

1 not sure that it was clear. With respect to
2 accepting the entire document as is, we have
3 not discussed and I'm not convinced that the
4 categorization of findings which we discussed
5 but never really and truly came to any
6 agreement on -- remain unsure as to whether
7 this is comprehensive enough or is too
8 detailed. We haven't had any discussion at all
9 on that.

10 And in terms of relying on a specific document
11 for guidance as to how we should proceed in --
12 in reviewing and reporting on each of these
13 cases that comes before us, this may not be as
14 polished as some of us would like it to be.
15 Therefore, I -- I have some reservation -- not
16 about accepting this; I agree that the intent
17 here is precisely what we want to try to
18 pursue. But I -- I would -- would caution that
19 the understanding that it's going to be
20 polished be inherent in the motion.

21 **DR. ZIEMER:** Okay. It appears that you are
22 speaking against the amendment and for the
23 original, which was more conceptual.

24 Jim Melius, and then Roy -- or -- I saw you --
25 yes.

1 **DR. MELIUS:** Okay. I missed the subcommittee
2 meeting so I didn't hear the discussion today
3 (sic) but would seem to me the way that we --
4 when we do need to go forward with this and
5 that the way of evaluating this and for us to
6 reach more certainty about it, more -- be
7 comfortable, is actually applying it to a
8 number of cases and then -- maybe the first 20
9 and then see what -- if we -- it needs to be
10 adjusted or modified, you know, based on that.
11 Does it capture what we wanted to -- intend it
12 to. And so I'm not sure I see a great deal of
13 difference between the -- the original motion
14 and the amendment in the sense of we would --
15 we'll just go forward and then, after applying
16 it, I think we'd have a much better sense of --
17 of -- be able to address any changes that may
18 be needed.

19 **DR. ZIEMER:** Thank you. An excellent point
20 that, in a sense, both motions have the same
21 intent. I think the -- the one was perhaps
22 recognizing that maybe there's a degree of
23 incompleteness and some unease in blessing the
24 document if it wasn't fully complete. But your
25 point is that we can proceed forward in any

1 event and then modify. Roy DeHart.

2 **DR. DEHART:** In our discussions yesterday I --
3 what I was hearing was a very soft outline of
4 what we were reviewing at that time, which we
5 have in front of us. And I don't know of
6 anything that has changed on that, so I'm
7 speaking against the -- the amendment. I have
8 a 260-page document at home that I want to
9 review before I try to combine or consider
10 these two documents. And I would encourage us
11 to keep the -- our procedures flexible until
12 that time that we've had an opportunity to
13 review the documents that are available to us.

14 **DR. ZIEMER:** Okay. Thank you. Gen Roessler.

15 **DR. ROESSLER:** Although I support the concept
16 of the amendment, I want to speak against it,
17 also, because I think in the document we have
18 the word "findings" is not yet clear to us, and
19 it's mostly not clear to us because we don't
20 have the document from SC&A. And once --
21 obviously this morning we had some
22 misunderstanding as to what is in that
23 document. Once we get it, then I think we can
24 better define what we mean by findings and
25 better put this together.

1 **DR. ZIEMER:** Okay. Other comments for or
2 against the proposed amendment? We've had
3 several I think speak against it. Let me ask
4 for --

5 **MR. GRIFFON:** I'm -- I'm -- I'm generally --
6 I'm -- I'm generally still for the amendment,
7 but you know, I -- I sort of see -- I mean Jim,
8 I think, made the main point and you concurred,
9 Paul, that --you know, we're going to get to
10 the same place, I think. So if we apply this
11 in concept first round and see how it works,
12 then maybe we can finalize a methodology -- you
13 know, after we've had more opportunity...

14 **DR. ZIEMER:** And actually -- again, I'll re-
15 emphasize -- I believe the intent of both
16 motions is the same, and ultimately we would
17 proceed, either way, to use this as a starting
18 point. Jim, another comment?

19 **DR. MELIUS:** And I'm just trying to understand
20 procedurally what --

21 **DR. ANDERSON:** This is Andy, people have to
22 speak up, you're kind of breaking up.

23 **DR. ZIEMER:** I don't know if that was somebody
24 on the phone or --

25 **DR. MELIUS:** That's Henry.

1 **DR. ZIEMER:** Oh, that was -- okay. We're
2 breaking up, okay.

3 **DR. ANDERSON:** Yeah, you're breaking up in more
4 ways than one.

5 **DR. ZIEMER:** Okay. Thank you, Andrew -- Andy.

6 **DR. MELIUS:** The -- I'm trying to understand
7 procedurally what would be the difference in
8 the two approaches at this point in time. I
9 would hate to have to wait to the next
10 committee meeting before we can finalize this
11 document and before we can start applying it
12 and sort of getting some of this information
13 categorized. We've got another 20 or so cases
14 at least that'll be going through the
15 individual dose construction (sic) review
16 process and -- and so I guess I would like to
17 see this applied as -- as part of this process,
18 and then maybe then if we then want to, at the
19 next meeting, you know, make some modifications
20 to it, let's do it in the context of having it
21 applied. Now whether that's covered by your
22 original proposal or whether it's only covered
23 by the amendment, I'd like clarification.

24 **DR. ZIEMER:** Yeah. The original proposal from
25 the subcommittee actually didn't speak to that

1 directly. It -- it said let's adopt this as a
2 concept, and I think in part wanted to bring
3 this forward to the Board with the opportunity
4 to put additional legs on it, if you wish,
5 which might be in the form of saying let's not
6 only adopt it, but let's use it. Which in a
7 sense I believe is what Leon's amendment was --
8 I believe, if I understand, Leon, was to do
9 just that. And it's my sense that the Board in
10 fact wishes to do that. They may be
11 uncomfortable with stating that this is sort of
12 the final form. That may be the real problem
13 that a few are having with this. But I think
14 we'll reach the same endpoint, either way.
15 If the -- if the amended motion is defeated,
16 you will need to turn around and make a motion,
17 if we adopt the original, to then use it. So I
18 think the final effect will be the same. We'll
19 be quibbling here about Robert's rules, but we
20 need -- we need to move forward, so let me ask
21 for -- are you ready to vote on the amendment,
22 which -- the Owens amendment, which was to
23 basically adopt this as the document and to add
24 some sentences to clarify that one part,
25 without specifying what would be added at this

1 point, either. Right?

2 All who favor that, say aye.

3 (Affirmative responses)

4 Let me see the hands, ayes -- one, two, three,
5 four, five, six.

6 And no's? And I think the ayes have it, so
7 it's -- it's now adopted as -- that is the
8 amended motion.

9 **DR. ANDERSON:** I'm an aye.

10 **DR. ZIEMER:** Okay. Now finally, we have -- we
11 have amended the motion. We now are going to
12 vote on the amended motion. You have to vote
13 again.

14 All in favor of the motion, as amended, say
15 aye.

16 (Affirmative responses)

17 Any opposed --

18 **DR. ANDERSON:** Aye.

19 **DR. ZIEMER:** Okay. Now the amended motion's
20 been adopted and this now is our document.

21 Does the Board wish to give any instructions on
22 the added sentences that -- that Leon referred
23 to -- Leon or Mark, yes.

24 **MR. GRIFFON:** I guess as a -- a -- what would
25 this be, a friendly amendment to this, I --

1 **DR. ZIEMER:** No, we've adopt--

2 **MR. GRIFFON:** -- suppose, or just language?

3 **DR. ZIEMER:** -- we've adopted this. Now if you
4 want to add to it --

5 **MR. GRIFFON:** Yeah, I -- I think we should add
6 a sentence at the bottom of the ranking the
7 findings, something to the effect that the
8 approach will include a case-specific ranking,
9 as well as an overall ranking. The approach
10 will include a case-specific ranking as well as
11 an overall ranking.

12 **DR. ZIEMER:** I think Leon's sentence actually
13 said that, did it not, Leon, the sentence you
14 added?

15 **MR. OWENS:** Correct.

16 **DR. ZIEMER:** In essence, that's already
17 included.

18 **MR. GRIFFON:** Okay.

19 **DR. ZIEMER:** Yeah.

20 **MR. GRIFFON:** All right.

21 **DR. ZIEMER:** But make a note in your document
22 in case you missed it. The approach will
23 include a case-specific ranking, as well as a -
24 -

25 **MR. GRIFFON:** Overall --

1 **DR. ZIEMER:** -- overall --

2 **MR. GRIFFON:** -- broad ranking, I'm not sure
3 what term we would use.

4 **DR. ZIEMER:** Overall ranking.

5 **MR. GRIFFON:** Yeah.

6 **DR. ZIEMER:** Now does the Board have any
7 further instructions for -- for our contractor
8 with respect -- we have the report. We'll have
9 to read it. We'll -- we are -- we'll still be
10 looking for responses from NIOSH on that, and
11 then we'll have an opportunity next time then
12 to come to full closure.

13 Let me ask if there's any more issues on that
14 that need to be addressed this morning. This
15 is on the first 20 cases. Mark.

16 **MR. GRIFFON:** I -- I guess -- again, just the -
17 - the process question of when or where or how
18 are we going to handle that. And -- and -- I
19 mean I -- I think, you know, to apply this
20 methodology to the entire report is a good idea
21 'cause as -- as Hans stated, I -- I probably
22 captured mainly the ones that had issues that
23 were discussed at the McLean, Virginia meeting.
24 But I think -- to move this along, I think we
25 have to determine when and -- and you know,

1 where we're going to -- where we're going to
2 consider that. I don't think we want to wait
3 two months for the next Board meeting to -- you
4 know.

5 **DR. ZIEMER:** Right. And related to that will
6 be whether or not this is handled, as it was
7 before, as a working group or a subcommittee
8 meeting. If it can be done as a subcommittee
9 meeting, although there are some practical
10 issues with respect to announcing in the
11 *Federal Register* and so on, in one sense that
12 is desirable in terms of the openness of the
13 process, where the interaction -- once we get
14 the comments from -- from NIOSH, if in fact
15 there needs to be any meeting involving NIOSH,
16 the contractor and the Board, that would need
17 to be handled either as a working group or
18 subcommittee. And if it's going to be a
19 subcommittee, we need to identify when that
20 would be, in terms of announcements in the
21 *Federal Register*.

22 **MR. GRIFFON:** I don't know if -- if we have the
23 answer to this, but did -- do we know the
24 specifics of the timing, how long does it have
25 to be posted ahead of time and...

1 **DR. ZIEMER:** Is Cori here or --

2 **MS. MUNN:** Thirty days.

3 **DR. ZIEMER:** -- can Liz -- any of the NIOSH
4 staff --

5 **MS. MUNN:** It's the same as for --

6 **DR. ZIEMER:** -- remind us of those lead times
7 for announcing in the *Federal Register*?

8 **DR. WADE:** He's going to get Cori.

9 **DR. ZIEMER:** Okay. Cori will remind us of
10 that, or maybe Larry is able to.

11 **MR. ELLIOTT:** Generally, committee management
12 office wants us to have a notice in the *Federal*
13 *Register* 30 days before your meeting. We have
14 deviated from that in the past, but with great
15 duress.

16 **DR. ZIEMER:** Okay, thank you. That's an
17 important piece of information. There is that
18 -- what has to appear in the *Federal Register*
19 is place and time and some agenda information,
20 and then it would be an open meeting for anyone
21 -- members of the public and so on.

22 **MS. MUNN:** For that reason alone, the
23 flexibility of a working group, especially in a
24 situation where no one can provide an absolute
25 date that documentation is going to be

1 available, is much more flexible, easier to
2 work with.

3 **DR. ZIEMER:** Yeah, it's -- it's true that the
4 working group approach is more flexible.
5 However, it does often raise questions on the
6 openness of the process, and so we need to be -
7 - have that in mind. We have started the
8 practice of keeping minutes -- or a transcript
9 of these meetings. But nonetheless, the
10 openness issue -- maybe Dr. Wade would like to
11 add to that.

12 **DR. WADE:** Well, I think -- I think the Chair
13 raises the right considerations, but if we were
14 to go with the working group we would again
15 take minutes and a transcript of that meeting,
16 so we do want to deal with the transparency
17 issue. So I -- I think we can work through
18 that and do a working group if that's the sense
19 of the Board.

20 **DR. ZIEMER:** Yes. Jim Melius.

21 **DR. MELIUS:** Could we adopt something to the
22 effect of, if feasible, a subcommittee meeting
23 to discuss these issues should be held, but
24 recognizing that it may not be feasible, in
25 which case the working group approach would be

1 -- with a written record, would be the backup
2 to that. And I think it's really going to be a
3 question of timing and scheduling, and our
4 first choice would be subcommittee. Our backup
5 would be working group.

6 **MR. GRIFFON:** I had a -- a similar comment or
7 idea, just to -- you know, it strikes me that
8 every time we come to these meetings we get
9 documents on the Friday before, so if we set a
10 subcommittee meeting, or a couple of them, up
11 in advance, I -- it -- I think that all of us
12 work under deadlines, and will probably have
13 products available for those meetings. We will
14 work I think with our contractor just to make
15 sure are these doable dates, you know. But
16 then if in fact we had one of those
17 subcommittee meetings, I -- I would argue that
18 the subcommittee meetings can be set up not
19 just to address one item, but we've got several
20 things on the plate. Let's lay them out,
21 designate a subcommittee meeting, then if they
22 -- for whatever reason, certain products aren't
23 ready at that subcommittee, then we would have
24 sort of an emergency workgroup session in
25 between or whatever and that would be the

1 backup option, as Jim said. I think that
2 works.

3 **DR. ZIEMER:** Other comments, or does someone
4 wish to make a motion for a specific action?
5 What --I'm sorry --

6 **DR. MELIUS:** Do we need --

7 **DR. ZIEMER:** -- am I looking for a flag?

8 **DR. MELIUS:** No, I don't --

9 **DR. ZIEMER:** No.

10 **DR. MELIUS:** Do we -- do we need a motion on
11 this? I mean I'll make the motion if --

12 **DR. ZIEMER:** Well, I -- I think we need to get
13 the sense of the Board and that's most easily
14 done by having a formal action. Before we do
15 that, let me inquire of maybe Jim Neton or
16 Larry. In terms of NIOSH's response to the
17 revision of -- of the first 20 cases, what --
18 what would we be looking at there in terms of
19 turnaround time? Is that -- is that premature,
20 since you haven't seen the document yet?

21 **DR. NETON:** Yeah, I think that's premature for
22 us to comment because we really haven't had a
23 chance to look at it and, you know, the
24 magnitude of the issues that we might have to
25 deal with. My sense is they're not going to be

1 great, but I -- we really haven't looked at it
2 yet.

3 **DR. ZIEMER:** Yeah. And it may -- thank you.
4 It may be that a motion such as was suggested
5 by Dr. Melius, which is somewhat general and
6 indicates the intent to try to have it as an
7 open subcommittee meeting, and we may be
8 dependent on -- at some point in learning when
9 that review would be done so that we could
10 schedule this interaction. But the Chair would
11 certainly entertain a motion to that effect.
12 And while we're thinking about the motion, let
13 me ask this question. Suppose we had a working
14 group meeting. Is there any reason why it
15 couldn't be publicly announced anyway and
16 invite members of the public to attend?

17 **DR. WADE:** No, there's no --

18 **DR. ZIEMER:** Now let me -- is that something
19 that -- as long -- if we -- even if we end up
20 with a working group, if we make known to those
21 interested parties that might wish to be
22 present?

23 **MS. HOMER:** I'm not entirely certain that it --
24 and I'd have to check with committee management
25 about this. I don't see a reason why not, but

1 it is separate from the FACA process because it
2 is a workgroup.

3 **DR. ZIEMER:** Yes, understood. But in essence -
4 - and we're not talking here about the reviews
5 of individual dose reconstructions. We're
6 talking about the -- the step where we have, in
7 essence, the redacted information and we're
8 dealing with this other process, so -- the
9 extent to which we can be open on this, in any
10 event, will be I think important.

11 Dr. Melius, did you start to make a motion or
12 am I prodding you too much?

13 **DR. MELIUS:** No. No, I'm ready, I think. I --
14 I move that the committee -- that the Board, if
15 feasible, hold a subcommittee meeting to
16 discuss and resolve issues related to the first
17 20 dose reconstruction reviews and other
18 matters related to the site profile reviews.
19 If it is not feasible to hold such a committee
20 meeting due to timing or availability of
21 adequate documents from either our
22 subcontractor or from NIOSH, then we should use
23 -- hold a working group meeting that -- that
24 working group meeting should be transcribed --
25 recorded and transcribed and, if possible,

1 announced to the public.

2 **DR. ZIEMER:** Thank you. You've heard the
3 motion. Is there a second?

4 **MR. OWENS:** Second.

5 **DR. ZIEMER:** Is there any discussion on this
6 motion? No.

7 Okay, all in favor, say aye?

8 (Affirmative responses)

9 Any opposed -- did I -- Henry, are you still on
10 the line?

11 **DR. ANDERSON:** I'm aye -- I'm ayeing.

12 **DR. ZIEMER:** Okay, just want to make sure
13 you're awake.

14 Any opposed?

15 (No responses)

16 And any abstentions? Then the motion carries.

17 Thank you very much.

18 If there's anyone in the assembly today that's
19 having a difficult time seeing the Board, I
20 have your glasses. Somebody has turned in a
21 set of glasses. Let me pass them on down to
22 Cori, but you -- you may claim these -- or if
23 they fit pretty well and you need an extra
24 pair, whatever.

25 Leon has kindly reminded me that when we

1 selected our 22 cases earlier today the Chair
2 failed to assign review teams. And so I now
3 ask that we return to our set of cases --

4 **MR. PRESLEY:** Paul --

5 **DR. ZIEMER:** Yes?

6 **MR. PRESLEY:** -- excuse me. Could we go ahead
7 and say that we -- that meeting that we just
8 set up, that we will have that in Cincinnati?
9 I think it'll be easier on the staff if we say
10 that we're going to have that meeting there --

11 **DR. ZIEMER:** Oh, I'm sorry, the --

12 **MR. PRESLEY:** -- in Cincinnati.

13 **DR. ZIEMER:** -- the subcommittee meeting?

14 **MR. PRESLEY:** Right. Go ahead and set a place
15 for that so that it'll -- it would be a whole
16 lot easier on them.

17 **DR. ZIEMER:** Yeah. Well, I suspect either
18 Cincinnati or McLean, but let -- let's -- we'll
19 ask Lew to work with those folks and find a
20 suitable location. I don't know that we need a
21 specific action, but that certainly would be
22 the intent -- convenient location for -- for
23 staff and -- and -- if that's agreeable, we'll
24 let them work that out. Thank you for that
25 reminder, though.

1 Now let's return to the list of cases, and last
2 time we found that a simple way to do this was
3 to go down the list and go in the order of --
4 of our teams. Also you may have particular
5 sites that you need to reclude (sic) yourself
6 from and that will affect the teams involved.

7 **DR. DEHART:** Paul, are we maintaining the same
8 teams?

9 **DR. ZIEMER:** We don't need to, but it's easiest
10 to do that, if it works out. Now I -- I need
11 to have a reminder, though, if you remember
12 whose team you're on.

13 **MR. PRESLEY:** Henry and I are on --

14 **DR. ZIEMER:** Okay, let -- let's start out --

15 **MR. PRESLEY:** Henry and Robert Presley are on
16 one team.

17 **DR. ZIEMER:** Anderson --

18 **DR. ANDERSON:** Yeah, we have --

19 **DR. ZIEMER:** -- and Presley.

20 **DR. ANDERSON:** Yeah, that's good for me.

21 **DR. ZIEMER:** Is that one team?

22 **MR. PRESLEY:** Yes, sir.

23 **DR. ZIEMER:** And Gen Roessler, who were you
24 with?

25 **DR. ROESSLER:** Roy DeHart.

1 **DR. ZIEMER:** Okay, DeHart and Roessler. And
2 Melius --

3 **DR. MELIUS:** And Richard Espinosa.

4 **DR. ZIEMER:** Espinosa.

5 **DR. MELIUS:** The A team.

6 **DR. ZIEMER:** Griffon --

7 **MR. GRIFFON:** And Tony.

8 **DR. ZIEMER:** Andrade. Let's see, Gibson and
9 Ziemer. And Munn and Owens. I think that's
10 it, six teams, right? Okay.
11 Let's start down through the list now. Leon,
12 you have to keep me on track here.
13 Now we have 22 cases, so we need four -- four
14 cases per team, in most -- most of the way.
15 And Anderson and Presley, let's see how we do
16 with the first few cases here. We've got 008,
17 which is Paducah, we're okay on that I believe.
18 Right?

19 **MR. GRIFFON:** What about 005?

20 **MR. PRESLEY:** 005 we added.

21 **MR. GRIFFON:** We just added that this morning.

22 **DR. WADE:** 005 was added.

23 **DR. ZIEMER:** I hadn't marked my copy here.
24 That -- 005 is the one we added -- yes.
25 Savannah River, 005, would be that team; 008,

1 11 and 15, and --

2 **MR. PRESLEY:** Henry, have you got a problem --

3 **DR. ANDERSON:** No.

4 **DR. ZIEMER:** Henry, did you get those, 5, 8, 11

5 and 15?

6 **MR. PRESLEY:** Henry?

7 **DR. ANDERSON:** Yeah, what?

8 **DR. ZIEMER:** You -- he's okay.

9 **DR. ANDERSON:** I'm okay.

10 **DR. ZIEMER:** Yeah.

11 **MR. PRESLEY:** You know where those are from?

12 **DR. ZIEMER:** Now --

13 **DR. ANDERSON:** I thought I heard it, yeah.

14 **DR. ZIEMER:** Yeah, 5 is Savannah River, 8 is

15 Paducah, 11 is Idaho and 15 is Los Alamos.

16 **DR. ANDERSON:** Yeah.

17 **DR. ZIEMER:** Okay. Next for DeHart and

18 Roessler, we have --

19 **MR. GIBSON:** Excuse me, Paul --

20 **DR. ZIEMER:** I'm sorry?

21 **MR. GRIFFON:** -- isn't Andrade on the first

22 four?

23 **DR. ZIEMER:** No, I have Andrade with Griffon.

24 **MR. GIBSON:** Oh, I'm sorry. I'm sorry.

25 **DR. ZIEMER:** No, right. These may not be the

1 same order the teams were before. I'm just
2 taking them as -- DeHart and Roessler, let's
3 see where we left off here.

4 **MR. PRESLEY:** 18.

