

UNITED STATES OF AMERICA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION

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NATIONAL INSTITUTE FOR OCCUPATIONAL
SAFETY AND HEALTH
ADVISORY BOARD ON RADIATION AND
WORKER HEALTH

+ + + + +

SUBCOMMITTEE ON PROCEDURES

+ + + + +

TUESDAY, MARCH 24, 2009

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The Subcommittee convened at 10:00 a.m., in the Zurich Room of the Cincinnati Airport Marriott Hotel, Hebron, Kentucky, Wanda I. Munn, Subcommittee Chair, presiding.

PRESENT:

WANDA I. MUNN, Chair*
MICHAEL H. GIBSON, Member
PAUL L. ZIEMER, Member

TED KATZ, Designated Federal Official

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IDENTIFIED PARTICIPANTS:

NANCY ADAMS, NIOSH Contractor
HANS BEHLING, SC&A*
ELIZABETH BRACKETT, ORAU*
MICHELLE FERGUSON, ORAU*
STUART HINNEFELD, NIOSH
EMILY HOWELL, HHS
PAT KRAPS, ORAU*
ROY LLOYD, HHS*
ARJUN MAKHIJANI, SC&A
STEVE MARSCHKE, SC&A
JOHN MAURO, SC&A*
ROBERT MORRIS, ORAU*
JAMES NETON, OCAS
STEVE OSTROW, SC&A*
MUTTY SHARFI, ORAU*
MATT SMITH, ORAU*
SCOTT SIEBERT, ORAU
ELYSE THOMAS, ORAU

* Participating via telephone

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1 P-R-O-C-E-E-D-I-N-G-S

2 10:03 a.m.

3 MR. KATZ: Okay, so let me get
4 started with roll call then.

5 This is the Subcommittee on
6 Procedures Review of the Advisory Board on
7 Radiation and Worker Health.

8 I'm going to begin with roll call,
9 starting with Board members in the room.

10 MEMBER ZIEMER: Paul Ziemer, Board
11 member.

12 MEMBER GIBSON: Mike Gibson, Board
13 member.

14 MR. KATZ: And on the line?

15 CHAIR MUNN: Wanda Munn, Procedures
16 Subcommittee Chair, Board member.

17 MR. KATZ: And by any chance, do we
18 have Mark Griffon this morning?

19 CHAIR MUNN: I believe that we are
20 not going to have either Mark or Bob Presley.
21 It's my understanding that both of them were
22 summoned late last week to --

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1 MR. KATZ: Right.

2 CHAIR MUNN: -- a meeting of the
3 Department of Energy relative to sensitive
4 materials that they could not get changed.

5 MR. KATZ: Right. Okay. I knew
6 Mark was traveling this morning. I didn't
7 know what time.

8 Okay, so that's it for Board
9 members.

10 Then the NIOSH ORAU team in the
11 room?

12 Jim? NIOSH ORAU teams in the room.

13 DR. NETON: Jim Neton, OCAS.

14 MR. HINNEFELD: Stu Hinnefeld, OCAS.

15 MR. SIEBERT: Scott Siebert, ORAU
16 team.

17 MS. THOMAS: Elyse Thomas, ORAU
18 team.

19 MR. KATZ: And NIOSH ORAU team on
20 the line?

21 MR. SMITH: This is Matt Smith with
22 ORAU team.

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1 MR. SHARFI: Mutty Sharfi, ORAU
2 team.

3 MR. KATZ: I'm sorry. So Matt
4 Smith, ORAU team, and who was second?

5 MR. SHARFI: Mutty Sharfi.

6 MR. KATZ: Mutty Sharfi.

7 MS. KRAPS: Pat Kraps is on the
8 line with ORAU.

9 MR. KATZ: And Pat Kraps. Thank
10 you.

11 MS. BRACKETT: Liz Brackett with
12 ORAU.

13 MR. KATZ: Liz Brackett, welcome.

14 MS. FERGUSON: Michelle Ferguson,
15 ORAU team.

16 MR. KATZ: Michelle Ferguson.

17 Okay, in the room then, SC&A?

18 MR. MARSCHKE: Steve Marschke,
19 SC&A.

20 MR. MAKHIJANI: Arjun Makhijani,
21 SC&A.

22 MR. KATZ: And on the line for

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1 SC&A?

2 DR. MAURO: John Mauro, SC&A.

3 DR. BEHLING: Hans Behling, SC&A.

4 DR. OSTROW: Steve Ostrow.

5 MR. KATZ: Welcome, everybody.

6 Federal employees and contractors
7 in the room?

8 MS. ADAMS: Nancy Adams, NIOSH
9 contractor.

10 MS. HOWELL: Emily Howell, HHS.

11 MR. KATZ: On the line, federal
12 employees or contractors?

13 MR. LLOYD: Roy Lloyd, HHS.

14 MR. KATZ: Okay, and then do we
15 have any members of the public on the line?

16 MEMBER ZIEMER: That want to
17 identify themselves.

18 MR. KATZ: That want to identify
19 themselves, absolutely.

20 (No response.)

21 MR. KATZ: Okay, none heard.

22 Then, just to remind everyone

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1 listening on the line, if you would just mute
2 your phones when you're not participating,
3 that would help. Thank you.

4 Wanda, it's all yours.

5 CHAIR MUNN: Thank you.

6 As all of you know -- and by the
7 way, I need to check to make sure -- did the
8 transcriptionist get our comments with respect
9 to the absence of Mark Griffon and Bob
10 Presley? That is a part of the official
11 record?

12 MR. KATZ: Yes.

13 CHAIR MUNN: Good. Thank you.

14 As all of you know, we've had quite
15 a difficult time scheduling this particular
16 meeting. My apologies for not being there
17 personally myself. I did see my surgeon
18 yesterday, and he said he thought I could
19 probably travel in the future, which will be
20 most helpful. But, for the time being, we're
21 going to try something that we haven't tried
22 before, which is working with this electronic

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1 database with part of us in one spot and part
2 of us somewhere else.

3 We were canceled from our original
4 meeting, which had been planned in January,
5 due to the rather severe weather conditions
6 that Cincinnati was suffering during that
7 week. This seemed to be the ideal date for us
8 to try to review this, but, as you can see, we
9 have had other conflicts arise in the interim.

10 So we are going to do the best we can with
11 this and hope we can get through it.

12 I need to make sure that all of the
13 people who are working with us have
14 essentially the same documents before them,
15 and if not, we need to make sure that you have
16 them.

17 The first thing I want to make sure
18 that you have is my very rough agenda for this
19 particular meeting, which was sent on the
20 22nd.

21 The second item that you should
22 have is the original agenda, which was sent

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1 out to you on January the 26th.

2 You should have information
3 relative to the CATI activity that Stu
4 Hinnefeld sent to you last week.

5 You should also have Mark Griffon's
6 comments on the CATI letter and form for
7 Energy employees themselves. He was unable to
8 get to the same type of material that goes to
9 survivor claimants.

10 And you should have -- now I guess
11 Nancy Adams will have passed out to you,
12 hopefully, the summary of our electronic
13 database standings at this particular moment.

14 Do we all have those things or is
15 anybody lacking something that needs to be
16 forwarded to them?

17 (No response.)

18 Good. Sounds like we're in great
19 shape.

20 Then the first thing I would like
21 to do before we get started with the CATI
22 interview activities, which I hope you will

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1 lead off with, Stu, is a quick review of the
2 database summary that Nancy has handed out to
3 you, so that we can get a feel to begin with
4 where we are.

5 Nancy?

6 MS. ADAMS: Thanks, Wanda.

7 The summary that was passed out
8 delineates the status of items for all of 2008
9 from the meetings and the reports that we did
10 produce for March 10th, May 12th, June 18th,
11 July 9th, and December 5th. Then I have just
12 added at the bottom the status for March 23rd.

13 In looking at this, there's an
14 apparent discrepancy in the total findings
15 from December 5th, which is 497, to today,
16 which is 486. I've got to go back through and
17 figure out what happened there, and I have not
18 yet had the opportunity to do that.

19 MR. MARSCHKE: May I ask you
20 something, Nancy?

21 MS. ADAMS: Sure, Steve.

22 MR. MARSCHKE: There's a glitch in

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1 the database program, and when you log onto
2 the database program -- it doesn't
3 automatically do the updates. If you add
4 issues through the database when you
5 immediately log on, it does not automatically
6 recognize those additional issues.

7 So a workaround is to click on the
8 sort/filter button; do not select anything to
9 sort or filter on. Just click the Okay when
10 that screen comes back up, and then you should
11 get over 500 issues. There should be about
12 530 issues or so that are currently in the
13 database.

14 When we bring up the database,
15 either later this morning or this afternoon, I
16 can show you how basically to go about that.
17 But I mentioned this in one of my emails back
18 in January, that there is this glitch that I
19 noticed that it's not automatically updating.

20 So that when you log on, it doesn't reflect
21 all the latest revisions. So there are 50 or
22 so issues which may not be representative,

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1 which is about the number that is missing
2 here. So that may be why it went down in this
3 instance. If you weren't aware of this and
4 you did not do a sort/filter on nothing, then
5 those issues would not be picked up.

6 CHAIR MUNN: So, essentially, it's
7 a time lag?

8 MR. MARSCHKE: Yes, it's a time
9 lag, but every time you go in you have to do
10 this sort/filter to update it. It's not like
11 a one-shot thing and then it's fixed. It's
12 every time you log onto the database you have
13 to do that.

14 MEMBER ZIEMER: Question: does
15 every person have to do that or, once it
16 updates for somebody --

17 MR. MARSCHKE: No, as far as I
18 know, every person --

19 MEMBER ZIEMER: The next person
20 that comes on, it's still back in the default?

21 MR. MARSCHKE: That's my belief,
22 yes. And the question becomes then: do we

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1 want to take an action item, does SC&A want to
2 take an action item to fix this or are we
3 basically -- right now, we've kind of frozen
4 the database in anticipation of going over to
5 the SQL database, which is going to be behind
6 the firewall on the NIOSH computers when we
7 get them.

8 So we haven't really been, you
9 know, taking charge and making fixes as they
10 come up. We're keeping a list of things which
11 are wrong, but not really fixing them.

12 So that's something that the
13 Subcommittee, if the Subcommittee feels that
14 this is a high enough visibility thing that we
15 should take care of it, we can take care of
16 it. If it's basically something, you know,
17 let's just postpone it and do this workaround
18 until we get the SQL version -- go ahead.

19 MEMBER ZIEMER: Well, at what point
20 does it get updated? I mean, does this sort
21 of happen indefinitely? Somebody's got to be
22 authorized to say, put the next 50 in, so that

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1 it's updated. At what point does that happen?

2 MR. MARSCHKE: The 50 are out there
3 someplace.

4 MEMBER ZIEMER: Yes, but --

5 MR. MARSCHKE: They just don't get
6 -- there's probably like a temporary file, and
7 that temporary file gets -- I've been noticing
8 this for a few months now, Paul.

9 MEMBER ZIEMER: Is this indefinite
10 or does --

11 MR. MARSCHKE: It's going to be
12 indefinite, is my understanding.

13 CHAIR MUNN: Now let's point out
14 that we discussed not this specific item, but
15 one of the reasons the database has been
16 frozen, awaiting for the new SQL process, we
17 discussed that at our last meeting in
18 December. Because that was not really and
19 truly clarified, this is probably the first
20 time that this specific issue has been so
21 clearly raised for us.

22 This was the type of issue that I

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1 had in mind when I identified our 4:30 p.m.
2 item on our agenda today relative to database
3 status. So we can either discuss this now or
4 we can postpone it until this evening when
5 people have had an opportunity to think about
6 -- not this evening -- this afternoon, when
7 people have had an opportunity to think a
8 little bit about what we really and truly do
9 need, and perhaps we can get a better
10 definitive response with respect to what we
11 can expect in terms of frozen data or very
12 rapid update.

13 MR. KATZ: Can I make a suggestion,
14 Wanda?

15 CHAIR MUNN: Yes, please.

16 MR. KATZ: Stu, we don't have any
17 definite date still for the SQL to come
18 online, and we also don't have a date for when
19 SC&A will all be equipped with computers and
20 be coming through the firewall either. That's
21 at least a month off.

22 I mean I would just suggest -- I

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1 mean I know some of the improvements; it makes
2 a lot of sense to put those off until we're on
3 SQL rather than doing double work. But this
4 is sort of a real glitch that confuses matters
5 and seems like it would make sense to just
6 correct it; I mean do whatever it takes to
7 sort this out, right?

8 CHAIR MUNN: Well, it certainly
9 seems obvious to me that that's what we need
10 to do. From my perspective, once the change
11 has been made by one of the authorized
12 entities who is able to do so, it seems to me
13 that that should automatically update the
14 database, so that anyone logging in 15 minutes
15 later would have the new data.

16 MR. KATZ: I just don't think we
17 want to live with this confusion for several
18 months possibly.

19 CHAIR MUNN: No, certainly I don't.

20 MR. MARSCHKE: So we'll take action
21 on it. When I get back, we'll get somebody
22 started on looking into the problem --

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1 MR. KATZ: That's great. That
2 sounds great.

3 MR. MARSCHKE: -- and seeing if we
4 can get it fixed.

5 DR. MAURO: Ted, this is John
6 Mauro.

7 In the past, when we have had
8 discussions like this regarding action items,
9 I do want to -- so am I hearing that we have
10 an action item here --

11 MR. KATZ: Yes.

12 DR. MAURO: -- and SC&A has the
13 green light to go ahead and make the next
14 repairs?

15 MR. KATZ: Absolutely.

16 DR. MAURO: Okay, thank you.

17 CHAIR MUNN: And, John, thank you
18 for making that statement. I would appreciate
19 it if each of us, as we accept action item
20 statements, do, in fact, make that statement,
21 that this is an action for whoever the action
22 is assigned to. This will make it much

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1 simpler for all of us to verify, just from
2 checking transcripts of prior meetings, what
3 our action is, if I have been too late to get
4 the information to you. It's an easier way
5 for us to ascertain that.

6 As I have not had any feedback from
7 the list of action items that I sent for the
8 meeting back in January, nevertheless, it is
9 easy to lose the given number of individuals
10 we have working on them. So thanks, John.

11 SC&A's action item is to pursue a
12 better method for current update of our
13 database.

14 Now I can mark that off of the
15 tail-end of our 4:30 item, unless something
16 else comes up in the interim.

17 Stu, do you want to get us started
18 with the CATI interview exchanges?

19 MR. HINNEFELD: Okay. I guess to
20 bring us up-to-date, the CATI form discussion
21 really started with the Subcommittee's, or
22 Working Group at the time, review of the

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1 CATI's procedure. That is where there were a
2 number of comments made relative to the CATI
3 form, in addition to the procedure.

4 Based on that discussion, we and
5 our contractor had proposed, well, here are
6 some changes that we think at least some
7 address some of the findings on the form. I
8 don't think all the findings on the form were
9 considered appropriate to put into the CATI,
10 and so they weren't all addressed. So a
11 modified or a markup of what had been used was
12 then prepared and shared with the
13 Subcommittee.

14 In the meantime, the OMB approval
15 of the CATI form was getting ready to expire.

16 It expired, I think, in December. So, in
17 order to have authority to continue to use it
18 to collect information from the public, we
19 submitted a request for renewal. What was
20 submitted was the form that has been used so
21 far. This was just a request to renew the
22 authority to use that form, just to make

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1 sure -- so we hadn't really arrived at, if we
2 would change anything, what would we change it
3 to? So that is the request that is out there.

4 There is a public comment period.
5 I have forgotten when that ends. I've asked
6 Dave Sundin in an email just now. So I think
7 maybe I'll know in a little while when that
8 comment period ends. But I have no knowledge
9 of whether we're getting any comments on it or
10 not. So that is kind of where the process is.

11 Now the Board, we shared with the
12 Subcommittee, as I said, a markup of what's
13 being used now. That is what I forwarded to
14 people earlier today. CP5 I believe is the
15 file that is for a surviving -- or I mean for
16 an Energy employee. Energy employee is the
17 claim, not for survivor.

18 So that is, I believe, the one Mark
19 commented on. Mark submitted some comments
20 that Wanda distributed last night, and I
21 believe that is the one he commented on.

22 Arjun, is that not the case?

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1 DR. MAKHIJANI: I am puzzled
2 because the numbering in the form that you
3 just sent is not the same as I find on Mark's
4 comments. He's got a lot more questions than
5 what you have. His numbering goes up to 19,
6 and it got like 8.2, 8.5, and I don't find any
7 of that in the form that you sent out.

8 CHAIR MUNN: I believe he was
9 working from both the letter and the form,
10 Arjun. Unless my email did not come through
11 well, what Stu sent this morning was the
12 letter itself.

13 MEMBER ZIEMER: Do you have the
14 employee form? Or the claimant's form -- or
15 the family form? There's two --

16 DR. MAKHIJANI: I'm looking at the
17 wrong one.

18 CHAIR MUNN: And it is for the
19 employee claimant. That's where Mark made his
20 comment.

21 MEMBER ZIEMER: The employee form,
22 Wanda, has decimal points, like 8.2, 8.3, 8.4,

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1 and so on, whereas the family form does not.
2 So I think maybe Arjun is looking at the other
3 form.

4 DR. MAKHIJANI: I am.

5 MEMBER ZIEMER: Yes, he is. Okay.

6 MR. KATZ: Okay, Wanda, we have
7 this sorted out. So it is the employee form.

8 CHAIR MUNN: That is correct. I am
9 working at a disadvantage because, among the
10 other catastrophes that we had to deal with,
11 that I had to deal with in setting up this
12 time and meeting, is the fact that my data,
13 all of my Board data for the past 15 years has
14 disappeared into electronic ether somewhere.
15 So I do not have many of the things that I
16 otherwise would be using.

17 But I think we can at least get
18 through perhaps some discussion about how we
19 need to approach the letter and form relative
20 to the employee specifically, rather than the
21 survivors, and see if we can follow through
22 with some of the Mark's comments.

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1 Arjun, have you read Mark's
2 comments, and are you or someone else from
3 SC&A prepared to follow through with that and
4 lead the discussion to some extent?

5 DR. MAKHIJANI: Yes, I have read
6 Mark's comments, you know, but I'm not able to
7 -- actually, I got two of the same forms from
8 Stu. So I'm still looking. I'm still looking
9 for the form.

10 CHAIR MUNN: Okay.

11 DR. MAKHIJANI: The document
12 numbers were different, but it was the same
13 document.

14 MEMBER ZIEMER: Yes, could I
15 comment on this? I noticed, in checking back
16 on the transmissions of those, one of the
17 transmissions identified two different forms,
18 and they were identical. So I had to go back
19 to an earlier transmission of the forms.

20 So I think the last time they were
21 presumably resent, but both the EE -- and what
22 was the other one?

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1 CHAIR MUNN: Survivor.

2 MEMBER ZIEMER: It was actually the
3 same document identified differently.

4 DR. MAKHIJANI: And I don't believe
5 I was on that earlier email.

6 MEMBER ZIEMER: But I have them
7 both on the stick if you want --

8 CHAIR MUNN: It would be very
9 helpful if you could resend those since mine,
10 as I have said, have disappeared somewhere
11 into electronic heaven.

12 MEMBER ZIEMER: And those are
13 identified on that stick as -- I think they
14 are .pdf documents, and they are the CATI
15 letter and Form EE, CATI letter, and Form SV,
16 which is the survivor. They are both .pdf
17 files, Arjun.

18 MR. KATZ: So, Wanda --

19 CHAIR MUNN: Yes?

20 MR. KATZ: -- can I make a
21 suggestion? With respect to Mark's comments,
22 I mean since they are not really SC&A's

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1 comments, they're Mark's --

2 CHAIR MUNN: Yes, they are.

3 MR. KATZ: -- it seems like one of
4 us here could read into the record both -- the
5 comments on their own, since they reference
6 the document, I'm not sure how intelligible
7 that will be, if we don't have --

8 CHAIR MUNN: If we don't have the
9 documents in front of us.

10 MR. KATZ: Not just the comment,
11 but the element in the document that is being
12 commented on, but we could --

13 CHAIR MUNN: It would be very
14 helpful if we had the form.

15 MR. KATZ: Well, we do have -

16 CHAIR MUNN: Is there anyone other
17 than myself and Arjun who does not have access
18 to the form?

19 DR. MAKHIJANI: These are also the
20 same form, survivor --

21 MR. KATZ: We still have a problem?

22 Is that what you're saying?

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1 MEMBER ZIEMER: Okay, then I put
2 the wrong ones on the stick. I had printed
3 out the right ones.

4 (Laughter.)

