed in the  
11          interim I think is -- is a wise approach for  
12          now.  Which means the need for a specifically-  
13          named contact person is kind of put aside for  
14          the moment.

15         **MR. GRIFFON:**  I -- I guess what I'm -- what I'm  
16         wresting with is if -- if -- Larry's example is  
17         -- is certainly one that I've been in the  
18         middle of before, that -- that -- so if we  
19         generate a document on the Board level -- first  
20         of all, there -- there are certainly issues if  
21         we generate something that by -- and this is  
22         always the -- the case in this sort of -- I  
23         mean this isn't research necessarily, but by  
24         putting some things together you potentially  
25         got into classified issues.  I mean -- boy,

1           tha-- tha-- there's a trickle-down there.  
2           Larry knows about it. I certainly know about  
3           it. I mean if you generate that report and it  
4           is deemed that there's something classified in  
5           there, you've got hard drive issues, you've got  
6           all kinds of things that could --

7           **DR. BRANCHE:** Well -- and --

8           **MR. GRIFFON:** -- result, but anyway, my point  
9           here is that I -- I had this sort of situation  
10          in some of my research and it -- it's not --  
11          it's not black and white. I mean I've got -- I  
12          -- I was in Oak Ridge where I had three  
13          security offers that -- three and it was like  
14          two to one split on how they came down on a  
15          certain issue in my report and -- and I was --  
16          I was -- it was basically a -- not a  
17          negotiation, but we -- we were discussing it  
18          between me being the author and -- and DOE.  
19          And I'm wondering how -- you know, if we  
20          generate something there's always different  
21          view on -- there -- there's gra-- I think  
22          there's some gray area --

23          **DR. BRANCHE:** Was this in your capacity as a  
24          Board member?

25          **MR. GRIFFON:** -- and -- and some -- some

1 classifiers I've seen have erred on the si-- on  
2 -- erred real strictly and others are -- are  
3 slightly different from that --

4 **DR. BRANCHE:** Right.

5 **MR. GRIFFON:** -- so I'm just wondering --

6 **DR. ZIEMER:** All -- all I'm proposing is that  
7 we not set up a workgroup or --

8 **MR. GRIFFON:** That's more --

9 **DR. ZIEMER:** -- an individual right now --

10 **MR. GRIFFON:** I agree with that part of --

11 **DR. ZIEMER:** -- we continue to operate as we  
12 have. If a need comes in, DOE would let  
13 Christine --

14 **DR. BRANCHE:** Me know.

15 **DR. ZIEMER:** -- know that -- or maybe Larry  
16 would say we -- we're going to look at these  
17 documents and we'd like to have a Board member  
18 along.

19 **DR. BRANCHE:** And we'll assign it as needed.

20 **DR. ZIEMER:** Christine will know who the -- who  
21 the cleared people are --

22 **MR. GRIFFON:** Yeah.

23 **DR. ZIEMER:** -- that can participate --

24 **MR. GRIFFON:** I guess we can just monitor the  
25 process and -- and if -- if you can just let us

1 know how many of these things hap-- whatever  
2 these issues are that arise --

3 **DR. BRANCHE:** Right.

4 **DR. ZIEMER:** Right.

5 **MR. GRIFFON:** -- if we haven't had any in six  
6 years --

7 **DR. ZIEMER:** If we have to formalize something  
8 at some point we'll do it, but I -- I don't see  
9 any advantage to formalizing this at this  
10 point, other than having cleared individuals  
11 available --

12 **DR. BRANCHE:** Right.

13 **DR. ZIEMER:** -- and we have some or -- we will  
14 have more, hopefully, as others become cleared.