5 **DR. ZIEMER:** Number 18, Feed Materials; number
6 25 is Hanford --

7 **DR. DEHART:** Skip 27.

8 **DR. ZIEMER:** -- 27 is Oak Ridge, so we have to
9 omit that one, conflict of interest on Oak
10 Ridge, so we would skip down to 36, which is
11 Nevada, and 39, which is Idaho. Okay?
12 Then Espinosa/Melius, go back and pick up 27,
13 which is Oak Ridge; 41, which is Feed
14 Materials, Paducah -- or no, Feed Materials
15 Production Center; number 43, which is Y-12;
16 and number 52, which is Idaho. Okay on that?
17 Then the Griffon/Andrade team --

18 **MR. GRIFFON:** I don't know Tony's conflicts, so
19 -- might need some help here.

20 **DR. ZIEMER:** We have his list here, it's -- Los
21 Alamos and Nevada are his main two.

22 **MR. GRIFFON:** Okay. Next four are fine.

23 **DR. ZIEMER:** 53 is Hanford, 57 is Y-12 --

24 **MR. GRIFFON:** 57?

25 **DR. ZIEMER:** I'm sorry, 58, I read the wrong

1 line. I need those glasses, where are they?
2 62 is Pacific Northwest and 63 is Rocky Flats.
3 We're okay on that, Mark?

4 **MR. GRIFFON:** Yes.

5 **DR. ZIEMER:** Gibson/Ziemer, we have 65 is
6 Hanford, 69 is Paducah --

7 **DR. WADE:** 69 was dropped.

8 **DR. ZIEMER:** That's the one that was dropped,
9 sorry. We have 67, Savannah River then that
10 was added. We have 70, Pantex -- actually,
11 Mike, I'm thinking that we should only take
12 three in order that Wanda and Leon both have
13 three. Right? We don't want to short-change
14 them. Right? Right. Is that agreeable?
15 Let's see what we have -- final three here. We
16 have -- no, we're going to have to do a switch
17 because 74 is Hanford. Wanda, that's -- let's
18 do a trade then. Let's put 74 back with
19 Gibson/Ziemer. We would put 70 with
20 Munn/Owens, that's Pantex. We'd put 89, which
21 is Rocky Flats, and 99, Argonne East. Okay?
22 Everybody okay on those? Any questions? So
23 the 22 cases are assigned as just indicated.
24 Thank you.

25 (Pause)

1 I'm looking to make sure that there aren't any
2 loose ends on the -- the dose reconstruction
3 roll-up process now. We've taken care of
4 attempting to schedule that next step. Is --
5 do any of the Board members have any issues
6 relating to the first 20 cases that we need to
7 address yet today? Thank you.

8 We have a few minutes left -- let me just
9 consult the agenda here. We have some time
10 left yet this morning in the work session. We
11 can -- we can begin, if the Board pleases, to
12 address issues related to the report on the
13 site profile that we heard this morning. We
14 still have Bethlehem Steel issues to deal with.
15 I believe that Dr. Melius was prepared to
16 perhaps make a motion relating to next steps on
17 the Bethlehem Steel, and that would be the
18 logical one to address next. Jim, are you
19 waving a flag there or prepared to --

20 **DR. MELIUS:** Yeah, I have actually five
21 motions, just for purposes of discussion. They
22 aren't (unintelligible).

23 **DR. ZIEMER:** Are these motions that we should
24 deal with one at a time, or do you want to
25 spring them all on us and --

1 **DR. MELIUS:** I think it would be easier just to
2 do them one at a time. I don't -- some of them
3 are pretty straightforward, but -- and they
4 address the overall issue of the NIOSH report,
5 as well as the four specific questions that
6 NIOSH asked the Board, so that's where the five
7 --

8 **DR. ZIEMER:** You're talking specifically about
9 Bethlehem Steel now.

10 **DR. MELIUS:** Bethlehem Steel, yeah.

11 **DR. ZIEMER:** Yes.

12 **DR. MELIUS:** And the first motion is that the
13 Board accepts the NIOSH response to the SCA
14 report on the Bethlehem site profile, including
15 NIOSH's plans to address several of SCA's
16 comments and to produce a revised site profile
17 or Technical Basis Document. The Board also
18 requests that NIOSH and SC&A meet to discuss
19 and resolve any remaining technical issues
20 related to SCA's comments and NIOSH's response.
21 Members of the Board should be present at that
22 meeting.

23 **MR. ESPINOSA:** So moved.

24 **DR. ZIEMER:** That's the motion --

25 **DR. MELIUS:** The motion.

1 **DR. ZIEMER:** -- and I believe Richard has
2 seconded the motion. It's now on the floor for
3 discussion.

4 Wanda Munn.

5 **MS. MUNN:** Are we going to leave that
6 outstanding issues sort of hanging in the air
7 without defining what they are?

8 **DR. MELIUS:** No, I have four motions.

9 **MS. MUNN:** That's the next motion.

10 **DR. ZIEMER:** And there are some -- hopefully
11 some follow-ups. Maybe you should
12 characterize, if it will help the Board vote on
13 this motion, to have some idea of what you're
14 going to propose as follow-up.

15 **DR. MELIUS:** That's fair. The -- the four
16 questions that NIOSH asked us for specific
17 comments on, one is on page 6 and has to do
18 with the use of the 95th percentile
19 distribution to -- et cetera. The other one
20 relates to the issue of -- of respiratory rate
21 in heavy work. The next one concerns the
22 aerosol size issue. And the last one concerns
23 how NIOSH characterized external exposures, and
24 those are the four specific questions that
25 NIOSH asked the Board to address, and I've

1 prepared motions for all of those.

2 **DR. ZIEMER:** Does that answer the question you
3 -- yes. Other questions or comments on this
4 initial motion? Are you ready to vote then?
5 All in favor of the motion, say aye?

6 (Affirmative responses)

7 And those --

8 **DR. ANDERSON:** Aye.

9 **DR. ZIEMER:** Thank you, Henry. Those opposed?

10 (No responses)

11 And abstentions? Thank you, motion carries.
12 Proceed.

13 **DR. MELIUS:** Okay. I also move that the Board
14 adopt this resolution. The Board concurs with
15 the use of the 95th percentile of the
16 distribution of air samples at Bethlehem Steel
17 to characterize the upper limits of exposures
18 at that facility. However, NI-- however, NIOSH
19 should continue to evaluate other approaches to
20 characterize exposures and work environments
21 similar to Bethlehem Steel, including better
22 ways to characterize exposures of workers in
23 higher risk job categories and better methods
24 to identify such workers.

25 And if I can explain, I think --

1 **DR. ZIEMER:** Let me have a second to the
2 motion. That'll get it on the floor and then -
3 -

4 **DR. DEHART:** Second.

5 **DR. ZIEMER:** -- you can elaborate. It's been
6 seconded. Now, proceed.

7 **DR. MELIUS:** Yeah. I think that -- I think
8 they've made a convincing case for this
9 particular site. However, I don't think we're
10 ready to say that's something that should be
11 generalized as an approach to all sites. It
12 may be, may not be; that they should continue
13 to evaluate that and I personally get concerned
14 that, in essence, what we've done is sort of a
15 mini SEC at Bethlehem Steel. We're really
16 beyond the point of -- we don't -- not taking
17 into account anything about a person's
18 individual history, work history. We've done
19 sort of a blanket approach that's applied to
20 someone, whether they worked in the rolling
21 mill area or whether they were a security guard
22 or some other person at that facility. So I
23 think that that may be appropriate for that
24 facility. However, I think we need to look at
25 other ways of -- of -- other approaches that

1 might be used in other facilities -- that. So
2 that intent is to yes, we concur with the
3 approach for Bethlehem; however, there till
4 needs to be some work as to what would be the
5 best way for other facilities.

6 **DR. ZIEMER:** Mark Griffon.

7 **MR. GRIFFON:** I guess the on-- the only concern
8 I have here is -- is that you -- you know, I
9 guess I agree with the NIOSH proposed method in
10 concept. I'll use Wanda's way to -- to look at
11 this. I -- I -- I'm a little hesitant to be
12 definitive about it until I hear more back from
13 SCA that -- that it in fact addressed all the
14 concerns of the original finding, so -- but --
15 but I do agree with the approach in -- in --
16 conceptually, so I don't -- I don't know if
17 that's against the motion or just -- I just
18 wanted to throw that out there, that I -- I
19 don't know that we have all the facts back.
20 And we had the discussion yesterday with --
21 with our contractor, could we get a timely
22 response, you know, and I think we're -- we're
23 closing in on this thing. I think we have to
24 come to closure on it, I agree. But I just
25 want to make sure that we understand fully what

1 we're voting on with that, that this upper 95th
2 percentile of what, of what dataset was it
3 representative? You know, there's some what-
4 ifs in that power point presentation that are a
5 little -- get a little more involved, I think.
6 So...

7 **DR. ZIEMER:** Thank you. Other comments? Jim,
8 would you read the motion again?

9 **DR. MELIUS:** Yeah. The --

10 **DR. ZIEMER:** Not too fast. I'm trying to
11 absorb it.

12 **DR. MELIUS:** Oh, okay. The Board concurs with
13 the use of the 95th percentile of the
14 distribution of air samples at Bethlehem Steel
15 to characterize the upper limits of exposure at
16 that facility. However, NIOSH should continue
17 to evaluate other approaches to characterize
18 exposures in work environments similar to
19 Bethlehem, including better ways to
20 characterize exposures of workers in higher
21 risk job categories and better methods to
22 identify such workers.

23 If I can explain --

24 **DR. ZIEMER:** Yeah, your first sentence, you're
25 referring to NIOSH's use of -- or -- use of the

1 95th percentile --

2 **MR. GRIFFON:** Of the Bethlehem Steel air
3 samples, yeah.

4 **DR. ZIEMER:** -- of the Bethlehem Steel air
5 sample.

6 **DR. MELIUS:** Well, what they specifically
7 proposed in --

8 **DR. ZIEMER:** Are proposed --

9 **DR. MELIUS:** -- in their comments. That's --

10 **DR. ZIEMER:** -- in their response.

11 **DR. MELIUS:** -- directly from their...

12 **DR. ZIEMER:** Okay. Yes, Jim?

13 **DR. NETON:** Just a point of clarification.

14 What we proposed was to use the Simonds Saw and
15 Steel data for 1949 and '50 --

16 **DR. ZIEMER:** Yes, under -- yes.

17 **DR. NETON:** -- and Bethlehem Steel for '51 and
18 '52 --

19 **DR. ZIEMER:** Yes.

20 **DR. NETON:** -- just so we're clear on that.

21 **DR. ZIEMER:** Yeah, I believe, Jim, you
22 understood that, right, and --

23 **DR. MELIUS:** Yeah.

24 **DR. ZIEMER:** Yes, that was --

25 **DR. MELIUS:** Even though that's not what's

1 stated there, but that's...

2 **DR. ZIEMER:** It's the 95th percentile on that
3 Simonds Saw's data.

4 **MR. GRIFFON:** For one time period and Bethlehem
5 Steel for the other time period.

6 **DR. ZIEMER:** I believe that's correct. Other
7 comments? And are you ready to vote on this
8 motion? Ready to vote.

9 All in favor of this motion, say aye?

10 (Affirmative responses)

11 **DR. ANDERSON:** Aye.

12 **DR. ZIEMER:** Thank you, Henry.

13 All opposed, no? One opposed.

14 **MR. GRIFFON:** No, I'll -- I'll abstain.

15 **DR. ZIEMER:** Abstaining? Mark is abstaining.

16 **DR. ROESSLER:** Well, I'll abstain then, too.

17 **DR. ZIEMER:** You're abstaining, two
18 abstentions, okay.

19 That's fine, you're welcome to abstain. I
20 think it -- for clarity, I don't believe these
21 abstentions have to do with the facility. They
22 may have to do more with the voters having some
23 uncertainty about exactly what this motion is
24 doing.

25 Well, I -- I don't want to interpret what the

1 abstentions mean. I'm sorry, I don't want to
2 characterize -- okay, thank you. Or do you
3 wish to characterize?

4 **DR. ROESSLER:** I can comment on what mine
5 means. I'm not clear that our subcontractor
6 agrees with this and I really haven't had
7 enough of an explanation as to what this 95th
8 percentile means. I can't picture in my mind
9 what impact this has on the actual claimants.
10 NIOSH said it would be more claimant friendly,
11 but I haven't quantitized (sic) it yet to come
12 to that conclusion.

13 **MR. GRIFFON:** I know -- yeah, mine's similar.
14 Maybe it should have just been a no vote, but I
15 -- I -- you know, I think Jim's trying to get
16 to the same position. In his first motion
17 anyway the idea was that where there's still
18 differences, we would go ba-- I think NIOSH and
19 SCA would work out -- you know, I think it was
20 in your proposal there was some follow-up on
21 these -- on -- on the comment resolution
22 process. You know, my -- I guess my notion
23 when we first discussed this second motion of
24 Jim's was that maybe we should just phrase it
25 to say that we agree in principle with the

1 approach taken, but -- and -- and -- and that's
2 simply -- I -- it's the same concern that Wanda
3 had of the earlier -- you know, I -- I don't
4 know if I concur with this until I -- I
5 understand it a little more deeply and hear
6 SCA's response. Quite frankly, they put a lot
7 of effort into researching this finding. I
8 don't know how much data was in the Simonds
9 Saw. I don't know how much data they're
10 relying on for distribution. You know, I don't
11 know how well they can -- you know, there's --
12 there's a lot of ifs in this, so I think --
13 that was my only reservation, so I -- I'd like
14 --

15 **DR. ZIEMER:** Okay. And that's helpful to have
16 on the record. You recognize there's some
17 reservations then that exist amongst the Board
18 members on -- on that particular motion.

19 **DR. MELIUS:** And I would just add that there
20 also will be a revised site profile or
21 Technical Basis Document, and if we so choose
22 to review that and can do so and look at the
23 level of details --

24 **DR. ZIEMER:** Right.

25 **DR. MELIUS:** -- I think it's just hard to find,

1 you know, where -- how far to go and I think we
2 do need to resolve some of these issues rather
3 than just sort of continually leaving them out
4 there.

5 **DR. ZIEMER:** And in fact at some later point if
6 additional information comes to light, the
7 Board could in fact say well, actually we have
8 a different view now. So that -- that's always
9 a possibility.

10 Please proceed.

11 **DR. MELIUS:** Okay. I'm trying to get to the
12 right page here.

13 Yeah, top of page 7. Okay and -- move that the
14 Board request that NIOSH review the use of the
15 ICRP default value for heavy work to determine
16 if it's appropriate for heavy industrial work
17 in hot environments.

18 It seems to me this is just a -- a simple sort
19 of factual issue, that there's a lot of studies
20 -- I know there've been studies done of heat
21 stress in steel mills, and I'm sure there's
22 others in uranium mines and -- and so forth.

23 And it seems to me that they could sort of
24 resolve and -- you know, based on those studies
25 and other information, what is the appropriate

1 way of characterizing the breathing rate for
2 people in such environments and -- do that and
3 it may very well be that the default value used
4 in ICRP is fine, but we'll just evaluate that
5 and move on from there.

6 **DR. ZIEMER:** Okay. You've heard the motion.
7 Second?

8 **DR. DEHART:** Second.

9 **DR. ZIEMER:** Discussion? Wanda Munn.

10 **MS. MUNN:** May I hear that motion again,
11 please? I --

12 **DR. ZIEMER:** Yes.

13 **DR. MELIUS:** I'll -- say it slow -- more
14 slowly?

15 **MS. MUNN:** Yes.

16 **DR. MELIUS:** Okay.

17 **MS. MUNN:** Words of one syllable.

18 **DR. MELIUS:** The Board requests that NIOSH
19 review the use of ICRP default value for heavy
20 work to determine if it is appropriate for
21 heavy industrial work in hot environments.

22 **MS. MUNN:** It was my understanding that NIOSH
23 had done that, and that they were recommending
24 the use of the ICRP default value. Is that
25 correct or not, Jim?

1 **DR. NETON:** That's correct, we were
2 recommending the use of heavy work breathing
3 rate, which is 1.7 cubic meters per hour. I
4 think the central issue was the use of mouth
5 breathing as opposed to nasal breathing.

6 **MS. MUNN:** Yes.

7 **DR. NETON:** That's an issue that's unresolved
8 at this time.

9 **MS. MUNN:** And it is unlikely that any of us
10 who have never been in that environment or
11 doing that kind of work would be expert at
12 making that decision. I suspect that most of
13 the reviewers are in the same position. It
14 seems unreasonable to me to always assume that
15 every person in that environment would be
16 breathing through their mouth rather than
17 breathing through their nose, even under fairly
18 heavy work conditions. To make that assumption
19 on a -- on a broad scale seems unreasonable.

20 **DR. ZIEMER:** Of course NIOSH is I believe
21 attempting to find default parameters that are
22 both claimant favorable and -- and reasonable.
23 And Jim, could you clarify in your -- your
24 motion -- it's -- is it specifically to address
25 this issue of the mouth?

1 **DR. MELIUS:** It's both mouth breathing and --
2 and breathing rate that came up, and my
3 recollection is when Jim Neton was presenting
4 this this morning, I think he referred to
5 uranium miners in some way, but it's just not
6 clear to me that -- that we've actually looked
7 into the derivation of that default value, and
8 therefore it seems to me that with some other
9 research you ought to be able to do it and
10 determine what's appropriate for different
11 kinds of work environments. And seems to me
12 that would be -- I won't say easy to do, but it
13 should be straightforward do to based on
14 whether their information's available, what
15 went into the derivation of the ICRP default
16 value for heavy work.

17 I have done some studies in steel mills and it
18 at least would appear to me that steel worker -
19 - many of those people do more than an hour of
20 heavy exercise -- equivalent of heavy exercise
21 during -- during a day, so at least on the fact
22 of it, the use of one and seven does not seem
23 to be right, but I may not completely
24 understand how they derived that and -- and
25 what's appropriate. It may be that different

1 things are appropriate for different types of -
2 - of work environment and I think that's, you
3 know, worthy of some further evaluation.

4 **DR. ZIEMER:** Where are we between NIOSH and
5 SC&A on those values? Remind me of -- what did
6 SC&A recommend be used, or were you simply
7 questioning the -- the basis for NIOSH's
8 selection? I don't recall the --

9 **DR. MAURO:** Yes, there are really two separate
10 issues, and it's important to keep them
11 separate. One is, as Dr. Melius pointed out,
12 the breathing rate inherent -- the -- the 1.7
13 cubic meters per hour breathing rate and the
14 assumptions imbedded in that as applied to the
15 work environment was one question, whereby
16 exploring that a little further in terms of is
17 -- in terms of the -- that work -- in that
18 working environment is that a claimant
19 favorable assumption.

20 Completely separate, and I -- quite frankly, a
21 much more difficult issue, has to do with
22 something that ICRP I don't believe addresses,
23 namely -- there is a fraction of the population
24 of the United States that are mouth breathers.
25 That is when they're sitting still they are

1 breathing through their mouth. And certainly
2 when they're moving into a more aggressive --
3 they are breathing through their mouth.
4 That changes some -- we in fact did some
5 analysis to see the type of effect that might
6 have on the dose calculation. If all of a
7 sudden we were to say wait a minute, there is
8 some -- some subdivision of the American
9 public, of the American workers who are mouth
10 breathers. Will that have an effect on the
11 dose to the lungs. We did some calculations.
12 They are contained, as it turns out, in our
13 most recent report on Mallinckrodt where we
14 found that it has about a factor of two effect
15 on the lung dose.
16 So -- but this is a different question. It's
17 almost a -- a -- what I call a policy question.
18 That is, do you -- how -- to what degree do you
19 take into consideration a sub-population of --
20 that has certain behavioral patterns that may
21 differ from reference man as adopted in ICRP.
22 I would -- I -- I -- I could -- I could see
23 arguing both sides, because 42 CFR 82 does
24 adopt ICRP methodologies. And so on that
25 respect you could say well, we're following

1 ICRP methodologies, which does not take into
2 consideration that particular issue. Or -- I
3 believe.

4 Or alternatively, and I guess this may -- this
5 is why I would say perhaps it is a Board issue
6 in terms of -- however, if it turns out there
7 is a substantial portion of the American
8 population that are mouth breathers, is it
9 appropriate to take that into consideration,
10 which -- which would deviate somewhat I guess
11 from the explicit guidance. I don't think ICRP
12 rules out your deviating --

13 **DR. ZIEMER:** Right.

14 **DR. MAURO:** -- but it's -- it's just there to
15 be helpful. I hope that helps.

16 **DR. ZIEMER:** Thank you. That's helpful, John.
17 And in essence SC&A has raised the issue and
18 says it ought to be considered. And I believe
19 your motion to the effect is to do just that.
20 Is that not correct?

21 **DR. MELIUS:** Yes.

22 **DR. ZIEMER:** Wanda.

23 **MS. MUNN:** In our report NIOSH says they will
24 revise the site profile to assume that all
25 workers were engaged in heavy work at all times

1 during the shift. So we're not talking about
2 the default rate of one hour per shift. We're
3 talking about -- NIOSH has said we'll go under
4 the assumption that we are going to be using
5 heavy work inhalation rates all eight-hour
6 shifts. I don't see that we can ask more than
7 that. If we begin to factor in how many people
8 are mouth breathers and how many people are
9 not, then we are getting into a realm I don't
10 believe there's any reasonable way to reach a
11 conclusion about.

12 If the motion that's being made is to accept
13 that NIOSH will use heavy breathing data for
14 eight hours, then I can support it. If it does
15 not, then I don't think we're helping NIOSH any
16 by just saying go back -- I don't think we're
17 helping either NIOSH or the other contractor by
18 saying go back and look at it more.

19 **DR. ZIEMER:** Did you want to respond, Jim, on
20 that?

21 **DR. MELIUS:** Yeah --

22 **MR. GRIFFON:** Just -- just a point of
23 clarification. I thought Jim was -- Jim Neton
24 was going to make it, but heavy work is
25 different than heavy exercise, so the one hour

1 and seven hour ratio is -- in ICRP-66 one hour
2 is -- referred to heavy exercise and the other
3 seven hours are -- are -- I forget, light?