5 MR. KATZ: A comedy of errors.

6 MEMBER ZIEMER: Okay.

7 CHAIR MUNN: Can you help us out,
8 Stu?

9 MR. HINNEFELD: I'm trying to.

10 MR. KATZ: We're working on this.

11 CHAIR MUNN: Let's hold on just a
12 moment until we see if we can't make sure we
13 have all of the documents in front of us.
14 When I was speaking of documents that we
15 should have, I failed to mention the most
16 voluminous of them all, which was Steve
17 Marschke's SC&A commentary on our Set 3 that
18 he provided for us.

19 MR. KATZ: Can you say that more
20 clearly, Wanda? It's hard. You're sort of
21 fading out.

22 CHAIR MUNN: Well, I'll try to

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1 speak up a little bit. I haven't had my
2 Wheaties yet.

3 But I had said that I did not
4 mention that we should also have Steve
5 Marschke's comments, which have been
6 incorporated into the database, but there are
7 extensive responses from SC&A with respect to
8 the Set 3 material that we covered during our
9 last meeting.

10 MR. KATZ: So, Wanda, Paul is just
11 copying the document for Arjun. As soon as we
12 get through with that, I'll let you know.

13 CHAIR MUNN: And hopefully, for me
14 as well.

15 MR. KATZ: I think it's the same
16 file. Have you emailed that to Wanda?

17 MEMBER ZIEMER: No, I haven't. I
18 don't have my email open.

19 MR. KATZ: Okay.

20 MEMBER GIBSON: I can do it.

21 MR. KATZ: Okay, Mike Gibson is
22 going to email you, Wanda.

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1 CHAIR MUNN: Thank you, Mike.

2 MEMBER ZIEMER: While we're
3 waiting, could I ask whether or not we could
4 look at Stu's introduction, which is separate
5 from the two documents?

6 CHAIR MUNN: That's appropriate.

7 MEMBER ZIEMER: If that's all
8 right, I have a question on Stu's document.
9 Let me ask this first: Stu, is this currently
10 in use?

11 MR. HINNEFELD: Yes.

12 MEMBER ZIEMER: This introduction?

13 MR. HINNEFELD: Yes.

14 MEMBER ZIEMER: Is it used verbatim
15 pretty much?

16 MR. HINNEFELD: I believe so. Pat
17 Kraps is on the phone. She might be able to
18 help us out there.

19 MEMBER ZIEMER: Pat, is that used
20 verbatim?

21 MS. KRAPS: Are you referring to
22 the introduction from the software --

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1 MEMBER ZIEMER: Yes the one-page
2 here. It's called, "Introduction to CATI
3 Script".

4 MS. KRAPS: The script?

5 MR. HINNEFELD: Yes, it appears on
6 -- Pat, it's what you sent to us. It appears
7 on the screen when the CATI interviewer is
8 conducting the interview.

9 MS. KRAPS: Right. We do not read
10 that verbatim.

11 MR. HINNEFELD: Okay. You're not?

12 MS. KRAPS: No, we do not.

13 MEMBER ZIEMER: So you just use it
14 kind of as a guide to --

15 MS. KRAPS: Yes, that's exactly how
16 we use it, as a guide to introduce the series
17 of questions that we go through with the
18 claimant.

19 MEMBER ZIEMER: Okay. Well, in any
20 event, let me ask you then -- and maybe you
21 can interpret this for us -- in the end of the
22 second paragraph, where you point out that the

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1 interview is voluntary --

2 MS. KRAPS: Yes.

3 MEMBER ZIEMER: -- there is kind of
4 a threatening statement after that. It says
5 --

6 MS. KRAPS: I'll save your breath.
7 We do not read that verbatim.

8 MEMBER ZIEMER: Okay.

9 MS. KRAPS: We do let them know the
10 interview is voluntary, and that's about all
11 we do.

12 MEMBER ZIEMER: Okay.

13 MS. KRAPS: We also let them know
14 that, if they choose not to be interviewed,
15 that's okay; we're going to be able to move
16 forward with dose reconstruction.

17 MEMBER ZIEMER: Okay. So the
18 business about hindering the dose
19 reconstruction, and so on, is not really
20 mentioned or --

21 MS. KRAPS: No, we do not make that
22 statement during the introduction.

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1 MEMBER ZIEMER: Okay.

2 MS. KRAPS: That's within the
3 interview.

4 MEMBER ZIEMER: Because I was
5 concerned about the statement that says: this
6 would hinder, not that it could or might, but
7 that it will.

8 MS. KRAPS: Yes.

9 MEMBER ZIEMER: So that's out then?

10 CHAIR MUNN: Although the last two
11 sentences do have a tendency to be the exact
12 kind of thing that we hear the claimants as
13 having interpreted the information to be,
14 which gives them the feeling that if they
15 don't get it somehow, it's all wrong. There
16 are certainly gentler ways to say that,
17 because they're not going to get it wrong.
18 It's impossible to get it wrong.

19 This is an attempt to get as
20 complete a set of information as we possibly
21 can, and to threaten that if you don't get it
22 and get it voluntarily, that it may result in

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1 an inaccurate dose, I think that's the kind of
2 statement that has been giving so many people
3 heartburn.

4 MEMBER ZIEMER: And so this
5 document, though, is not part of the OMB
6 package, is that correct? Is it OMB or --

7 MR. HINNEFELD: That is correct; it
8 is not a part of it.

9 MEMBER ZIEMER: This is not part of
10 the OMB package. So we don't have to comment
11 on it officially for the public record as far
12 as commenting on the document that will be in
13 The Federal Register?

14 MR. HINNEFELD: Right. OMB is only
15 interested in -

16 MEMBER ZIEMER: Right.

17 MR. HINNEFELD: -- the parts where
18 we're asking for recommendations.

19 MEMBER ZIEMER: But, nonetheless,
20 if this is a guide that is given to
21 interviewers, I certainly would suggest that
22 the guide be changed. Particularly if you're

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1 not using that anyway, why have it in there?
2 It would make sense to me that you modify it
3 and show what you actually ask, and are there
4 things that you do state that aren't in here?

5 I mean, it sounds like this is --
6 yes, here it is, but we don't use it. Well,
7 are there things that you do say that aren't
8 in here, and are there other things that are
9 in here that you don't say, in some form or
10 another?

11 CHAIR MUNN: And in either case, I
12 would strongly suggest that those last two
13 sentences in the second paragraph be reworded,
14 so that the person who is conducting the
15 interview has very specific direction, though,
16 with respect to how to elicit that specific
17 information and make the non-voluntary
18 statement. These two really do sound
19 threatening.

20 MR. KATZ: Can I address a process
21 issue that Paul just raised, Dr. Ziemer, with
22 respect to OMB? Given what we have, which is,

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1 in effect, we're extending the use of the
2 existing CATI script, not the proposed revised
3 one that you all will be commenting on, I
4 think your recommendations to NIOSH, they will
5 not be to OMB because OMB doesn't even --
6 they'll be incorporated and then OMB will get
7 a package, I believe, from OCAS that reflects
8 both changes that you recommended and the
9 changes they have already decided to make as
10 one.

11 DR. MAKHIJANI: Let me suggest
12 something in regard to these last two
13 sentences. I mean I don't know if I'm out of
14 turn here.

15 After saying that the interview is
16 voluntary, we might disclose to them that, you
17 know, you sometimes use information in CATI,
18 but they normally complete the dose
19 reconstruction without that information, which
20 is as I understand how it proceeds normally.
21 Anyway, 50 percent of your claimants are
22 survivors, and you don't have very much

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1 information in those in CATI.

2 DR. NETON: There are certain
3 segments, though, where we verify the types of
4 cancers that the person has. We will discover
5 certain pieces of information. It may be in
6 there or supplemental information. So it does
7 provide some utility. I mean these are
8 not worthless interviews.

9 DR. MAKHIJANI: No. No, no, that's
10 not what I'm suggesting.

11 MR. HINNEFELD: What you said I
12 believe is correct, that regardless of what
13 they can tell us, we're confident we're going
14 to be able to complete the dose reconstruct,
15 whether they tell us anything --

16 DR. MAKHIJANI: What I might
17 suggest is that you inform them so far as the
18 technical number work part is concerned, you
19 can normally proceed, and that if they choose
20 not to be interviewed and you have some
21 problem, that you will get back in touch with
22 them and inform them that you need more

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1 information, or whatever. It might be more
2 clear to the other side, so they feel freer to
3 say yes or no.

4 MEMBER ZIEMER: I have a feeling
5 that the interviewers are already doing this
6 in a sense, and I think our only concern is
7 that the script suggests otherwise, and maybe
8 it needs to be brought into what practice
9 really is.

10 DR. NETON: I suspect this was
11 written at the very beginning of the
12 program --

13 MEMBER ZIEMER: Right.

14 DR. NETON: -- when we really
15 didn't have a feel for --

16 MEMBER ZIEMER: Right.

17 DR. NETON: -- how the interviews
18 were going to inform this.

19 MR. HINNEFELD: And it's similar to
20 the language on the original attachment to the
21 introduction for the packet, the original
22 language, which has since been modified.

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1 DR. MAKHIJANI: Yes, that's what I
2 was going to say. This seems like a leftover
3 from the letter that we used to send.

4 MEMBER ZIEMER: So that would be a
5 recommendation to NIOSH separately. If we
6 choose -- does this go to the Board also?
7 Wanda, I'm sort of asking you, I guess. This
8 could be a work group recommendation to the
9 Board that we recommend to NIOSH that the
10 script be amended to reflect more current
11 practice and remove threatening-sounding
12 language.

13 CHAIR MUNN: I think that's
14 appropriate. It seems also appropriate to me
15 that, since in my head it's very clear what
16 those two sentences ought to say, the
17 direction they ought to take, but I don't know
18 whether that's clear in other people's minds
19 or not.

20 I definitely have no objection to
21 taking a personal action item to make the two-
22 sentence suggested revision for the rest of

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1 the Subcommittee to take a look at. I would
2 be glad to do that if no one has any strong
3 feeling about that.

4 MEMBER ZIEMER: Might I make one
5 other comment? Maybe I'll ask Pat this
6 question because this may be a tempest in the
7 teapot.

8 But I assume that you would use
9 this script in training new interviewers in
10 terms of how they should approach the
11 interview process. No. 1, are we likely to
12 have new interviewers? I mean do you actually
13 have to use this in the future or is that a
14 pretty sort of stable group? Well, I know
15 you're all stable, but I mean -- a constant
16 group that you're not going to be bringing in
17 new people anyway, so we don't need this
18 anymore? Or what do you see as we go forward
19 on this? Is this document going to be used
20 even?

21 MS. KRAPS: Well, the document that
22 you all are referring to is actually the

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1 software program that was developed by NIOSH
2 back in 2001-2002.

3 MEMBER ZIEMER: Yes.

4 MS. KRAPS: And I believe it was
5 stated that this was built way back when. So
6 what you are referring to is actually a
7 software program.

8 MEMBER ZIEMER: Yes.

9 MS. KRAPS: And to answer your
10 question, no, we haven't brought any new
11 interviewers on for the last eight months, and
12 the one that we did bring in is a former DOE
13 worker and was able to be trained fairly
14 quickly as to what we do say and what we do
15 not say during an interview.

16 MEMBER ZIEMER: So it's conceivable
17 that you might have some use for the document
18 in the future in sort of training new people
19 as to what the ground rules are for the
20 interviews?

21 MS. KRAPS: Yes.

22 MEMBER ZIEMER: Okay, thank you.

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1 MS. KRAPS: But we've had the same
2 corps of interviewers since roughly 2002.

3 MEMBER ZIEMER: Okay, thank you.

4 DR. MAURO: Wanda, this is John
5 Mauro.

6 CHAIR MUNN: Yes, John.

7 DR. MAURO: I've got a question.
8 I'm looking over Mark's material, and in a
9 sense he has some comments related to the CATI
10 letter and to the form.

11 CHAIR MUNN: Yes.

12 DR. MAURO: And he has a couple of
13 comments on the letter. Now my concern is
14 that the introduction to CATI script that Stu
15 distributed, is that material that is like a
16 third type of thing?

17 I'm seeing that we have three
18 things. We have this introduction to CATI
19 script. Apparently, there's a letter that
20 goes with the CATI, and then there's the form
21 itself.

22 Mark had a comment on the letter.

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1 His comments on the letter that goes with the
2 form also apply to the introduction. In other
3 words, I'm trying to organize information in
4 my mind, and Mark had two comments that he
5 refers to as comments on the letter. Are we
6 going to capture that in this discussion?

7 MR. KATZ: Yes.

8 DR. MAURO: Okay. Does it apply to
9 this introduction to the CATI script or we
10 haven't gotten to that one yet, the letter?

11 MR. KATZ: Well, we haven't gotten
12 to Mark's comments or the letter.

13 DR. MAURO: Okay. I just wanted to
14 make sure. So there really are three
15 different elements?

16 MR. KATZ: Yes.

17 DR. MAURO: I understand. Thank
18 you.

19 CHAIR MUNN: Yes, there are. But,
20 to the best of my knowledge, Mark did not
21 comment on the introduction to the script.

22 DR. MAURO: That's correct. That's

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1 my understanding also.

2 CHAIR MUNN: I think he was working
3 specifically with the letter and with the
4 form. I didn't see any indication that he had
5 anything to say or whether he even had an
6 opportunity to see the introduction to the
7 CATI script, which is probably -- well, no, I
8 was on the verge of saying the less strictly
9 formulated of the three, but I'm not familiar
10 enough with the process to make that
11 statement. So I best not do that.

12 I think, however, looking at the
13 comments that Mark put together, he was
14 specifically directing his attention to the
15 form and the formal letter.

16 Is there any objection to my
17 submitting to the Subcommittee a suggestion
18 with respect to those last two sentences of
19 the CATI script? Or would we rather just
20 leave an open suggestion that they be revised?

21 MEMBER ZIEMER: Well, my
22 recommendation is that, if we make this as a

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1 recommendation to the Board, that we recommend
2 to NIOSH -- actually, we don't officially
3 advise NIOSH, but I think we can make a
4 recommendation to them that they consider
5 revising that or having their contractors
6 revise it to reflect current practice and
7 removal of threatening language, insofar as
8 that document might be used in the future to
9 train new interviewers.

10 CHAIR MUNN: All right. Then we'll
11 just simply take that as an action for us to
12 identify a request to NIOSH. I'll put that as
13 an action item for us to do.

14 Do you agree, Mike?

15 MEMBER GIBSON: Yes.

16 CHAIR MUNN: Very good. I'll list
17 that as a proposal for us to -- I'm assuming
18 that this particular discussion is an adequate
19 direction to NIOSH. Is that correct? Or
20 shall I submit an email?

21 MR. HINNEFELD: Well, I've written
22 it down.

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1 CHAIR MUNN: Okay.

2 MEMBER ZIEMER: Wanda, I think we
3 can formalize it in our Board action.

4 CHAIR MUNN: Very good.

5 MEMBER ZIEMER: In other words, you
6 can report to the Board that this is a
7 recommendation from the work group and the
8 Board can endorse it.

9 CHAIR MUNN: Will do.

10 Now can we address Mark's comment?

11 Ted, would you like to take this
12 opportunity to determine whether this needs to
13 be read into our transactions, since without
14 Mark being present, there's no other direct
15 method for us to insert this in our
16 transcript?

17 MR. KATZ: Right. I mean I've
18 provided these comments to the
19 transcriptionist. They could be appended, I
20 guess, to the transcript as an alternative,
21 but if you want it said aloud on the record as
22 part of kicking off your discussion, I can

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1 read them.

2 CHAIR MUNN: It might be easier for
3 it to be located if it were incorporated in
4 the basic transcript rather than added
5 elsewhere sort of thing.

6 MR. KATZ: Okay. So would you like
7 me to read these comments --?

8 CHAIR MUNN: I would appreciate it
9 if you would.

10 MR. KATZ: -- one by one, I guess?

11 CHAIR MUNN: Yes.

12 MR. KATZ: It probably would help
13 for me to read what he is referring to. Maybe
14 I will read the comment and then I will, in
15 this case, have to read what he is talking
16 about.

17 So his first comment is on the
18 letter, the CATI letter that's sent to the
19 person to be interviewed, the employee to be
20 interviewed, prior to them having an
21 interview.

22 It says, Mark says, in the first

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1 paragraph, "Why was the last sentence deleted?

2 It makes the process easier for NIOSH/ORAU if
3 you leave out this line, if we need additional
4 information that may only be available from
5 supervisors, co-workers, or others, the
6 interview is also an opportunity for you to
7 help us identify and locate these persons.
8 However, does it make it a better
9 questionnaire?"

10 Now let me read the last sentence
11 that is proposed for deletion. The sentence
12 reads, "If we need additional information that
13 may only be available from supervisors, co-
14 workers, or others, the interview is also an
15 opportunity for you to help us identify and
16 locate these persons."

17 So that is the line that has been
18 deleted from the letter as it stands now that
19 goes to employees.

20 CHAIR MUNN: Okay. Do we need to
21 address these one at a time?

22 MR. KATZ: I think so.

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1 MEMBER ZIEMER: This is Ziemer,
2 Wanda.

3 I think one of the issues that was
4 on this co-worker business, I think the
5 experience was that the co-workers are almost
6 never contacted. I think they said like five
7 times out of 20,000 or something they had
8 been.

9 I don't know about supervisors. My
10 guess is that they were deleting this because
11 they don't do it, and so it's a little
12 misleading.

13 MR. HINNEFELD: Well, there's
14 another part.

15 MEMBER ZIEMER: Yes.

16 MR. HINNEFELD: Part of what we're
17 trying to do is not be burdensome on the
18 interviewee. So, if they read this sentence,
19 first of all, "If we need additional
20 information that may only be available from
21 supervisors, co-workers," -- first of all, how
22 does the claimant know if we're going to need

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1 that information? I mean, when they get that,
2 they have no way of knowing if we who sent
3 them this letter are going to need that
4 information. So they, presumably, some of
5 them, will decide: I'd better try and
6 remember and find supervisors, co-workers, and
7 so on, so I can tell them at the time, so that
8 they can talk to them.

9 So it's part of the burden,
10 essentially, that is being placed on the
11 claimant --

12 MEMBER ZIEMER: In advance.

13 MR. HINNEFELD: -- in advance of
14 the interview, to have to worry about this
15 issue, and then add to that the fact that it's
16 rarely done. It's rarely necessary to hunt
17 down individuals that this person would know
18 with direct-hand knowledge because it's not
19 that common to be told about an event that is
20 sort of an "oh, my gosh" event in the dose
21 reconstruction that you can't find out about
22 without tracking down the specific people they

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1 tell you about.

2 So it is a combination of those two
3 things.

4 MR. KATZ: Yes, directly to the
5 point, I think, this has been deleted in the
6 proposed new script, Stu?

7 MR. HINNEFELD: Yes.

8 MR. KATZ: We would not routinely
9 ask them for these individuals. So there's no
10 reason to forewarn them of that because
11 they're not going to be asked within the
12 script for their co-workers, et cetera.

13 MR. HINNEFELD: Right. Now if they
14 recount something and they say, "And Joe Smith
15 was there and he was there," and we feel like
16 we need to talk to Joe Smith, if we can't
17 figure out some other -- if, first of all,
18 what he's telling us is really different than
19 what we thought would happen anyway, what
20 happens very often is people will describe
21 work conditions that we expect and that the
22 dose reconstruction accounts for. That is

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1 very often what happens.

2 So, consequently, since they are
3 describing things that you would expect them
4 to encounter in their work, and your dose
5 reconstruction technique accounts for that,
6 you don't really feel the need to learn
7 additional or have somebody confirm that it
8 happened, and things like that.

9 So there are a number of reasons
10 here why -- well, the main reason is we want
11 to decrease the expectation that we're going
12 to go out and talk to everybody, the people
13 they knew when they worked, decrease that
14 expectation, and, also, in that sense,
15 decrease the burden on them that some of them,
16 some fraction of them feel obliged to, gosh,
17 I'd better try to figure out, you know,
18 remember who these people were and see if I
19 could figure out how to find them.

20 Actually, we've heard stories,
21 accounts of people who went through a lot of
22 work to find co-workers and supervisors, only

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1 to tell us about them, and then we did nothing
2 about it because we understood the situation
3 it was describing okay from other sources.

4 DR. MAKHIJANI: I take Stu's
5 point well because I think when I interviewed,
6 started interviewing claimants, especially
7 survivor claimants early on, this was a very
8 big frustration that they took some time and
9 effort to find co-workers and then nothing was
10 done. They were never contacted. So it was
11 creating a lot of problems.

