1.0 Description

Dose reconstructions for the claims from Simonds Saw and Steel have been performed using ORAUT-TKBS-0032. In January 2011, a class of Simonds Saw employees were added to the SEC covering employment periods from 1/1/1948 through 12/31/1957. On 4/18/2011 revision 1 of the Simonds Saw TBD was issued incorporating the SEC. After resolving additional issues raised during a review of the TBD, revision 2 of the TBD was issued 10/21/2014.

2.0 Issue Evaluation

One of the changes made in revision 2 of the TBD was to assign the 95th percentile of the calculated uranium intake distribution. Previously, the full distribution was assigned. Therefore, the intakes for all employees would be higher when calculated using revision 2 when compared to other revisions.

Since the intakes for all employees increased, there is no need to itemize other increases in dose. All claims previously considered will have to be reevaluated. However, those that would already be compensated under the SEC provisions would no longer depend on a dose reconstruction for compensation, so those will be eliminated from this evaluation.

3.0 Plan for Resolution or Corrective Action

In order to evaluate the effect of issuing the revised TBD on all previously completed claims, a search was conducted for all completed claims with verified employment at
Simonds Saw and Steel that had a probability of causation (POC) of less than 50%. This search identified 134 claims. 54 of these claims had at least 250 days of employment during the SEC period. 28 of them had a cancer qualifying them for compensation under the SEC but 5 of the 28 also had another non-qualifying cancer. Therefore, 23 claims were eliminated from further evaluation under this PER. The 5 that also had a non-qualifying cancer were kept for further evaluation in case a dose reconstruction was necessary for medical benefits.

For the 111 remaining claims, 6 had already been completed using revision 2 of the TBD and were eliminated from further evaluation. A new dose estimate was performed for the remaining 105 claims using the TBD, as well as all other applicable approved dose reconstruction methods. The resulting probability of causation (POC) was below 45% for 73 claims and greater than 52% for 24 claims. Rework of the eight remaining claims resulted in a POC between 45% and 52%. For those claims, IREP was run 30 times at 10,000 iterations per NIOSH procedures. The resulting POC was greater than 50% for 3 of the 8 claims and below 50% for the remaining 5 claims.

NIOSH will provide the Department of Labor with the list of all claims evaluated under this PER. NIOSH will request the return of the 27 claims that would now have a probability of causation greater than 50%.