4 **DR. NETON:** Yeah, seven hours would be light
5 exercise, of which the ICRP model assumes a
6 normal person would breathe through their nose
7 100 percent, where under -- under habitual
8 mouth breathing, I think it's something like 50
9 percent mouth breathing under light exercise
10 conditions. All humans -- most humans breathe
11 through their mouth 50 percent of the time
12 under heavy exercise, so there's some subtle
13 distinctions there. But it really does boil
14 down, as John Mauro characterized, to do we
15 address habitual mouth breathing as a default
16 value in this program.

17 **DR. ZIEMER:** Okay. Thank you. Jim?

18 **DR. MELIUS:** And what I think the intent of my
19 motion was saying that I think you need to do
20 further review and get further information on
21 this overall issue, both breathing rate and the
22 issue of mouth breathing, and present it back
23 to the Board or however you want to, you know,
24 follow up on it. We're not going to be able to
25 completely resolve it, but we're saying let's

1 look -- there's other information available
2 liter-- in the literature and so forth and
3 let's look at it in more detail.

4 **DR. ZIEMER:** So it would be more along the
5 lines of whatever final selection is made that
6 there's a clear justification or basis --

7 **DR. MELIUS:** Yeah.

8 **DR. ZIEMER:** -- for that. Further discussion?
9 Are you ready to vote on this motion?
10 All in favor, aye?

11 (Affirmative responses)

12 Opposed?

13 **DR. ANDERSON:** Aye.

14 **DR. ZIEMER:** Thank you. Opposed?

15 (Negative responses)

16 Let me see the hands opposed.

17 (Negative responses)

18 And abstentions? Okay, then the motion does
19 carry. Thank you. Proceed -- you have an
20 additional motion?

21 **DR. MELIUS:** Yeah, this one I -- short motion,
22 but -- be Board discussion.

23 The -- move that the Board concurs with NIOSH's
24 characterization of aerosol size and density
25 used in the Bethlehem site profile.

1 **DR. ZIEMER:** Okay. We've heard the --

2 **DR. MELIUS:** Which is found on page 8.

3 **DR. ZIEMER:** We've heard the motion and --

4 **MR. GRIFFON:** Second.

5 **DR. ZIEMER:** -- seconded. This had to do with

6 the selection of the mass -- aerodynamic mass

7 medium diameter, as characterized in the -- and

8 I -- I believe we also heard that our

9 contractor also concurred with that. Is there

10 discussion?

11 All in favor, say aye?

12 (Affirmative responses)

13 **DR. ANDERSON:** Aye.

14 **DR. ZIEMER:** Thank you. Opposed, no?

15 (No responses)

16 Abstentions? That motion carries. Thank you.

17 **DR. MELIUS:** And --

18 **DR. ZIEMER:** Next one?

19 **DR. MELIUS:** -- next and final motion, move

20 that the Board concurs with NIOSH's approach to

21 characterizing external exposures.

22 **MR. ESPINOSA:** So moved.

23 **DR. ZIEMER:** Seconded. The Board concurs with

24 NIOSH's --

25 **DR. MELIUS:** Approach to characterizing

1 external exposures.

2 **DR. ZIEMER:** Okay. Discussion?

3 **DR. MELIUS:** Page 10. And I believe in SC&A's
4 comments on this was that issue of clarifying
5 the basis for this. Again, my understanding
6 was that that had been -- additional
7 information had been provided and -- and I
8 thought the justification that NIOSH made in
9 their -- you know, it did provide an adequate
10 justification.

11 **DR. ZIEMER:** For their -- for their --

12 **DR. MELIUS:** Approach.

13 **DR. ZIEMER:** -- decision -- or approach.

14 Discussion on this item? Then are you ready to
15 vote?

16 Okay. All in favor, aye?

17 (Affirmative responses)

18 **DR. ZIEMER:** Any opposed? Henry, yes?

19 **MR. GRIFFON:** Henry's gone.

20 **MR. PRESLEY:** Henry?

21 **DR. MELIUS:** Henry's gone fishing.

22 **DR. ANDERSON:** Aye.

23 **DR. ZIEMER:** Yeah, thank you. Opposed?

24 **MR. GRIFFON:** I'm opposed.

25 **DR. ZIEMER:** One opposed.

1 take a few minutes here at the beginning to say
2 a little bit more about this Board and its
3 role. We've already had a couple of extensive
4 public comment sessions, but usually -- in our
5 evening sessions, particularly -- we do take
6 the time to talk just briefly about what the
7 role of the Board is, partially because there's
8 often confusion about what it is that this
9 Board actually does.

10 And contrary to what the local newspapers or
11 news media have indicated, this is not a
12 hearing that we have here. This is one of our
13 regular meetings, and at all of our meetings we
14 have public input through the public comment
15 session. This happens to be a kind of special
16 meeting because it's the first of our meetings
17 where we have had before this Board a petition
18 dealing with Special Exposure Cohort, so in
19 that sense this has been a special meeting for
20 this Board.

21 Let me tell you very briefly a little more
22 about the Board. First of all is you're
23 probably aware that the program that we're
24 dealing with is a program that has been split
25 up by Congress into sort of pieces. That is,

1 the responsibilities are shared by a number of
2 agencies -- Department of Labor, Health and
3 Human Services, Secretary of Energy and the
4 Attorney General -- so you have different
5 Federal agencies that, in a sense, are
6 administering this program. That may be good
7 news and it may be bad news. I'm never quite
8 sure when you get a lot of Federal agencies in
9 the pot, but in any event, that's the way
10 Congress set the program up.

11 In addition to these Federal agencies, the
12 legislation called for the appointment of an
13 Advisory Board, and that's what this group is.
14 These are individuals who are not feds, but are
15 serving, in a sense, independently. The
16 legislation says that the Advisory Board on
17 Radiation and Worker Health will consist of no
18 more than 20 members appointed by the
19 President, who also appoints the Chair, and
20 also that the members shall represent the
21 workers, the scientific community and the
22 medical communities.

23 And so that's what this group is here, that is
24 the -- and -- and you probably notice right
25 away that you don't see 20 people. And the

1 reason for that is that the President actually
2 has only appointed 12 individuals to this Board
3 thus far, and of those 12, ten are here. Dr.
4 Andrade unfortunately is ill with the flu, and
5 Dr. Anderson is in Alaska tonight, but the rest
6 of the Board members are here.

7 I have listed their names here and there are
8 placards. I'm not going to introduce each one
9 individually tonight, but I do want you to
10 notice, if you look at the names and a little
11 bit about their titles, you will see that they
12 represent a kind of spectrum of technical,
13 medical and worker groups or agencies or
14 entities. So here's about half the Board on
15 this slide and I'll list the rest of them here
16 momentarily -- and the rest are listed here.

17 So you see we have a mix of individuals, come
18 from various parts of the country. We are --
19 this is not a full-time job for us and we do
20 not work for NIOSH or these other agencies. We
21 come from various walks of life and meet
22 together regularly for the purpose of this
23 legislation and to deal with this particular
24 issue, the compensation program that you're all
25 interested in.

1 This Board has been charged with some very
2 specific duties. There are very specific
3 things that we, under the law, are required to
4 do, and there are other things that we simply
5 are unable to do, much as we may like to do
6 them. There are a lot of things that we wish
7 we were able to do, particularly after we hear
8 many of your stories. But to some extent we
9 ourselves are limited by the law as to what we
10 are able to do.

11 I've listed here precisely what the
12 responsibilities of this Board are. Some of
13 these responsibilities have been largely
14 completed. We are responsible to work with
15 NIOSH in a sense to help develop the guidelines
16 for the dose reconstruction program and for the
17 probability of causation rule that is used.
18 And we have been in the past directly involved
19 in developing those guidelines. They are now
20 in place.

21 We also have an ongoing job of evaluating the
22 scientific validity of the dose
23 reconstructions. And for this purpose the
24 Board has the assistance of an outside
25 technical contractor that helps us evaluate the

1 dose reconstructions. And we do this on a --
2 essentially an audit basis. We randomly select
3 cases that have been completed and review them
4 in an audit type of function to determine
5 whether or not, for example, NIOSH is following
6 its own procedures properly, if the dose
7 reconstructions have been carried out in
8 accordance with the proper methods, and so on.
9 So that process is ongoing and will be going on
10 throughout the years ahead.

11 And finally, this Board has a role in the
12 identification and determination of the so-
13 called Special Exposure Cohort groups, so that
14 any petitions involving Special Exposure
15 Cohorts require that this Board review the
16 petition, review the recommendations of NIOSH,
17 and that we ourselves make a recommendation.
18 Our recommendation goes to the Director of
19 NIOSH, and that in turn feeds up to the
20 Secretary of Health and Human Services. And
21 incidentally, in case you weren't aware, issues
22 involving the Special Exposure Cohort --
23 particularly if there's a determination made
24 that a group should go forward as a Special
25 Exposure Cohort -- eventually that goes back to

1 Congress. So there are steps beyond, for
2 example, what has occurred here today, even
3 with respect to the Mallinckrodt group.
4 Our group does not do dose reconstructions. We
5 do not handle individual cases. We're always
6 glad to learn of your case and your experience,
7 but if you have particular issues, they
8 actually have to be handled by the staff people
9 from NIOSH or, in some cases, Labor may be
10 involved, depending on what the issue is. And
11 if you have particular issues, this Board will
12 not directly deal with your case, but we are
13 glad to refer you to those folks from the
14 agencies who actually handle the cases and
15 process the dose reconstructions.
16 We are interested in the process. We're
17 interested in how well it's working or how well
18 it isn't working, what your frustrations are.
19 We're very much aware of the frustrations
20 throughout the system. One of our jobs is to
21 try to help smooth the way and try to overcome
22 some of the barriers that have existed in the
23 past that made it difficult for the process to
24 be completed.
25 As we proceed with the public comment period

1 then, I hope you'll keep that in mind that we -
2 - we're not necessarily here to answer specific
3 questions you may have on a particular case.
4 But if you do have such questions, we want to
5 make sure that they are also heard by the staff
6 members of the agencies who are here and who
7 can also help. But the Board likes to hear of
8 your situations in the context of the job we
9 have to do with respect to evaluating quality
10 of dose reconstructions and evaluating, for
11 example, the Special Exposure Cohort situation.

12 **GENERAL PUBLIC COMMENT**

13 So with that as background -- let's see if we
14 can -- with that as background, I'm going to
15 proceed. I have a list of individuals, some of
16 whom are leftover, as it were, from our
17 previous session, and I'll start with those,
18 and then -- and then continue on with other
19 names that might come forward.

20 I have Mary Johnson here on my list. Is Mary
21 with us tonight? We're hopeful the snow didn't
22 -- or the thought of snow didn't scare too many
23 away. Mary, if you'd please approach the mike
24 we'd be pleased to hear from you first.

25 **MS. JOHNSON:** My name is Mary Lou Johnson. I'm

1 the widow of David Johnson. Dave worked at
2 Mallinckrodt at Weldon Spring from 1957 through
3 1961. In December of 1997 he fell to the floor
4 with a grand mal seizure and was diagnosed that
5 day with a glioblastoma multiforme, which is a
6 grade four brain tumor. This is Dave. His
7 case number, 5045. I wanted NIOSH to put a
8 face with a case file.

9 These aren't just numbers, they're human
10 beings. He was my husband, my best friend --
11 excuse me -- excuse me -- the father of my
12 children and my business partner. He lived six
13 months. I took care of him. I've run the
14 family business by myself for the last seven
15 years. I know I'm just one of many, many, but
16 so much time's gone by, so many of them are
17 dying, it's time for them to be workmen's
18 compensated now.

19 I know you get tired of hearing these cases.
20 They're real. How would you feel today if you
21 went home and found your spouse on the floor
22 and told they had five months to live? Can you
23 imagine the devastation that would put on your
24 family?

25 Thanks for letting me speak. Thank you.

1 **DR. ZIEMER:** Thank you for sharing a very
2 difficult story. Mary Jenerry has asked to
3 speak. Mary, welcome back.

4 **MS. JENERRY:** Well, I did speak yesterday, but
5 I failed to tell you about David Johnson. I
6 worked with him, too, and I worked about four
7 feet from him. And I had many times seen him
8 take containers and he said he was taking them
9 down to Destrehan, and there was some kind of
10 radioactive material in the containers. Of
11 course he died of the brain tumor, and I just
12 wanted to speak for him 'cause he can't.
13 That's about all I have to say. Thanks very
14 much.

15 **DR. ZIEMER:** Thank you, Mary. Tim Manser? Is
16 it Tim? Appears to -- is -- M-a-n-s-e-r,
17 perhaps? How about Donna Land?

18 **MS. LAND:** Yes. Dr. Ziemer and all the Board
19 members, I am here as a claimant for my
20 husband, Earl F. Socks, who worked at the
21 Mallinckrodt plant at Weldon Springs. He
22 worked there from June 1957 until December
23 1961. And I want to emphasize to you people
24 that these workers had no idea of the danger of
25 what they were working with. I have a picture

1 here that I'd like to present just as an
2 example.

3 The workers were not informed of the dangers of
4 exposure to uranium processing. My husband was
5 involved in a chemical explosion at a tank farm
6 where acid was sprayed on him. It was
7 hydrofluoric acid. He referred many times to
8 the orange fumes coming off the pots where the
9 uranium ore had been placed with chemicals to
10 be boiled down to a pure uranium state. The
11 orange dust had settled on pipes, lines, and
12 anyplace it could settle, and it was left
13 there.

14 My husband developed lymphoma. We sent the
15 biopsy tissue from St. Luke's to Barnes
16 Hospital for a second opinion, where it was
17 also verified as lymphoma. This followed 33
18 continuous days of irradiation, trips back and
19 forth, burning layer after layer of his body,
20 illness and inability to accept food. Because
21 of my husband and others like him, I urge you
22 to no longer delay the site profile of the
23 Mallinckrodt Chemical Plant at Weldon Springs,
24 Missouri. Thank you.

25 **DR. ZIEMER:** Thank you very much. We do have

1 with us again this evening Tom Horgan from
2 Senator Bond's office, and Tom, I believe you
3 would like to speak. Thank you.

4 **MR. HORGAN:** All righty. Thanks again for --
5 to the Advisory Board for sitting through these
6 long days. They're -- we really appreciate and
7 appreciate all the work you do. And now that
8 it is the official public comment period, I did
9 want to -- I was taking some notes and want to
10 express some concerns on behalf of Senator Bond
11 and -- and the Mallinckrodt claimants. Some of
12 this is -- well, let me just go right to it.
13 Do we know what the status of Dr. Anderson's
14 participation in tomorrow's discussion of the
15 site profile from '49 to '57 will be? I mean
16 we are going to be -- you do plan on discussing
17 '49 to '57.

18 **DR. ZIEMER:** Yes, we do.

19 **MR. HORGAN:** And do you -- is he going to be
20 here by phone?

21 **DR. ZIEMER:** I'm -- I don't think I know for
22 certain what his schedule is. I -- my
23 understanding --

24 **MR. HORGAN:** Can somebody answer that?

25 **DR. ZIEMER:** -- is that he will be flying part

1 of the day, so --

2 **MR. HORGAN:** So is he going to participate in
3 tomorrow's discussion and deliberation or not?

4 **DR. ZIEMER:** I do not know.

5 **MR. HORGAN:** Does anybody know at the Board?
6 Dr. Wade, do you know?

7 **DR. WADE:** I think he's going to be in the air
8 part of the time. I do not know if it'll be
9 all the time.

10 **MR. HORGAN:** Okay. Well, then does the Board -
11 - if you're going to have deliberations on this
12 key topic from '49 to '57, is there a schedule
13 on the agenda, now that it appears to be pushed
14 off today's agenda, to deliberate on '49 to
15 '57? I just got the answer to that question.
16 Are there going to be votes on recommendations
17 tomorrow with -- or without -- it appears
18 without Dr. Anderson's presence?

19 **DR. ZIEMER:** That will be entirely up to the
20 Board as to whether the Board wishes to make
21 motions.

22 **MR. HORGAN:** So there could be votes tomorrow.

23 **DR. ZIEMER:** There could be votes, yes,
24 certainly.

25 **MR. HORGAN:** Okay. Now this next question is a

1 housekeeping question, and it's to you,
2 Chairman Ziemer. We were all following the
3 agenda today, and I guess I would like to know
4 why there was a departure from today's agenda?
5 In other words, we had NIOSH give their
6 presentation on the site profile, and then we
7 had Denise on behalf of the Mallinckrodt
8 claimants, and then after that there was
9 supposed to be an immediate Board discussion of
10 the issues raised in those two petitions, and
11 then we went straight into two hours of public
12 comment. Now I am all for public comment, and
13 it was even scheduled for tonight right now and
14 that's why all these people are here, but it
15 wasn't scheduled right after that crucial --
16 those two crucial presentations. And I guess
17 I'd like to know why it was -- I mean why was
18 there a departure? Why did we not proceed --
19 the Board proceed directly into this discussion
20 when the two presentations were fresh in their
21 minds?

22 **DR. ZIEMER:** The schedule -- and the Chair will
23 take responsibility for this. The schedule
24 called for petitioner comments and public
25 comments from 1:30 to 3:00 o'clock, at which --

1 and so we continued with the public comment.
2 The petitioner comments ended at approximately
3 2:30. The comment period continued, as per the
4 agenda, and we had a number of individuals from
5 Mallinckrodt who indicated, because the Chair
6 asked them if they would be willing to speak
7 this evening. A number of them indicated they
8 would be unable to be here and requested that
9 they be allowed to speak, and the Chair
10 therefore allowed them to speak so that the
11 Board could hear --

12 **MR. HORGAN:** See, I guess I was following it
13 and I saw the NIOSH presentation from 1:00 to
14 1:30, the SEC presentation that Ms. Brock gave
15 and her designates from 1:30 to 3:00, and then
16 I thought they were going to have an hour
17 discussion. I didn't know that included public
18 comment when public comment was --

19 **DR. ZIEMER:** Yes, the -- the agenda calls for
20 public comment. The group that Ms. Brock
21 designated -- according -- and I keep track of
22 the time as we go -- finished at approximately
23 2:30, at which time I started down the list of
24 others and asked specifically which -- which
25 individuals needed to speak because they could

1 not be here this evening. So that is the
2 reason for it. I take the responsibility --

3 **MR. HORGAN:** Okay, I have an -- an -- a
4 schedule back here and I unfortunately left it
5 at my chair, but that didn't -- that wasn't
6 clear. It didn't seem that that was supposed
7 to be the scheduled agenda and --

8 **DR. ZIEMER:** All right. And in fact we -- we
9 actually went into our break time. We ended up
10 the discussion at 3:30 and then resumed at
11 approximately 4:00. The schedule calls for the
12 Board to have its discussion on that topic at
13 about -- at 3:45, so we were not that far off.
14 The Board discussion was scheduled for after
15 the break, which is exactly what we did. We
16 did run a little long on the public discussion,
17 at the request of the members of the public.

18 **MR. HORGAN:** Well, I guess I didn't quite read
19 it that way, but maybe I'm the only one. At
20 any rate, my point that I was making is that
21 the Board lost valuable deliberative and debate
22 time when these reports were fresh in their
23 minds. When the topic was hot, we went to two
24 hours of public comment. And by the way, I'm
25 not against public comment. I encourage it

1 strongly. It's just that I -- it seemed to me
2 that it was out of order on this agenda.
3 Now even when we did get to the Board
4 discussion on the NIOSH and the claimants'
5 presentations, when Mr. Elliott was called up
6 to the microphone the first thing he said was
7 "If you remember my presentation," and then he
8 went into make his point. I guess I'm going to
9 leave it at there, but you know, that cost us
10 valuable time and now we're going to have to --
11 the Board's going to have to deal with this
12 tomorrow when a Board member's probably not
13 going to be here after specific arrangements
14 were made for him to participate. And I'm
15 going to leave it at that, but I want the Board
16 and the Designated Federal Official to be aware
17 of that.

18 **DR. ZIEMER:** Yes, and let me also comment that
19 the Board did not a priori indicate that it was
20 going to take any specific actions by the end
21 of business today. This was only desig--
22 indicated as a Board discussion, period.

23 **MR. HORGAN:** Well, we -- but the agenda does
24 indicate that this would -- the -- the -- it
25 would be wrapped up today.

1 **DR. ZIEMER:** No, I'm sorry, it does not.

2 **MR. HORGAN:** Okay, where -- oh, okay. I don't
3 see it -- is it on tomorrow's agenda, too?

4 **DR. ZIEMER:** We have -- we have Board working
5 sessions tomorrow morning and working sessions
6 tomorrow afternoon, as well.

7 **MR. HORGAN:** Again, I think that's relatively
8 unclear, but I'll -- I'll -- I'll accept the
9 answer.

10 Okay. And also I -- we're hearing about a new
11 letter. I guess it -- I don't know if I got it
12 right, I was in and out a lot, from a Mount
13 (sic) Mason that I -- is that correct? -- that
14 rebutes (sic) the early letter of I guess Mr.
15 Mason showing the falsified data. You know,
16 basically there's a rebuttal and that key piece
17 of evidence that calls into question a lot of
18 the data from '49 to '57, there is a -- we hear
19 now, today -- at least I have, for the first
20 time -- that there is a new letter that rebuts
21 this. Is this letter here? Can we -- can we
22 produce that? Does -- does -- NIOSH has a
23 letter. Do we have a copy of that?

24 **DR. ZIEMER:** I don't know the answer to that.
25 Let's see, someone from NIOSH --

1 **MR. HORGAN:** Can someone from NIOSH --

2 **DR. ZIEMER:** The Board -- the Board has not
3 seen the letter, let me tell you that.

4 **MR. HORGAN:** The Board hasn't seen it, okay.

5 **DR. ZIEMER:** No. Jim Neton from NIOSH perhaps
6 can answer your question, so --

7 **DR. NETON:** Jim Neton. Certainly we'll make a
8 copy of the letter available to both the Board
9 and the public. We do need to review the
10 letter for Privacy Act issues, and as soon as
11 we do that and redact, as appropriate under the
12 provisions of the Privacy Act, we will make it
13 available to the public.

14 **MR. HORGAN:** Well, my next question is, you
15 know, what -- well, I guess, Jim, you might
16 want to stay here. When was it discovered?
17 Who all has seen it? And I put incorrection
18 (sic) the Board and I just heard that the Board
19 has not seen it. Has the petitioner seen it,
20 since it was brought up as a rebuttal to a key
21 piece of evidence in their presentation?