12 Now leaving aside the question of
13 whether NIOSH should be interviewing co-
14 workers in the case of survivors for the
15 moment, I think if you're not going to use
16 them, it doesn't make sense to tell them in
17 advance. But I do think it might still be --
18 the question of incidence and the incomplete
19 record of incidence in dose reconstruction is
20 kind of a technical point that is very
21 important.

22 They might be told in some way that

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1 -- and this is the same sentence which appears
2 in both letters, for the employee and for the
3 survivors, that they might be told that, if
4 you know of some particular incident that
5 you're especially concerned about that you
6 can't inform us, and some co-worker might be
7 helpful, but then you would interview that
8 person.

9 You might add, again, that normally
10 we are able to complete these without
11 information on co-workers because records are
12 normally complete or you're using maximizing
13 and efficiency methods, or whatever, which is
14 mostly the case. I mean, mostly, you are able
15 to complete these because either you've got a
16 minimum or a maximum, and you don't need the
17 co-worker information, as I understand.

18 MR. HINNEFELD: Rather than delete
19 the sentence entirely, you could rephrase it.

20 You could rephrase this, because it's written
21 there because the original form didn't
22 specifically ask who your co-workers were.

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1 That's why it was written.

2 DR. MAKHIJANI: Right.

3 MR. HINNEFELD: The revised form,
4 the proposed revised form, does not. But you
5 could put in a different sentence that would,
6 just first of all, make sure, you know,
7 reassure them that we don't want them to go to
8 a lot of work to find people. But if they can
9 readily identify people who observed things
10 that they feel is important for their dose
11 reconstruction, they will have the opportunity
12 to call us with this.

13 So the problem is, when you try to
14 really flesh this out, you're getting a longer
15 and longer and more and more complicated
16 letter. So I'm not going to attempt to write
17 anything here in this meeting, but, you know,
18 there could be a way to try to see, is there a
19 sentence we can write there that kind of
20 conveys that message that you can identify
21 these people to us? We don't want you to go
22 to any work to try to identify them for us.

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1 But, if there are some readily available ones
2 you want to tell us, we certainly will listen
3 to you.

4 I don't know that we would promise
5 that we would talk to them, though, because,
6 again, depending on what the person tells us,
7 we may be completely comfortable or they may
8 describe an event that we know all about;
9 we've had other accounts or we found records
10 of and we got the whole investigation report.

11 So we don't want to promise that
12 we'll call, but you could leave the avenue
13 open for them to provide names, if they're
14 readily available, without deleting this all
15 together, or you wouldn't even have to say
16 anything about it here and just account for it
17 in the interview itself.

18 I mean there are a lot of things
19 you could do besides just delete it.

20 MEMBER ZIEMER: I have an
21 additional comment. It relates to what you
22 said, Stu.

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1 It seems to me -- and I think I
2 made this comment several months ago or
3 something along this line -- I don't think
4 either of these cover letters conveys to the
5 claimants why they're being contacted for
6 information.

7 It says that NIOSH needs their help
8 to reconstruct the dose, which I guess I'm not
9 even sure that's a good statement. But it is
10 not at all clear that NIOSH is prepared in
11 general to reconstruct doses anyway. It's not
12 at all clear that you're in a sense looking
13 for any supplementary information that they
14 may wish to provide.

15 I believe it still has the tone
16 that there's a burden on them to provide
17 information without which the dose cannot be
18 reconstructed, if you understand what I'm
19 saying.

20 It's true it says it's all
21 voluntary. You don't have to have the
22 interview, but it seems to me the tone is

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1 still there that there's a much greater burden
2 on the claimant than we really believe there
3 is in terms of how we carry out dose
4 reconstruction and how we proceed.

5 If somehow it could be conveyed to
6 them that much of the information that is
7 needed will be available, and is already
8 available to NIOSH from existing records, and
9 that to the extent that the employee may wish
10 to supplement that or comment on that -- in
11 other words, if there could be a tone that
12 made it clear that NIOSH has a lot of
13 information, but recognizes that, as the
14 claimant, you may have additional information
15 that you may wish to make available to us.

16 I think the deleted part here could
17 be put in the form of a general statement that
18 we may wish to get back to you later if we
19 seek additional details, or something like
20 that. It doesn't have to be couched in terms
21 of supervisors or co-workers or anything of
22 that sort. It could simply be pointed out

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1 that, if we get into your dose reconstruction
2 and we have questions, we would like to be
3 able to come back and ask you if you have
4 additional details on some specific thing.

5 And I know that this letter I don't
6 think goes to OMB. So we're talking about,
7 again, I think, recommendations to NIOSH and
8 the ORAU team. Again, I'm thinking in terms
9 of the tone of the letter and what the
10 expectation of the claimant is when they get
11 this letter, what they feel their burden is.
12 Because they're going to go back and look at
13 the questions, and I know you're suggesting
14 deleting a lot of that, and that should help.

15 But I think the tone of the letter
16 needs to match that in some way. I don't have
17 specific wording, but it's kind of a feeling
18 that I have in terms of how it's presently
19 stated.

20 And I guess the other thing I would
21 add to that, it seems to me that it would make
22 sense not to have an identical letter for a

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1 family member, the same letter as the claimant
2 gets. We already know the family members,
3 almost across the board, know much less, and
4 the letter should recognize that and tell them
5 that we understand that they may know very
6 little about the claimant's details, but in
7 case they do, we are soliciting that
8 information.

9 And again, I don't have specific
10 wording, but that's kind of the tone of what I
11 feel. I'm concerned about, and, Mike, I think
12 you have similar concerns, about the families.

13 You've expressed this before, that they often
14 know very little about what the claimant did.

15 Why do they get the same letter as an
16 employee?

17 MEMBER GIBSON: Well, I agree it
18 should be two letters. I think one to the
19 Energy employee.

20 You know, I agree with part of your
21 comments, Paul, that it should kind of give
22 the feeling that, in general, the process can

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1 get along without this interview, but I like
2 part of Stu's comments, too, that somewhere in
3 there we want to conduct this interview
4 because you may have news about an incident or
5 something that our records don't show.

6 MEMBER ZIEMER: Yes, I agree with
7 that. Right. Right.

8 MEMBER GIBSON: It kind of pulls
9 it both ways.

10 MEMBER ZIEMER: Right.

11 CHAIR MUNN: I think Paul and Mike
12 have articulated pretty well the concerns that
13 we have expressed previously. Perhaps it
14 feels to me that we're a little bogged down in
15 terms of how to accomplish what we're talking
16 about here.

17 If there is something other than a
18 recommendation that we can make to NIOSH, then
19 perhaps we should try to identify what that
20 is. If not, then it seems it would be very
21 helpful from the Subcommittee's point of view
22 to be more specific with respect to what we

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1 expect from NIOSH.

2 What's the feeling there with
3 regard to how to proceed to make this happen?

4 MEMBER ZIEMER: Well, I'll be
5 willing to respond to that.

6 It seems to me that if there's a
7 general agreement -- and, yes, I'm looking for
8 feedback from NIOSH and ORAU, if we're off
9 base here, to set us on the right track.

10 I think we can certainly -- well, I
11 guess with the work group I want to be the
12 same way as we are with our Board contractor.

13 I don't think we should do the work of NIOSH
14 or ORAU. I think if we want to delineate
15 something about the tone of the letter, I
16 would like to put the burden back on them to
17 suggest some modifications.

18 I mean I can wordsmith and Mike can
19 wordsmith and Wanda can wordsmith and Mark
20 can, but I don't think we should be rewriting
21 the letter per se, is my view on it.

22 CHAIR MUNN: No, I agree. I agree.

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1 So if I identify as our action item that I
2 will circulate to the Subcommittee members my
3 suggestion of wording for a recommendation to
4 NIOSH, and with the expectation that at our
5 next meeting of the full Board we will provide
6 that recommendation to them with respect to,
7 one, differentiating clearly between the
8 employee letter and the family survivor letter
9 and, two, making very clear, making more clear
10 in the letter that dose reconstruction can
11 proceed without any further information, but
12 for their own benefit, in the event that there
13 may be significant information that they're
14 unaware of, these interviews will go forward.

15 If that's agreeable to the other
16 members of the Subcommittee, then I will try
17 to word that recommendation and get it around
18 to you.

19 MEMBER ZIEMER: Wanda, does that
20 include two different letters or how do you --

21 CHAIR MUNN: Yes. Yes. More
22 distinct the differentiation between the

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1 employee letter and the family member letter
2 and the survivor letter.

3 DR. MAKHIJANI: Should there be
4 something in there that actively said that we
5 have issues of special concern that we may not
6 know about, especially the employee letter?

7 CHAIR MUNN: I can hardly hear what
8 you're saying.

9 DR. MAKHIJANI: I was saying that,
10 especially in the employee letter, there might
11 be some mention in there of issues you are
12 especially concerned about or you feel records
13 might be inadequate, especially, Wanda, here.

14 Because this is a frequent
15 complaint in SECs, for instance, that people
16 feel records are inadequate and incidents
17 haven't been recorded.

18 Since you're proceeding with a
19 normal dose reconstruction without the routine
20 information provided, what radionuclides were
21 involved, what buildings people worked in, and
22 so on, it would seem that the special purpose

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1 of the CATI, if it is to be useful, is to
2 elicit that kind of information that may then
3 help the dose reconstructor.

4 I mean you may not need it, but --

5 DR. NETON: There is a section in
6 the CATI that does talk about, is there
7 anything else you would like to offer in the
8 interview?

9 CHAIR MUNN: Right, right.
10 Essentially, you need supplemental
11 information. Now I'm thinking required
12 information.

13 DR. NETON: Maybe something in a
14 warning to that effect or a cover letter to
15 suggest that they prepare, present that
16 information?

17 DR. MAKHIJANI: It could be more
18 specific. I mean, is there anything else?
19 Usually, you know, sometimes at the end of an
20 interview, your mind will blank and you'll
21 say, "There's nothing else. I've said it
22 all."

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1 The thing that I'm pointing out is
2 very often in SECs you see this concern here
3 pretty much across the board. Records are not
4 adequate. Incidents haven't been recorded.
5 You know, "I've worked with contaminated
6 equipment that was considered to be clean, and
7 it was sent back to the field." This kind of
8 thing that people feel is not in the records.
9 So I don't know whether you want to indicate
10 that in the letter or not.

11 MEMBER ZIEMER: I don't see why it
12 couldn't be indicated, and it is part of the
13 interview. In fact, I think, Mike, you
14 suggested this. This is one of the areas that
15 you do want to solicit information perhaps.
16 Do they know of something that they at least
17 wish to have in the record that might have
18 been overlooked?

19 DR. MAKHIJANI: Because I mean, to
20 say, "We really don't need your information,
21 but we're interviewing you," it's kind of, you
22 know, it seems like going to the other

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1 extreme, from saying, "We really need your
2 help in dose reconstruction" to saying, "We
3 really don't need your help, but we're
4 interviewing you."

5 MEMBER ZIEMER: I hope I didn't
6 convey that we tell them we don't need their
7 help.

8 CHAIR MUNN: No, I don't think you
9 can say that.

10 MEMBER ZIEMER: I was talking more,
11 there's a feeling that the burden is on them
12 to provide the information for it to be done.

13 I would like to see a letter that they didn't
14 feel like the burden is on them to get the
15 information.

16 DR. MAKHIJANI: No, no, I subscribe
17 to your sentiment.

18 MEMBER ZIEMER: Right, right.

19 CHAIR MUNN: Back to the issue, how
20 to proceed, is there any objection to my
21 writing the wording of a proposed
22 recommendation to NIOSH for full Board

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1 approval and circulating it to the
2 Subcommittee for agreement?

3 MEMBER ZIEMER: I'm good with that.

4 MEMBER GIBSON: Yes, sounds good
5 to me.

6 CHAIR MUNN: Very good, I'll take
7 that action. I will get it to you in
8 reasonable fashion here.

9 MR. KATZ: Wanda, just a process
10 issue: Paul and I were discussing before the
11 meeting opened, we have a teleconference
12 meeting of the full Board --

13 CHAIR MUNN: Yes.

14 MR. KATZ: -- a week from today, I
15 believe.

16 CHAIR MUNN: Yes.

17 MR. KATZ: So it depends really on
18 how this day proceeds with respect to the CATI
19 discussion, but you could possibly be looking
20 at being able to make recommendations to the
21 full Board a week from today, just to help you
22 with the timing question. If you don't get

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1 it, if you can't get that much done, then
2 that's not an issue, that date.

3 CHAIR MUNN: I would like it if we
4 could. I think a great deal of it depends
5 upon the current schedules of the Subcommittee
6 members, and from what I can identify right
7 now, that schedule is looking pretty bad. But
8 I will try to get this information out as
9 early as possible with an idealized goal of
10 attempting -- there's an item on the agenda on
11 the 31st. I'm not at all sure that it is
12 possible, but I will give it a try.

13 Now that was --

14 MR. KATZ: So that was item one
15 from Mark.

16 CHAIR MUNN: That was one issue.
17 Now issue No. 2?

18 MR. KATZ: Yes. So issue No. 2
19 from Mark also references this same letter
20 that we've been discussing to the employee.
21 He says, "On page 2, second paragraph, the
22 text reads, quote, this interview provides you

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1 with the opportunity to inform NIOSH of any
2 additional information regarding your work
3 history that might not be contained in the
4 exposure monitoring and information we receive
5 from DOE or AWE, close quote."

6 And his comment is, "Nothing wrong
7 with the sentence. However, I'm not sure
8 where this other information is brought out
9 during the interview process and captured."

10 MR. HINNEFELD: Well, I think from
11 our standpoint, there are two places. One is
12 in the incident. You know, we ask them to
13 describe the incidents they were involved in
14 because oftentimes people will feel like
15 something worthwhile is an incident to them,
16 and they would want to report that. Then, at
17 the end, when we ask for additional things you
18 want to tell us about, "Anything else you want
19 to say?"

20 And we do, in fact, get a number of
21 people who provide a number of comments at
22 that part of the interview. So I would say

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1 that's where it's done, if that is what Mark
2 is suggesting here. That would be what we
3 would say.

4 DR. NETON: In fact, occasionally,
5 we find people that bring to light work
6 histories that aren't even documented by
7 either the DOE or the DOL. I mean they will
8 say, "Well, I worked two years before that,"
9 or something to that effect, in an interview.

10 That will be added to the interview and
11 captured.

12 MR. HINNEFELD: Well, yes, it would
13 have to be verified.

14 DR. NETON: It has to be verified.

15 MR. HINNEFELD: Yes, we don't just
16 add it.

17 DR. NETON: No.

18 MR. HINNEFELD: It has to be
19 verified by the Department of Labor.

20 DR. NETON: Right.

21 CHAIR MUNN: My personal reaction
22 to Mark's second comment was that my

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1 perspective of what existed in the CATI
2 indicated that his concern was already
3 covered, but that's open for discussion.

4 Does anyone have any strong
5 feelings that the existing process and the
6 existing form does not call for that
7 additional information adequately? It seems
8 like it does to me.

9 DR. MAKHIJANI: This goes to some
10 of Mark's comments on 19 and mine and,
11 actually, relates to what we just talked
12 about.

13 In the question on incidents, you
14 might add something like: "Do you know of
15 incidents that were not recorded or that we
16 might find more information about and
17 documentation that might not be in your file?"

18 To give you a specific example, in
19 some site -- I can't remember; I don't
20 remember the name of the site, but there was a
21 particular requirement, I think, or something
22 like that. I don't remember the site. It

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1 said that their records individually did not
2 contain incident information. It was part of
3 the site information that didn't show up in
4 the employee record.

5 So, in Question 19, we don't
6 solicit a specific like that. I think this
7 would probably be most applicable to records,
8 things that happen to them, but they feel the
9 records don't exist. And incidents would
10 probably be the most important category.

11 MEMBER ZIEMER: Well, I notice in
12 20, under "other relevant information," they
13 say, "Have we missed asking you about any
14 conditions, situations, or practices that
15 occurred during this job which you think might
16 be useful to us in estimating your dose? If
17 yes, describe in detail what occurred, when,
18 where, how long, and who was involved."

19 That seems to me like a means of
20 capturing other information. Maybe it's not
21 complete, but it sounds like it is pretty
22 open. That's in addition to the incidents

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1 section.

2 DR. MAKHIJANI: Yes. I mean it is
3 open. I think the open parts are fine. You
4 know, people do get the opportunity to
5 describe what's on their mind that might have
6 been missed in the specific question.

7 I was referring to the question of
8 records, and did they feel that what they
9 experienced was captured in the records?

10 MEMBER ZIEMER: Well, and then it
11 says, "Are you aware of any records related to
12 this information that may help us estimate
13 dose?"

14 DR. MAKHIJANI: Yes.

15 MEMBER ZIEMER: I mean the
16 questions I think are there.

17 DR. MAKHIJANI: Maybe it's
18 adequate. I don't know.

19 CHAIR MUNN: In direct response to
20 Mark's concern, I think that several areas
21 have been pointed out here that would address
22 his concern.

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1 My only question here is, how do we
2 relay the information we've discussed here
3 briefly and succinctly to Mark in response to
4 that specific question?

5 NIOSH, can you very quickly respond
6 to that by electronic means to this
7 Subcommittee, just as a cover and for the
8 record, to respond to Mark's question?

9 MR. HINNEFELD: You want us to
10 provide a response to No. 2 about where we
11 believe that --

12 CHAIR MUNN: Yes. Yes.

13 MR. HINNEFELD: -- is called for in
14 the interview? Yes, Mark may have -- you
15 know; Mark is pretty thoughtful about this.
16 He may have a slant on this that didn't really
17 come across as comments. So I think that's
18 probably a good idea, to just provide that to
19 him and then let him explain further.

20 CHAIR MUNN: Based on the comments
21 that we've just made here that have pointed
22 out responses to that, I think we can say we

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1 are going to respond to Mark's concern, Item
2 No. 2, and move on to the next comments, with
3 respect to the form.

4 MR. KATZ: Okay. So now comments
5 on the form, and this is the employee's
6 script, interview script.

7 MEMBER ZIEMER: I'm sorry, I have a
8 question. Before we get to the script, and on
9 the page 2 item, I just want to ask, do the
10 recipients already know the acronyms? Do they
11 know what an A-W-E is? Many of these people
12 didn't work for the Department of Energy.
13 They worked for a contractor of the Atomic
14 Energy Commission.

15 CHAIR MUNN: Well, don't the basic
16 rules of grammar apply still to all of the
17 communications that go out from any
18 governmental agency? Aren't all acronyms
19 first spelled out before they are used
20 subsequently in any material? Or has that
21 rule gone by the wayside with electronic text?

22 MR. HINNEFELD: I believe, Wanda,

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1 that is normally what we try to do, is we
2 write it out the first time and use the
3 acronym following, and then, after that, we
4 put the acronym.

5 CHAIR MUNN: Right.

6 MEMBER ZIEMER: No, but even if you
7 say what it is, do they know what an Atomic
8 Weapons Employer is?

9 MR. HINNEFELD: I don't remember.
10 Jim, do you remember the application form? I
11 mean that they submit to Labor.

12 DR. NETON: I don't recall. I
13 suspect they do, but I can't think of where
14 they would become aware of that in the
15 process, off the top of my head. It's worth
16 checking into.

17 MEMBER ZIEMER: I mean there's many
18 of these individuals that will say, "Well, I
19 never worked for the Department of Energy. I
20 worked for, you know, Union Carbide, and they
21 were a contractor of the Atomic Energy
22 Commission."

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1 DR. NETON: Somehow, applying to
2 the program now, I suspect that they are
3 asked, what kind of weapons employer they
4 might have worked for. I'm not sure. We need
5 to --

6 MR. HINNEFELD: I think there's a
7 lot that the claimant goes through before we
8 ever see them.

9 MEMBER ZIEMER: Okay.

10 MR. HINNEFELD: I don't really
11 know, sitting here.

12 MEMBER ZIEMER: They would get that
13 from the Department of Labor?

14 MR. HINNEFELD: There are these
15 series of EE forms that are the application
16 forms. There's one if it's a living Energy
17 employee, and there's one for survivors, and
18 there are other forms.

19 MEMBER ZIEMER: That explains it?

20 MR. HINNEFELD: I don't know. I
21 don't know. All I'm saying is that there is a
22 lot of opportunity early in the process,

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1 before the case ever comes to us, for them to
2 understand why it is that they're in the
3 program.

4 MEMBER ZIEMER: Okay. So they
5 probably -- we haven't had a problem with
6 people saying, like when we say, "Were you an
7 A-W-E employee," they don't say, "Well, what
8 is that?"

