1.0 Description

Revision 4 of the Technical Basis Document (TBD) for the Blockson Chemical Company (DCAS-TKBS-0002) was issued on 5/19/2014. The previous revision (revision 3) was issued on 12/20/2010. A Program Evaluation Report (DCAS-PER-036) was issued on 4/5/2012 to evaluate the effect of revision 3 on previously completed claims. This PER (DCAS-PER-060) will evaluate the effect of revision 4 of the TBD on previously completed claims.

2.0 Issue Evaluation

Revision 4 of the TBD changed the way internal dose was estimated for the stomach, small intestine, upper large intestine, lower large intestine, and colon. Both revision 3 and 4 provide inhalation and ingestion intakes for building 55. Revision 3 indicated that ingestion intakes produce a higher dose in the gastrointestinal tract. While this is true in many cases, some exposure situations result in the inhalation intakes producing higher doses in these organs. Therefore, revision 4 of the TBD was issued to change the instructions to use the intake that produces the higher dose.

3.0 Plan for Resolution or Corrective Action

In order to evaluate the effect of revision 4 of the TBD on previously completed claims, a search was conducted for all completed claims that had a probability of causation (POC) of less than 50% and an internal dose target organ of stomach, small intestine, upper large intestine, lower large intestine, or colon. This search identified 23 claims. Sixteen of
these claims had previously met the conditions for compensation under a Special Exposure Cohort (SEC) and did not have an additional non-SEC cancer. One of the remaining 7 claims had been completed using revision 4 of the TBD and was removed from further evaluation.

For the remaining 6 claims, the internal dose was calculated using the inhalation and ingestion intakes in revision 4 and the higher of the two selected. This dose was then compared to the internal dose in the current dose reconstruction. The comparison reviewed the total internal dose for all years dose was assigned as well as the highest year of internal dose. Revision 4 resulted in a higher internal dose for only one of the 6 claims. This evaluation was considered complete for the remaining 5 claims.

For the one claim resulting in a higher internal dose, a full dose estimate was completed using TBD revision 4, as well as all applicable approved dose reconstruction methods. The POC remained below 45% for this claim. Therefore no claims need to be returned to NIOSH. NIOSH will provide DOL with the list of all the claims evaluated under this PER.