22 **DR. NETON:** I'm -- I don't -- I can't answer at
23 this meeting exactly when the letter was
24 discovered, but it has been on our research
25 database drive for -- for a while, is my

1 understanding. The petitioners have not seen
2 it, but I do believe it was used as a part of
3 the basis for the professional judgment
4 evaluation that the Advisory Board has a copy
5 of. But I -- I can certainly find out exactly
6 in which data capture effort this -- this came
7 to be on our database and -- and let you know
8 when I find that information out.

9 **MR. HORGAN:** Okay. I guess my -- and my next
10 question would be what -- I guess it was
11 answered. Why was not the letter brought
12 tonight to be shared with the Board and the
13 petitioners?

14 (Off microphone) Why was the letter not brought
15 tonight to be shared with the Board and the
16 petitioners?

17 **DR. NETON:** I'm not exactly certain how to
18 answer that. We didn't bring everything with
19 us that we obviously needed to -- to share with
20 the petitioners. It was not possible to
21 predict exactly which pieces of information --
22 clearly this was one, in retrospect, that
23 should have been.

24 **MR. HORGAN:** Well, and I -- I have to agree
25 with you, Jim. If you're going into court of

1 law and you draw attention to evidence, it
2 helps to have it there to -- so that we can
3 look -- everybody can look it over and -- and -
4 - and look at it, but at any rate, I'm not
5 going to belabor that topic.

6 Now I hear for the first time that we have six
7 new boxes of information about -- I guess it's
8 related to Mallinckrodt. This is the first
9 I've heard about it. And we need to go through
10 these documents. I guess I'd like to know when
11 were they discovered and how long is it going
12 to take to go -- sift through these documents?

13 **DR. NETON:** Okay. As Judson Kenoyer indicated
14 earlier in the afternoon, the existence of this
15 information was known for a while. However, it
16 was interleaved among classified information
17 and it took some time to get that information
18 released. To the best of my knowledge, these
19 boxes were not released until as recently as
20 several weeks ago, so it's been in the last
21 couple of weeks that we've taken possession of
22 the boxes and we have yet not gone through
23 every single box to identify the type of
24 information that's in there.

25 **MR. HORGAN:** Who released them, do you know?

1 **DR. NETON:** I can't answer that. Judson
2 Kenoyer may -- Judson, do you know who released
3 the boxes?

4 **DR. ZIEMER:** Was the question who released or -
5 -

6 **MR. HORGAN:** Yeah, he said that --

7 **DR. ZIEMER:** What was the question?

8 **DR. NETON:** It must have -- well, I'll let
9 Judson answer that question 'cause I'm really
10 not that familiar with the process.

11 **MR. KENOYER:** This is Judson Kenoyer. These
12 boxes I believe were released after review from
13 the ORO vault in Oak Ridge and transported to
14 the Cincinnati Operations Center, and I've -- I
15 had -- I've had a couple HPs starting to review
16 those, and at the same time, after they review
17 it, we will upload it to our computer system so
18 that we can disperse the information.

19 **DR. NETON:** Was it Department of Energy?

20 **MR. KENOYER:** It was -- these were in the ORO
21 classified records vault, and they were
22 declassified by DOE.

23 **MR. HORGAN:** Okay. Well, I guess the -- the --
24 all I'm going to say is if we could -- if the
25 Board or the petitioners could get an

1 unredacted copy of the -- of that letter, I
2 know you have Privacy Act concerns, but -- but
3 guarding those, I'm sure that you --

4 **DR. ZIEMER:** I'm certain we'll make everything
5 available that we get.

6 **MR. HORGAN:** Uh-huh.

7 **DR. ZIEMER:** Everything the Board gets, you can
8 have.

9 **MR. HORGAN:** Now I'm not going to stay up here
10 too much longer, but there was a comment made
11 today -- I think it was a really good comment -
12 - by one of the Board -- I think it was -- is
13 it Mars-- I -- I can't remember your name at
14 the end of the table.

15 **DR. ZIEMER:** Wanda.

16 **MR. HORGAN:** Wanda. I'm sorry, Wanda. And it
17 was the more information we uncover, the better
18 chance that we can determine the feasibility of
19 dose reconstruction. I think that's -- you
20 know, fair to say. I mean new information may
21 come out over time that may help us down the
22 line. But while time may be the Board's best
23 ally in determining the feasibility of dose
24 reconstruction, it is and it already has been
25 the claimant's worst enemy. Thirty people have

1 died while waiting for their frames (sic) to be
2 processed. A large portion of these claims
3 have been waiting for over four years to get
4 dose reconstruction.

5 Now I'm going to reiterate something that
6 Senator Bond said the other day. How long must
7 these people have to wait to see if they can
8 have their dose reconstruction done? Will six
9 years be enough? Eight years? This Act was
10 supposed to provide compensation for these
11 people in a timely manner. Again, how long do
12 they have to wait? I thank you for your time
13 and I appreciate all the effort and hard work
14 you put through on this.

15 **DR. ZIEMER:** And Tom, we thank you and the
16 Senator's office for your ongoing interest in
17 the program, and for raising some important
18 issues tonight for us.

19 Now let me return here to my list. George
20 Allen? Is Geor-- is it George? Yes.

21 **MR. ALLEN:** Good evening. My name is Mortimer
22 George Allen, III. My father was Mortimer G.
23 Allen, Jr. My father was in World War II in
24 France and Germany. When he got out, went to
25 St. Louis U., he became an accountant.

1 I'm here to address -- we've heard earlier to
2 see -- earlier today about -- from nuclear --
3 former nuclear workers, family of -- families
4 of nuclear workers. I'm here to address
5 another class of workers at Mallinckrodt, the
6 people that worked in the front office.
7 My father answered to a Mr. Bruner and Mr.
8 Thayer. He was in -- the head of cost
9 accounting department. His job was inventory.
10 He inventoried the nuclear material. He told
11 me about carrying containers two at a time.
12 When they became clo-- got closer than three
13 feet together, they got hot in his hands.
14 Sounds like nuclear fission was going on, to
15 me.
16 When they built the Hematite facility I was
17 there for opening hot dogs and soda. I
18 remember what it looks like. My father did
19 inventory there on a quarterly basis. Then on
20 a monthly basis for several years. He worked
21 for Mallinckrodt from 1955 until 1970.
22 In 1969 my mother developed tumors on her legs.
23 She washed my father's clothes. She slept in
24 the same bed with him. And in 1973 she died.
25 Cancer was unknown, it was just cancer; that's

1 all I know. Medical records are not available.
2 In 1991, in like February, my father turned
3 yellow, jaundiced. We thought he might have
4 hepatitis of some form. And he went to the
5 doctor, doctor said no, you don't have that.
6 They opened him up. They took a look and
7 closed him back up. He had cancer of the
8 pancreas and the liver. They gave him eight to
9 ten months with chemotherapy and radiation, and
10 they gave him three to five months without. He
11 took the without. He died in July of 1991.
12 I hope that this Board certifies all people
13 that worked at Mallinckrodt, whether they
14 worked in the actual processing plant or worked
15 in the front office. My -- our car was
16 repainted because of the fumes from this
17 process, the same as George Mallinckrodt's car
18 was repainted. My father's secretary and other
19 women that worked in the office, their nylons
20 melted on their legs from the acid fumes that
21 reached the front office. I was told about
22 having to blow a considerable amount of dust
23 off the desks in the offices in order to do
24 their work at that time because of that dust
25 came into the office buildings.

1 That's all I have. Thank you.

2 **DR. ZIEMER:** Yes, thank you, George. Barb --
3 perhaps it's Kolsman -- Kolsman? Are we close?

4 **MS. KOENEMAN:** Thank you. My name is Barb
5 Koeneman and I'm here on behalf of my father,
6 Clifford (unintelligible) --

7 **DR. ZIEMER:** Barb, could you give us the
8 spelling on that, just for the record here?

9 **MS. KOENEMAN:** Yes, it's K-o-e-n-e-m-a-n.

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

11 **MS. KOENEMAN:** My father worked for
12 Mallinckrodt from 1936 to 1966. He was an
13 electrical foreman. He died of lung -- lung
14 cancer in 1984. My story is much like all the
15 others you've heard here, and I'm sure you hear
16 them all the time, just a slight variation.
17 I can't remember a time where he didn't have
18 difficulty in breathing. He had chronic COPD
19 before he was diagnosed ultimately with the
20 lung cancer. He had a hard time walking from
21 point A to part -- point B without getting out
22 of breath. He had a hard time cutting the
23 lawn, just simple things.
24 He also suffered from these horrendous
25 nosebleeds. His nose would start bleeding and

1 they would just gush and he would have to be
2 hospitalized for several days at a time. They
3 would have to insert -- insert balloons and
4 expand them to get the bleeding to stop.
5 Like I said, there's just slight variations
6 from I'm sure the same story you've heard over
7 and over. There's a lot of people who need
8 your help to expedite. And I want to thank
9 Denise for all she's done, because before
10 Denise nobody really gave a rip what happened
11 to these workers, and I thank God for Denise.
12 That's all.

13 **DR. ZIEMER:** Thank you. Also I have Rayetta
14 Koeneman. Sounds like -- a family member,
15 perhaps?

16 **MS. KENNEMAN:** Hello, everybody. I'm speaking
17 on behalf of my father, Raymond Kenneman. My
18 name is Rayetta Kenneman and this is my sister
19 Joan. My father worked at the Mallinckrodt
20 Destrehan site, uranium division. Dad worked
21 from 1951 until 1956. He became very sick and
22 was hospitalized. The doctors told him to quit
23 Mallinckrodt, for he had extensive lung and
24 pulmonary complications, so Dad had to quit at
25 the age of 36.

1 Dad died of lung cancer in the year of 2001. I
2 was born in 1954. I was conceived in the years
3 Dad was working at Mallinckrodt Destrehan site.
4 I was a sickly infant -- infant and child. I
5 have severe Crohn's disease with one-third
6 colon and small bowel left, along with many
7 surgeries, and I have to have another one in
8 the near future.

9 I have also had benign grapefruit-size tumor
10 removed along with my ovaries and fillipian
11 (sic) tube. And my breast, I've had cysts in
12 the milk duct tract. I have many more health
13 complications. I am in constant deal of pain
14 and I am speaking on the behalf of all workers
15 and survivors who have worked and gave their
16 lives to Mallinckrodt. Thank you.

17 **DR. ZIEMER:** Thank you very much. Next, Joe
18 Frazier.

19 **MR. FRAZIER:** My name is Joe Frazier. I'm a
20 retired pipe fitter, Local 562, 41-year member.
21 I worked for Sterns-Rogers* at Weldon Springs,
22 1968 and '69; United Nuclear at Hematite, and
23 Mallinckrodt Chemical Destrehan Street in the
24 '70's for General Installation Company, which
25 has been out of business for ten years.

1 While working at Weldon Springs plant as a pipe
2 fitter for Sterns-Rogers, our job was to remove
3 existing pipes and equipment from the buildings
4 and install a new system to produce agent
5 orange. Some of the pipes and frequent -- and
6 equipment contained foreign residue. At that
7 time I still smoked, and we would be checked at
8 the smoking area to see if we were clean.
9 Periodically the monitor would tell us to take
10 a shower and get clean clothes. These
11 buildings were not clean. You could find small
12 particles of that yellow stuff lying around.
13 Before we left, Stern-Rogers broke up one of
14 the concrete floors, put down a membrane and
15 poured a new floor over the membrane. At that
16 time I was maintaining the temporary heat and
17 one of the monitors told me the -- came over
18 there checking was that the radiation was
19 already coming up through the new concrete.
20 I believe this contractor took on more than
21 they had ever realized, as the site was unable
22 to be decontaminated. As a result, all work
23 stopped and we were laid off. Before we left
24 we were told ten foot of contaminated soil was
25 to be removed from the site. The plant stood

1 vacant for a number of years while it was, I
2 guess, reviewed and the plant could be cleaned
3 up right. I would presume instead of removing
4 the ten foot of contaminated soil, 75-foot
5 mound was put over on top of it.
6 Construction workers are laid off when the job
7 is completed, or in the case, terminated. The
8 contractor takes his profits and goes home.
9 The construction workers go on to other
10 projects, wherever that may take them.
11 I feel that I was one of the workers that fell
12 through the cracks with the problem, as I fell
13 in the time frame that no one was concerned for
14 illness resulting from radiation exposure from
15 1968 to 1974. I strongly feel this should --
16 and must be re-evaluated to include these
17 missing years. My dilemma is it is not -- it -
18 - not strange that the Weldon Spring site was
19 contaminated before I worked there, after I
20 worked there, but not while I worked there.
21 I have had 13 nose surgeries, 12 for basal cell
22 cancer, one for squamous cell cancer. My
23 father and his brother, which was my uncle,
24 were also pipe fitters. They had no problems
25 with skin cancers. They had similar

1 complexions and did not work around nuclear
2 radiation. My -- my main concern is that one
3 of these -- if I don't stay on top of this and
4 get my checkup every six months that one of
5 these skin cancer-- if I miss one of these
6 things, this possibly could lead to something
7 else, and I want to give my thanks to Denise
8 Brock for her driving effort to win
9 compensation for radiation-exposed workers.
10 Thank you.

11 **DR. ZIEMER:** Thank you, Joe. Next, Jim
12 Manning. Jim?

13 **MR. MANNING:** I also am a retired pipe fitter
14 and I first met Joe Frazier on that job at
15 Weldon Spring many years ago. And I would like
16 to tell you about some of my experiences out
17 there.

18 Now our job was to, in essence, demolish this
19 plant. We took down pipe and took pumps apart
20 and everything, and we were assured before we
21 started there that all of these pipes had been
22 flushed and there was nothing in them at all.
23 And a lot of this duct work was supposed to
24 have been cleaned out, and it's been my
25 experience that -- one day I was on a ladder in

1 one of the buildings -- and these buildings had
2 floors made of what is called stainless steel
3 checker-plate. And what it is is a piece of
4 stainless steel about four by eight feet with a
5 diamond pattern on it to make it less slick
6 when you walked on it.

7 So I was on top of this ladder disconnecting
8 some pipe when this liquid came out -- where I
9 had disconnected, it made -- it had broken the
10 pipe -- and it spilled on the floor below me.
11 So I thought I had better get a bucket or
12 something to catch the stuff in, whatever it
13 was. So I went and found a steel five-gallon
14 bucket, put it under (sic) the floor under this
15 leak, climbed back up on the ladder, looked
16 down at the steel bucket, and the bottom of it
17 had been eaten out and the stuff was spreading
18 across the floor. And I got a few drops of it
19 on my thumb and about a day later I lost some
20 skin where that had gotten on my thumb. It --
21 little further damage.

22 And then also we took out a duct and capped it
23 off with duct tape and plastic film, and this
24 was loaded onto a car -- a railroad car on the
25 old MKNT railroad* which is now the KT trail*,

1 of course. And this was put on open freight
2 cars -- I guess you would call them a coal car,
3 not these dump-bottom cars you see today, but
4 an open freight car with a wall around it about
5 four feet high. And it was sent off to -- we
6 were told Oak Ridge, Tennessee for further
7 disposal.

8 Now in handling these materials, we used a
9 crane to load them into this freight car, and
10 occasionally the plastic film that we'd put on
11 them with the duct tape would come off and out
12 would come a yellow powder, which has -- I
13 think has been identified as something called
14 yellowcake. And it was not unusual for spills
15 to happen.

16 And actually that's all I have to say. Thank
17 you, Mr. Chairman, ladies and gentlemen.

18 **DR. ZIEMER:** Thank you, Jim. Next, Clarence
19 Snyder, Weldon Springs. Clarence?

20 **MR. SNYDER:** Clarence Snyder, electrician,
21 employee number 10167. I've worked at -- from
22 1957 to 1965 at the Mallinckrodt Chemical
23 Company, Weldon Springs uranium division. I've
24 graduated (unintelligible) Trade School in
25 1948. Mallinckrodt Chemical Company was

1 contracted by AEC at Weldon Springs to process
2 uranium ore. Early in 1940 the Destrehan
3 Street plant, St. Louis, Missouri, processed
4 regular uranium, later moved to Weldon Springs
5 where enriched uranium was processed. So the
6 company had a long history of (sic) our
7 production methods were improved. The Weldon
8 Springs plant had the latest technology, but
9 lacked protection for their plant workers. It
10 should have operated as a state of art facility
11 with a clean and safe environment. Instead,
12 Mallinckrodt was negligent and was operating a
13 hazardous and dangerous radioactive plant.
14 Numerous blowouts and explosions occurred which
15 electricians were expected to repair. High
16 levels of radiation were monitored by the
17 badges we wore warning the dosage amount, but
18 did nothing to prevent airborne dust and
19 chemicals.
20 Electrical equipment failures were common from
21 chemical fallout. The quality of the air was
22 affected by the pot-room product, orangecake,
23 where liquid was boiled down to orangecake. In
24 another hazardous process open salt baths in
25 the pilot plant were used to heat uranium metal

1 for spin casting.
2 Improved methods increased production, some of
3 which turned out to be even more dangerous. I
4 can recall numerous incidents where electric
5 furnaces were burned out when defective slag
6 liners caused blowouts. A new method then was
7 used known as vacuum induction electric
8 furnaces. By the way, the old furnaces were
9 also electric, but they were the standard
10 electric furnaces. It, too, failed and six
11 operators were injured in the explosion.
12 No doubt Mallinckrodt managers received many
13 awards for their work and accomplishments
14 during World War II through the Cold War. The
15 employees, however, received nothing -- no
16 retirement, not even a thank you for our
17 service nor our commitment to our country.
18 I'm here to -- I'm here today to comment. As a
19 former known employee of Mallinckrodt Chemical
20 uranium division, Weldon Springs, Missouri,
21 from start-up to close, and in my position as
22 electrician witnessed most all day-to-day
23 hazardous operations -- danger, blowouts and
24 explosions. As electrician -- electricians
25 health and safety rep, these gave grave

1 concerns were (sic) re-- were repeatedly
2 reported, but safety procedures still lagged
3 and caution remained lax and unenforced.
4 Today, nearly 50 years later, we affected
5 employees and approximately 70 percent
6 survivors are still making a joint effort to
7 fight for a substantial monetary compensation
8 for the negligence and injustice this company
9 allowed to exist, causing injuries, illnesses,
10 suffering and early deaths to their employees -
11 - to their employees. Now we are requesting
12 from this date on for compensation, while our
13 diligent investigator, Denise, and our
14 legislators can realize their (unintelligible)
15 and the results in a most timely manner.
16 Too much time and delay now has already passed
17 and stagnating our claim and immediate po--
18 positive results should hereto be finalized.
19 I'm also speaking representing the 26
20 electricians that I've worked with at
21 Mallinckrodt. Thank you.

22 **DR. ZIEMER:** Thank you. Next we'll hear from
23 Jean Sack -- Jean Sack.

24 **MS. SACK:** Good evening. Can you hear me?
25 'Cause some of them I couldn't hear.

1 **DR. ZIEMER:** You're doing well.

2 **MS. SACK:** Okay. My husband's name was Earl
3 Sack and he hired in when he returned from the
4 Korean Conflict -- they called it conflict then
5 instead of war -- and he was at the Destrehan
6 plant when he started and was there just a very
7 short time and he was moved to the Mal-- Weldon
8 Spring plant, and he was a welder.
9 Now I didn't -- he didn't talk a lot about how
10 bad things were to me, and -- but of course
11 some of these men that -- electricians and that
12 have talked about things. The only thing he
13 ever said to me was that they had some problems
14 at the plant and he would have to crawl around
15 in there where this uranium stuff had been
16 running all day. Now they had to shower every
17 evening, but of course all day long, if you've
18 got this stuff on you, you know, what good does
19 it do?
20 He died when he was 60 years old of pancreas
21 cancer. And still at that time we didn't know
22 that it was, you know, given to -- whether it
23 was really because of he worked at Weldon
24 Spring, because they kept saying every-- noth--
25 you know, everything was fine, there was no

1 danger. He died, my two -- I had three
2 children, but my two daughters were expecting
3 babies when he died. He never saw his two
4 grandchildren.

5 If it wouldn't have been -- the first -- the
6 first time that I got upset about the slowness
7 of things going on was when I read in the paper
8 one day that they had -- the people -- that
9 they were having a meet-- that they'd had a
10 meeting for uranium workers in St. -- in the
11 St. Louis area and that there was poor
12 representation there. And I thought -- what
13 meeting? I wasn't notified of any meeting. So
14 I wrote a letter to the person in charge and
15 says I hope you're going to run things a little
16 better next time because I wasn't notified.
17 Naturally there's probably no -- lots of other
18 people that weren't notified.

19 So I have to thank Denise because she notified
20 all of us when she got these meetings together.
21 My claim was done in -- let's see, when was it
22 -- I guess when she had her first -- first or
23 second meeting, whenever they had come out and
24 said that the government had finally decided
25 that the people that worked in the uranium

1 places should be compensated because of the
2 dangerous situation, so that's when I fir-- so
3 I went to the meetings and I filed a claim.
4 My claim has been in for three years now. Dose
5 reconstruction is pending. What a joke, as far
6 as I'm concerned. If they would have saved all
7 that money they've spent all this time and just
8 paid the people that died with cancer or had
9 cancer, the things that they said were -- were
10 causes from being in ur-- around uranium, it'd
11 be cheaper than what -- what we're going
12 through right now.

13 I just -- the other -- the other thing that I -
14 - the other time I got upset was I couldn't --
15 when I was filling out my claim, I couldn't
16 remember the date that my husband started at
17 Mallinckrodt. I knew the year, but I didn't
18 know the day. So I wrote to the personnel
19 office at Mallinckrodt and asked them what --
20 that I needed to know the date that my husband
21 was hired at Mallinckrodt, that he worked at
22 Weldon Spring and so on and so forth. Well, I
23 received a letter back that said Mallinckrodt
24 had no record that my husband worked there.
25 Now, you know, he died, but you know, he didn't

1 work there. So that told me that I was in -- I
2 was in for, you know, a lot of trouble. I was
3 very re-- I was -- I was looking forward to
4 receiving some compensation because of some
5 problems and -- financial problems with three
6 children and -- and -- and I still haven't
7 received a compensation. Thank God I was able
8 to work myself.

9 Thanks to Denise for getting us started, and I
10 hope I receive some compensation before I die.
11 Thank you.

12 **DR. ZIEMER:** Yes, thank you, Jean, for sharing
13 with us there. Gloria Bringer. Gloria?