9 MR. HINNEFELD: I don't know. I
10 haven't heard of a lot of problem with that.
11 I don't know if Pat has anything to offer or
12 not.

13 MEMBER ZIEMER: Pat, are you still
14 on the line?

15 MR. HINNEFELD: Okay, Pat is not on
16 the line.

17 MEMBER ZIEMER: Who else on the
18 ORAU team works with Pat? Do we know --?

19 MR. HINNEFELD: Well, nobody else
20 who is on the phone, right?

21 CHAIR MUNN: Can't we just leave an
22 action item that NIOSH will verify for us how

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1 the claimant is informed of the exact meaning
2 of --

3 MEMBER ZIEMER: I have a feeling
4 it's probably not an issue if it's not
5 written.

6 MR. HINNEFELD: I mean they get a
7 glossary from us with their receipt packet. I
8 would think the Atomic Weapon Employer is in
9 that glossary. So, I mean, this should not be
10 the first time they've seen the term, I don't
11 think.

12 MEMBER ZIEMER: Okay. Does that
13 come with this packet?

14 MR. HINNEFELD: No, that goes
15 earlier.

16 MEMBER ZIEMER: Earlier? Okay.

17 MR. HINNEFELD: The acknowledgment
18 packet is when we first get a claim --

19 MEMBER ZIEMER: Okay. I got you.
20 All right.

21 MR. HINNEFELD: -- we send an
22 acknowledgment packet.

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1 MEMBER ZIEMER: Okay.

2 CHAIR MUNN: Are we satisfied on
3 that point?

4 MEMBER ZIEMER: I think I'm fine.
5 I don't want to make extra work here. I just
6 was concerned as to what level of sort of
7 knowledge people had about these acronyms when
8 they get this thing kind of at the front end.
9 But they, apparently, have had -- well,
10 they've filled out all the forms at this
11 point. So they have to have had --

12 MR. HINNEFELD: Well, I think we've
13 never had any trouble with anybody not really
14 understanding why they're in it.

15 MEMBER ZIEMER: Yes, yes.

16 MR. HINNEFELD: I mean they know
17 they worked for Bethlehem Steel, and that's
18 why they're in, or something.

19 MEMBER ZIEMER: Got you. Okay, I'm
20 all right.

21 CHAIR MUNN: Good.

22 MR. KATZ: Would you like me to

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1 proceed?

2 CHAIR MUNN: Again, before we go on
3 to the form, thanks to Mike for the email.
4 Unfortunately, Mike, your email came as a
5 winmail.dat file which, for some reason, my
6 system does not want to open. So whatever the
7 format was that you sent that file, it's not
8 helping me out. I still don't have the form.

9 MR. KATZ: So that's the script?
10 Mike sent you the script.

11 MEMBER ZIEMER: Is that a .pdf
12 file?

13 CHAIR MUNN: If it were a .pdf
14 file, I would not have a problem.

15 DR. NETON: You might be able to
16 open it with Acrobat Reader.

17 CHAIR MUNN: My system doesn't want
18 to acknowledge it. I don't know whether it's
19 Vista or what, but --

20 MR. KATZ: Jim was suggesting you
21 might want to try Acrobat Reader since it was
22 a .pdf file.

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1 CHAIR MUNN: Well, I have Acrobat
2 Reader and I tried --

3 MR. KATZ: Okay.

4 CHAIR MUNN: -- changing the suffix
5 to .pdf, and it didn't help.

6 MR. KATZ: Okay. Well, we'll have
7 someone else send you, in case somehow --

8 MR. HINNEFELD: We're talking about
9 the form, is that we're talking about?

10 MR. KATZ: Yes.

11 CHAIR MUNN: Yes, I would like the
12 form.

13 MR. KATZ: The scripts.

14 CHAIR MUNN: Yes, which were lost
15 from my other files when I destroyed whatever
16 I did.

17 MR. HINNEFELD: Okay. I just
18 forwarded an email to you that I think has the
19 version we're working on.

20 CHAIR MUNN: Thank you, Stu. I
21 appreciate it.

22 Now we can go back to Ted.

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1 Comments on the form?

2 MR. KATZ: Okay. So Mark's first
3 comment -- again, this is the employee's
4 script, for the Energy employee -- and his
5 first comment, and I guess Paul will follow
6 along with the form itself; I don't have that
7 -- is: "In several places, including Question
8 7, you ask the claimant to list, quote, time
9 period worked or time period."

10 He's just suggesting that that
11 include in parenthetical, e.g., He says,
12 "e.g., 1960 to 1965". But, in other words, a
13 clarification that you're talking about what
14 years.

15 MEMBER ZIEMER: Like don't write
16 down five months --

17 MR. KATZ: Right. Exactly.
18 Exactly. He is meaning be specific about
19 dates, in effect.

20 CHAIR MUNN: Then --

21 MR. KATZ: That seems just pretty,
22 the comments, pretty straightforward. Does

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1 the Board --

2 CHAIR MUNN: Yes, it does.
3 However, would it not be good just to change
4 the year, from time period to the years
5 worked?

6 MEMBER ZIEMER: Well, you don't
7 want them to say 10 years either. Dates or if
8 you put --

9 CHAIR MUNN: Yes. Date of the time
10 period worked.

11 MEMBER ZIEMER: "yyyy to yyyy" or
12 something.

13 CHAIR MUNN: Does that create a
14 change that gives anybody heartburn?

15 MEMBER ZIEMER: No. That's what's
16 intended, I think.

17 MR. KATZ: I mean keep in mind, I
18 think, that this is an interview with a live
19 person on the line. So if there were any
20 confusion, I'm sure the interviewer would
21 clarify that they're looking for dates.

22 CHAIR MUNN: You would think so.

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1 MR. KATZ: You probably don't need
2 to edit this if this were a standalone written
3 document that they were going to respond to
4 through the mail, the questionnaire.

5 CHAIR MUNN: Does anyone feel that
6 we need to take any action on this, since, as
7 Ted points out, this is really and truly a
8 question that is asked by an interviewer who
9 is going to be very specific about needing
10 years?

11 MEMBER ZIEMER: I think it's fine.
12 I wonder if we might go back, though, and go
13 through these items one by one and maybe bring
14 in Mark's comments when we get to the
15 particular item?

16 MR. KATZ: Yes, we could do that.

17 MEMBER GIBSON: I had some comments
18 on one and two.

19 MEMBER ZIEMER: I did, too.

20 MR. KATZ: Why don't we do that
21 then? That will be the last for now, and when
22 you all come in when we get to the items with

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1 Mark's --

2 MEMBER ZIEMER: Is that okay,
3 Wanda?

4 CHAIR MUNN: That's fine with me;
5 if that's the way you want to do it, if you
6 think that's more effective.

7 MEMBER ZIEMER: Well, I don't know
8 if it's more effective.

9 CHAIR MUNN: Well, my concern here
10 is the only comments that I've had have been
11 from Mark. Unless other members of the
12 Subcommittee have formulated some concerns of
13 their own that they wish to bring forward,
14 then there doesn't seem to be any reason for
15 us to go through the form item by item again,
16 is there?

17 MEMBER ZIEMER: Well, in fact, I
18 have some comments.

19 CHAIR MUNN: That's good.

20 MEMBER ZIEMER: And Mike does, too,
21 I guess.

22 MEMBER GIBSON: Right.

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1 CHAIR MUNN: All right.

2 MEMBER ZIEMER: So I guess we do
3 have some --

4 CHAIR MUNN: Then is it your
5 preference that, rather than follow through on
6 Mark's issues, that we begin an item-by-item
7 review of the form itself? Would that serve
8 our purpose better?

9 MEMBER ZIEMER: We can do it
10 whatever way you want, Wanda. It's your call.

11 CHAIR MUNN: Well, if the two of
12 you there also have comments about one or more
13 of the items that we are going to be looking
14 at on the form, then it would appear
15 reasonable that we start marching through the
16 form beginning from item one, if we all have
17 the form in front of us.

18 MEMBER ZIEMER: Okay.

19 CHAIR MUNN: Shall we do that?

20 MEMBER ZIEMER: I'm good with that.

21 MR. KATZ: Yes.

22 CHAIR MUNN: I'm going to have to

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1 wait until the form gets to me. It hasn't
2 yet.

3 MR. KATZ: Wanda, until that
4 happens, we can just, where there's a comment,
5 they can read the item.

6 CHAIR MUNN: You can go right
7 ahead, yes.

8 MR. KATZ: Yes.

9 MEMBER ZIEMER: Now item one is the
10 same for both the employee and the family
11 member form. Are we just looking at the
12 employee form right now or both?

13 CHAIR MUNN: It seems wise to me
14 for us to take these forms one at a time.

15 MEMBER ZIEMER: Okay.

16 CHAIR MUNN: Otherwise, we are
17 going to be jumping back and forth, and it
18 will be doubly confusing, certainly for your
19 Chair.

20 Let's begin with the employee's
21 form since that's the one on which we appear
22 to have a mass of questions here.

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1 MEMBER ZIEMER: I notice that NIOSH
2 is recommending that the facility name be
3 deleted. I'm not sure, when they say,
4 facility here, if they're talking about like
5 Los Alamos National Laboratory or building
6 something or other or the hot lab or how you
7 would use the chart if the facility was
8 eliminated completely.

9 Some of these people have worked in
10 multiple places. Some have worked in multiple
11 buildings. So I would like to sort of learn
12 why they are eliminating facility but I'm not
13 even sure what facility means.

14 MR. HINNEFELD: I think that is an
15 addition. A yellow highlight is a --

16 MEMBER ZIEMER: It's yellow
17 highlighted.

18 MR. HINNEFELD: That's an addition.

19 MEMBER ZIEMER: That's an addition?

20 DR. NETON: Something has changed,
21 but I think it is meant to be deleted.

22 MEMBER ZIEMER: Well, if it's an

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1 addition, then my original question is, does
2 the recipient know what we mean by facility?
3 Remember, they're going to be looking this up
4 in advance, right, getting ready for the
5 interview? Do we want to know that they
6 worked at the test site or do we want to know
7 that they worked in Building 505 of something,
8 or what are we asking them there? I think it
9 needs to be made clear. If we say, you know,
10 "building" or --

11 DR. NETON: That's a good question.
12 I'm not sure what was intended.

13 MR. HINNEFELD: I'm not 100 percent
14 sure. I believe it means like a building,
15 not --

16 DR. MAKHIJANI: Well, you have a
17 separate question on buildings later on, No.
18 7. "What building or location did you work
19 in?"

20 So I also got a little confused by
21 that when I saw "facility" because we often
22 have the buildings question come up. But I

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1 think you're asking them which site they
2 worked at.

3 MR. HINNEFELD: Yes, this is to ask
4 if the employment that has been referred to us
5 is correct. We have a referred employment.

6 MEMBER ZIEMER: Okay. Then we need
7 to specifically earmark this so they know, I
8 think. If it's site, e.g. and give them an
9 example, e.g., Los Alamos National Lab or
10 something like that.

11 DR. MAKHIJANI: Yes, so you might
12 say, "What site did you work at? What job did
13 you hold there?" That might make it, I guess,
14 clearer.

15 I had another comment, if I might,
16 Dr. Ziemer. Especially in the construction
17 worker thing, it's come up that very often DOL
18 is referring to the union people to verify
19 employment because they lost track of the
20 subcontractors and things like that.

21 So here you might have an
22 additional column for contractor or

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1 subcontractor or maybe AEC/DOE, who they
2 worked for, although they might have worked --
3 it might be a complicated question because a
4 lot of people work for a lot of different
5 companies. So I don't know whether or how you
6 want to get into that.

7 MR. HINNEFELD: They may not be
8 real familiar whether they know if they're a
9 contractor or subcontractor. You know, they
10 know they work for J. A. Jones, and they don't
11 know if J. A. Jones was contracting with the
12 DOE or with somebody else.

13 DR. MAKHIJANI: Maybe that's a
14 separate question, is: who did you work for?

15 MR. HINNEFELD: The employer may
16 be --

17 DR. MAKHIJANI: Who was your
18 employer? Right. Is that useful here? I
19 don't know.

20 MR. HINNEFELD: I don't know.

21 DR. NETON: I think there are
22 pluses and minuses when asking that question.

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1 One thing that just dawned on me, I
2 think facility is in here because I think
3 we're referring to covered facility, and that
4 is sort of jargon in our business, because
5 there are plants that only a specific building
6 is covered versus the entire site. Maybe
7 that's where this confusion arises from.

8 I'm not sure what level of detail
9 you are trying to elicit from that box there.

10 Maybe we need to clarify that.

11 MEMBER ZIEMER: Could I ask another
12 one on this table? And it will come up again
13 when we get to the other claimants, that is,
14 the family members.

15 But under "supervisor's name", and
16 we're talking about people going back quite a
17 ways, I think in the form, again, it would be
18 helpful to put, for example, in parentheses,
19 if known, or something like that, so that they
20 don't spend a lot of time going back into
21 records saying, "Gee, I can't remember who my
22 supervisor was in 1957." You know, it's 40-50

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1 years later, and "Gee, who was it?" So I'm
2 just suggesting that that be clarified.

3 And then job title, I think the
4 same thing. If you asked me what my job title
5 was at a certain place 40 years ago, let's
6 see, I'm not sure. But why not say "job title
7 or type of work"? Like, if you're a pipe-
8 fitter, I'm not sure if my job was pipe-fitter
9 level 3 or -- name something. Do you know
10 what I'm saying?

11 Wouldn't it be just as good just to
12 say, "job title or type of work" or something?

13 I mean, we would want to know if they were a
14 carpenter, but do we need to know that they
15 were some specific named title? I'm just sort
16 of asking that question.

17 Is the actual title the critical
18 piece of information? I don't know. It's a
19 question to me.

20 CHAIR MUNN: I think job title, I
21 mean job title or job performed would be
22 more --

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1 MEMBER ZIEMER: Well, see, the
2 other thing we have found is that job titles,
3 the person may know their job title, but we
4 may not have that information in the system as
5 far as what we can retrieve in terms of
6 information.

7 CHAIR MUNN: Or job performed.

8 DR. MAURO: This is John Mauro. I
9 have an observation.

10 I think that there are
11 circumstances when job title is important when
12 we're going in and, let's say, we're doing a
13 search related to a SEC. I realize we're not
14 talking SECs. So there is value of knowing a
15 person's job title, if he knows it.

16 But, at the same time, for the
17 purpose of dose reconstruction audits, when we
18 do our work, knowing the kind of job the
19 person does is relevant. So I could see both
20 types of information have value.

21 DR. NETON: Question 8 asked,
22 "Describe what you did on a job as routine

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1 duties." So that is to elicit that type of
2 information.

3 I really think this "job title" is
4 just sort of a placeholder because they might
5 have had three or four different jobs in the
6 plant, and then they go through every single
7 job and ask these series of detailed work
8 history questions. So I'm not sure -- I don't
9 think there's any harm in making it more
10 broad.

11 Is your concern that, if we ask for
12 job titles, they have no idea, and they
13 wouldn't provide any additional information
14 or --

15 MEMBER ZIEMER: Or that they spend
16 a lot of time and effort trying to get the
17 exact title where that may or may not be that
18 important; you know, that "I was a level 3
19 secretary" versus a level 2, or what year. "I
20 don't remember when I got promoted to level
21 3."

22 I don't know. I'm just concerned,

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1 how much specificity do they need?

2 DR. NETON: Because this is an
3 interview where you can elicit that response
4 from the person, but maybe your concern is
5 this is mailed in advance to the claimants,
6 and they would pore over this and try to fill
7 it out.

8 MEMBER ZIEMER: Right.

9 MR. KATZ: You could use your
10 parenthetical "if known" --

11 MEMBER ZIEMER: Or "if known."

12 MR. KATZ: -- to avoid the problem
13 of them searching forever for something that
14 maybe you don't need.

15 MEMBER ZIEMER: But you do want to
16 know if they were a hot lab or hot cell worker
17 or a fuel-handler versus, you know --

18 MR. KATZ: Right, but when they're
19 interviewed, that's when that is elicited.
20 This is just being provided in advance.

21 MEMBER ZIEMER: Right.

22 MR. KATZ: So you're just trying to

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1 avoid them spending time basically --

2 MEMBER ZIEMER: Right. Right. I'm
3 okay with "if known."

4 CHAIR MUNN: As long as work done
5 gets in here somewhere in the interview,
6 that's really and truly --

7 MEMBER ZIEMER: Well, that will
8 come out in the work history.

9 CHAIR MUNN: Yes. So are we okay
10 with that one?

11 (No response.)

12 Sounds like we can move on to the
13 next one? Since I still don't have the form,
14 I can't identify that or read it.

15 MEMBER ZIEMER: Well, the next
16 several questions had to do with detailed work
17 history. So I guess I don't know yet what the
18 yellow means on the mark-up sheet. Does that
19 mean we're adding or deleting?

20 MR. HINNEFELD: A yellow, addition.
21 The yellow is an addition. A yellow
22 highlight is an addition.

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1 DR. NETON: I think it is at least
2 something that is changed on the form. I
3 think when this form was modified, any area
4 that was changed is highlighted in yellow.
5 Now I don't know whether that was an exact
6 addition or whether it had moved from
7 someplace else. I'm not certain.

8 MR. KATZ: I guess what's germane
9 is whether you have any issues with what's
10 there, right?

11 DR. NETON: So the yellow is there.
12 This is the form as it would be used.

13 MR. HINNEFELD: Yes, I mean at the
14 end of the form there's some line-outs. So
15 things that are removed are lined out, and
16 things that are in yellow are additions. I
17 believe that is the -- yes, changes.

18 I mean it could be that this is
19 being used to replace the way the question was
20 previously phrased.

21 MR. KATZ: I suspect that's --

22 MR. HINNEFELD: Yes, that is

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1 probably what happened.

2 DR. NETON: It could have been some
3 changes in verbiage or a word or two.

4 MR. HINNEFELD: Right.

5 DR. NETON: I'm pretty certain
6 we've asked a lot of these questions before,
7 maybe in a slightly different format.

8 MEMBER ZIEMER: Well, I have
9 several questions. So let me ask the
10 questions.

11 No. 1, how important is it that you
12 know that they did shift work? It's Question
13 5.

14 MR. HINNEFELD: Probably only in a
15 radon environment like Fernald.

16 MEMBER GIBSON: I don't know if I
17 necessarily agree with that because, if you
18 try to use co-worker data to establish a dose,
19 an upper-bounding dose, whatever, there could
20 have been a difference in what the day shift
21 workers were exposed to and as to what the
22 second shift workers were exposed to.

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1 MEMBER ZIEMER: Well, what I'm
2 really asking you is, does NIOSH use that
3 information? Do you use shift -- do you say,
4 well, this is a second-shift guy, so we'll use
5 a different worker/co-worker model? See, I
6 don't know if they are doing that. That's why
7 I'm asking.

8 DR. NETON: I can't think of an
9 example, but I can't guarantee that we haven't
10 done something. We've done a lot of --

11 MR. HINNEFELD: I don't even know
12 what the Fernald radon model says anymore. I
13 just remember the measurements were higher
14 overnight than they were during the daytime.

15 DR. NETON: I would have to go back
16 and look. I can't answer that question. But
17 Mike raises a valid point.

18 MEMBER ZIEMER: Yes, I'm just
19 asking whether it is used.

20 MR. MARSCHKE: I don't know if it
21 is germane, but on the one of the petitioners
22 on the SECs, he had a concern that the off-

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1 shift workers were not being monitored as
2 rigorously as the first-shift workers were
3 being monitored. So that is a concern. I
4 mean that was his concern about differences
5 between the shifts.

6 He claimed that working the
7 weekends, he was not getting the monitoring
8 that he got when he worked the normal 40-hour,
9 8:00-to-5:00 shifts.

10 MEMBER ZIEMER: Okay, but maybe I
11 am feeling like the interviewers are tied too
12 closely to this. If the answer is yes, do
13 they solicit the information about the shift?

14 Because it's a yes/no thing right here. If
15 they say yes, that's still not helpful unless
16 you follow it up and say, okay, what shift is
17 it? Is that what happens then?

18 MR. HINNEFELD: Yes, I think maybe
19 what we can take from here is maybe an
20 explanation for why or how this would be used,
21 and maybe even some modification to it.

22 MEMBER ZIEMER: Right.

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1 DR. NETON: It seems like on the
2 surface it's a very simple question. Do you
3 think it would be overly burdensome to have
4 someone remember if they did shift work or --

5 MR. HINNEFELD: I think it would be
6 hard to remember when you worked shift work.

7 MEMBER ZIEMER: Well, here's the
8 other part of it, and it applies to 3 and 4 as
9 well. If a person says, "I worked overtime,"
10 how is that helpful unless you know when that
11 occurred? I mean there are very few people
12 that work overtime every year, year-round for
13 40 years, or whatever the lifetime is.