15 **DR. BRANCHE:** Just so --

16 **MR. GRIFFON:** I -- I would at least appreciate  
17 it if you could let other -- the other Board  
18 members know -- like this is your -- to the  
19 best you can describe it in a -- in a -- you  
20 know, an open e-mail, this issue arose and I've  
21 assigned selected Board members to -- you know  
22 --

23 **DR. ZIEMER:** Well, let me ask -- I'm not sure  
24 we can always let people know when --

25 **DR. BRANCHE:** That's --

1 DR. ZIEMER: -- these issues arise even.

2 DR. BRANCHE: Right. I think I can tell you  
3 when it's been resolved, potentially, but I  
4 don't know if --

5 DR. ZIEMER: Well, you may not even be --

6 DR. BRANCHE: -- I can tell you when arise.

7 DR. ZIEMER: -- (unintelligible).

8 DR. BRANCHE: Yeah, we -- I'll have to work  
9 with DOE and see how this happens, but -- let  
10 me see how -- how we work on this.

11 DR. ZIEMER: Yeah. If something arises, you  
12 can de-- you may --

13 DR. BRANCHE: I'll give you as --

14 DR. ZIEMER: -- find out what --

15 DR. BRANCHE: -- much information as I can.

16 DR. ZIEMER: -- what can the Board --

17 DR. BRANCHE: Right, no.

18 DR. ZIEMER: -- what can be made known to the  
19 Board about this. I don't know, Larry do you --  
20 - you've had some experience in that.

21 DR. BRANCHE: Well, I -- I mean I've had some  
22 experience.

23 DR. ZIEMER: In general, some of this -- even  
24 the fact that it occurs is probably not  
25 releasable. Right?

1           **DR. BRANCHE:** Right.

2           **DR. ZIEMER:** Okay.

3           **DR. BRANCHE:** Well, let me just make certain  
4 that --

5           **MR. ELLIOTT:** You can't call attention to it.

6           **DR. BRANCHE:** Right. Let me just make certain  
7 that everyone knows, for the record, because  
8 the word "workgroup" around this has been -- a  
9 workgroup for this could never be established.

10          **MR. PRESLEY:** That's right.

11          **DR. BRANCHE:** Our procedures for workgroups  
12 require that we have transcripts, that we have  
13 a court reporter. So the idea of a workgroup  
14 for this is not appropriate.

15          **MR. GRIFFON:** Again, I -- I --

16          **DR. BRANCHE:** So --

17          **MR. GRIFFON:** Well, I'm still a little hazy on  
18 what this is, but I mean I'm willing to  
19 proceed. It just -- kind of monitor it for  
20 now, but you know, what this is --

21          **DR. BRANCHE:** I understand.

22          **MR. GRIFFON:** -- again, this -- regarding  
23 policies, regarding classified documents, I see  
24 no problem with having a workgroup on that.  
25 The -- the other things, I can understand your

1 point, but regarding a -- you know, if there's  
2 -- there's this discussion of the policy going  
3 back and forth --

4 **DR. ZIEMER:** There's -- there will be no policy  
5 discussion --

6 **MR. GRIFFON:** -- (unintelligible) --

7 **DR. BRANCHE:** No.

8 **DR. ZIEMER:** -- as far as I know.

9 **DR. BRANCHE:** Exactly.

10 **DR. ZIEMER:** Yeah. We're not talking about  
11 having any policy discussions.

12 **MR. GRIFFON:** Okay.

13 **DR. ZIEMER:** All we're saying is we're going to  
14 continue to operate as we are. If a cleared  
15 person is needed for -- from the Board for  
16 something, we'll make them available.

17 **DR. BRANCHE:** Right. That's all I have on that  
18 particular --

19 **DR. ZIEMER:** Board members, are there other  
20 issues that we need to address today?

21 (No responses)

22 If not, I thank you for your time and your  
23 patience. I declare that this meeting is  
24 adjourned. Thank you for all who participated,  
25 members of the public and staff. We appreciate



1  
2  
3  
4

it.

(Whereupon, the meeting was adjourned at 12:10  
p.m.)

1

**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 June 26, 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 26th day of July, 2008.

---

**STEVEN RAY GREEN, CCR, CVR-CM, PNSC****CERTIFIED MERIT COURT REPORTER****CERTIFICATE NUMBER: A-2102**