14 **MS. BRINGER:** Ladies and gentlemen, my name is
15 Gloria Bringer and I am standing here on behalf
16 of my father, Frank Bogner*, Jr. He worked for
17 Mallinckrodt for 41 years, from 1946 to 1987.
18 He started at the Destrehan plant. When they
19 started up Weldon Spring, he started up the
20 plant. When they closed it down, he closed it
21 down. Then he went back downtown.

22 Not only did he work at those two plants, while
23 at Weldon Spring he was also in charge of
24 equipment for Lattie* Avenue, for the equipment
25 at the airport site, and he was also sent to

1 Fernald, Ohio to set up the plant there. So we
2 have five different places that he worked for
3 Mallinckrodt.

4 We just received a letter from NIOSH that
5 stated the letter that received last year that
6 said that Dad was in dose reconstruction was a
7 mistake. They didn't exactly tell us why.
8 There are four different reasons and it's one
9 of those four reasons, or a com-- or a combined
10 reason, but is it because he worked at five
11 different sites and site profiles have not been
12 completed for those five sites? Only Fernald
13 and Destrehan have been completed.

14 Well, at the rate things are going, it'll be
15 the year 3000 by all -- time all five site
16 profiles are done. My mom can't wait that
17 long, and I'm standing here for her.

18 Dad -- before he passed away in March of 2002,
19 he made a listing. He's -- he applied in
20 September 14th, 2001 for his -- his benefits
21 from this program. And he made a listing and
22 we went through his work history. He listed
23 every single building he worked at at
24 Destrehan, every single building he worked at
25 at Weldon Spring. He could tell me which area

1 he was in each building and which elements he
2 was exposed to. He was exposed to beryllium,
3 green salt, pitchblende, uranium ore, orange --
4 orange oxide, brown oxide, radium, thorium,
5 black oxide, barium sulphate and uranium
6 residue. In working with uranium residue he
7 did suffer an eye injury. However, the medical
8 records from '46 to '66 are missing, so we
9 cannot verify that -- at least Mallinckrodt
10 can't.

11 But see, Dad saved everything. He's got every
12 single W-2. He's got every single pay slip.
13 He's got every single note that was ever
14 written to him and any piece of correspondence.
15 So we've got signatures from people all over
16 Mallinckrodt. And he also saved the Wise Owl
17 plaque that he received from having his eye
18 injury, and it has a date on it, so we have
19 some verification there.

20 Where are those records, that's my question.
21 We've got the ones from '80 -- from '66 to '87,
22 but we don't have anything before that.

23 He suffered from heart attacks, seven by-
24 passes, prostate cancer, two knee replacements,
25 diabetes, Parkinson disease, blood clots in his

1 lungs, several strokes and finally respiratory
2 failure.
3 As I said, he died March 1st, 2002. On January
4 9th of 2002 my mother was diagnosed with
5 moderate dementia. The doctor said it was
6 because of the severe stress that she had been
7 under in caring for my dad. She never left him
8 side -- his side for more than a half an hour
9 or 45 minutes. She would make several trips to
10 the grocery store because she didn't want to
11 leave him. If -- on those frequent or
12 infrequent times that she did leave him over
13 that, she bought a cell phone. Mom is not a
14 20th century person. She bought a cell phone
15 and had it on the whole time, in case something
16 happened to Dad and so she could get back to
17 him right away. He always said the best \$2 he
18 ever spent was for their marriage license.
19 She also suffered quite a bit. I was born in
20 '47, my brother in '50. Between '50 and '56
21 she suffered two miscarriages. My sister was
22 born in '56. She cannot have children. She
23 almost died trying to have children. Mom had a
24 heart attack. She had a stroke. She had
25 triple by-pass. Right now she's in a dementia

1 facility.

2 We applied for these benefits. After Dad died
3 we had to apply for survivor benefits. And in
4 2002 we went to a meeting that Denise held, and
5 it was the second big meeting, I suppose,
6 'cause we had a whole lot of people there in
7 St. Charles, and I talked to both the Secretary
8 of Energy and the Secretary of Labor, and they
9 both assured me that our benefits would be paid
10 to us and our claims met within six to 18
11 months.

12 Well, ladies and gentlemen, that was October
13 2002 and it's now January (sic) of 2005.
14 Obviously, you know, people don't know what
15 they're talking about 'cause they don't know
16 what they're doing. I am tired -- physically,
17 mentally, emotionally -- of being lied to,
18 deceived, given the runaround by Mallinckrodt,
19 by NIOSH, by the various Departments of
20 government. This has affected our whole
21 family. My brother lives in Seattle, my sister
22 in Chicago, so I'm the only one here to fight
23 for Dad and to take care of Mom.

24 As one of the other people said, the government
25 would have come out way ahead if they had just

1 paid everybody who worked at Mallinckrodt,
2 because anybody who walked into those plants,
3 especially Destrehan and Weldon Springs,
4 deserved to get that money, because just
5 walking in those places you were exposed to
6 what was there.

7 I know several times Dad would come home and
8 say we were up to our armpits in plutonium
9 today. And I'd say really? And he'd say
10 literally up to our armpits. You have to
11 consider that Dad was a foreman. He was a
12 supervisor. He had to go into all of those
13 places and work with all those people to make
14 sure that all that equipment was working
15 properly. If something was wrong, they called
16 him. He had his beeper. He worked night
17 shifts. He worked day shifts. There's a lot
18 of times that we don't remember my dad because
19 he wasn't there. He was a company man. And if
20 this is the way the company treats him, then
21 you know, I don't care if Mallinckrodt goes
22 down the drain in bankruptcy, quite frankly.
23 No one in this whole world can be found who had
24 the same job as my dad, because he was at so
25 many places doing so many things. And so

1 therefore they can't do a dose reconstruction
2 because there is no one who had similar
3 exposure. So therefore I please ask you, in
4 your recommendation, that Mallinckrodt be
5 declared a Special Exposure Cohort and that we
6 finalize this and we can get back to our own
7 lives and go on living. Thank you.

8 **DR. ZIEMER:** Next we have Joyce Humphrey.
9 Joyce?

10 **MS. HUMPHREY:** Thank you very much. I stand
11 here on behalf of my father, Lloyd Humphrey,
12 who passed away August 6th, 2004. He worked at
13 Weldon Springs plant from 1957 to 1965. His
14 first six months there he was in the -- what
15 they called the pot room in the refinery, and
16 then he worked in the warehouse where he
17 unloaded rail-- railroad cars and delivered the
18 ore in that to different places in the complex.
19 On the list of cancers, I believe there are 22
20 of them, my dad had four primary cancers. In
21 June of 2000 he had his bladder removed because
22 of bladder cancer. He suffered numerous
23 urinary tract infections, which is common when
24 you have your bladder removed. That eventually
25 led to his death, along with colon cancer,

1 which he was diagnosed with in December of 2002
2 and operated on. He had a recurrence of colon
3 cancer in 2003 and had another surgery. He had
4 skin cancers, one of which was over 35 years
5 ago, so I cannot get the medical records for
6 that, but he's had -- had two more since then.
7 None of these cancers were cancers that spread
8 to any other part. They were all primary
9 cancers.

10 We filed the original claim for my father in
11 August of 2001. After he died in August of
12 2004 I filed a claim as a survivor. To my
13 knowledge we are in reconstruction right now
14 for dosage reconstruction. I don't know how
15 they can possibly do that accurately, but
16 that's what they're trying to do.

17 My dad said he would never live to see any
18 resolution on this, and he was right, he
19 didn't. I'm just wondering if I will.

20 My dad was assigned a tracking number -- 1142
21 is his number -- and I would like for the Board
22 to know that my dad was more than a number. My
23 dad was a World War II veteran who won five
24 Bronze Stars -- he was awarded five Bronze
25 Stars. He was a family man, a Christian man, a

1 good friend to many people. He was more than
2 that tracking number.

3 And I guess I would like to finally say, you
4 know, please -- they were not told -- according
5 to my father, they were not told how dangerous
6 it was to work in what they were working
7 around. And that wasn't right. Please, make
8 it right now and give these men and women the
9 compensation that they deserve. And I would
10 like to thank you for listening to me and thank
11 you, Denise, for everything you've done. Thank
12 you.

13 **DR. ZIEMER:** And thank you, Joyce. If I read
14 this correctly, I think it's Donna Locker Long.
15 Am I reading that correctly? Is there -- is it
16 Donna Long? D. Long?

17 **UNIDENTIFIED:** (Off microphone) I think I -- I
18 think I'm being called twice.

19 **DR. ZIEMER:** Oh --

20 **UNIDENTIFIED:** (Off microphone)
21 (Unintelligible) yesterday and then it -- said
22 that I would wait until today (unintelligible).

23 **DR. ZIEMER:** Oh, possibly your name has
24 reappeared. Okay, thank you. Yes, you were on
25 this.

1 Jennifer Hunter Hernan -- Herner?

2 **MS. HORNER:** Horner.

3 **DR. ZIEMER:** Horner, thank you.

4 **MS. HORNER:** My name is Jennifer Horner, maiden
5 name Hunter. I'm here with my mother, Freida
6 Hunter. My father first filed his claim July
7 of 2001 and in August he wrote a personal
8 statement because he, like a lot of people, did
9 not believe that he would live to see anything
10 happen with his claim. So I'd like to read his
11 statement since he is no longer with us to
12 represent himself.

13 (Reading) In the early months of 1957 I went to
14 work for the Mallinckrodt Chemical Company at
15 Weldon Springs, Missouri as a maintenance
16 electrician. I worked for this company until
17 March of 1963 as an electrician. During this
18 time frame I worked on all phases of electrical
19 work used in the process of converting uranium
20 ore into uranium metal. This process was very
21 complex, as it took various acids in the
22 processing of this uranium ore.

23 One of the most dangerous buildings as far as
24 radiation was called the metals building where
25 they put the ore in big ovens and baked it at

1 high temperature for several hours.
2 And within the context, in the body of this, he
3 goes into dimensions of the ovens and the
4 equipment, the machinery, a lot of detail, down
5 to inches, of what everything looked like. And
6 then further down it says (reading) If there
7 were any cracks or openings in the slag liner,
8 the magnesium would burn through the shell
9 outer lining in a split second, causing a
10 blowout in the furnace or oven, usually
11 damaging the oven elements and interior. The
12 ore would run down into the pit where it would
13 have to cool down from several hundred degrees.
14 The controlled relays were near the back of the
15 furnace on a rack, with electrical conduit
16 buried in concrete alongside of the pits, the
17 control cabinet near the front of the oven.
18 The heat during one of these blowouts would be
19 so intense in the pit that they would melt the
20 control wiring in the conduit buried in
21 concrete alongside the pit.
22 When these ovens would have a blowout they
23 would be out of operation for a period of time
24 and production would be down, so they would
25 expect the craftsmen to get the ovens back in

1 operation as soon as possible. I've worked on
2 these ovens on the interior while the uranium
3 ore in the pit would still be glowing red from
4 the heat. I have no doubt that while working
5 on these ovens I was exposed to quite a lot of
6 radiation. The building contained several of
7 these ovens or furnaces.
8 There was other equipment located in this
9 building. There were some big (unintelligible)
10 vertical lathes that were used to mill these
11 blocks of uranium metal down to a certain size.
12 And while the milling process was in progress,
13 the sparks would fly from the milling machine
14 cutting head. They had a liquid coolant
15 flowing over the cutting head to contain the
16 sparks. I know that there was a lot of
17 radiation around these machines, and we had to
18 do maintenance work on these machines. There
19 was blocks of uranium metal sitting at open
20 storage areas in one corner of the building.
21 In a left rear corner of the building there was
22 a large machine called an extrusion press.
23 This machine had a large induction furnace and
24 handling system to heat these large blocks of
25 uranium metal to a very high temperature. They

1 would come out of this furnace glowing bright
2 red. I'm sure that the men who worked in the
3 buildings -- metal buildings and the other
4 various production buildings were exposed to
5 various amounts of radiation that would cause
6 cancer and other diseases and problems of
7 health.

8 I've been diagnosed with colon type cancer
9 approximately seven years ago. The treatment
10 pain that I have suffered has had a significant
11 impact on mine and my family's lifestyle during
12 this time frame. And it's signed Ralph O.

13 Hunter.

14 We had it notarized and it was sent off August
15 of 2001. He did his phone interview, even
16 though he was barely able to sit there he was
17 in so much pain. He did that in April, 2002,
18 and died a couple of months later, June of
19 2002.

20 I just find that it's amazing that he was able
21 to recall all these details, even though he was
22 not feeling very well, even down to
23 measurements -- specific measurements of
24 machinery and equipment, even down to the brand
25 names of the machinery. And then recalling how

1 everything was still burning bright red in the
2 pits. And it's obvious that he received enough
3 radiation exposure to cause his cancer, and yet
4 prior to the site profile NIOSH has sent a
5 letter stating insufficient exposure.
6 Our family believes, as well as I'm sure a lot
7 of people, that these claims are being delayed,
8 I guess waiting for the workers to die, and
9 hoping that families and surviving spouses
10 won't have the nerve or the knowledge to
11 continue with the claim. I guess you're just
12 hoping that they'll go away. These people are
13 not going away. My mother is not going to go
14 away.
15 And I do have some concern about residual
16 effects. I have a seven-year-old at home. My
17 father's only grandson was born paralyzed and
18 missing major organs. There's got to be
19 something there.
20 You know, today's workers are protected by
21 government agencies and by OSHA and protective
22 equipment and conscientious employers who are
23 held liable for anything that they do -- any of
24 their actions. It's just a shame that
25 yesterday's workers are not given the same

1 consideration and protection.

2 **DR. ZIEMER:** Thank you, Jennifer. Ron Steiger
3 -- Steiger, Steger?

4 **MR. STEIGER:** My name is Ron Steiger. My wife
5 worked at Mallinckrodt from '52 to '56, '57.
6 She went there right out of high school. There
7 was a shortage of lab technicians because of
8 the draft -- a lot of drafting going on into
9 the Korean Conflict -- so they had to hire up
10 some people. So she -- she was one of the
11 chosen few. She worked there for six years.
12 She left there because she was pregnant with
13 our first daughter.

14 In the meantime, I went in the Marine Corps,
15 and I finally found out that she had a more
16 dangerous -- she had a more dangerous job than
17 I did. I could shoot at the person that was my
18 enemy, which she couldn't.

19 At the first doctor's visit for our last -- our
20 last child was a boy. And at her first checkup
21 at the pediatrician -- or obstetrician, they
22 found a little lump in her throat, which was
23 diagnosed as Hodgkin's. This was six years
24 after she left Mallinckrodt. She fought it for
25 ten years. That wonderful doctor at Wash. U.

1 did a fantastic job, and she was determined to
2 live until her son -- who was born then -- got
3 into grade school. So she made that.

4 But I think there was about 16 hospitalizations
5 over those ten years, different kind of
6 radiation, different kind of -- there wasn't a
7 lot of -- it was a new process and they didn't
8 quite know what the drugs would do to you. She
9 lost her bladder because of -- of the -- the
10 effects of some. So it's just been a long
11 struggle.

12 And I just think we've been lied to too much.
13 It's just been one big coverup after another,
14 and as you get these letters, I've been -- I
15 started this about four years ago, and -- and
16 just about the time you think you're going
17 somewheres, another letter'll show up and say
18 well, you know, you're -- you're still here or
19 you're still there. And then when they come up
20 here and said well, we went from a D to a C or
21 a A to a B or whatever this is, I mean that was
22 another -- I thought what -- what is this, you
23 know, this is stupid.

24 So gentlemen, I thank you for your effort, but
25 you got to do better. And Denise has been a

1 fantastic help. Thank you.

2 **DR. ZIEMER:** Thank you, Ron. Andy Semradi --
3 Samradi?

4 **MR. SAMRADI:** I guess you're getting tired of
5 hearing from me, but I'm here as a
6 representative of the airport people. Now this
7 man here, he said he was a contract worker out
8 there. You're lumping everybody in on this
9 Destrehan site, and these people deserve
10 everything they get. But if I look around this
11 room here, I don't know these people from
12 Mallinckrodt, but it looks to me like you went
13 from '42 to '47 -- none of these people are
14 them. These are all people that started after
15 '40-something, so what are they going to get?
16 You know, they were out at Weldon Springs and
17 this -- they should get it.
18 But the airport people -- I'm telling you, I've
19 got a fact right here. The alpha and beta is
20 over the limits, and this was done in 2000.
21 Now why are we fighting NIOSH? NIOSH should be
22 working for us. I've had investigations out
23 there and they come out and do nothing. They
24 can't get into the spots and all -- well,
25 there's a few TWA people here -- and we made

1 them run some tests years ago, and we can't get
2 the answer. We can't get the answer from DNR
3 about this water pollution. And I get the laws
4 and authorities and everything here that tells
5 you the Clean Water Act. Cradle to grave is
6 what my company told me. I had the haz-whopper
7 training. And when I go out and I pick
8 something up and I release it into the air or
9 into the stream, I'm guilty. But my company
10 could do it and they could -- they could cover
11 up all the facts and everything we've got.
12 Now you've got this CF 29 1910-20, access to
13 employees exposure records. I've asked for
14 these. I can't get them. I contact NIOSH, I
15 contact OSHA, nobody will do a thing. They
16 won't make the company -- they say they have --
17 they don't have my records. Now this was in
18 2000. Now these people here are trying to get
19 records from '42. How are they supposed to get
20 records when we -- and I can't get them now.
21 And what is the penalty if they don't have
22 records? It says you have to keep the records
23 of anybody's employment for 30 years after you
24 leave employment. Now where are my records?
25 Now what's going to happen -- the airport has

1 got pollution out there. I'll guarantee you
2 you've got pollution. I could show you. All I
3 got to do is get somebody out there. It's all
4 government, and that's what NIOSH inspector
5 told me. He says this is all political.
6 You're not going to get the records.
7 Well, I was in on that new tire construction. I
8 was in on that new east terminal construction,
9 ate my arm up. I got breathing problems and I
10 finally got a doctor at Barnes that told me you
11 want to die or do you want to live? If you
12 want to live, get out of this airport. Well,
13 he had me on workmen's comp. My company fought
14 me for -- 2000 I went on workmen's comp,
15 supposedly. They been -- I still have not got
16 a dime from workmen's comp. I have no sick
17 leave. I was out over two years with no pay at
18 all coming in. Me and my wife survived and
19 that's what I'll do, I'll survive the rest of
20 my life. I don't need them. But I could see
21 the -- what you're doing to these people here.
22 Now not you people, I mean. But NIOSH, to me,
23 is fighting us. Why are they fighting us?
24 They should be out there running
25 investigations. And I'll tell you, there's a

1 couple of TWA people here that -- I've got a
2 list here in my -- well, not here, but in my
3 briefcase there, I know of at least 75 people
4 at the airport that has got cancer, have died
5 of cancer, and one of them here has got cancer
6 now. And they're dying all the time on us out
7 there.

8 Now sure, this is Mallinckrodt people, but
9 we've been the residual things that they dumped
10 out there. I could prove truckload after
11 truckload used to come out there. It went into
12 Coldwater Creek, went into the Mississippi
13 River. Everybody along Coldwater Creek has
14 been affected by this. Now it's time -- you
15 know -- oh, sure, you voted or are going to
16 vote on the '42 to '47, that -- that's
17 ridiculous 'cause those people are dead. There
18 might be one or two of them here. These people
19 here from '47 on, even to -- there's a few here
20 that were working there in -- in the '90's.
21 It's still there.

22 Now if the airport has still got residual
23 radiation, where's that? I've got samples that
24 have got DDT in it that's been banned since '77
25 that's at the airport. Now if anyb-- why can't

1 we get somebody to come and run tests and
2 investigations to help the people? There's a
3 thousand employees at the airport that should
4 be involved in this. All those construction
5 workers. The electricians, when they built
6 that new control tower out there, they refused
7 to go in it because the water would splash on
8 them and they would put welts on them, burn
9 you.

10 The airport police complained about the mold in
11 their office. It wasn't the mold. It was the
12 stuff right underneath the ground underneath
13 them they were breathing. And we've got a lot
14 of the samples and things, but we can't get any
15 attorney -- I've been to the biggest attorneys
16 around this area. Nobody will touch it. DNR
17 won't touch it. Bill Renner* went to Jefferson
18 City, talked to DNR, OSHA. I've been to
19 everybody I can, and we can't get anybody to do
20 -- and it's like a prison out there. You can't
21 get on the property there.

22 Now some of the employees could get there, but
23 they threaten to fire them. I had a television
24 station working with me to get samples. They
25 threatened to sue the television station, TWA

1 and the City of St. Louis. And -- well, I lose
2 my thought. I got brain damage and -- but I
3 mean I'm going to survive.
4 I've got my arm back. I -- and I -- but I'm
5 not working there. I don't -- don't have any
6 money from them. I've got my Teamster pension
7 now. But the company fired me one day before I
8 could self-pay and get \$700 a month more on my
9 teamster pension, so you tell me that they
10 didn't set me up. And they fired me for
11 absenteeism, and I was -- had a perfect
12 attendance the year before and they give me a
13 letter of commendation, and -- but they -- they
14 didn't want me after 43 years, and I had the
15 best job out there and everybody -- you could
16 talk to anybody and they'll tell you that.
17 But I mean should we get this -- like you got
18 access to your records. Should all of us
19 younger people get these records now, before we
20 have to go through this same process of dose
21 reconstruction a couple of years from now
22 whenever our families want to -- we've -- we
23 turn up with cancer and die? I can't get them
24 now. How are we going to dose reconstruct what
25 I got if I can't get them now? And these

1 people from NIOSH are going to come in here ten
2 years from now and say oh, we're going to work
3 on it and they're going to postpone it,
4 postpone it and postpone it like they're doing
5 for these people.

6 Now I realize Weldon Springs is not included in
7 your thing. The airport's not included. Hey,
8 this is all Mallinckrodt stuff we're exposed
9 to. And I could show you -- and if anybody
10 wants to -- I'll put up my own money. If you
11 want to -- if you want to come out there and
12 give me a construction crew, I'll -- I'm not a
13 betting man. I don't go to the boats and
14 stuff, but I'll bet you every dime I got, I'll
15 take a construction crew out there, I'll drill
16 test wells, and if I don't find this radiation
17 and these DDTs and these pesticides and stuff,
18 I'll pay for it, but you pay for it if I find
19 it. I'll guaran-- hey, that's as close as I
20 come to a guarantee on it. But it's about time
21 to pay these people here. Thank you.

22 **DR. ZIEMER:** Next I have Frances -- I believe
23 it's Scoeggins.