14 So if they say yes, and they say
15 this is how many hours, how do you apply that?

16 So there's a lot more information needed
17 here.

18 DR. NETON: But I would think this
19 is an instance where it might apply
20 generically to a model overall. If we receive
21 consistent responses from a particular
22 facility that everybody said they worked 10

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1 hours of overtime a week for this AWE period,
2 we would consider it in development of some
3 sort of a --

4 MEMBER ZIEMER: Right, and I know
5 we've seen facilities where people have
6 pointed out, in fact, even some of the ones
7 that involve the civilian workers and the
8 tests, where they're talking about 50- and 60-
9 hour weeks were the norm, and we can take that
10 into consideration.

11 But somehow this needs to be tied
12 in with years.

13 DR. NETON: Well, this is for a
14 particular job that he's claiming at one
15 point, right?

16 MEMBER ZIEMER: Yes.

17 DR. NETON: It's the first job.

18 MEMBER ZIEMER: Right. Well, I'm
19 trying to get a feel for what the interviewer
20 does with this information because, if a
21 worker just says, "On average, I worked 10
22 hours overtime," how do you use that unless

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1 you know what years it occurred in, and so on?

2 So what happens with the information?

3 MR. HINNEFELD: I'll go back and
4 find out. This is a direct resolution of a
5 comment that has been made on the form, when
6 they did the --

7 MEMBER ZIEMER: To solicit this
8 information?

9 MR. HINNEFELD: Yes. Yes.

10 MEMBER ZIEMER: I'm sort of saying
11 that's great information, but without any
12 specificity, how can you use it?

13 MR. HINNEFELD: Right. I'll find
14 out. I mean the best we can do is go figure
15 out the intent and how it is going to be
16 utilized.

17 MEMBER ZIEMER: And then does that
18 put a burden on the worker? Yes, I remember
19 working overtime, but I don't know whether
20 it -- was it five weeks in 1957 or was it
21 year-around or what? Again, it is sort of --

22 DR. NETON: It really depends on

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1 the case.

2 MEMBER ZIEMER: Yes.

3 DR. NETON: For example, if this
4 work was completely monitored, his overtime --

5 MEMBER ZIEMER: Then it makes no
6 difference. It's irrelevant. That's the
7 other part of it.

8 DR. MAKHIJANI: Dr. Ziemer, the
9 overtime question is separate from the shift
10 question, I think.

11 MEMBER ZIEMER: Yes, I understand
12 that. Right.

13 DR. MAKHIJANI: The overtime
14 question has come up from the beginning when
15 we've done interviews and talked to workers,
16 and you're using eight-hour days, and it is
17 relevant when you're using air concentration
18 data.

19 MEMBER ZIEMER: Yes, yes.

20 DR. MAKHIJANI: So it becomes quite
21 important in the individual dose
22 reconstruction to have that information. If

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1 they tell you they worked 10 hours a day or if
2 they slept at work -- actually, one of my
3 comments here was it came up not only at the
4 Nevada test site, it came out of Mallinckrodt.

5 People said, "During the heavier
6 periods of work, we worked two shifts and we
7 were so exhausted we had to get up again to
8 work two shifts that we just slept right
9 there. You know, we ran to the office and
10 slept."

11 MEMBER ZIEMER: Right. I
12 understand.

13 DR. MAKHIJANI: So I think the
14 hours of work question, besides overtime that
15 might be supplemented by, you know, "Did you
16 sleep at work" or, you know, "Were there
17 periods when work was so heavy that you
18 actually slept there? -- I think that is a
19 very important question.

20 The shift question I think would
21 need to be amplified to be meaningful.

22 MEMBER ZIEMER: I think they all

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1 would need to be amplified, and maybe what has
2 to happen here is, if the answers to any of
3 these are yes, then you give more detail on
4 the extent of this, or something that would
5 provide more useful information.

6 If this is it, it's not very
7 useful.

8 DR. MAKHIJANI: That's right,
9 because no quantitative information is
10 solicited.

11 MEMBER ZIEMER: Right. Right.
12 Either "Yes, I did" or -- well, it does ask,
13 on the average, how many hours overtime, but
14 even that, unless you plug it into some
15 periods of time --

16 DR. MAKHIJANI: Don't you just use
17 that -- sorry -- don't you just use that
18 generally when somebody says 10 hours a week
19 and you just apply that?

20 DR. NETON: Right, but it's very
21 rare I think that we would do a claimant-
22 specific adjustment. Again, it would be more

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1 of a facility.

2 If we knew that all certain job
3 categories worked 10 hours a week, we would
4 probably just default to that. So this is
5 almost a way -- are you going to get the
6 upper-bracket exposure or the routine
7 exposure? Maybe if you were a secretary and
8 didn't work overtime, you would get a certain
9 dose model versus someone who was involved in
10 overtime work or maybe if there were a
11 specific shift model -- for instance, radon at
12 Fernald -- it would allow us to make some
13 first-order corrections. These wouldn't be
14 second-order corrections like, how many
15 additional hours are we going to add, that
16 sort of thing.

17 MEMBER ZIEMER: Right, right,
18 right.

19 MR. KATZ: Paul, with respect to
20 the period of time, though, the point you're
21 making about when he worked overtime, when the
22 person -- they go through this interview for

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1 each job, for each era of that person's work
2 history.

3 MEMBER ZIEMER: Okay. So these are
4 repeated for each of these?

5 MR. KATZ: Repeated for each of
6 their jobs during their career.

7 MEMBER ZIEMER: Okay. Okay. Got
8 you.

9 But, even there, suppose they
10 worked at one place for "X" -- 30 years? If
11 they said they worked overtime, that doesn't
12 help you unless you know it occurred sort of
13 across the board for 30 years or if it
14 occurred for 10 weeks in one year, or
15 something.

16 A lot of people do shift work for a
17 couple of years and then they're on regular
18 shift or they switch. So it is sort of the
19 issue of, are you soliciting the information
20 that you're actually going to use? If you
21 don't need that detail, I think it is fine.

22 I'm sort of asking, are we getting

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1 what we need for what we do?

2 The questions on both forms are
3 identical, both for the employee and the
4 family member.

5 DR. NETON: Well, did we agree,
6 Stu, we're going to go back and just try to --

7 MR. HINNEFELD: Yes, we'll get a
8 little more insight into how the question is
9 going to be used.

10 MR. KATZ: So that's still
11 Questions 4 and 5.

12 MR. HINNEFELD: Three through five,
13 I think.

14 MR. KATZ: Three through five,
15 right.

16 DR. NETON: In AWE model
17 development, we will go back and they'll look
18 through all the CATIs and say, "Is our AWE
19 profile consistent with what we've heard from
20 all the claimants?" It could possibly result
21 in modifications to our profile.

22 CHAIR MUNN: So am I hearing a

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1 NIOSH action to report back more fully on how
2 the work history questions are used?

3 MR. KATZ: Yes, are or would be
4 because it sounds like at least one of these
5 questions was added at the behest of SC&A.

6 MEMBER ZIEMER: Could I ask this
7 question? This is sort of a process question
8 because NIOSH is talking about clarifying
9 something here, but these are also the
10 documents that have to be formally commented
11 on for --

12 MR. HINNEFELD: No, you can submit
13 these comments directly to us. You don't need
14 to comment to OMB.

15 MEMBER ZIEMER: Because right now,
16 the only thing that OMB has is the extension
17 of the existing --

18 MR. HINNEFELD: The extension of
19 the existing. Once we arrive at --

20 MEMBER ZIEMER: So there will be
21 another modification before you --

22 MR. HINNEFELD: Yes. We won't wait

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1 until it has to come up for recertification.
2 We'll make a change -- we'll make an amendment
3 to the form once we arrive at what it will
4 look like.

5 Then we will resubmit to OMB saying
6 we want to replace this form we have been
7 using to perform the audit and that we want to
8 use for this form. So that is how this works.

9 So these comments should come directly to us.

10 CHAIR MUNN: Okay. So the action
11 item is NIOSH will report back on
12 clarification of details regarding how work
13 history is used.

14 Am I stating that correctly or not?

15 MR. HINNEFELD: You may just want
16 to take Questions 3 through 5.

17 MEMBER ZIEMER: Yes.

18 CHAIR MUNN: Right. All right.

19 MR. HINNEFELD: Or, Paul, do those
20 comments pertain to 6 as well?

21 CHAIR MUNN: Sorry, I'm not hearing
22 you clearly, Stu.

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1 MR. HINNEFELD: Well, I'm just
2 wondering if Question No. 6 has that same sort
3 of thing. "How many hours per week did your
4 job involve potential exposure to radiation
5 and to radioactive materials?"

6 Again, that is something -- isn't
7 that Question 6?

8 DR. NETON: Yes, that is Question
9 6.

10 MR. HINNEFELD: That is something
11 that would change over a person's employment
12 or employment at a given site, the same way as
13 the amount of overtime they worked and things
14 like that. It could anyway.

15 CHAIR MUNN: Sure.

16 MR. HINNEFELD: I'm just trying to
17 scope out the extent of the things I want to
18 reply back on.

19 CHAIR MUNN: Yes. Well, one would
20 expect that to change over time, yes.

21 DR. MAKHIJANI: Wanda, I sent you
22 the form.

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1 CHAIR MUNN: Yes, I have them now.
2 Thank you. I appreciate Scott and Arjun both
3 responding to that.

4 MEMBER ZIEMER: Well, on number
5 six, and I hadn't noticed this before, but
6 your use of the term potential exposure I
7 think you could argue that if a person worked
8 in a laboratory that had materials on hand,
9 their job always involved potential exposure.
10 You're after the actual exposure. What does
11 potential mean here?

12 MR. HINNEFELD: Well, I believe the
13 intent would be, if you -- well, I may be
14 speaking out of school. But there are
15 probably some jobs where you work in an office
16 for at least a part of your day or the bulk of
17 your day.

18 MEMBER ZIEMER: Right.

19 MR. HINNEFELD: And some part of
20 that, you would not be in a production area or
21 something.

22 I suppose it still is, with

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1 something like that, again, you can ask the
2 same question, how helpful is this actually?
3 How necessary this is going to actually be for
4 dose reconstruction because a lot really
5 hinges on that answer. You could ask that
6 question. I'm not sure what would hinge on
7 that answer.

8 MEMBER ZIEMER: Well, what I'm
9 saying is, if you worked in that office but
10 you're from time to time going to be sent out,
11 potentially that could be anytime and,
12 therefore, all the time.

13 MR. HINNEFELD: Well --

14 MEMBER ZIEMER: You want to know,
15 on average --

16 MR. HINNEFELD: The intent is not
17 that, well, when I'm working in my office, I'm
18 potentially going to be exposed because I may
19 be -- I think the one indication or point
20 where this may come into play would be if
21 you're going to decide for a co-worker, was
22 this person constantly exposed or occasionally

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1 exposed person, because that makes a different
2 category usually on a co-worker application.

3 MEMBER ZIEMER: Right.

4 MR. HINNEFELD: So I'm not sure we
5 make that distinction based on the CATI
6 answer, to be completely honest with you.

7 CHAIR MUNN: Well, Paul does make a
8 good point though, the point being that a
9 staggering number of people assume that if
10 they work anywhere onsite or even near-site
11 that they have a potential for exposure.
12 Whether that is true in a strictly
13 categorical, scientific sense is an entirely
14 different issue. But the use of the word
15 potential pretty much covers almost, in the
16 minds of the claimants, covers pretty much
17 anyone who goes through the gate.

18 DR. NETON: Right, except that we
19 do go on to elicit a lot of additional
20 information about what did you do, what type
21 of potential nuclides were there.

22 CHAIR MUNN: Right, right. I

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1 understand that. I'm just hovering in on the
2 use of the word potential. I've seen that as
3 a trigger in so many minds.

4 DR. NETON: I really thought this
5 was more sort of to establish some sort of a
6 dichotomy. I mean the administrative staff,
7 who rarely visited the areas where radioactive
8 materials were used, secretarial types, I'm
9 not sure we haven't got an answer that zero
10 has shown up in some of these interviews. I
11 mean that's helpful information to begin with,
12 when someone says, "Oh, I had very little
13 potential," or "Maybe I walked out there one
14 hour a month or two hours."

15 CHAIR MUNN: Yes.

16 DR. NETON: I think it is a helpful
17 question.

18 MEMBER ZIEMER: So they understand
19 what it means then?

20 DR. NETON: Well, I think the
21 interviewer has an opportunity to explain it.

22 MEMBER ZIEMER: Okay.

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1 DR. NETON: I think it is a
2 reasonable question.

3 MEMBER ZIEMER: I'm okay then, as
4 long as the interviewer is approaching it that
5 way.

6 CHAIR MUNN: All right. Can we
7 move on from work duties to item 8?

8 DR. MAURO: Item 8, Mark had a
9 comment.

10 CHAIR MUNN: With respect to
11 routine duties and the handling of materials.
12 Mark's comment was 8.2.

13 MR. KATZ: Yes, I'll read it, if
14 you would like.

15 The overall 8 is "Describe what you
16 did on the job as routine duties." 8.2, Mark
17 says, "What quantities of radiological
18 material over what time? If the interviewee
19 has enough information to answer this
20 question, it doesn't seem like the field
21 provided on the form is appropriate for
22 collecting the information. One problem is

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1 that it could vary tremendously by
2 radionuclide. For example, was there tons of
3 uranium, ounces of plutonium, etcetera?"

4 CHAIR MUNN: I'm assuming the
5 interviewer is not constrained by the space on
6 the form.

7 DR. NETON: Well, I think I can
8 shed some light on this question. That
9 response was originally in the form when it
10 was drafted. After some interagency review,
11 the response on what types of quantities was
12 taken off the form. There were issues with us
13 determining what quantities of plutonium were
14 in various facilities at various times, that
15 sort of thing.

16 MEMBER ZIEMER: So is this question
17 disappearing then or they are just asking --

18 DR. NETON: It doesn't ask what
19 quantities. Mark is saying, why don't we find
20 out what quantities?

21 MEMBER ZIEMER: Well, it says,
22 "What quantities" -- 8.2 on the employee's

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1 form, not on the --

2 CHAIR MUNN: "What quantities of
3 radioactive materials were present or
4 processed, ounces, pounds, kilograms, drums?"

5 DR. NETON: Yes, I think it had
6 more to do with the specific isotopes.

7 CHAIR MUNN: Well, this is 8.2.

8 DR. NETON: This would be the
9 isotopic -- but I guess if you have generic
10 quantities, that's okay.

11 CHAIR MUNN: But Mark's question is
12 that, if they have enough information, the
13 field on the form isn't large enough. And my
14 response is that the size of the field on the
15 form really doesn't have anything to do with
16 it, does it? The interviewer can write as
17 long as the interviewer is getting
18 information. Correct?

19 DR. NETON: But I think Mark is
20 getting into this; it varies tremendously by
21 radionuclide. I think that is where we ran
22 into trouble with this. This is a generic

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1 question, were there tons, pounds? But if you
2 get into specific information about what
3 quantities of individual nuclides such as
4 plutonium or maybe enriched uranium, you could
5 get into some issues with other agencies.

6 CHAIR MUNN: But there are very few
7 people other than very specific laboratory
8 personnel who had that kind of detail.

9 DR. NETON: Right.

10 MR. HINNEFELD: Well, I think Pat's
11 back on the phone. Pat, the first question,
12 8.2.

13 First of all, I know this is done
14 on a computer. Does the field expand to just
15 accommodate however much you want to write in
16 there?

17 MS. KRAPS: Yes.

18 MR. HINNEFELD: That's what I
19 thought.

20 MS. KRAPS: We can put in as much
21 as the claimant would like to have put in
22 under that particular topic.

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1 The other thing, in the electronic
2 software program itself, that's not called out
3 as a separate question, but rather as a tie-on
4 to the question. In other words, if the
5 employee or the claimant says, "Yes, I was
6 exposed; we handled tritium," then we would
7 ask very generically, you know, "Did you
8 handle it daily? Was it a lot? Was it
9 liquid," et cetera, et cetera?

10 So we do ask the question very
11 generically, trying to stay away from the
12 specifics, as Jim was referring to.

13 MEMBER ZIEMER: Well, Pat, each of
14 these nuclides that are listed in 8 as well as
15 the unknown ones or the blanks in 8, those
16 expand to allow you to enter quantities, at
17 least in a general sense?

18 MS. KRAPS: Yes, absolutely.

19 MEMBER ZIEMER: That could, in some
20 cases, be in terms of millicuries or is that
21 always in mass?

22 MS. KRAPS: Well, we can put it in

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1 in whatever format that the claimant is
2 stating.

3 MEMBER ZIEMER: Okay. But when you
4 get into certain ones like plutonium, are you
5 even permitted to ask that question?

6 MS. KRAPS: Well, I can tell you --
7 and this is a very general, broad brush here,
8 if you will -- very rarely do the claimants
9 actually give us quantities.

10 MEMBER ZIEMER: Okay.

11 MS. KRAPS: Okay, when they do give
12 us quantities, it's usually in terms of, you
13 know, daily eight hours a day and it was
14 solid, and leave it at that.

15 MEMBER ZIEMER: I see.

16 MS. KRAPS: Or I had a gentleman
17 that I did an update with a week ago, and he
18 referred to it as tons, just because he worked
19 there for so long. So, again, we don't get
20 into the nitty-gritty specifics.

21 CHAIR MUNN: That's why there is
22 enough flexibility for the interviewer to

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1 pursue the issue, right?

2 DR. MAKHIJANI: On Question 8,
3 might it be useful to ask whether in the
4 portion where materials got suspended, you
5 know, radionuclides were suspended, was the
6 environment dusty? Because these questions
7 sometimes come up in assessing area, air
8 monitoring, and all of this.

9 CHAIR MUNN: It seems, in response
10 to Mark's specific concern, is that the
11 question and the interviewer are flexible
12 enough to be able to accommodate essentially
13 any type of material that the employee wants
14 to provide. Am I correct in that statement?

15 MR. KATZ: Yes, you are correct
16 that they can provide as much information as
17 they want. These fields are expandable.

18 CHAIR MUNN: Excellent. Then that
19 should put the 8.2 question to bed.

20 MEMBER ZIEMER: Well, let me ask,
21 though, a follow up on Arjun's question. I
22 don't think this is soliciting information

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1 about releases here. You're asking about
2 whether or not something became airborne, and
3 I think they're only asking here what form it
4 was in. Was it solid, gas, and so on? But
5 you're asking about a follow-up, I think,
6 Arjun, are you not?

7 DR. MAKHIJANI: Yes. My comment
8 wasn't directed at 8.2 particularly, but at 8
9 more generally, in that seems to be, from my
10 memory, the only place where the materials
11 question comes up in all of the subcategories.

12 The other questions are about monitoring.

13 And so since that would appear to
14 be the place to ask about whether the
15 processes were -- you know, whether you had
16 machining or something that was suspending the
17 materials, or whether the environment was
18 dusty or not --

19 CHAIR MUNN: There are questions
20 further down with respect to control measures
21 and whether special work permits were
22 required, et cetera, and monitoring questions

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1 come up in 9. So there's material further
2 down that, if the questions that we're coming
3 to further down don't respond, don't seem to
4 fit the bill, would you bring the question
5 back up again, Arjun, when we get down there?

6 DR. MAKHIJANI: Absolutely. I mean
7 I guess it could be more than one --

8 DR. NETON: Yes, 8.3 kind of gets
9 to that issue. It says, "What type of
10 production process involving radioactive
11 material occurred in the area?" I mean, a
12 person could describe whether they were
13 rolling uranium rods or running a lathe or
14 something of that effect.

15 DR. MAKHIJANI: Yes, but it doesn't
16 get at what I was -- and that's the context.
17 That's why I raised it in the context of 8
18 because over there you get information like "I
19 was machining" or "We were producing green
20 salt and some metal," or whatever.

21 Then the corollary of the process
22 description would be, was it dusty; was it

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1 clean; was there visible suspension as a
2 result of the process?

3 Maybe it's not useful. It occurred
4 to me in going through Question 8 in the way
5 it is structured.

6 DR. NETON: I don't know. I'm not
7 sure what you would make of a response in that
8 area if you know the area is already -- I
9 guess --

10 DR. MAKHIJANI: Well, we've had
11 this -- this, I guess, goes to our discussions
12 on Bethlehem Steel, how dusty it was --

13 DR. NETON: Right.

14 DR. MAKHIJANI: -- whether at the
15 workplace people were able to see the dust. I
16 remember we actually tried to quantify from
17 that, and that turned out to be quite useful
18 information.