24 **MS. SCOGGINS:** Scoggins.

25 **DR. ZIEMER:** Scoggins, Frances Scoggins. Thank

1 you.

2 **MS. SCOGGINS:** My husband worked for Dow
3 Chemical Company in Madison, and he died of
4 cancer in '91. He found out in August -- in
5 April of -- 20th, so on his 64th birthday --
6 that he had lymphoma, and he suffered agonizing
7 death for -- from then until he died in July
8 6th of '91. And I had -- we had six children.
9 This is one of them. And I had two
10 miscarriages and I think that was because of
11 what he was working with at Dow Chemical
12 Company. But he didn't tell us anything about
13 his work 'cause we didn't know anything about
14 his work. But he was -- he started at Dow
15 Chemical Company in 1953 and we had our second
16 baby in '54, and he was working there then and
17 he's -- he was just a wonderful man and he was
18 good to the girls. And he -- I said during
19 that time I had two miscarriages, but that's
20 all I've got to say.

21 **DR. ZIEMER:** Thank you. Yes?

22 **MS. BEST:** I'm also a survivor of Ray Scoggins.
23 I'm his daughter.

24 **DR. ZIEMER:** And tell us your name, also,
25 please?

1 **MS. BEST:** My name is Pamela Best.

2 **DR. ZIEMER:** Pamela? Uh-huh.

3 **MS. BEST:** And in 1996 I was diagnosed with RA,
4 and then in 2002 I was diagnosed with OA. I
5 have had a heart attack. I've had two heart
6 surgeries, and I was born in 1958. And that
7 was between the time -- 1958 until 1964 is
8 whenever Mom had her two miscarriages. One was
9 a set of twin boys and the other was a single
10 boy, but she still lost them. And when she got
11 pregnant with my youngest sister, she was born
12 in 1962, and she found out she was fine then.
13 But that was after everything.

14 I don't understand why nobody told these
15 workers how much damage this could do, not only
16 to them but to their families. I mean this
17 stuff can be handed down, generation to
18 generation, and there's no sense in not telling
19 anybody about it. That's all I needed to say.

20 **DR. ZIEMER:** Thank you. Next I have listed
21 Harry Durse -- or Durkso family -- family?
22 Maybe several folks. Is it Durkso?

23 **UNIDENTIFIED #1:** (Off microphone) Durso, D-u-
24 r-s-o.

25 **DR. ZIEMER:** D-u-r-s-o, Durso. Thank you.

1 **UNIDENTIFIED #1:** Good evening. We are the
2 daughters of Harry Durso. He worked at
3 Mallinckrodt from 1941 to 1972. He spent 21
4 years at the -- is it called Destrehan plant,
5 the one off of North Broadway, and ten years at
6 Weldon Springs. He was a chemical operator,
7 that was his title. We have a Mallinckrodt
8 newspaper that has five photos of him in here,
9 and it looks like the only -- he's stirring up
10 -- I guess whatever, chemicals or something,
11 and -- did you want to see it? And it looks
12 like the only protection that they had at that
13 time were some kind of glasses that they could
14 wear over their own glasses or -- or whatever.
15 And my father was diagnosed with cancer in --
16 let me find it now, where did I put it?

17 **UNIDENTIFIED #2:** In '77.

18 **UNIDENTIFIED #1:** '77?

19 **UNIDENTIFIED #2:** Uh-huh.

20 **UNIDENTIFIED #1:** Oh, in August of '77, and he
21 died in August of '81. On his actual death
22 certificate it was listed as a heart attack.
23 He was in intensive care. He had several
24 surgeries for cancer. And when he died he had
25 cancer from his brain all the way to his toes,

1 probably. He couldn't walk without assistance.
2 My mother used to have to rub his legs. His
3 legs hurt so bad 'cause he had cancer in both
4 his legs and that. That was bad enough. The
5 doctors came out and told us he had ten minutes
6 to live unless they would put him on life
7 support. My father did not want that. I think
8 that's the hardest decision our mother had to
9 make is saying no life support.

10 A few years later our mother died in November
11 of '90 from cancer, and she also suffered a
12 terrible death like he did. She had numerous
13 tumors. She had had radiation implants put in
14 her to try to kill the -- the tumors and
15 everything and she also died a terrible, long
16 death.

17 Right now we haven't been diagnosed with
18 anything, thankfully, and we hope that
19 continues. But we thank you for your time and
20 effort. And thank you, Denise.

21 **DR. ZIEMER:** Robert Mollinhauer?

22 **MR. MOLLINHAUER:** My name is Robert
23 Mollinhauer. I'm here on behalf of my dad,
24 Richard. I don't know the exact date he
25 started, but he had 37 years. He was at the

1 Destrehan plant, shifted to Weldon Spring, and
2 then back. And they made him retire after 37
3 years 'cause he -- he had cancer. He was
4 walking sideways. He had something called
5 hydrocephalus. I've got all the records,
6 filled everything out, and like everybody else,
7 why are we waiting? I'm going on four years.
8 Here, here it is here, the same thing, comes
9 all the time. My question is why. And I know
10 Denise is helping us, but why can't we just get
11 paid. That's all I have to say.

12 **DR. ZIEMER:** Thank you. Virginia Jones --
13 Virginia?

14 **MS. JONES:** Hello. I will make this short. My
15 husband worked for 32 years for Dow Chemical.
16 It was Spectralyte* when he passed away. He --
17 he died in 1986 and he had cancer in the lungs,
18 in the shoulder, the brain, various parts of
19 his body. And he worked in a lot of different
20 departments. He had one more year but he was
21 going to retire, and that's all I have to say.

22 **DR. ZIEMER:** Thank you very much. Richard
23 Ralgens -- again, I'm having a little trouble -
24 - R-a-l-g-e-n-s? I may be reading that wrong.
25 Richard -- maybe it's R-o-c-l-g -- Rocler,

1 maybe, Rocler? Anything close? I'm sorry, I'm
2 having trouble reading this. Richard A. --
3 also from Spectralyte Corp.

4 **UNIDENTIFIED:** (Off microphone)
5 (Unintelligible)

6 **DR. ZIEMER:** Okay.

7 **UNIDENTIFIED:** (Off microphone) Thank you,
8 though.

9 **DR. ZIEMER:** Thank you very much. Linda
10 Ridenauer? Linda Ridenauer not here? Okay,
11 let's -- and also Donald Ridenauer, perhaps
12 have left then. Paul Led, L-e-d.

13 **MR. LEO:** (Off microphone) Leo?

14 **DR. ZIEMER:** Leo, Paul Leo, is it, L-e-o?

15 **MR. LEO:** (Off microphone) Yes.

16 **DR. ZIEMER:** Yes, that's it.

17 **MR. LEO:** My name's Paul Leo. I've worked at
18 the St. Louis airport site in the late '90's,
19 early 2000, and since then I've developed
20 respiratory problems and that's really all I
21 have to say. There -- there was people getting
22 sick on the job site, and I've learned that
23 they did an air -- air quality study. They
24 told the workers that there was nothing wrong,
25 and it's come out that they lied, so thank you.

1 **DR. ZIEMER:** Thank you. Betty Rode.

2 **MS. RODE:** I'm here to speak on behalf of my
3 deceased husband, Ray Rode. He was from the
4 Hematite United Nuclear plant and also he
5 worked for Combustion Engineering, and it had
6 formerly been -- in the beginning it was a
7 Mallinckrodt plant, and they sold out to United
8 Nuclear. They sold out five or six times
9 during the time he worked there, from '67 to
10 '88 that he worked there.
11 He was a security guard. He was required to go
12 throughout all the plant, throughout the
13 radiation areas, the hot rooms, everything, and
14 all the grounds on his rounds that he would
15 have to make every hour. He was not given any
16 proper uniform to wear -- I mean only a shop
17 coat was all he was required to wear. No mask,
18 no gloves, no -- nothing. And he went through
19 all kind of contaminated areas.
20 And upon retirement he contacted (sic) a
21 chronic cough and when he finally went to the
22 doctor because he couldn't clear this cough up,
23 he was told that he had scarring in his lungs,
24 and there was nothing they could do for him.
25 They said there was no treatment for it, other

1 than a lung transplant, and they figured by the
2 time that he received a lung -- received a lung
3 transplant that something else would get him
4 first. So they said that there was no
5 beryllium at that plant, but I have reason to
6 believe there was because a lot of the workers
7 that worked there said there was beryllium
8 there, and I think that he had that CBD or
9 whatever it was, beryllium disease.

10 And once while he was working there he was --
11 the plant was secured over a weekend. He was
12 the only guard on duty, and he discovered that
13 the hydrous ammonia tank was leaking, and he
14 went to report it to the guy that was over him,
15 Arlen Nowak*, and he told him to go find the
16 shutoff valve and shut the tank off because it
17 was leaking so bad. He didn't want to get out
18 in the cold to come and take care of it, so he
19 asked him to do it, which wasn't his job, so he
20 didn't know where the shutoff valve was and he
21 said it took him three tries to go back and
22 find where to shut the valve off at because it
23 kept taking his breath. And he came home that
24 morning and told me that he had almost got
25 overcome by the ammonia, it was so strong, and

1 he said that he burned all the way down through
2 his -- his chest, and he wanted to know if I
3 had cough medicine or something he could take
4 to relieve that.

5 Well, after so long, the -- the burning quit,
6 and then he had developed this cough, a chronic
7 cough. He just hack, hack, hacked all the time
8 and he didn't seem to have a cold or anything.
9 So that's what sent him to the doctor 'cause he
10 couldn't get rid of his cough. And the doctor
11 said that he had striping all through his
12 lungs. He didn't know what it was.

13 We had to change doctors because of insurance.
14 We changed insurance and so he was required to
15 take another physical, and when he took the
16 other physical later on, they told him man,
17 what have you been into? You have got into
18 something that you have inhaled and has burned
19 your lungs. He said they have scarred them up
20 something terrible.

21 And so as years progressed, it got worse. His
22 breathing got worse. His oxygen level would
23 drop and he finally had to go on oxygen, and he
24 was on oxygen full 24 hours a day, seven days a
25 week. And it got to the point that later on he

1 couldn't even walk across the floor, he -- he -
2 - without assistance. He went from a healthy
3 man of about 209 pounds down to less than 120
4 pounds when he passed away, and he's been gone
5 for two years now.

6 And I have put in claims since 2001, and I have
7 got rejections from Department of Energy,
8 Department of Labor. I have done -- they give
9 me the runaround -- get in touch with Paducah,
10 Kentucky. I'd call them. They'd say go --
11 write to Colorado. I'd write out there.
12 They'd say write to Seattle, Washington. I'd
13 write out there. I've wrote -- and I get a
14 stack of denials that big, they said because --
15 we're not paying because it's not cancer.
16 Well, it's just as bad as cancer. It scarred
17 his lungs and it took his life. And I've got
18 his lung X-rays there. And when he passed away
19 I had an autopsy done, which cost me \$2,000,
20 and I didn't have to have the autopsy done but
21 I wanted to know myself just exactly what was
22 his problem. And I have a 15-page autopsy and
23 it states in there that he was a perfectly
24 healthy man. All of his problems was located
25 right in his lung area, and it was due to some

1 toxic substances or gases that he had inhaled
2 at some time or another that scarred his lungs
3 up so bad. And yet I can't get any
4 compensation because they say he didn't have
5 cancer. Well, to me, this was just as bad
6 'cause it took his life.
7 And a lot of other people's got respiratory
8 problems, and they can't get any compensation,
9 either, because it's not cancer. Cancer is the
10 main word. If you don't have cancer, you don't
11 have any chance to get any compensation.
12 That's baloney. There's a lot of respiratory
13 problems and lung problems that's just as bad
14 as if you had cancer. I'm not saying cancer's
15 not bad, 'cause I know that's bad and I feel
16 sorry for people that have it. But I also feel
17 sorry for the people that are turned down
18 because they don't have cancer.
19 And he was a faithful worker down there. He
20 worked 21 years down there, and they should
21 have given him protection. These men that were
22 working inside of these dangerous areas, they
23 had proper clothing and they had masks and they
24 had gloves, and they had boot things over their
25 shoes. Ray went through all these. He -- he

1 turned doorknobs. He went through these areas
2 and with no protection, not even a mask, just a
3 shop coat like a doctor wears, a shop coat, as
4 though that was going to protect him.
5 And then he comes home with these same uniforms
6 on, these same shoes that he tramped all over
7 that plant with in areas, and I had to wash his
8 clothes. And he told me, don't handle my
9 clothes. Take something to pick them up and
10 throw them in the washing machine 'cause they
11 could have a lot of that contaminated dust and
12 stuff on them. And -- well, I ended up with
13 breast cancer, but I mean that was my problem.
14 I didn't figure it was -- I mean I don't know
15 what caused it, but anyway, could have been
16 from some -- handling a lot of his clothes, who
17 knows.
18 But anyway, I think it's a doggoned shame that
19 they're letting a lot of these workers go
20 without any compensation. And they're --
21 they're just as sick as people that's got
22 cancer, but yet they're not recognized by the
23 health -- Energy or Labor because it wasn't
24 lung cancer.
25 My -- the man that did -- or pathologist that

1 did the report of his autopsy, he saved his
2 lungs for a lung study, and he -- he sent it
3 not only to him, but he sent it out to three or
4 four other pathologists to get their idea on
5 it, and they all came back with the same
6 report, a toxic substance caused his scarring,
7 burned his lungs up, from something that he
8 inhaled.

9 So I've been waiting now five years for
10 compensation and they keep saying oh, you'll --
11 you'll probably get it, you'll probably get it.
12 Well, I'll probably be dead. I'm 75 years old,
13 and I can't wait forever on it. So I just hope
14 you can do something that somebody else can't.
15 Thank you.

16 **DR. ZIEMER:** You've reflected -- you've
17 reflected some frustrations that actually
18 probably would ultimately need to be addressed
19 by legislators since, for example, this program
20 is -- as you say -- is very specific in terms
21 of the disease that it addresses. The remedies
22 that are often needed are legal remedies, and
23 hopefully some of the Congressional people who
24 may be here tonight will hear that. So your
25 point is well made. Thank you.

1 Don -- I'm not sure if the last name is Foy or
2 if I'm just seeing part of the last name. It's
3 either Don or Dan, I believe. Is there a Don
4 or Dan Foy or Roy, anything close? I'm -- I'm
5 not able to read the middle part of this. It's
6 either a middle name or the first part of a
7 last name that I cannot decipher. Are there
8 any Dons here that think they signed the list?
9 If not, I'm sorry, I'm unable to read it.
10 Okay, let me skip ahead. Maynard Wise? Okay.
11 Donna Earlman?

12 **MS. EHLMAN:** (Off microphone) Ehlman.

13 **DR. ZIEMER:** Oh, E-h-l, okay. I'm trying to
14 read these writings. They're all different.
15 Thank you.

16 **MS. EHLMAN:** My name is Donna Ehlman and I'm
17 here speaking on my father's behalf and my
18 mother's behalf. She's up here. I've heard
19 these stories before. I know a lot of the
20 people that have been talking. I was down here
21 last year speaking on my dad's behalf. I'm
22 very thankful that he's still living.
23 He worked at the Destrehan plant from '52 to
24 1958, and then from '58 to '63 at the Atomic
25 Energy plant at Weldon Spring. He also, just

1 as this lady's father, wrote a letter because
2 he really didn't think he would be here. He's
3 been living the last five years, probably
4 should have only lived two and a half years but
5 he's defied medicine. He's had a lot of good
6 care from my mother. But his lungs shut down
7 on him five years ago and he was on a
8 ventilator for a long time. And he wrote this.
9 (Reading) I worked in the breakdown area
10 picking up shells with a hoist. We would take
11 the cap off with the shell laying in a cradle.
12 Then we would cut the lime-lined shells out of
13 the shell with a jackhammer as far down to the
14 derby as we could. Then we would up-end the
15 shell with a hoist and hammer on the sides and
16 bottom of the shell until the derby or the
17 ingot of uranium fell out.
18 The next operation was to break the lime off
19 with hammers until you had a fairly clean
20 derby, about seven or eight inches in diameter,
21 five inches high, weighing about 95 pounds.
22 Some derbies had a black oxide form on the
23 bottom, and when we would slide them on a metal
24 roller conveyor they would catch fire. If you
25 didn't clean it off, it would burn all day.

1 Most of the shells were not being cleaned good
2 enough, and I submitted a suggestion for a
3 better cleaning solution and got \$25. It was a
4 pretty good one.

5 I don't recall how long I was on that job, but
6 following that I was put over in the refinery
7 operating the metal dissolver. It was a very
8 dangerous job working with scrap uranium from
9 the blowouts, which was a fine material, very
10 dangerous because it dissolves very fast. The
11 larger the chunks are, the more solid and
12 slower they dissolve. Fork truck drivers would
13 bring predetermined loads to me on wood skids.
14 I'd load them on stainless steel baskets into a
15 tank of about 10,000 gallons. I would close
16 the lid and start the acid spray over it.
17 Too much fine material would cause a reaction.
18 The lid would raise up and the fire would puff
19 out. If that ever happened I was supposed to
20 open the flood valve with water and it would
21 sound an alarm to evacuate the refinery.

22 One Saturday morning material was set up for
23 me, and it looked like too much fine stuff at
24 one time. My lead man said run it. When the
25 lid raised up four inches, it started belching

1 out fire, and I was scared to death. I turned
2 off the acid, went down the ladder and flooded
3 it. My lead man came out and said what the
4 hell are you doing? I said I'm just doing what
5 I'm supposed to do. Turned out my boss was off
6 and the wrong material had been set out. No
7 one communicated that to me.

8 I had been trying to get into the machine shop
9 so I wasn't on that job much longer. I ended
10 up running a taper lathe, various other jobs in
11 the machine shop. I worked the 4:00 to 12:00
12 shift most of the time, and got a lot of
13 experience working in the field with some good
14 buddies -- Roger Aubachon*, Hank Padulsky*, Joe
15 Mintier*, Frank Bogner* -- and his daughter's
16 here -- Les White and Charlie Sheeley.

17 We all worked together tearing down blown
18 furnaces, which were very hot. Sometimes we
19 would only stay in there for 15 minutes,
20 sometimes a half-hour. Other times we would
21 work on dust collectors, cleaning the bags and
22 putting in new ones. I can't say that anyone
23 ever checked them out before we worked on them,
24 but I believe they were very hot. We would
25 often spend a couple of hours in the dust

1 collectors.

2 I remember when they drilled holes throughout
3 the plant at Destrehan and told everyone they
4 were checking for termites. I believe now, as
5 I did then, that it was to check radiation
6 levels because it was no longer safe.

7 There was a gentleman here who talked about the
8 radiation levels in the floor and how when they
9 poured the new concrete into the floor that the
10 radiation was penetrating that, as well.

11 (Reading) I believe that's why they built the
12 Weldon Springs plant. I didn't go out there
13 voluntarily 'cause I didn't want to drive the
14 75-mile round trip every day, but eventually I
15 was forced to go or lose my seniority, so I had
16 to go back into the manufacturing division
17 because there were already enough people in the
18 machine shop.

19 This time I went to work in the green salt
20 plant. I had to operate the fluid beds on the
21 very top floor. There were two vessels there
22 where they forced hydrogen to react with orange
23 oxide to turn it into brown oxide. The heat
24 was terrible, 145 degrees.

25 The brown oxide was mixed with hydrofluoric

1 acid -- hydrochloric acid into three different
2 screws, each one about 25 to 30 feet long. If
3 the acid was added too fast, it would bridge
4 the screw. Sometimes it was so bad the
5 hydraulic pressure couldn't turn the screw.
6 There were other times when the ribbons in the
7 screw would break and a whole bank of furnaces
8 would be shut down and the screw would have to
9 be pulled out. It was a costly job and a lot
10 of work. A couple of good panel operators
11 could control the green salt by speeding up or
12 slowing down the screws, but the jobs were
13 always hazardous. We wore gloves, hardhats and
14 goggles.

15 When I went back to the machine shop I was
16 exposed to many other types of contaminations
17 working on the bullard lathes.

18 I think this lady over here talked about those.
19 My dad said (reading) they would cut off -- cut
20 a curl off a 4,000-pound ingot of uranium. The
21 chips would fall into a basin around the chuck,
22 which was continually being flushed with water-
23 soluble oil, but it would still ignite and turn
24 cherry red.

25 I changed the dies in the extrusion presses.

1 They would be burned black with a hard crust on
2 them. I would straighten the mandrels and they
3 would be black. It seems to me that anything
4 in contact with uranium a certain length of
5 time would turn black, and I think that the
6 black oxide that forms is very hot.

7 We were always packing pumps, changing and
8 repairing machinery in areas where we had to
9 have rubber boots, gloves and goggles on. I
10 remember going to take out the packing on a few
11 pumps, which was only referred to as "a place
12 across the street" -- this was down at
13 Destrehan. When we went through we had to
14 neutralize our tools that we had used and throw
15 them in a barrel. After that they were put on
16 a raffinate truck and hauled out to the airport
17 dump. It must have been really potent stuff.

18 I know that some of these observations and
19 opinions may not be completely accurate, but I
20 believe they should be told. I believe it's
21 possible -- I believe it's probable that the
22 airplanes flying over the raffinate dumps at
23 the airport may have been picking up radiation,
24 and that that is why they wanted to move
25 operations to Illinois. That's probably a

1 little exaggerated, but I've thought about this
2 for years.

3 One thing I do want to bring up is my concern
4 that for years they have hauled waste through
5 St. Louis with no thought for public safety.
6 They tore down the Destrehan plant and hauled
7 it out Highway 70 to 94 and dumped it into the
8 quarry. After that they cleaned up the Brown
9 Road site and hauled it out.

10 The next site was the pit or lake that had some
11 good material on the bottom. Somebody wanted
12 to reclaim it, and they wanted to pump the
13 water into the Missouri River. People in St.
14 Charles County got wise and wouldn't allow them
15 to dump it into the river for fear of
16 contamination, but I think it was done anyway.
17 I think the Department of Energy knew that they
18 were in trouble for dumping in the river.

19 Finally they made a place on the Weldon Spring
20 site for storing waste. They built a new road
21 from the quarry to the storage site that
22 eliminated the well-traveled Highway 94 route.
23 I don't know what all is completed, but I think
24 they finally monitored the water and pumped it
25 into the river.

1 I believe the workers and the public have had
2 the wool pulled over their eyes for years. Now
3 after 50 years they want the workers, who are
4 50 to 60 percent deceased, to go by their rules
5 and regulations for compensation.

6 I worked hard as an employee of Mallinckrodt
7 Chemical Company, as did many other people. My
8 illnesses began after I was laid off. I've had
9 several heart attacks when I was 45 years
10 young. I worked as a machinist after that for
11 29 years, but have always had problems with my
12 legs and feet from the day that I started.

13 I've had quadruple bypass, a second bypass
14 surgery, a cholecystectomy, colon cancer,
15 prostate problems, and most recently suffered
16 Adult Respiratory Distress Syndrome and was
17 diagnosed with pulmonary fibrosis, years after
18 I had stopped smoking. I was on a ventilator
19 for three and a half, four months, to breathe.

20 He's had a long road to recovery, and he's
21 still very debilitated or he would be here to
22 speak for himself, I'm sure. He can't -- he
23 says he can't prove that this was all caused by
24 radiation exposure, but he has many -- he has a
25 stack of medical records, out of this world, to

1 support his claims. He's had good care from
2 his wife, doctors and nurses, and without God,
3 I don't think he would still be here to write
4 this so that I could tell you of his
5 experiences.

6 But I think that people are really getting
7 tired of the wait. I understand it's not your
8 problem, but look around the room. Just look
9 around the room. These are not people who were
10 working at the Destrehan plant in the '40's.
11 These are people who have worked there after
12 that, and out at the -- out at the plant.
13 Take a -- has any -- has anybody here been out
14 to look at the -- at the site at Weldon
15 Springs? The money that was spent to bury what
16 was left of that plant and the teardown is
17 unbelievable. I've been out there and I've
18 walked to the top. And I'm telling you, you
19 don't make a grave for something like that
20 unless it's dangerous. Thank you.

21 **DR. ZIEMER:** Next the Hanak family -- Hanak?
22 H-a-n-a-k, perhaps have left. Let me continue.
23 Debra D-e-t-- I'm having trouble reading the
24 rest. This is office -- oh, this is the
25 Congressman's office. This would be Debra --

1 Debra Dornfeld?

2 **MS. DORNFELD:** I don't want to talk, that's
3 okay.

4 **DR. ZIEMER:** Okay, Debra.

5 **MS. DORNFELD:** I don't need to talk.

6 **DR. ZIEMER:** Bernel Hower -- Howrer, H-a-e-r-e-
7 r. Thank you.

8 **MR. HERRER:** Bernel Herrer.

9 **DR. ZIEMER:** Herrer?

10 **MR. HERRER:** Yes, sir.

11 **DR. ZIEMER:** Herrer, thank you.

12 **MR. HERRER:** At the age of 21, just fresh out
13 of the military, I was seeking un-- seeking
14 employment. I was hired by -- at Weldon
15 Springs in 1959. I was employed till 1966.
16 During that period of time I worked in the
17 metals plant, sampling plant and the refinery.
18 In the metals plant there wasn't a job I guess
19 that I wasn't trained on. Some of the folks
20 that have spoken before me that repaired the
21 furnaces, well, I cleaned up after some of the
22 blowouts in the furnaces. I worked in the
23 breakdown area. Some of my good friends are no
24 longer with us. Charlie Bradensteiner and I,
25 we used to work in the breakdown area, worked

1 in the slag plant, and naturally the dust
2 problem was quite severe, even though we wore
3 small -- we called them respirators, but they
4 really didn't amount to too much.
5 When the crucibles and the furnaces had a
6 blowout -- what we called a blowout -- there
7 would be dust floating around in the metals
8 plant from the front to the rear of the
9 building. And unless you were close to it, you
10 didn't even wear a respirator, you just -- you
11 weren't asked to, you weren't told to.
12 Fortunately I'm still standing here and able to
13 talk about it, even though I've had two tumors
14 removed, one off of my jaw, one off my back.
15 I've had three stints. I've had an abdominal
16 aortic aneurysm which was five centimeters, and
17 I have reoccurrences with bronchitis.
18 1970 I married my bride, and I informed her --
19 after we were married, I didn't tell her before
20 -- that -- I said look, I've made a decision,
21 we're not having any children. I don't want to
22 take a chance, after hearing some of the horror
23 stories and witnessing some of my friends that
24 had children that were born with heart defects,
25 blind in one eye, and similar things.

1 So these are some of the things that
2 fortunately (sic) we trusted our employer to
3 keep us safe. Fortunately (sic), maybe we
4 shouldn't have trusted them that far. But I
5 will trust you folks to do everything you can
6 to get this handled and to the people that
7 really need the help. Please work for them and
8 try to get this resolved. Thank you.

9 **DR. ZIEMER:** Thank you. Kimberly Smith Asfari*
10 or -- am I close on that one? I'm having a
11 little trouble reading the writing. Kimberly -
12 - from Mallinckrodt downtown. No? Billy J.
13 Smith? George Allen?

14 **MR. ALLEN:** (Off microphone) I already spoke --

15 **DR. ZIEMER:** Yes --

16 **MR. ALLEN:** -- (unintelligible).

17 **DR. ZIEMER:** Yes.

18 **UNIDENTIFIED:** (Off microphone) Would you start
19 over, please?

20 **MR. ALLEN:** Thank you. I didn't come prepared
21 tonight to speak. I didn't believe I'd be
22 called on so I didn't come prepared, but anyway
23 --

24 **DR. ZIEMER:** Somebody put your name down.

25 **MR. ALLEN:** Yeah, I did --

1 **DR. ZIEMER:** Okay.

2 **MR. ALLEN:** -- when I came here, but I didn't
3 realize that I would get called.

4 Anyway, you know, I've got a copy of my
5 father's security termination agreement from
6 Mallinckrodt dated October 28th, 1957 that
7 shows that most likely he had to enter the --
8 the processing areas or other top secret areas
9 of the Mallinckrodt plant. What I've got in my
10 hand is his employment file. Getting this
11 employment file was like pulling teeth. It
12 didn't come easy. Finally a vice president of
13 legal at Tyco gave it to me after I really
14 raised a stink about it.

15 Two years later my sister found out about this
16 program and tried to get my father's employment
17 file, and Mallinckrodt told her that he never
18 worked there. Luckily I already had it.

19 What was in this file, though, was interesting.
20 There -- I asked -- I asked this vice president
21 of legal at Mallinckrodt what about the
22 dosimeter badge readings from working at
23 Hematite, from working at Weldon Springs. And
24 I was told that all this information had been
25 scooped up by the Department of Energy and --

1 on several years prior to that and that it was
2 locked up somewhere, and I couldn't see it.
3 All my father's medical records were destroyed.
4 He died in 1991. This was in 2001. Ten years
5 later, they're all gone, couldn't find them.
6 My father's employment record, it shows pay
7 increases. It shows some conferences he had,
8 but not once in here does it show what he did
9 for the company besides being assistant
10 comptroller. It doesn't show anything about
11 working at -- at Hematite, which the DOL has
12 now certified him as working there. It doesn't
13 show anything about Weldon Springs. It doesn't
14 show anything.
15 And when I filed this claim, it was a couple --
16 a year or two later after we filed it, we got a
17 determination from NIOSH. The NIOSH
18 determination was based upon background
19 radiation at the Mallinckrodt plant. And the
20 amount of radiation they said he received was
21 below the threshold to cause the cancer that he
22 died from when I had a signed affidavit in the
23 package from the comptroller of Mallinckrodt
24 that my father had done inventory at Hematite
25 and had handled this material on a monthly

1 basis. And this wasn't even included. They --
2 they just based their determination on the
3 background radiation, which was based upon the
4 background radiation at a similar plant, not
5 even on the actual Mallinckrodt plant.

6 I was irate, to say the least, when I got this.
7 I phoned NIOSH. I phoned the Department of
8 Labor. And a couple of days later they called
9 me back and he said oops, we have a flag in
10 your file. We need to do another telephone
11 interview.

12 I did another telephone interview. Then they
13 sent me a letter saying that they were going to
14 -- starting the dosage reconstruction process
15 over again. This'll be the second one. The
16 first one took what, a year and a half, two
17 years? You know, this -- I'm -- we're on the
18 second dosage reconstruction now because they
19 decided that he actually was a Hematite
20 employee, as well as a Destrehan Street
21 employee. And this is just taking forever.
22 Thank you.

23 **DR. ZIEMER:** Thank you. Dan Meklovich* --
24 Meklovich -- close?

25 **MR. MEKLOVICH:** My name's Dan Meklovich. I'm

1 here representing my sister, Patrice Solomon,
2 and myself. My father was a 34-year employee
3 of Mallinckrodt, despite the fact that they say
4 he never worked there, and I have documents,
5 you know, that mention his name in the
6 Mallinckrodt magazine and everything. Like so
7 many of the other stories here, it's clear --
8 I'll defy any of you on the Advisory Committee
9 to reconstruct your caloric intake for February
10 8th, the year 1994. How many calories did you
11 ingest yourself ten years ago today? How --
12 you can't do that. Given the absence of these
13 records, you're asking strangers to do dose
14 reconstruction on people whose jobs they didn't
15 do, they don't understand, and more
16 importantly, the records have been either
17 inadvertently, accidentally or purposely
18 destroyed.

19 I have a degree in electrical engineering with
20 a minor in nuclear engineering from the
21 University of Missouri at Columbia. I know
22 that the exposure that people receive in
23 roentgens and all the other measures are real,
24 because in this magazine it says I also worked
25 at Mallinckrodt as a co-op student in the

1 '70's. I saw what my father did. I saw what
2 these other people did. I worked with Frank
3 Bogner. I know what these people did. The
4 injustice is not Mallinckrodt losing the
5 records. The injustice is not going to be the
6 fact that they were lied to, because back then
7 we didn't know. When I was there in my
8 twenties working at Mallinckrodt, and studying
9 this at school, I didn't know, and I was a
10 student of about the dangers of nuclear
11 engineering. The crime will be if you don't
12 grant them Special Exposure Cohort status
13 because you're asking a dose reconstruction
14 committee to do the impossible. That's the
15 issue, is it can't be done. You can't do what
16 you don't have records for. You can't ask
17 people to reconstruct doses when they don't
18 even know what these people did for a living.
19 Thank you.

20 **DR. ZIEMER:** Thank you. Larry Nolte? Then
21 Terry Mauzer?

22 **MS. MAUZER:** Hi, my name's Terry Mauzer and I
23 worked at the Hematite plant. The reason I'm
24 here to -- for my comments to this committee is
25 hope to expand the time frame from the opening

1 of the plant in 1956 to the closing of the
2 Hematite plant in June of 2001, simply because
3 I don't know where to start to bring the
4 attention to the Hematite plant in Missouri.
5 I was employed as a radiation worker from
6 February of 1995 to the closing of the plant in
7 June of 2001. I had several positions within
8 the company. My first exposure to
9 hexafluoride, UF-6, was in the production and
10 assembly plant. In this process the UF-6
11 cylinders were turned from a gas form to
12 uranium-enriched powder to form what was known
13 as green pellets, which were then used in
14 enriched -- sorry -- used in the plant -- I'm
15 sorry -- placed in the millennium boats on an
16 incanel* tray. They were then placed on ramps
17 to enter what was known as a dewaxer furnace.
18 The plant -- pellets then went through three
19 temperature zones. They would burn off any
20 impurities, causing a poof of smoke on regular
21 -- on a regular basis. The poof would emit
22 fumes and radium -- radon particles into the
23 air in which we as an operator were constantly
24 exposed.
25 Also the plant would -- planter end, which this

1 area would be so contaminated with residual
2 contamination that we'd have to clean
3 constantly just to keep the residual
4 contamination that we would have to -- to keep
5 your dac* readings down, I'm sorry. This was a
6 very dirty and nasty job. Usually the only
7 protective clothing we had on were very thin
8 cotton liners and also rubber latex gloves we
9 used every time to -- every time -- God, I'm
10 sorry -- every time -- every type of protection
11 to try to keep from being exposed to the radon
12 particles, but it was basically a no-win
13 situation, so imagine if you can the horrific
14 experiences as operators we had to endure on a
15 daily basis just to keep the production going.
16 The pellets then went to a centering furnace in
17 which the same basic concept as the dewaxer
18 except in the process the pellets would go
19 through a chemical change to cause the pellets
20 to ceramatize. From there the pellets went to
21 another operator in which they would dump the
22 pellets into the machine, which then shook the
23 pellets, causing a cloud of powder to encircle
24 the operator, causing them to get dangerously
25 high readings. I find this to have been a very

1 dangerous step to the fact -- due to the fact
2 that 90 percent of all of our equipment was so
3 old and outdated. We took a chance, first of
4 all, in safety. Also we were endangering our
5 lives on a daily basis to get the production
6 out the door. As one supervisor had said to us
7 all -- it's all about the numbers, not taking
8 in consideration for their workers.

9 From this point the pellets were being ground
10 to meet certain guidelines for NRC and customer
11 standards. The pellets would then be placed
12 back into another -- a millennium boat, then
13 transferred into -- onto a cart. While in
14 transit some of the residual contamination
15 would fall onto the table, causing even more
16 exposure to the radon dust particles. The
17 pellets were once again dumped onto a work area
18 known as the shaker table. This would cause
19 the pellets to chip and display a very, very
20 thick dust on the work area. The pellets,
21 while being shook, were -- formed -- would form
22 a very visible cloud in which the operator was
23 exposed to airborne particles on -- in order to
24 align the pellets on a pre-cleaned tray in
25 order to prevent cross-contamination expos--

1 and exposure to the dust particles.
2 From there the pellets would then be pushed
3 from the tray for inspection of any of the
4 defects or for the correct enrichment. In this
5 process the operator would use a rolling table
6 which would turn each roll of the pellets one-
7 third circumference per rotation in order to
8 get a complete and true inspection. The
9 operator would slide the pellets back onto the
10 tray. Keep in mind the contamination would
11 still be at the work area, causing exposure to
12 the dust particles once again from this point.
13 The operator would then transfer the trays onto
14 carts to be sent to a cardex* machine. In this
15 process the operator would load the pellets
16 into a deep pan to then have the pellets go
17 through a bulk dryer. In this process the
18 pellets would be held in what was known as a
19 bay. The bay would -- kept it at a certain
20 temperature in order to be sent to the rod line
21 assembly process.
22 I can remember several times the bays would get
23 jammed, and as an operator were once again told
24 to solve the problem, so the operator,
25 following instructions of management, would go

1 into the equipment, un-jam the bulk dryer, not
2 even realizing dangerously high levels of
3 alpha, beta and gamma radiation they had been
4 exposed to in order to keep production flowing.
5 Once the pellets went to the rod line they were
6 then placed into the rods in which they would
7 eventually go to an off-site reactor which was
8 used in the process of making electricity.
9 Also some of the operators were required to do
10 what was known as a core sample. In this
11 process the cans of pellet or pow-- powder
12 would be placed into a hood on a calibrated
13 scale in order to get approximately 25 grams of
14 powder or pellets. An operator had to use a
15 thieve (sic) to get a true homogenous sample
16 and the powder and pellets would be placed into
17 a plastic vial, securely closed. This
18 procedure would cause a high radiological
19 exposure, I'm sorry, and then the sample would
20 be sent off to our lab technicians for analysis
21 to find the true U content.

22 I had then worked in the recycle recovery
23 department. In this department I have been
24 exposed to an oxidation reduction and pyro
25 runs. In this process the pellets and material

1 would be changed from its original form using
2 different types of chemicals such as ammonium
3 hydroxide, caustic soda, potash and green salts
4 to cause a chemical change in the components,
5 causing the product to change its chemical form
6 to make uranium isotopes of U-235 and U-238.
7 In this particular department not only was I
8 being exposed chemically, but I discovered I
9 was being exposed to residual contamination
10 from the Mallinckrodt, which was -- which as 19
11 -- 97 percent uranium dioxide from the previous
12 years of ownership. We were also required to -
13 - to bathe, drink and wash our hands in water
14 that little did we know would be tainted with
15 technetium.

16 I have stated several ways I feel I have been
17 ex-- I have been exposed to radiation. Pellets
18 and dust were constantly lying on the floors,
19 tables and in hoods. Around filter banks we
20 were told to clean up the material several
21 times per shift. We used cotton liners and
22 latex gloves for personal protection. It was a
23 joke. The contamination materials would go
24 through the gloves into our skin. We also wore
25 white coveralls to protect our bodies from

1 exposure, but this thin cotton garment as
2 useless for any type of protection. We were
3 also required to wear lapel monitors, dosimetry
4 badges, which another ridiculous form of
5 protection. Although we were required to wear
6 a special breathing apparatus, 75 to 80 percent
7 of the time the batteries were dead due to the
8 improper protective gear. I know I was highly
9 exposed to the radiation emitted from the
10 pellets and the dust particles.
11 When my lapel monitor was working I would come
12 up with a high U count. This would happen
13 many, many times. I'm certain at these times I
14 was highly exposed. I have been exposed to
15 fumes and such a gray -- a thick gray cloud of
16 smoke while attempting to retrieve my full face
17 respirator from health physics. Please -- what
18 is wrong with this scenario. I have been -- I
19 have even suggested that it would be a good
20 idea to place the masks in our department so we
21 wouldn't have to walk through the fumes and
22 contamination to get the mask that is supposed
23 to keep from receiving radiation exposure.
24 From supervisor to upper management, no one
25 would listen.

1 One day two of our coworkers were changing out
2 a filter bank while their protective gear --
3 one of the employees was removing the filter
4 when they discovered an abnormally huge amount
5 of contaminated powder. This was considered a
6 criticality because there was over 35 kgs of
7 powder, which is an over-permissible exposure
8 limits. We were all highly exposed to the
9 radon molecules. I'm sure there are many more
10 instances in which we were all exposed.
11 I'm 25 -- I was 25, engaged to be married in
12 1995. I had been diagnosed with cervical
13 cancer. This was a very devastating -- to me.
14 I had thought I had a great job and a future,
15 to only have my ability to have children taken
16 away from me to have a complete hysterectomy.
17 To me, the nature of -- nature -- natural end
18 of childbearing years is -- in a woman is
19 menopause, not hysterectomy.
20 These cases I've cited are the ones I'm aware
21 of. I'm convinced that there are many more
22 that haven't come to light. There are many
23 former employees who are of childbearing years,
24 both men and women. To what extent with their
25 repercussions of working at the plant represent

1 itself in offspring to come. We wonder why no
2 one is even acknowledging the Hematite location
3 when we have just as many illnesses and deaths.
4 In all my research I have no -- found no
5 information that anyone is doing anything to
6 help the community and the employees who
7 desperately need the help in getting the time
8 frame changed in order to receive the
9 compensation for all we've been through. Thank
10 you.

11 **DR. ZIEMER:** Thank you. There's just a couple
12 more, folks. I know it's getting late, but
13 Judy Shanahan? Is Judy still here? Judy.

14 **MS. SHANAHAN:** Here's a picture of my family.
15 I'm 52 years old and I'm one of five children.
16 My mother, widowed for the last 46 years, is
17 88. A few weeks ago my husband told me about a
18 group that was meeting at the Columns. It was
19 the survivors of -- it was for the survivors of
20 cancer victims who had worked at Mallinckrodt
21 Chemical Company. Little did I know I was in
22 there for the shock of my life.

23 Denise was great. I was glad to have here
24 there with me. Until this time it was my
25 understanding that my father had died of

1 natural causes, if that's what you call it --
2 call cancer of the colon, stomach and
3 intestines. I had no reason or cause to
4 believe otherwise. It's what we were told.
5 We were ages five, six, eight, 11 and 12. Mom
6 was 43, Daddy was 46. For over a year before
7 he passed away he was home in bed sick. We
8 were seldom allowed into his room. We had to
9 be very quiet when he was sleeping. My
10 brothers, sister and I were regularly sent to
11 visit relatives and friends that year. The two
12 older boys, Ken and Jim, stayed at home to help
13 Mom.
14 My brothers remember Mom having to help Daddy
15 walk around the house at least once a day to
16 prevent bedsores. He was in a tremendous
17 amount of pain. Mom had to give him shots of
18 morphine. Due to the pain and the morphine he
19 changed from a gentle, loving, kind man into
20 someone he himself loathed. He was frantic,
21 knowing he was leaving his wife holding the
22 responsibility of raising five children. He
23 felt he was personally responsible for all that
24 had gone wrong, and that he was a failure in
25 his life, letting down those he loved.

1 During this time Mom enrolled in night classes
2 to renew her teaching certificate. She already
3 had a master's degree in education. On top of
4 taking care of a dying husband, five little
5 children, she had to plan for our future. My
6 mother did not want friends, his mom's parents,
7 hers, siblings or any other relatives to know
8 the seriousness of his illness. My mother
9 agreed. They did not want the intrusion of
10 others making suggestions on how they should
11 deal with it, or their pity. He wanted to live
12 out his life as best he could with his wife and
13 children. Any good hours of the day he wanted
14 to share with them.
15 He felt a terrible guilt about leaving Mom with
16 five dependent children. He believed that he
17 had failed those he loved. It was all his
18 fault that their lives were going to be
19 terribly difficult.
20 A week after Daddy died, Mom began her search
21 for a teaching job. Several schools turned her
22 down. Many told her a woman with five children
23 couldn't possibly hold down a job. The
24 superintendent of Ritner* school district
25 thought differently. He thought a woman who

1 could look for a job a week after burying her
2 husband was someone he could take a chance on.
3 She was hired, and taught English for over 25
4 years.

5 Knowing she couldn't just get up and leave five
6 children home alone to get off to school, she
7 hired someone to come in each morning. Her
8 name was Mrs. Crider. She came in, made us
9 breakfast, packed our lunches and got us out
10 the door. It was the responsibility of the
11 oldest sibling to get the younger ones to
12 school and back.