19 That came out of interviews. Both
20 NIOSH and SC&A spent quite a lot of time and
21 effort trying to find out which workplaces
22 were dusty enough for visible dust. This is

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1 from memory of --

2 DR. NETON: No, you're right.
3 You're right.

4 MEMBER ZIEMER: Maybe, just as a
5 follow-up to that idea, there are some other
6 questions here in 8 that somewhat relate to
7 that but don't ask the specific question.

8 For example, "What specific tasks
9 did you perform? What are the processes?"
10 Maybe a corollary to 8.3 even would be, "Are
11 you aware of any processes where radioactive
12 materials were released to the work
13 environment," or something like that, I think
14 is what you're getting at, are you not, Arjun?

15 CHAIR MUNN: But isn't that covered
16 much further down in any incidents or
17 activities that haven't been covered here?

18 MEMBER ZIEMER: Well, I think
19 partially it does, but you might consider
20 certain processes where you have sort of
21 general partial releases that maybe wouldn't
22 be qualified as incidents. I'm not sure at

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1 Bethlehem Steel that they were considered
2 incidents. It was the normal work environment
3 in the sense that it was kind of dirty work or
4 messy work.

5 DR. MAKHIJANI: And especially in
6 the period.

7 MEMBER ZIEMER: Yes, for that
8 period.

9 MR. HINNEFELD: You're asking for a
10 depiction of, essentially, the appearance of
11 the workplace, was it clean or dirty, however
12 you want to phrase that.

13 MEMBER ZIEMER: Right, right,
14 right.

15 MR. HINNEFELD: That would be
16 relevant to whether we build the same --

17 MEMBER ZIEMER: There are other
18 questions here about contamination control
19 measures. So maybe something would fit in
20 here to ask the question in some form or
21 another about work conditions. I am not sure
22 what the wording would be.

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1 DR. NETON: You're getting the
2 dusty environment-type questions. That is
3 relevant for maybe a uranium facility, but
4 when you get into a plutonium facility, it's
5 not really important.

6 MR. HINNEFELD: No. You would hope
7 not.

8 MEMBER ZIEMER: It had better not
9 be.

10 DR. NETON: I don't know. I could
11 see it potentially useful. Although many
12 workers confuse chemical dusty environment
13 with a radioactive dusty environment. It
14 doesn't necessarily get you a definitive
15 answer.

16 MEMBER ZIEMER: Because they do
17 have a question about contamination control
18 measures and respirators, and so on. I mean
19 it is sort of like, well, why are you using
20 those potential or real --

21 DR. NETON: But I guess you could
22 argue that if they answer "never" to all of

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1 8.6, it still doesn't mean it wasn't a
2 dusty --

3 MEMBER ZIEMER: Right. Right. So
4 you may need the specific question.

5 DR. MAKHIJANI: Yes, I mean the
6 suggestion really was from the uranium
7 environment being awfully dusty, trying to
8 establish what that means quantitatively.

9 CHAIR MUNN: So is there a
10 Subcommittee recommendation with respect to
11 this concern?

12 MEMBER ZIEMER: It seems to me it
13 would be appropriate to have a question that
14 solicited the type of information that was
15 described. I mean I don't know what the
16 wording would be, but it would fit in with the
17 other questions, I think.

18 MR. HINNEFELD: Yes, we can --

19 CHAIR MUNN: May I suggest that we,
20 at the moment, put this in a sidebar for our
21 own thinking until we have gone through the
22 forms to see if other questions further down

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1 are a more appropriate place for this issue?
2 Or do you want to address it right now, right
3 here, right now?

4 MEMBER ZIEMER: I'm okay with that.
5 I just don't want to lose it.

6 MR. KATZ: There's another comment
7 from Mark that falls in this range of
8 questions. It is on 8.5.

9 He asks, he says, "8.5 asks a very
10 specific question and, once again, no
11 systematic way for the information to be
12 collected." So it's not so much that there
13 isn't a field for it, but it isn't systematic.

14 The question 8.5 is, "What specific
15 task did you perform, using what types of
16 radioactive materials (in what quantities)
17 and/or radiation-generating equipment?" So
18 what specific task did you perform?

19 So Mark is saying that the response
20 field there doesn't give sort of a systematic
21 way of collecting the information.

22 MEMBER ZIEMER: Well, I suspect the

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1 computer form does.

2 Pat, are you still on the line?

3 MS. KRAPS: I'm on the line. I'm
4 not sure that I understand the --

5 MEMBER ZIEMER: Question 8.5, what
6 kind of a field do you have when you collect
7 that information?

8 MS. KRAPS: We have a field where
9 we type in the type, the quantity, and the
10 specific task.

11 MR. KATZ: Okay. So it sounds like
12 you have exactly what Mark had in mind.

13 MR. MARSCHKE: Well, I guess my
14 question would be, I mean, if the claimant is
15 attempting to fill this form out before the
16 interview, he gets this in the mail, as I
17 understand, and he's maybe attempting to fill
18 it out before the interview, I mean, how does
19 he know what the -- he doesn't have access to
20 the electronic form. So he may be spending
21 time or he may be looking at the same field
22 and have the same question that Mark has:

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1 what's the specific way that I should put the
2 information in that field?

3 Do we need to tell him more
4 information or to use additional sheets of
5 paper or not to be limited by the size of the
6 fields that are shown on the form, or
7 something along those lines?

8 MEMBER ZIEMER: They do provide for
9 suggested tables in some of the others. I
10 think the computer, apparently, is doing it
11 that way. Does that help the person to
12 organize their stuff, to have a little table
13 for themselves?

14 MR. MARSCHKE: That's the question
15 I'm asking, I guess. Does the person -- I
16 mean your question earlier on, Paul, was like
17 the individual is trying to fill this out in
18 anticipation of the phone call, and he may be
19 stumped by, you know, well, what do I put in
20 here?

21 MEMBER ZIEMER: Well, it says what
22 he needs. They need the type and the quantity

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1 and the type of equipment, which is what Pat
2 said the array does. We're just not showing
3 the array here. You're sort of saying, why
4 not, I guess.

5 MR. MARSCHKE: Why not? I mean
6 he's not limited to that little space.

7 MEMBER ZIEMER: Right.

8 MR. MARSCHKE: Basically, he knows
9 he's not limited to that little space. He
10 realizes that he can expand that as large as
11 he wants to or needs to, I guess is the
12 question, or does he know that he can expand
13 that to as big as he needs to?

14 DR. MAKHIJANI: Is the electronic
15 form different before it's filled out than the
16 hard copy? Is the electronic form different
17 than the hard copy of the form that is sent
18 out to the claimant? I wasn't aware of that.

19 MR. HINNEFELD: Well, it appears on
20 the screen probably very similar to the way it
21 appears here.

22 DR. MAKHIJANI: Okay.

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1 MR. HINNEFELD: But as you enter
2 the --

3 CHAIR MUNN: But it's expandable
4 electronically. As additional information is
5 provided, you can expand it to whatever size
6 it needs to be.

7 MR. HINNEFELD: Yes, the field is
8 expandable. I mean --

9 CHAIR MUNN: Right.

10 MR. HINNEFELD: -- it probably
11 looks like this. As you put things in there,
12 you keep typing, and it expands to accommodate
13 what you type in. I think that is how it
14 works.

15 MR. KATZ: Right, but Pat noted
16 that this field actually includes these three
17 columns or --

18 MR. HINNEFELD: Well, no, what she
19 said was it includes the type, quantity, and
20 the task.

21 MR. KATZ: Right.

22 MR. HINNEFELD: She didn't say it

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1 was a table.

2 MR. KATZ: Oh, okay.

3 MR. HINNEFELD: Is there a table,
4 Pat, or not?

5 MS. KRAPS: I'm sorry, was that
6 directed to me?

7 MR. HINNEFELD: We're on Question
8 8.5, Pat.

9 MS. KRAPS: Yes.

10 MR. HINNEFELD: You said the form,
11 you put in the type of material, the quantity,
12 and the task.

13 MS. KRAPS: Yes.

14 MR. HINNEFELD: Is that a table
15 that pops up or you just enter it in that
16 fashion when you enter it into the field?

17 MS. KRAPS: It's literally the type
18 has a field; quantity has a field, and the
19 task has a field.

20 MR. HINNEFELD: Okay.

21 MR. KATZ: So it seems like the
22 question you are raising, Steve, is whether

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1 this form should also be sort of a job aid for
2 the employees, to make it easy for them to
3 prepare, because this is really to give them
4 just advance notice of the interview and what
5 will be covered, but it wasn't really
6 designed, I guess, as a job aid to them so
7 much.

8 MEMBER ZIEMER: Well, for example,
9 on Question 8.1, we don't say what types of
10 radioactive materials were present and give
11 them one little line.

12 MR. KATZ: Right.

13 MEMBER ZIEMER: We give them the
14 whole array to help them.

15 MR. KATZ: Right.

16 MEMBER ZIEMER: So how is this
17 different --?

18 MR. KATZ: I think that array is to
19 help the interviewer.

20 DR. NETON: Yes, this was not
21 designed to help the claimant.

22 MEMBER ZIEMER: Oh, okay.

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1 DR. NETON: It happens that we send
2 it out to them to give them a heads-up that
3 these types of questions are coming, but it
4 was really not the intent to have --

5 MEMBER ZIEMER: Yes, it helps both,
6 I understand that, right. No, it's sort of --
7 I don't know -- it's sort of the little
8 line --

9 DR. MAURO: This is John.

10 I guess I don't have the cover
11 letter in front of me, but that might be an
12 important point to make. That is, when he
13 receives this, he should be alert that he's
14 not expected to fill out all this information
15 before the interview, just we're going to call
16 and discuss this.

17 Is that something that is made
18 clear in the cover letter?

19 MEMBER ZIEMER: Well, they tell
20 them, you know, don't fill this out and send
21 it in; this is just to help you organize your
22 thoughts.

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1 DR. MAURO: Okay. No, that's fine.
2 I just wanted to check that. Thank you.

3 DR. MAKHIJANI: What would be the
4 harm in sending out the actual electronic
5 version that pops up before it's filled out?

6 CHAIR MUNN: It's an issue of how
7 much detail you want to end up sending these
8 folks, for goodness sakes. This is a
9 formidable number of pages for people to look
10 at and a formidable number of questions. If
11 you're going to just keep adding all of the
12 potential expandables that the software gives
13 you that the interviewer has, you will have a
14 document that would literally stagger an ox.

15 You just have to anticipate that
16 your folks are going to read the letter, so
17 that the letter essentially tells them do not
18 send the questionnaire back. We'll take the
19 information by telephone.

20 If we put every potential format
21 for a response into each one of these
22 questions, it becomes an overwhelming burden.

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1 We're trying to eliminate the burden on the
2 claimant, not expand it.

3 We want them to know these are the
4 types of questions that are going to be asked,
5 but they can expand it, whatever links they
6 wish, in the telephone interview.

7 MEMBER ZIEMER: Maybe we would be
8 just as well to leave off the little line,
9 just leave the question there, that that's a
10 question that they're going to ask you. Do
11 you need that little line that asks the same
12 thing on 8.3 and 8.4? Do you need those
13 little lines? Or even on 8.2? Outside of the
14 tables, and so on, why do they need those
15 little lines?

16 CHAIR MUNN: The only reason in the
17 world they need those, from my perspective,
18 would be for the claimant to scribble some
19 notes, so that they would have them fresh in
20 their mind at the time that they did the
21 telephone interview.

22 MEMBER ZIEMER: Well, why not leave

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1 out the little line and just put some space
2 there, so they can write their notes?

3 CHAIR MUNN: Yes, it might be --

4 MEMBER ZIEMER: That little short
5 line doesn't give them much to scribble on. I
6 don't know.

7 CHAIR MUNN: No, it doesn't. Blank
8 spaces would probably be better, but that's a
9 minor point. We can certainly discuss that.

10 MEMBER ZIEMER: Yes, and, actually,
11 remember, this is something to go to OMB. So
12 OMB needs to know what the question is. I
13 don't think they necessarily need to know how
14 much space is devoted to the answer, do they?

15 CHAIR MUNN: I think not.

16 MEMBER ZIEMER: Or how it is
17 arrayed?

18 CHAIR MUNN: So we've reached the
19 witching hour, and I know folks there need to
20 go get lunch and I certainly need to go get
21 breakfast.

22 So if we can come to an agreement

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1 about where we will take this up in an hour, I
2 would like to break for lunch.

3 MEMBER ZIEMER: Good idea.

4 CHAIR MUNN: Can we say that, when
5 we come back from lunch, we will reach some
6 sort of consensus with respect to items 8.2
7 and 8.5 that we have just been discussing?

8 MEMBER ZIEMER: Sure.

9 CHAIR MUNN: And hold that in
10 abeyance until we come back and pick up where
11 we left off with discussion of 8.2 and 8.5,
12 and some decision as to whether or not real
13 changes are merited here? Okay?

14 MR. KATZ: That sounds good, Wanda.

15 CHAIR MUNN: Very good. My
16 electronic clock says 9:17 my time, if you can
17 trust anything electronic today. So is 1:15
18 your time adequate for lunch?

19 MR. KATZ: Yes. Thanks, Wanda. So
20 we will recess until 1:15.

21 CHAIR MUNN: Very good. We'll see
22 you at 1:15. Bye-bye.

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1 MR. KATZ: Thanks, everyone on the
2 phone. Bye now.

3 (Whereupon, the above-entitled
4 matter went off the record at 12:19 p.m. and
5 resumed at 1:20 p.m.)

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A-F-T-E-R-N-O-O-N S-E-S-S-I-O-N

22

1:20 p.m.

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1 MR. KATZ: This is Ted Katz. I've
2 just reconnected the phone for the Advisory
3 Board on Radiation Worker Health, Subcommittee
4 on Procedures Review. We're reconvening after
5 a lunch break, and I would just like to check
6 who is on the line, starting with Wanda, of
7 course, who is the Chair of this Subcommittee.

8 CHAIR MUNN: I'm here.

9 MR. KATZ: Are we joined by any
10 other Board members, by any chance?

11 CHAIR MUNN: I had the impression
12 they were going to be --

13 MR. KATZ: Okay. Yes, I know. I'm
14 just checking. There are 13 folks on the
15 line.

16 John Mauro, have you --

17 DR. MAURO: I'm here.

18 MR. KATZ: Great. Great.

19 DR. OSTROW: Steve Ostrow here.

20 MR. KATZ: Great, Steve.

21 Pat Kraps, are you back on?

22 MS. KRAPS: Yes, I'm back on.

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1 MR. KATZ: Great. Okay, Wanda, it
2 looks like --

3 CHAIR MUNN: Very good. Let's take
4 up where we left off.

5 Before we actually get into that, I
6 would request that all of you take a look at
7 our agenda, see what we've done to ourselves
8 today, re-evaluate what we've been doing.

9 There is concern -- and I think
10 reasonable concern -- that we at the
11 Subcommittee are drifting away a bit from our
12 actual task, which is probably being
13 overburdened by an extreme attention to
14 detail, to process, and to the finer points of
15 how things are done rather than whether they
16 are, in fact, being done in a reasonable,
17 scientific, and appropriate manner, as
18 anticipated by legislation.

19 Let us do our very best to try to
20 get through very quickly some of the issues
21 that have been raised by Mark's questions that
22 he brought to us and accept the fact that, if

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1 we are going to do this kind of thorough
2 parsing of each of these forms, we need to be
3 honest with ourselves about it and set aside
4 an entire meeting date for nothing except this
5 activity.

6 Clearly, this is, in my view,
7 beyond the purview of what we are expected to
8 do. But, if other members of the Subcommittee
9 feel that this is an appropriate use of our
10 time and energies, then we need to pursue
11 that.

12 I don't want to ask at this moment
13 whether we are, in fact, going to establish a
14 specific day for doing nothing but this, but
15 if this is the manner in which we are going to
16 pursue the question which was originally,
17 should the CATI be improved in any way, can we
18 make this easier for claimants, and we seem to
19 have drifted quite a ways away from that
20 initial question.

21 Even though all of our issues that
22 are being raised bear on that in some way,

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1 it's not the direct inference that one could
2 easily see as being an oversight, at least a
3 high-level oversight function for this kind of
4 procedure.

5 That being said, we had indicated
6 that we would take up where we left off, which
7 was in the middle of Question 8. We were
8 discussing both Section 8.2 and 8.5 and a few
9 things in between that bore on that.

10 So, if we want to continue that
11 now, the question that I would like to pose to
12 you is whether there are specific
13 recommendations that you would like to see
14 this Subcommittee bring to the Board for their
15 approval to pass along to NIOSH, only on these
16 issues that we have been discussing, that is,
17 8.2 and 8.5.

18 Do we have any specific requests?
19 We've discussed it at length. There are
20 several concepts of what might be done. The
21 real issue here is whether the form in its
22 current format is not getting the information

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1 that we need. If it's getting the information
2 we need, then our individual preferences with
3 respect to verbiage and perhaps other syntax
4 may not be the best use of our time.

5 Any thoughts?

6 MEMBER ZIEMER: Well, I'll make a
7 comment and break the silence here. I'm fine
8 with 8.2 and 8.5. I think we got to debating
9 about whether the form should show a table or
10 have more space or something, but it certainly
11 elicits the right information. That's the key
12 thing, as you have identified. So I'm fine if
13 they leave it as it is on those two.

14 CHAIR MUNN: I'm hesitant to make
15 any final commentary with respect to these
16 items, specifically because two of our members
17 are not present. I'm sure that both of them
18 have input that they would like to have heard.

19 But unless I hear comments to the
20 contrary from our Subcommittee members, I am
21 going to suggest that we very quickly move
22 through the other comments that have been

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1 made, see if we can address them in sentences
2 of 25 words or less, and then toward the end
3 of our meeting, when we are doing
4 housekeeping, debate whether or not a specific
5 date should be set aside for no purpose other
6 than to address the CATI issues that people
7 may have.

8 So unless I hear objection to that,
9 we're going to move on to the next question on
10 Mark's list. Do I hear objections?

11 MR. KATZ: No, no objections here.

12 CHAIR MUNN: Then let's go on to
13 his item 4 under "comments on the form".

14 MR. KATZ: His item 4 is similar to
15 what's above. For 8.7, he says, "Once again,
16 is this time period specific?" Then he asks,
17 "Prior to a certain time period, there were no
18 special work or rad work permits," or he
19 states that.

20 CHAIR MUNN: I believe that we have
21 already heard from the individuals who work
22 with these forms on a daily basis that the

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1 interviewer has adequate flexibility to obtain
2 that type of specificity needed in the
3 response. Is that correct?

4 MS. KRAPS: This is Pat Kraps.

5 Yes, that's correct. If the
6 claimant answers in the affirmative, then we
7 ask during what time period.

8 MEMBER ZIEMER: Which is 8.8. So
9 it is covered.

10 MR. KATZ: Okay. Should I move on,
11 Wanda?

12 CHAIR MUNN: Very good.

13 MR. KATZ: Okay. The next issue he
14 has is on Question 9. "Similar problems as
15 mentioned above." Okay, which we've dealt
16 with in general. "Plus, in 9.2 and 9.3, I
17 would give an example of time period; e.g.,
18 1960 to 1965," is the comment he has made
19 elsewhere, "and frequency; e.g., weekly,
20 monthly, annually."

21 But this is something, again, these
22 are interviews. They are oral, and the

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1 interviewer can elaborate.

2 CHAIR MUNN: Correct. Any
3 objection to that response?

4 MEMBER ZIEMER: No.

5 MR. KATZ: Okay. So let's move it
6 on then.

7 "Question 17 should be worded in a
8 neutral way," and he gives as an example,
9 let's see, "Did you ever not wear or not turn
10 in your badge?" Versus, he's saying you
11 shouldn't say, "Did you ever elect," I don't
12 know what the rest of his sentence is.

13 CHAIR MUNN: "Not to turn in your
14 dosimeter badge because you were approaching a
15 radiation dose limit?"

16 MR. KATZ: Got it.

17 CHAIR MUNN: Again, here we have a
18 question of semantics. The basic issue of
19 whether or not the question as it is written
20 is adequate to elicit this information that's
21 needed is the outstanding question.

22 MEMBER ZIEMER: We have heard of

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1 cases where the badge was not turned in
2 because the worker was basically made by a
3 foreman or someone in charge to not turn it in
4 or to not use it.