13 A friend of Mrs. Crider's asked why Mrs.
14 Shwiller* never got married. After all, she
15 was pretty, well-educated and very smart. Mrs.
16 Crider told her yes, she is very pretty and
17 intelligent, too. However, only a crazy man
18 would marry a woman with five children and Mrs.
19 Shwiller wasn't going to marry a crazy man.
20 My Grandpa Bud put all five children through
21 college during the depression. Four of his
22 children were girls. There's a story that
23 Grandpa's friends would often criticize him for
24 sending his girls to college. They said George
25 Buck, why are you -- what are you, crazy? Why

1 would you work to send all those girls to
2 college when they're just going to get married
3 and have kids. Unwaveringly and sincerely,
4 Grandpa would answer, "And I couldn't think of
5 a better reason to have an education."
6 Thank God for Grandpa's wisdom. Without Mom's
7 education we could have never stayed together
8 as a family.
9 Daddy was a cost accountant for Mallinckrodt.
10 He worked there from 1937 to 1958. Last week
11 while looking through my mom's records, I found
12 a manuscript he had prepared on the chemical
13 industry for publication to the National
14 Association of Cost Accounting. The
15 instructions for 'paring (sic) this document
16 included a guide stating, and I quote, In
17 deciding on the type of manuscript which will
18 have the greatest possibility as a publication
19 and earn the greatest credit in the Stevenson*
20 trophy competition, you should include actual
21 case studies of how we do it, articles dealing
22 with specific experiences relating to any phase
23 of manufacturing.
24 Upon reviewing my father's manuscript one could
25 see that performing his duties as a cost

1 accountant for Mallinckrodt he was clearly
2 required to frequently visit the physical plant
3 where the chemicals were being processed. Our
4 brother can -- my brother can remember Daddy
5 was sometimes so red and swollen -- no doubt
6 from radiation exposure -- that some days he
7 couldn't even get his pants on. His doctors
8 told him it was 'cause he had a skin
9 irritation. Put some lanolin on it. This was
10 long before he was actually diagnosed with
11 cancer.

12 You'll be happy to know, however, we -- I found
13 another letter stating we have been 'vised
14 (sic) by the national headquarters that your
15 manuscript entire develop a material control
16 program in the fine chemical industry has
17 earned 80 points. Congratulations, you are now
18 the second-highest in points in the St. Louis
19 chapter. I guess I should be proud.

20 My mother kept great files, many of which,
21 until the last couple of weeks, I had never
22 seen. Allow me to share a few clips from
23 letters I have been reading. In a resolution
24 passed by the board of directors from NECA,
25 Kenneth Shwiller served on the board for eight

1 years as director of the meeting and a general
2 member of the board for 14 years. He had
3 countless friends throughout the United States
4 because of his jovial personality, optimism and
5 the spirit of cooperation. As a formal
6 expression of our affection, love and esteem,
7 we shall miss the able counsel and admirable
8 personal qualities, but his memory shall abide.
9 Quote from a church newsletter written by the
10 choir director, Kenneth was the ideal choir
11 member, perfect tenor voice, fine choir
12 background, excellent attitude and an interest
13 that went beyond Thursdays and Sundays. We
14 will all remember his quiet wit and chuckles,
15 his great kindness towards everyone. I
16 particularly shall remember how he gazed
17 heavenward when I would ramble on and waste
18 time. My muddled mind fails to grasp the
19 reason for taking a man at the height of his
20 life from a wonderful family who needed him.
21 A letter from a minister to Ada and his
22 children -- her children. Death is like an
23 ocean. It is too big to see across. No matter
24 how we strain our eyes to look across the
25 waves, we cannot see land. Even the greatest

1 scientists with the finest telescope gazing out
2 across the water for days and days can't see
3 the opposite shore, and might shake his head
4 and say there isn't any. Daddy is gone but
5 Mother is still with you. You are fortunate
6 that God has given you such a brave,
7 courageous, loving mother to guide you and help
8 you through the days to come.

9 The newspaper article carrying his obituary, it
10 states, vice president of the National
11 Association of Cost Accountants died at his
12 home after one year's illness. Cost accounting
13 department for Mallinckrodt Chemical Company.
14 Survivors include wife Ada Buck and five
15 children.

16 Directly above his obituary was an article
17 titled Examination for Cancer Can Stop Worries.
18 It states waiting helps no one. Examination is
19 the only answer. If all exams are negative,
20 everyone is relieved of worry. If something is
21 discovered, early treatment will mean a cure.

22 I just wonder how my mom felt when she read
23 that article placed directly above his
24 obituary.

25 Mom kept all the letters and cards and flowers

1 she -- and flowers she received. She kept a
2 record of the thank you notes she had written.
3 They totaled 118 cards. Can you imagine
4 grieving for your husband, taking care of five
5 children, looking for employment and finding
6 time to write 118 cards? Unbelievable.
7 Mom never remarried. She told us she already
8 had the best, even though it was just for a
9 short time. She had five children to take care
10 of, and didn't have time after Daddy died, so
11 the -- oh. After Daddy died, so did the
12 demonstrative side of my mother. Until
13 recently none of us had ever heard her tell us
14 she loved us, nor did we see warm hugs.
15 However, we never questioned her love for us.
16 We always knew she did.
17 Daddy had two wishes when he died: Keep us all
18 together as a family, and secondly, put us all
19 through college -- tall orders for a widow with
20 five children, but you (unintelligible) mother.
21 Three of her children graduated from college.
22 Ken has his PhD. at Buena Vista University and
23 is the dean. Jim has his undergraduate and is
24 the owner and publisher of a magazine called
25 "50 or Better" in Kansas. Jane, like Mom, has

1 a master's in education and teaches students
2 with special needs. My brother Paul is a
3 mailman, and I went to Stanford* Brown Business
4 College and hold a position of executive
5 assistant to the president of Lynwood*. My
6 mother fulfilled a dying man's wishes.
7 After the meeting at the Columns I had to tell
8 my siblings what I had learned. They all live
9 in different states, so I had to do it by
10 phone. Those were the hardest calls I've ever
11 made. To learn and pass on that your father,
12 whom you believed had died naturally, was in
13 fact stolen from you is tragic. To have to
14 pass this sadness on to my siblings was
15 heartbreaking.

16 Denise asked me to represent my family today.
17 I asked my brothers and sisters to tell me what
18 they wanted to share. Here are their comments.
19 Many soldiers were killed in combat. Others
20 making a bomb. It's as though he was there.
21 Ken told me -- Dad talked to me a lot about
22 taking responsibility. He would get angry with
23 me for not being responsible enough. During
24 that time Mom told him they were in a
25 partnership. Ken was the oldest and she needed

1 him to share the responsibility of taking care
2 of the other children. When she had to go to
3 the grocery store, she told him he was in
4 charge. His reaction -- oh, my God, I'm in
5 charge?

6 Jane said hearing the news was like Dad had
7 been taken away all over again, only this time
8 he had been killed through negligence and
9 ignorance. She had accepted it, but now must
10 learn to accept it all over again, but in a
11 different way. Like me, none of us can even
12 think about it without hurting. This is not
13 something you want to relive.

14 Jim remembers how Mom -- how he could hear Mom
15 crying and -- not sobbing, almost wailing late
16 at night when she thought we were all sleeping.
17 He didn't have any idea of what to do to
18 comfort her. He also remembers going to talk
19 to Dad and seeing Mom inject him with morphine,
20 and then having to help walk him around the
21 house, screaming in pain.

22 My youngest brother, Paul, really doesn't
23 remember him much because, like me, he was too
24 young. He is devastated to learn that we
25 didn't have to lose him. We could have had a

1 father all these years. His wish is for all of
2 us to sit down and share what we know. That is
3 something we've pretty much always avoided
4 doing. It hurts.

5 I remember very little. I would be better off
6 telling you how it affected our lives. Daddy
7 put himself through business college. He made
8 a pretty good salary, and I'm sure our lives
9 would have been much different in so many ways.
10 Mom had to go to work full time to support us,
11 and we lived very frugally. Mom was good at
12 stretching the buck.

13 My uncle worked for Pet Milk Company and
14 supplied us with all the powdered milk you
15 could ever want, and more. You wouldn't
16 believe what you could make with powdered milk.
17 I could do a testimonial. I could tell you
18 what was under the Christmas tree every year of
19 my life growing up. My older brothers jovially
20 called every year the Fruit of the Loom
21 Christmas. We went to the Muni Opera on summer
22 nights and sat in the free seats. There were
23 programs at the art museum that were free and
24 Mom would take us there often. We were all
25 scouting -- in scouting, youth sports, but

1 church was the most important part of our
2 upbringing. All five of us have been
3 confirmed. We attended Sunday School and
4 church every Sunday except occasionally when my
5 brothers skipped out and went down to the donut
6 shop until the minister caught them.
7 Mom loved us all, treated us all as
8 individuals, but equally. She supported us and
9 did all she could to make a good life for us.
10 When I graduated from high school my boyfriend
11 asked me to marry him. As tradition would have
12 it, he had to ask the parent. He did. Mom
13 said no. She told us that Daddy's dying wish
14 was for us all to go to college. How could I
15 argue? I believe that was the one good thing
16 caused by Daddy's death. I didn't marry my
17 high school sweetheart.
18 I met the most wonderful man in the world, and
19 from what I know of my father, he mirrors him
20 in many ways. For that, I'll be eternally
21 grateful.
22 When I was 29, newly married, living in
23 Chicago, my husband and I decided to move back
24 to St. Louis. I knew my relationship with my
25 mom had to change if I returned, so I went and

1 saw a therapist. You see, at 29 I had never
2 really put my dad into his grave. I carried
3 him with me all the time. All I had to do was
4 think about him, and it would bring tears. The
5 therapist said let's do some role-playing. I'd
6 drive back down to St. Louis, and I can
7 remember one time sitting on the back porch
8 with Mom and asking her, what traits of Daddy's
9 do I have? Her response, none. I cried all
10 the way back to Chicago. I knew that her
11 response was not in any way intended to hurt
12 me. It was truly the only response she could
13 give. I left not angry, but terribly confused.
14 I visited my Aunt Patty and upon return to
15 Chicago we sat on the rocks looking out onto
16 Lake Michigan. She relayed to me the traits
17 that I possessed of my father's. My heart
18 filled with warmth and I was at peace. She
19 told me it was too difficult for my mom to
20 express these types of feelings, or bare her
21 soul in such a way. After this I was able to
22 bury my father, knowing I carry him with me,
23 and I began understanding my mother and
24 appreciating her in a whole new way. Today we
25 have a wonderful relationship.

1 We have been robbed. My father was taken from
2 us, not by natural causes, but by a chemical
3 that Mallinckrodt Chemical Company needed to
4 produce for our country. And by the way, Daddy
5 joined the Army after Pearl Harbor, but was
6 released as unfit for service almost
7 immediately because of something odd about his
8 back. So he joined the Navy and was six weeks
9 into basic training at Great Lakes when the
10 Navy doctors discovered the secret. Isn't it
11 ironic that in a way he did give his life for
12 his country, but instead of perhaps dying an
13 almost immediate death on a faraway battlefield
14 or at the high seas, he had to suffer over 400
15 pain-filled nights and days, knowing his health
16 was gone and he, too, would die soon.

17 Little of Daddy I really remember. Most of
18 what I know is through the eyes of others. He
19 was a kind man, a religious man who came home
20 from work and hugged his wife and children. He
21 made sure we said our prayers before dinner and
22 at bedtime. In his final year bedtime always
23 included a reminder of Christ's love for us.
24 He had a beautiful voice and loved to sing. He
25 was a fine athlete, winning many amateur tennis

1 tournaments. He was the catcher on the
2 Mallinckrodt softball team. He was a gentle
3 man who was loved by many. Having him die once
4 was awful. To know that he was stolen from us
5 after all these years is worse than I can ever
6 begin to convey.

7 Mother lived frugally and saved as best she
8 could. These days she suffers from dementia
9 and can no longer live alone in the little
10 house where we all grew up, the first and only
11 home Mom and Dad ever bought, the same place my
12 father died. Four weeks ago we moved her into
13 a retirement home and her mental health took a
14 dramatic downward spiral. We must now move her
15 to an assisted living facility. She exists on
16 Social Security and retirement funds from her
17 teaching years, and has only a small cash
18 reserve.

19 Our mother is a proud, independent woman. The
20 thought of possibly relying upon her children
21 to pay for her care is devastating for her.
22 The funds to which she is entitled would remove
23 this enormous financial burden from my mother.
24 She would be able to independently afford the
25 type and quality of care she needs and truly

1 deserves. It would give her the financial
2 stability she has never had due to her great
3 loss. I certainly hope those in control of
4 these funds will expedite the process for all
5 the survivors. It would be an inconceivable
6 tragedy for her to spend the rest of her life
7 worried about her finances, when her relief is
8 tied up in the red tape of government.
9 Death is truly like an ocean. It is a
10 bottomless sea of pain with waves of emotion.
11 Only one can imagine what is on the other side
12 of this vast emptiness. The other day Mom
13 asked me where is Kenneth? Why did he leave
14 us? Can anyone here please give me that
15 answer, because I'd like to know. Thank you.
16 **DR. ZIEMER:** Thank you, Judy. Very well-
17 stated. Frank Tyndale. Is Frank still here?
18 **MR. TYNDALE:** Howdy. My name's Jim Tyndale.
19 **DR. ZIEMER:** Jim? Okay, Frank --
20 **MR. TYNDALE:** Jim. Yeah, Franklin's my
21 official name. Jim's what everybody calls me
22 by.
23 **DR. ZIEMER:** Okay, gotcha. Thank you.
24 **MR. TYNDALE:** A little bit younger than most of
25 the folks you've seen. I hired in at the

1 Hematite plant in '92, worked there until 2001.
2 I'm going to kind of help out with a coup--
3 Mallinckrodt folks, hopefully. I remember one
4 of the first jobs I had when I was there, they
5 put me out in a pit about a quarter of the size
6 of this room and they had it divided up into
7 three-foot squares. And they said Jim, we want
8 you to take an inch to three inches off of each
9 square and we're going to test them and see
10 what kind of radiation or anything we get out
11 of them.

12 Well, they had me dig several of the squares to
13 about waist deep, then they come out and said
14 well, we're going to dig core samples, and they
15 went down 40 to 60 feet and still found stuff
16 down there. They said well, you're not going
17 to do it with a shovel, we'll just come back
18 and do it again some other time. It's still
19 like that out there now. It's never been
20 cleaned off so that's still there.

21 There's pipes that they took out of oxide and
22 before that was done with the submarine fuel,
23 the real high enrichment, that those pipes are
24 still buried out there. And I listened to a
25 gentleman speak about what they did with them,

1 put them in plastic bags with duct tape, and
2 that's exactly what they did with them, put
3 them out there. And it's still out there and
4 probably not going to last the whole lifetime,
5 you know, of everything. I'm sure it's
6 breaking down and that's what's in the water
7 out there now is why they've plumbed water all
8 the way to the -- the Hema-- Hematite
9 facility's kind of out of the way of everyplace
10 else. It's, you know, three to four, five
11 miles from the closest town and they've plumbed
12 water all the way out to there because of the
13 stuff in the water from the plant. So -- and
14 then -- that's just kind of a couple things
15 there about hopefully it'll help the
16 Mallinckrodt folks a little bit that they're --
17 you know, it's definitely there. You could go
18 out now with a backhoe and dig it up. They
19 haven't moved it. It's still there.
20 About my job, like I said, I had the burial
21 pits I dug up for them when I first started
22 there, and then they put me on a job called the
23 scanner in '93. And I don't think anything's
24 ever been done as far as fully -- with the
25 radiation, you know -- one of the jobs I had

1 doing that scanner was they had me change the
2 source every 18 to 24 months. It's a
3 californium source, we actually eraded (sic)
4 the rod, the fuel pellets, up to whatever
5 enrichment they were supposed to be. If it was
6 -- we did -- we -- fortunately we dealt with
7 much lower grade uranium than what the nuclear
8 was. Ours was -- our max limit was five
9 percent, and what we would do is actually with
10 the scanner was enrich that radium up to
11 whatever it was, and my job was to look at the
12 reports and see -- make sure that if we had 3.5
13 percent there was 3.5 percent and not five
14 percent or anything like that there. And like
15 I was saying 18 to 24 months, we'd change that
16 source in the back of it, and it was just --
17 this is a huge casket about nine -- eight, nine
18 feet tall, round, filled with cement and lead.
19 And whenever we'd do that about every 18 to 24
20 months, they would actually turn off the
21 nuclear alarm and everybody'd have to get out
22 of the building that I was in changing that.
23 There'd usually be two or three of us in there
24 changing this source. And they would say -- I
25 asked them one time how come -- well, the first

1 time. I said how come you got a guy out turn
2 off the -- well, we're afraid it's going to set
3 off the nuclear alarm. You know, I guess
4 you're young and stupid, you don't think about
5 things like that at that age, but -- but at the
6 age of 32 in '99 I was diagnosed with a real
7 rare type of sarcoma cancer. And I don't know
8 if you can prove anything from anyplace, but I
9 drank the water out there. I was in -- pretty
10 much an athlete. I didn't drink soda or
11 anything like that there, I drank straight
12 water 'cause I thought it was better for me,
13 and I drank the water that come out of the
14 plant out of the -- out there now, which
15 they've said for all the surrounding homes and
16 everything, don't drink it. You know, it's not
17 safe.

18 But just a couple of those things there I
19 wanted to bring up and say, you know, that it's
20 still -- we would like to extend the time up
21 because that uranium and everything is still in
22 the ground, even from back whenever they did
23 the high enrichment stuff and buried it in the
24 ground. It's still in the ground. It's
25 leeching into the drinking water and they're

1 plumbing in water. They've plumbed it in for
2 all the surrounding homes and everything out
3 there, you know. It's in the ground. Thank
4 you.

5 **DR. ZIEMER:** Thank you very much. Now I also
6 have Dan McKeel on the list. Dr. McKeel has
7 addressed the Board a couple of times in this
8 meeting, but Dan, you -- you have the mike
9 again. You are the last speaker, Dan.

10 **DR. MCKEEL:** This is going to be very brief and
11 it's about a completely different subject. I
12 want to put in the record just another
13 forgotten group of people. There were two
14 people here tonight from the Thompson-Sterns-
15 Roger group, and I want to tell you about a
16 third. And I'm looking forward to the day when
17 this Special Exposure Cohort status will be
18 sought for all the other people at
19 Mallinckrodt, including those folks at Weldon
20 Spring.

21 But I wanted to tell you about 460 construction
22 people, employees of Thompson-Sterns-Roger from
23 approximately January 1968 to June 1969 when
24 the Army Corps of Engineers from Kansas City
25 and the Aberdeen Proving Ground Army crew

1 repurposed the Weldon Spring chemical plant for
2 production of herbicide orange, popularly
3 called Agent Orange, for use in Viet Nam.
4 I obtained a report from the Aberdeen Army
5 group, which is in my packet that I gave to Dr.
6 Ziemer, and here's what the description of the
7 contamination was at Weldon Spring. Now this
8 is after the plant had shut down and it was
9 being cleaned up to produce Agent Orange.
10 So on page 39 of this report it says (reading)
11 Contamination discovered in and under the
12 concrete floor in the south end of building 103
13 was of such a magnitude that it was necessary
14 to excavate six inches of old floor and pour
15 new concrete, thus effectively masking the
16 contamination.
17 Page 40, (reading) At the completion of the
18 project, approximately two -- \$2,800,000 had
19 been expended for decontamination and
20 dismantling of buildings 101, 103 and 105 to
21 reduce the radiological contamination to
22 acceptable levels. Even with these extensive
23 efforts, none of the structures met the
24 criteria for release to the general public when
25 surveyed for alpha contamination in May '69.

1 Finally on page -- on that same page a little
2 farther down, (reading) In building 103, the
3 digestion and de-nitration plant, the
4 contamination of the floor could not be brought
5 down to acceptable limits, even after a partial
6 removing -- removal and a coating of tar was
7 applied to the entire area, and four to six
8 inches of reinforced, high-density concrete was
9 poured over the tar. The curbing around the
10 floor remain visibly contaminated. The floor
11 in the southwest corner of the north section
12 could not be contaminated -- decontaminated,
13 and a layer of tar was poured over the area as
14 a temporary measure.

15 The person who I'd like to represent to you
16 tonight is named Charles Reed. He is one of
17 those disenfranchised TSR construction workers
18 who worked in building 103 at Weldon Spring
19 during 1968 and dug up those brick floors. He
20 describes visible yellowcake, the uranium oxide
21 lying beneath the floor. He describes workers
22 picking up the radioactively-contaminated
23 bricks with their bare hands, and not being
24 told what the nature of yellowcake was, nor of
25 its dangers to his health. He was not given a

1 respirator to wear, despite an extreme
2 potential for dust exposure and inhalation of
3 alpha particles. His exposure was the same as
4 or greater than some of the Atomic Energy
5 Commission MCW uranium division workers before
6 1966 when uranium production was still ongoing.
7 Charles suffered severe skin and nerve damage
8 to both feet and ankles in the absence of any
9 co-morbidities such as diabetes or peripheral
10 vascular disease. True, these radiation-
11 induced illnesses were not EEOICPA-approved
12 cancers, but for him they were still were and
13 still remain extremely disabling ailments.
14 Charles and his fellow TSR workers deserve to
15 be compensated just as much as workers who
16 developed their berylliosis or the 22 cancers -
17 - any of those approved under the act under
18 Titles B, D and E.
19 By Charles' account, his chest film badge dose
20 could not possibly have been accurate. He,
21 like many MCW workers, recount having their
22 badges pulled, some days while they worked, so
23 that excess doses would not be recorded. Their
24 boots were not always cleaned or changed, nor
25 were stringent steps taken to ensure that their

1 contaminated clothing remained on site.

2 There are many wrongs that EEOICPA could have
3 partly addressed, but thus far has failed to do
4 so. The original intent of Congress has not
5 been adequately served. And I thank you again
6 for coming and hearing my remarks and staying
7 so late.

8 **DR. ZIEMER:** Thank you. This will conclude
9 then our public session for this evening. I do
10 remind you all that the Board will be
11 reconvening tomorrow at 8:00 o'clock. There --
12 included in tomorrow's sessions there are
13 public comment periods early afternoon and
14 later in the afternoon.

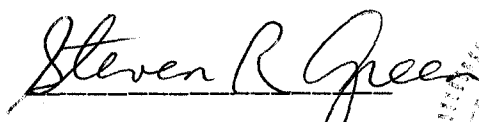
15 Thank you all for being here tonight. You've
16 been very patient. I know it's been a long
17 evening, but we thank you for being here. I
18 wish you all a good evening. (10:00 p.m.)
19 (Whereupon, an adjournment was taken to
20 Wednesday, February 9, 2005 at 8:00 a.m.)
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C E R T I F I C A T E O F C O U R T R E P O R T E R**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 February 8, 2005; 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 2nd day of March, 2005.

**STEVEN RAY GREEN, CC, 4****CERTIFIED MERIT COURT REPORTER****CERTIFICATE NUMBER: *,21G2_ ' ' 775**