5 So I suppose the worker might
6 argue, "I did not elect to do that. I was
7 told to do that."

8 It's more neutral if we leave out
9 the word "elect." The issue is not whose
10 fault is it at this point. This looks like
11 it's the worker's fault. It may not be. I
12 think that may be what Mark is --

13 MR. KATZ: Yes.

14 MEMBER ZIEMER: I don't want to
15 assume necessarily, but it sounds like he's
16 concerned about the implication of the word
17 "elect." Leaving it out simply leaves that --

18 CHAIR MUNN: Would we like to
19 recommend in our suggestions to the Board that
20 the words "elect" and "to" be eliminated from
21 the form?

22 MR. KATZ: Yes, or you could just

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1 state generally that, as Mark suggests here,
2 he says it should be worded in a neutral way.

3 In other words --

4 MEMBER ZIEMER: Yes.

5 CHAIR MUNN: Which would be, "Did
6 you ever not turn in your dosimeter badge" --

7 MEMBER ZIEMER: Yes.

8 CHAIR MUNN: -- "because you were
9 approaching a radiation dose limit?"

10 MR. KATZ: There may be other
11 reasons. I wouldn't limit it.

12 DR. MAKHIJANI: Yes. That's what I
13 was about to say is at NTS we've heard other
14 reasons. So I think the briefer version that
15 Mark has suggested would probably be better.

16 But, as a sub-question, if yes, you
17 might ask, not only how frequently, but for
18 what reason.

19 MEMBER ZIEMER: For what reasons,
20 yes.

21 DR. MAKHIJANI: If it was dose
22 limit or if they were afraid of damaging the

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1 badge? Then you would get that information.
2 So that's sort of become neutral and you're
3 not kind of prompting them.

4 CHAIR MUNN: Okay. I will include
5 that in our list of recommendations that we
6 send around to take a look at.

7 The next one?

8 MR. KATZ: Okay. So now we are on
9 Question -- it relates to Question --

10 MEMBER ZIEMER: Before we jump
11 ahead, I just want to point out, on 13.2,
12 "What types was performed?" should read, "What
13 types were performed?" Just editorial.

14 CHAIR MUNN: Okay. Very good.

15 MR. KATZ: Okay. This relates to
16 item 19, and Mark says that it should be
17 asking, "Were you involved in an incident?" or
18 plural "incidents", and he says, "And
19 obviously, 19.1 through 19.17 apply for each
20 incident."

21 CHAIR MUNN: And of course, again,
22 we go back to the fact that the interviewer

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1 would clearly be obtaining that for each
2 incident. Correct?

3 MEMBER ZIEMER: That's correct.

4 Pat?

5 MR. KATZ: That's correct.

6 MS. KRAPS: Excuse me. For each
7 and every incident, it's captured in its own
8 unique entity. In other words, we don't lump
9 all these incidents together. They have their
10 own field per incident.

11 CHAIR MUNN: Thank you.

12 MEMBER ZIEMER: Might I ask another
13 question here, Wanda?

14 CHAIR MUNN: Please do.

15 MEMBER ZIEMER: I wonder if the
16 employee, at the time that they get this form,
17 knows what we mean by incident. I mean,
18 semantically, you can say, "Well, anything I
19 did was a particular incident."

20 We use it more like accident. I'm
21 wondering if it would help clarify if we did
22 something like "incident/accident," to sort of

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1 help the person understand what we mean. Or
2 is this defined in the materials that they get
3 with this, so that they know what we mean by
4 an incident?

5 CHAIR MUNN: Actually, don't we
6 mean more off normal occurrence rather than --

7 MEMBER ZIEMER: Well, that's what
8 I'm asking. Does the claimant know what that
9 is?

10 MR. HINNEFELD: I think we're
11 fairly comfortable letting the claimant decide
12 because that means it is important to them.
13 Okay? To the extent that they want to
14 describe something, they describe something
15 that's important to them, then that would be
16 what we account for, and make sure we've
17 accounted for, in the dose reconstruction.

18 I think we're just as comfortable
19 leaving it defined in the mind of the reader
20 or interviewee.

21 MEMBER ZIEMER: If they think it's
22 an incident.

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1 MR. HINNEFELD: If they think it's
2 an incident, then it is.

3 MEMBER ZIEMER: All right.

4 DR. NETON: Oftentimes, we will get
5 people commenting on setting off portable
6 monitors or something like that, and it might
7 have been a radon-related issue.

8 MEMBER ZIEMER: Right.

9 DR. NETON: But it's important to
10 them, and we can capture that.

11 CHAIR MUNN: Are we all comfortable
12 with that?

13 MEMBER ZIEMER: Yes.

14 DR. MAKHIJANI: Could I make a
15 comment on 9.2?

16 CHAIR MUNN: Please.

17 DR. MAKHIJANI: It goes to what Dr.
18 Ziemer had said earlier. Is this where one
19 brings up the question of incidents that
20 workers believe were not logged or recorded or
21 dealt with?

22 So this isn't a badge question.

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1 You've asked that. There might be a parallel
2 question here. I mean it might be recorded.
3 They might not be aware of it. Or is it
4 captured in just asking of what incidents they
5 went through? I mean I'm not sure.

6 MEMBER ZIEMER: Could you clarify?
7 I'm not sure I understand your question.

8 DR. MAKHIJANI: Well, to take the
9 specific example of Savannah River Site, when
10 we did the site profile review, we went
11 through the hazard investigation database and
12 we found that it was incomplete, and that
13 there were incidents that we could identify
14 that had happened. I mean radiologically that
15 you could specify spills and things, that were
16 not in the database. Actually, quite a number
17 of them.

18 So I am wondering whether the dose
19 reconstructor might benefit from being alerted
20 to that because normally they rely on the
21 written record that is in the claimant's file
22 to reconstruct the dose.

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1 CHAIR MUNN: Well, I thought we
2 just heard, though, which sounded like a very
3 sensible response, that whatever the
4 claimant's concept considers to be an incident
5 is what we are looking for. The need is to
6 obtain additional information over and beyond
7 what the records already show.

8 If the records show that an
9 incident has occurred, then during that period
10 of time then the dose reconstructionist
11 certainly would have that incident included in
12 the material that's already a part of that
13 data file.

14 DR. MAKHIJANI: Well, it's up to
15 the pleasure of the Working Group. You know,
16 it's just an issue that's come up.

17 I would agree with Wanda that the
18 way the question is phrased, it is open-ended.

19 So whether the incident is recorded or not,
20 the worker would bring it up if he thought it
21 was important.

22 MEMBER ZIEMER: I think Stu has

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1 indicated -- because they wouldn't necessarily
2 know what's in the official record anyway,
3 would they?

4 MR. HINNEFELD: There's a good
5 chance they may or may not. I mean I don't
6 know that, depending upon the practices, they
7 may not know. They say nobody -- well, they
8 might be able to say nobody even came around
9 and asked any questions, in which case you
10 would probably think, well, then no record was
11 generated of it. But that's not necessarily
12 true.

13 Or they may say, well, they asked
14 us some questions, but I don't know that they
15 did anything or wrote a report or anything,
16 because they very commonly, certainly back a
17 number of years, I don't think they would have
18 known if a report had been written about it or
19 not. So you could ask them -- I mean I don't
20 know how many of them are going to know. I
21 have also talked to claimants who were sure
22 there was a record of the incident they were

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1 involved in, despite the fact that it wasn't
2 in their exposure record.

3 DR. MAKHIJANI: Yes. I mean I
4 don't know how helpful it would be, but it is
5 a suggestion because this has come up in
6 interviews pretty commonly.

7 MEMBER ZIEMER: But what are you
8 suggesting --

9 MR. HINNEFELD: Well, it comes up
10 interviews in what way? People will say,
11 well, nobody knew about this; none of this
12 ever got written down, that kind of thing?

13 DR. MAKHIJANI: Yes, with the
14 suggestion that the dose reconstruction is
15 incomplete; we don't take that into account.

16 MEMBER ZIEMER: Yes.

17 DR. MAKHIJANI: I mean we just did
18 a whole bunch of --

19 DR. NETON: But I think that's
20 always the case. I mean we always review this
21 record and ensure that anything they've
22 asserted in this interview is somehow covered

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1 in our dose reconstruction.

2 DR. MAKHIJANI: Right. Yes, which
3 is why I'm saying I'm not sure whether it's
4 helpful or not. I'm just saying that this
5 particular thing has come up quite often.
6 Whether the dose reconstructor needs a flag or
7 the worker needs a prompt to kind of review in
8 their mind situations that they may think
9 important that were not recorded, I'm not sure
10 how the incident might be interpreted more
11 broadly and less broadly by different people.

12 MEMBER ZIEMER: Well, I think that
13 is what this is intended to do, though, isn't
14 it, to solicit such information?

15 DR. NETON: I'm not sure we behave
16 any differently if we asked the question and
17 they said, no, it wasn't recorded. We take it
18 at face value that this occurred to the
19 person, and then the dose reconstruction is
20 supposed to document why we believe that was
21 or was not important in their exposure
22 history.

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1 MEMBER ZIEMER: Fair enough.

2 CHAIR MUNN: So it is covered by
3 current practice.

4 Item No. 8.

5 MR. KATZ: Mark asks, "Why is
6 Question 18 being deleted? I believe it
7 should stay in."

8 And the question is --

9 CHAIR MUNN: I was not aware that
10 18 was being deleted. Is it, in fact, being
11 deleted? "Were you ever requested to have a
12 medical x-ray?"

13 MEMBER ZIEMER: It doesn't appear
14 to be.

15 MR. KATZ: It doesn't appear to be.
16 I don't know --

17 MR. SIEBERT: Yes, it got
18 renumbered. If you go down to the very bottom
19 of the document, it shows they removed 18,
20 asking about co-workers --

21 MEMBER ZIEMER: Oh, the original
22 18.

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1 MR. KATZ: Oh, yes. "Can you name
2 co-workers and other witnesses such as," et
3 cetera. That's the co-worker question that
4 was discussed in this Working Group, the
5 deletion of that.

6 CHAIR MUNN: And we discussed that
7 to some degree earlier. I'm not at all sure
8 that our discussion ended with a concrete
9 finding. Did it in the minds of others? Is
10 there a recommendation here?

11 MEMBER ZIEMER: I thought we said
12 that if NIOSH needed to go back and get such
13 information, they would do so. It doesn't
14 have to be solicited at the front end.

15 This does the same thing as the
16 original concern, and that was asking them to
17 come up with names of co-workers and
18 supervisors in advance of us having any real
19 need for that information. I mean it goes
20 hand-in-hand with that original issue, which
21 was the deletion that Mark asked about on the
22 first page. I think those two are tied

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1 together.

2 MEMBER GIBSON: But it seems a
3 little different to me, though, because this
4 is like, after you went through this whole
5 process, are there any co-workers or
6 specialists that could expand on the
7 information he was given, rather than just
8 mentioning a specific incident for a co-worker
9 that you worked with that knew something about
10 your work.

11 CHAIR MUNN: I'm not sure how to
12 proceed with that one. It appears to me that
13 it is covered by other questions. It's very
14 simply --

15 MEMBER ZIEMER: Maybe we could do
16 this in a different way because this looks
17 like you're going to try to independently
18 confirm what they have said --

19 CHAIR MUNN: Yes.

20 MEMBER ZIEMER: -- as opposed to
21 accepting what they have said. Maybe -- and I
22 don't have a wording suggestion right now --

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1 but maybe we can ask them if they would like
2 to identify other individuals such as workers,
3 and so on, that should be contacted if
4 additional information is needed, or something
5 like that, without indicating that we
6 necessarily plan to do that or -

7 CHAIR MUNN: That could easily be
8 incorporated --

9 MEMBER ZIEMER: -- I'm not sure how
10 to --

11 CHAIR MUNN: That could easily be
12 incorporated in Question 20. "Have we missed
13 asking you about any conditions, situations,
14 or practices that occurred during the job
15 which you think may be useful to us in
16 estimating your radiation doses? Or are there
17 other workers" --

18 MEMBER ZIEMER: "That we should
19 contact?"

20 CHAIR MUNN: -- "we should contact
21 if additional information is needed."

22 MEMBER ZIEMER: However it is done,

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1 it needs to be done in a way that doesn't make
2 them think that we have to go back to confirm
3 their assertions with other people, right?

4 DR. NETON: Right. That's the
5 problem, is raising the expectation that we
6 will be contacting people. And if they go
7 through a long soul-searching to try to
8 remember names from 50 years ago and then we
9 don't use them, we get some disgruntled
10 claimants on our hands.

11 CHAIR MUNN: Do we need to
12 determine this right now? Do we need to set
13 this aside at a time when Mark and Bob are
14 amongst us to express their concerns and
15 opinions?

16 MEMBER ZIEMER: It's your call, but
17 I'm willing to set it aside.

18 CHAIR MUNN: Well, my personal
19 opinion is, it can be covered in 20, but I
20 understand what NIOSH's concern is with
21 respect to raising the expectation of a
22 claimant that hears something else they need

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1 to do, and if they don't do it, they're
2 missing out on something.

3 MEMBER ZIEMER: But it might be
4 worded in such a way that they have the
5 opportunity to identify individuals without
6 its being suggested that we're automatically
7 going to follow up and contact them for
8 confirmation of something.

9 DR. NETON: It almost seems, if
10 they could go to the trouble to --

11 MEMBER ZIEMER: Yes.

12 DR. NETON: -- provide the names,
13 then they believe that you should probably
14 contact them --

15 MEMBER ZIEMER: Right.

16 DR. NETON: -- because they believe
17 that they have information they'll offer that
18 might be relevant.

19 CHAIR MUNN: If I were a claimant,
20 that would be my expectation.

21 MR. KATZ: Yes, in Larry's
22 presentation of this several work groups ago,

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1 I mean the pitch he made to the work group was
2 that OCAS doesn't want to lead these people on
3 in any way that believe that there will be
4 contacts made of co-workers unless NIOSH
5 determines that they're needed for a special
6 case but that OCAS didn't want to raise their
7 expectations in any way about making such
8 contacts.

9 That is just to remind you of what
10 Larry basically said.

11 CHAIR MUNN: We continue to discuss
12 the pros and cons of this but can't quite seem
13 to come to a concrete conclusion.

14 I would really like to request that
15 we put this specific issue aside and address
16 it when we are addressing the survivors'
17 questionnaire, as it should logically, I
18 think, apply to both. And it would be helpful
19 for all of us, I believe, to have the folks
20 who are concerned about this to be present and
21 voicing their concerns individually.

22 Do we have any objection to that?

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1 MEMBER ZIEMER: No.

2 MR. KATZ: Mike and Paul agree.

3 CHAIR MUNN: If not, let's plan to
4 do that, and I will make a note to that
5 effect.

6 Now, general comments that Mark
7 had?

8 MR. KATZ: Yes. First, he says,
9 "This seems like a very lengthy and
10 complicated questionnaire, since many workers,
11 based on my experience doing questionnaires at
12 several DOE facilities, have had, on average,
13 four to five job titles and worked in many
14 different buildings over their career. This
15 would mean four to five times through that
16 entire form or questionnaire."

17 That's his first comment, general
18 comment.

19 CHAIR MUNN: And I believe we have
20 heard from Pat that they make every effort at
21 the time they are doing these interviews to
22 capture all of that simultaneously, without

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1 the individuals having to go through the whole
2 form each time. Am I incorrect there?

3 MS. KRAPS: No, that's correct.
4 The other thing I want to point out is that it
5 is entirely up to the Energy employee. We
6 have some Energy employees who want to cull it
7 out very specifically by time period or by job
8 duty, and we'll do that as many times as they
9 would like.

10 So it is really up to the
11 individual as to how we format the information
12 that we are obtaining.

13 CHAIR MUNN: And I certainly agree
14 with Mark that it is lengthy and complicated.

15 I can't, however, perceive any more
16 simplistic way to get as thorough a set of
17 data as we would like for the interviewers to
18 be obtaining.

19 Does anyone have strong feelings
20 that this can be abbreviated in any way?

21 MEMBER ZIEMER: Well, certainly the
22 more places they've worked, the more

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1 information you have to elicit. In a sense,
2 no matter how you format it, you are going to
3 have to go through that many sets of
4 information for the person. If they've worked
5 at five places, you've got five different sets
6 of information.

7 So, in fairness, you have to go
8 through that. I mean, whether you do it
9 sequentially or in parallel, you still have to
10 gather the information.

11 CHAIR MUNN: Yes, I think the sense
12 of the concern is known and understood. Any
13 way to change it is not clearly evident to
14 those of us who are sitting here now.

15 Question No. 2? I mean Comment No.
16 2.

17 MR. KATZ: Comment 2 is actually a
18 question, which is, he asks -- so this is, I
19 guess, for Stu and Pat -- "Are participants
20 allowed to answer some of the questions in
21 this survey? For example, what if an
22 individual was employed as an assembly worker;

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1 could they mention the buildings, duties,
2 radionuclides?

3 MR. HINNEFELD: If they are
4 concerned having to talk about classified
5 information, we would conduct a classified
6 account.

7 Isn't that right, Pat?

8 MS. KRAPS: I'm sorry, I'm not sure
9 that I'm following what the question is.

10 MR. HINNEFELD: If we send these
11 questions to the claimant and the claimant
12 says, "I can't answer some of these because
13 the information is classified," then what do
14 we do?

15 MS. KRAPS: We stop the process
16 right there and we set up a secured interview
17 at the facility with a Q-cleared interviewer.

18 CHAIR MUNN: And so the answer is
19 yes to Mark's question.

20 MR. HINNEFELD: Well, I don't know.
21 What were you going to say, Mike?

22 MEMBER GIBSON: I think Mark may

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1 be asking something more similar to this
2 recent involvement with DOE, worrying about
3 all the different pieces of information that
4 come together. Because this all of a sudden
5 forms some kind of information without its
6 being --

7 MR. KATZ: Yes.

8 MEMBER ZIEMER: It could.

9 MR. HINNEFELD: It could. I think
10 the purpose, then, is, if we're doing the
11 classified interviews at a secure facility, is
12 then the interview report can't leave that
13 facility until -- you know, the DOE has to
14 look at it and make sure it's okay to go
15 before it can leave. So that's the intent.

16 MEMBER GIBSON: Well, I understand
17 when it is known classified information, but,
18 just like we sit around the table here at the
19 work group meetings, and all of a sudden we
20 start talking about this, in light of this,
21 and somebody says, "Stop. We can't talk about
22 that."

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1 Well, what if the claimant and the
2 interviewer does not know that those pieces
3 could fall together in this form?

4 DR. NETON: Well, I know very early
5 on in the process we vetted this interview
6 form with the Department of Energy, and we did
7 make some modifications, but at that time,
8 there was no issue with the questions that we
9 were asking in terms of the mosaic effect or
10 whatever that you would like to call it.
11 That's my recollection.

12 MEMBER GIBSON: I'm just saying I
13 think maybe that is what Mark is asking. I'm
14 certainly not carrying the water for DOE.

15 MR. HINNEFELD: If the interviewee,
16 if the claimant doesn't know the information
17 is classified, our interviewer won't know it
18 is classified. I mean that is a fact. It
19 will end up in the CATI report.

20 MEMBER ZIEMER: Now in advance, it
21 seemed to me that we told the claimants
22 somewhere that if they had classified

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1 information, or if the information they needed
2 to share, if they knew it was classified, they
3 could request -- but that doesn't show up
4 here, does it?

5 DR. NETON: I thought it used to be
6 in one of the letters, but --

7 MEMBER ZIEMER: I thought it was,
8 too.

9 DR. NETON: Maybe I'm mistaken.

10 MR. KATZ: Why don't we ask Pat?
11 Can you hear this, Pat?

12 MS. KRAPS: Yes, I can hear it.
13 I'm trying to flip through the paperwork. It
14 used to have that in here.

15 DR. NETON: Yes, I thought one of
16 the earlier versions had that statement in
17 there.

18 MEMBER GIBSON: It's still in
19 there.

20 MS. KRAPS: Yes, it's still in
21 here. It's right behind the cover letter,
22 right before the questionnaire, right before

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1 the descriptive questions.

2 MEMBER GIBSON: Right before the
3 public segment, the paragraph above that, the
4 last sentence.

5 MEMBER ZIEMER: Okay. I think that
6 takes care of it, doesn't it?

7 CHAIR MUNN: "Dose reconstructions
8 can be completed without discussing classified
9 information. We will arrange for a secure
10 interview for those claimants who believe such
11 an arrangement is necessary."

12 MR. KATZ: It takes care of the
13 question, as Mike was saying, that takes care
14 of the question as to whether it's clearly
15 classified information. It doesn't address
16 the issue of the mosaic effect, or whatever,
17 of bringing together unclassified information.

18 MEMBER GIBSON: And maybe that is
19 not what Mark's asking. So maybe we could
20 wait and see what he means by that.

21 MEMBER ZIEMER: Well, I think the
22 answer to Mark's has to be that, if you're

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1 dependent on the claimant to identify if they
2 think it's classified. Otherwise, I think
3 what described could happen. If the worker
4 doesn't know it, it's not going to happen.

5 CHAIR MUNN: But they are allowed
6 to answer the questions on the survey.

7 MR. KATZ: But the answer to the
8 question is, yes, they are allowed to
9 answer --

10 CHAIR MUNN: Yes.

11 MR. KATZ: -- the questions on the
12 survey.

13 CHAIR MUNN: Which was Mark's
14 question.

15 MR. KATZ: That is Mark's question.

16 CHAIR MUNN: All right. Are we
17 prepared to leave this particular CATI right
18 now, the employee's form and format? We have
19 several suggested items that we are going to
20 put together to circulate, and we are going to
21 make a decision with respect to whether or not
22 we will have a session devoted only to these

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1 and nothing else.

2 This is probably as good a time as
3 any to make that decision. I recommended it,
4 personally. I would like to hear from anyone
5 else who has either similar or opposing
6 opinions.

7 MEMBER ZIEMER: I'm ready to leave
8 this one.

9 MEMBER GIBSON: That's fine.

10 MEMBER ZIEMER: Mike's ready.

11 CHAIR MUNN: We do, however, still
12 have to address the survivor's CATI form. And
13 if it takes us as long as this has taken us,
14 then it will take the better part of a day in
15 any case.

16 MEMBER ZIEMER: I don't think it
17 will take very long.

18 CHAIR MUNN: I certainly hope not.

19 MR. KATZ: We don't have any
20 comments from Mark on the survivors --

21 CHAIR MUNN: No, it was because he
22 did not have adequate -- his email to me said

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1 he hadn't had adequate time to spend putting
2 together his comments.

3 MR. KATZ: Got it. Okay.

4 CHAIR MUNN: So my guess would be,
5 given his language, that he would anticipate
6 doing exactly that at some juncture.

7 Then we will assume, then, at this
8 juncture, that our next meeting we may have to
9 have two more. But at our next meeting we
10 will set aside the first half of our session,
11 specifically for the remaining CATI form and
12 for the verbiage and outstanding issues that
13 we identified as we were going through this
14 one.

15 We'll set that date a little later.

16 MR. KATZ: Okay.

17 CHAIR MUNN: All right, let's go to
18 the next agenda item, which is the status and
19 discussion of specific procedures, which we
20 had designated from either other work groups
21 or from the Board generally to address at our
22 early opportunity.

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1 The first one that I have listed is
2 OTIB-0052, then 54, then 66, and then 70.

3 Who wants to take the lead on
4 identifying where we are and what action this
5 group needs to be undertaking?

6 MR. MARSCHKE: For OTIB-0052,
7 Wanda -- this is Steve -- as I recall, back in
8 December, oh, actually, back in October, Mark
9 had sent me an email with four specific
10 questions regarding OTIB-0052. I had drafted
11 up responses to those four questions and sent
12 them back to Mark.

13 Then, in December, we asked about
14 the status of those four questions and
15 responses. I guess at that time, we were not
16 prepared to get into that detail.

17 So the question is, from an
18 OTIB-0052 point of view, do we want to talk
19 about those questions and responses? Since
20 Mark is not here, I don't know if he will be
21 able to say that he's satisfied with the
22 responses.

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1 Again, if NIOSH looked at them, and
2 whether or not they're satisfied with them, or
3 if they want to make changes or things along
4 those lines --

5 CHAIR MUNN: Have we had any
6 response? Do you have any response to any of
7 the material that's been generated?

8 DR. NETON: Yes, Wanda. This is
9 Jim.

10 I wasn't at that meeting, but I got
11 the message from the Stu. The question that I
12 heard was, does NIOSH agree with SC&A's
13 responses? And the answer is, we've gone
14 through these responses to the four questions,
15 and we're in agreement. We have no issues
16 with what they've prepared.

17 MR. MORRIS: Robert Morris --

18 MR. KATZ: I'm sorry, can you speak
19 up, please? It's very hard to hear you.

20 MR. MORRIS: Sure. This is Robert
21 Morris. I'm with the Chew and Associates team
22 that authored OTIB-0052.

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1 I guess the only thing I would add
2 to what Jim just said is that, at this point,
3 we don't think that anything that has come out
4 of this question-and-answer process prompts
5 any change in the bottom-line recommendation
6 of acquiring a factor of 1.4 to any
7 construction trade worker's measured external
8 dose.

9 DR. NETON: All right. Thanks for
10 that clarification, Bob. I meant to say that
11 the answers in general did not in any way
12 change our approach to what we're doing.

13 MR. MARSCHKE: No, I agree,
14 actually, with that conclusion as well.

15 DR. NETON: Exactly. I think that
16 is where we are at. Mark indicated, though, I
17 think, that these were just the beginning
18 questions. Somewhere I saw in the transcripts
19 or somewhere that he had a few questions to
20 start with, but there may be others that
21 follow. So I don't know that we can concur
22 that we're completely done.

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1 MR. MARSCHKE: Yes, so it is just
2 some starting questions here.

3 DR. NETON: Right.

4 MR. MARSCHKE: Again, I don't know
5 if we can --

6 CHAIR MUNN: Just looking at our
7 issues-tracking phase and the database, we
8 show item 4 as in progress, item 9 as in
9 progress, 9, 10, 11. Twelve is in abeyance.
10 The ORAU dose database was not used. Items 13
11 and 14 are in progress, and 15 and 16 were
12 transferred.

13 So I guess the real question is, if
14 there's general agreement, then am I hearing
15 from you that before we close the items, which
16 are in progress and in abeyance, you would
17 like to have Mark present and have each of
18 those items identified as we go through them?

19 DR. NETON: I think that's probably
20 going to have to happen, Wanda, because my
21 recollection was that NIOSH responded to each
22 of those questions by modifying text in the

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1 OTIB.

2 I think at one point SC&A and NIOSH
3 were in agreement, and the issues were ready
4 to be closed, but then at that point Mark
5 opined that it was not SC&A who could close
6 this issue; it was the Working Group, and
7 rightfully so, or the Subcommittee. So he
8 still has some unanswered questions,
9 apparently.

10 CHAIR MUNN: All right. Then
11 OTIB-0052 will appear on our next agenda list.

12 MR. MARSCHKE: The other thing,
13 Wanda, I believe NIOSH has updated -- you
14 indicated that some of the issues were
15 addressed elsewhere --

16 CHAIR MUNN: Yes.

17 MR. MARSCHKE: -- either
18 transferred or addressed elsewhere. I believe
19 OTIB-0020 is the location that some of those
20 issues were going to be addressed. Wording
21 was going to be added to OTIB-0020, and I
22 believe would be the revision of OTIB-0020

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1 that just went out. Perhaps those words have
2 already been added. I think when I looked at
3 OTIB-0020 there were some additional words in
4 there regarding OTIB-0052.

5 CHAIR MUNN: When we pick this up
6 on our next go-round, we will be able to close
7 those without any issue, unless Mark has a
8 problem with them, correct?

9 MR. MARSCHKE: I think we should --
10 yes.

11 CHAIR MUNN: Good.
12 The next item that I show is
13 OTIB-0054. Where were we?

14 MR. HINNEFELD: I think this is
15 waiting for our responses to the findings.
16 Isn't that where we are?

17 CHAIR MUNN: I can't hear you, Stu.

18 MR. HINNEFELD: It's waiting for
19 our responses, our initial response to the
20 finding.

21 MR. MARSCHKE: That's where the
22 database shows it. Everything on OTIB-0054 is

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1 open.

2 CHAIR MUNN: So we need all
3 responses from NIOSH for OTIB-0054?

4 MR. MARSCHKE: That is correct.

5 CHAIR MUNN: All right.

6 MR. MARSCHKE: There's 26 issues,
7 and we haven't gotten --

8 MR. KATZ: Do we have a timeframe
9 for -- an estimate for --

10 MR. MARSCHKE: Not today, no.

11 MR. KATZ: -- for that?

12 MR. MARSCHKE: No.

13 CHAIR MUNN: We'll continue to
14 carry it on the database until we do.

15 MR. KATZ: Can you just send me an
16 email when you guys figure out what --

17 MR. HINNEFELD: I'll see what I can
18 find out. I think it might be more likely to
19 have some rather than all.

20 CHAIR MUNN: Yes.

21 DR. MAURO: This is John Mauro.

22 This might be helpful. On our list

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1 we've got 26 issues, but in going through the
2 report -- I read it before the meeting -- many
3 of them are supportive. In other words, I
4 can't say how many, but in reading the summary
5 description of the 26 findings, a large number
6 of them, some of them are actually supportive.

7 MR. MARSCHKE: Yes.

8 DR. MAURO: It's we agree or we
9 concur, or certainly there are others that are
10 of varying degrees of concern. Reading it,
11 there really are only a handful that are of
12 substantive concern.

13 So what I am getting at is I just
14 want to let everyone know that, of the 26 --
15 there are 26, but what it boils down to,
16 there's only really a handful that are of some
17 substance. It would probably be a good idea
18 for Joyce Lipsztein to be a party when we
19 eventually get to those issues because I think
20 it is going to come down to four or five that
21 are of substance.

22 CHAIR MUNN: Good.

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1 MEMBER ZIEMER: May I ask whether
2 there was a separate matrix or are these all
3 in the main database now?

4 CHAIR MUNN: OTIB-0054 --

5 MR. MARSCHKE: When you log on,
6 basically, you're going to have -- remember
7 when we talked about that thing this morning,
8 Paul? Is that what you're asking about?

9 MEMBER ZIEMER: Well, no, I was
10 asking whether there was an initial matrix
11 aside from this or is this one that we were
12 able to put the findings directly into this
13 matrix? At one point, we had the initial
14 matrices, and then they got merged, but was
15 there an initial one for this?

16 MR. HINNEFELD: I don't believe so.

17 MEMBER ZIEMER: Okay.

18 DR. OSTROW: This is Steve Ostrow.

19 I was the one who put SC&A's report
20 together. John is right, we have 26 comments
21 total, out of which only 16 are findings, and
22 10 we just called observations. Out of the 16

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1 findings, just taking a quick look, there's
2 maybe about half of them that maybe somewhat
3 require further discussion. About half of
4 them are probably smaller items. So, out of
5 the 26, there's maybe a third of them or so
6 that will require some thought to go over.

7 CHAIR MUNN: That's good. If the
8 database has been peopled with those, that is
9 one of those items which does not come up
10 easily.

11 DR. MAURO: Wanda, this is John.

12 I just went online and opened, and
13 you need to do what Steve said. You know, you
14 go to the filter and just turn it on, the
15 filter section, and it all comes up. So it's
16 all populated. In other words, the database
17 is, in fact, populated, but you've got to go
18 through that one really quick step that Steve
19 described earlier, and it will be there.

20 CHAIR MUNN: Well, I had mine
21 filtered, apparently, in a different way. So
22 it doesn't come up in the unfiltered data at

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1 all. So if I ask for something other than
2 procedure numbers, the first filter, what
3 should the first filter be?

4 MR. MARSCHKE: Don't ask for any
5 filters. Take off all the filters, Wanda.

6 CHAIR MUNN: Okay.

7 MR. MARSCHKE: Take off all the
8 filters and just click the Okay button.

9 CHAIR MUNN: Okay.

10 MR. MARSCHKE: It should come back.
11 If you look at the bottom of the screen, when
12 you come back to the summary screen and you
13 look at the bottom, it should be 532 issues.

14 DR. MAKHIJANI: And just FYI, there
15 was a matrix that was submitted on July 30th,
16 2007. At least that's to my computer --

17 MEMBER ZIEMER: Oh, there was?

18 DR. MAKHIJANI: Yes.

19 MEMBER ZIEMER: July 30th?

20 DR. MAKHIJANI: Yes. There were 16
21 issues.

22 MEMBER ZIEMER: 2007?

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1 DR. MAKHIJANI: At least that's
2 what my computer says.

3 MEMBER ZIEMER: So that should be
4 --

5 DR. MAKHIJANI: That should have
6 been transferred into the --

7 MR. MARSCHKE: What was the 50 --
8 the report itself --

9 DR. MAKHIJANI: That's 54. We're
10 all talking about 52.

11 MEMBER ZIEMER: We're talking about
12 54.

13 DR. MAKHIJANI: Sorry about that.
14 Okay. I have no record of 54 matrix.

15 MR. MARSCHKE: No luck, Wanda?

16 CHAIR MUNN: No, it's not working
17 for me. I took off all the filters, and I'm
18 still not getting what I want to see. So
19 there's some sort of evil demon between me and
20 the O drive, and I'm not sure exactly what it
21 is.

22 MEMBER ZIEMER: Well, in any event,

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1 we need the NIOSH responses.

2 CHAIR MUNN: Yes, we do. So my
3 indication will be our next agenda will need
4 NIOSH responses before we can proceed.

5 MR. HINNEFELD: Okay, I'll provide,
6 when I can, I'll provide a date when we can
7 have responses.

8 CHAIR MUNN: Okay.

9 DR. MAURO: Wanda, this is John.

10 Am I correct that our modus
11 operandi now is that NIOSH will just go ahead
12 and load up the data into the system that we
13 have now, or is that somehow we're going to
14 treat it separate?

15 CHAIR MUNN: No, that's correct.
16 That was my understanding.

17 DR. MAURO: Okay, very good.

18 MR. HINNEFELD: Well, we will have
19 to see if we can get -- we tend to get a read-
20 only version, isn't that right? Even on the
21 ORAU side, it tends to open as a read-only.

22 We will work with our data people

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1 and see if we can get that fixed. We should
2 be able to open it in as a write version.

3 MR. MARSCHKE: You should. Some of
4 your people should have write access. We gave
5 them write access as far as our software --

6 MR. HINNEFELD: Okay. We'll work
7 it out between our computer folks and your
8 computer folks, so that we have write access
9 on the ORAU side. This is on the ORAU side.
10 It's not on our side. So that ORAU will be
11 able to write them in. We'll work on that,
12 and then we will work on getting responses and
13 then just putting them in there.

14 If we can't get that worked out, we
15 will write our responses and we will send them
16 to Steve and John and impose on them to do the
17 data entry for us.

18 MR. KATZ: And, Wanda, I will wait
19 to hear from Stu about timing before I put
20 this on the agenda for the next Subcommittee,
21 because there is no point in putting it there
22 until we get the NIOSH responses.

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1 CHAIR MUNN: That's true, and
2 certainly not for anything more than just
3 status update, where we are with it.

4 MR. KATZ: Right.

5 CHAIR MUNN: OTIB-0066.

6 MR. MARSCHKE: OTIB-0066, we
7 received from Stu the NIOSH responses back on
8 January 16th. SC&A, Steve Ostrow, actually,
9 drafted the SC&A recommendations. I forwarded
10 those to the Working Group a couple of weeks
11 ago, I guess.

12 CHAIR MUNN: Yes.

13 MR. MARSCHKE: They are also in the
14 database, I guess if you can find them in the
15 database, but they should be also in the
16 database.

17 So we can either work with the
18 database or we can work with the Word file
19 that I sent back on, I guess it was about
20 January -- actually, oh, I didn't send the
21 file until a couple of weeks ago.

22 MEMBER ZIEMER: What is it called?

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1 MR. MARSCHKE: The file is called
2 -- oh, it's got a long name. Let me see if I
3 can find it.

4 Do you want the name of the --

5 MEMBER ZIEMER: What you
6 transmitted to us.

7 MR. MARSCHKE: Yes.

8 DR. MAURO: This is John.

9 I'm looking at the electronic
10 version, and I notice that the NIOSH responses
11 are here; that is, they have been loaded.

12 MR. MARSCHKE: The NIOSH responses
13 should be loaded, and also the SC&A replies
14 should be loaded as well, John, if you look at
15 them.

16 DR. MAURO: Yes, I see. Yes. Yes,
17 it's on my version here.

18 MR. MARSCHKE: Yes.

19 DR. MAURO: Yes, I'm accessing the
20 O drive, and it seems to be working for me.
21 I'm probably going to find out what's going
22 on, why some people can do it and some folks

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1 can't.

2 MR. MARSCHKE: I'm just trying to
3 find where -- I don't know that I brought that
4 email, have a copy of that email with me,
5 Paul. Shoot. I brought the file; I didn't
6 put in the email.

7 MEMBER ZIEMER: Oh, I know, I'm
8 looking in the wrong place. I brought it on
9 my disk or my stick here.

10 MR. MARSCHKE: It was a file that I
11 sent back on the 23rd, and the email's title
12 was, "Regarding Information for Procedures
13 Subcommittee Meeting - OTIB-0066 -
14 Disclaimer". And it was sent by me on March
15 23rd.

16 Here's one right here that is
17 highlighted, Paul.

18 MEMBER ZIEMER: Yes. I found it.
19 I was looking in the wrong drive.

20 And your responses are in red?

21 MR. MARSCHKE: That's correct, yes.

22 MEMBER ZIEMER: I've got it.

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1 MR. MARSCHKE: If I can summarize --
2 Wanda, did you --

3 CHAIR MUNN: I have no idea.

4 DR. MAURO: They are four, five,
5 four of them. I think everything is pretty
6 straightforward.

7 MR. MARSCHKE: This is what I was
8 going to suggest: I mean, basically, we agree
9 with NIOSH's responses. So the four items are
10 either -- I think there's two of them that we
11 recommend be closed and two of them that we
12 recommend be put in abeyance. One and 3 I
13 think recommended be put in abeyance, and 2
14 and 4 we recommended to be closed.

15 DR. OSTROW: That's correct.

16 DR. MAURO: Let me help out a
17 little bit, too.

18 There was really only one technical
19 comment where we thought there was something
20 wrong that needed to be fixed. It had to do
21 with a factor of 1.4 in the organically-bound
22 tritium dose conversion factor. NIOSH agreed,

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1 yes, that they will fix it. Right now, of
2 course, that's in abeyance until it is fixed.

3 The other comments, if you recall,
4 Wanda, really have to do with implementation,
5 and implementation on a site-by-site basis.
6 It was something that I think we agreed at the
7 last meeting needed to be handed over to the
8 site-specific work groups like Pinellas,
9 Savannah River.

10 It really becomes a matter of, can
11 you implement this protocol? The protocol is
12 fine, but can you implement it? Do you have
13 the data? That is very much a site-specific
14 issue.

15 In addition, it is an issue that is
16 subject to some classification concerns. In
17 fact, I believe that meeting that Mark and
18 Robert are attending today is exactly this
19 subject.

20 So the way I recall -- and I think
21 as expressed on the information sent to you --
22 is that, from this Procedures Group's

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1 perspective, it is SC&A's position that we're
2 done, I mean in terms of making our technical
3 comments on this particular document, and it
4 really now becomes a matter of how we
5 implement it in the real world at real sites.

6 I don't know whether this is
7 something that -- when we last spoke, it was
8 something that I believe this work group said
9 it probably should be handled by each separate
10 work group dealing with the sites where it's
11 effective.

12 CHAIR MUNN: And how do we relay
13 that information to those individual work
14 groups? We're back in that loop that we have
15 never smoothed out completely of follow-
16 through, because we haven't established a
17 process that is known to all.

18 DR. MAURO: I think you are
19 correct. Right now we haven't passed the
20 baton, so to speak.

21 MR. KATZ: But may I just raise a
22 point, Wanda?

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1 CHAIR MUNN: Yes.

2 MR. KATZ: I mean, SC&A is saying
3 they're finished and they believe the issues
4 have been resolved or there's one in abeyance
5 but it will be resolved, according to their
6 views.

7 But doesn't the work group have to
8 do its bit in terms of it has to accept that
9 before you go on to referring issues for the
10 implementation questions on --

11 CHAIR MUNN: That's correct, we do,
12 absolutely. Yes. And at this juncture, it's
13 very difficult without the data in front of
14 me, which I apparently am unable to find,
15 unable to get to come up for me. It's
16 something in the way I'm set up here that is
17 not doing the right thing.

18 When I say no filter, what I get is
19 a response that there is no filter and no
20 data.

21 (Laughter.)

22 So I'm sorry.

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1 MEMBER ZIEMER: Wanda?

2 CHAIR MUNN: Yes?

3 MEMBER ZIEMER: This is Ziemer.

4 We do have a separate document from
5 Steve that was sent out a couple of weeks ago.

6 Steve, I don't know what the date was. Was
7 it late January or --

8 MR. MARSCHKE: I sent it out on the
9 23rd.

10 MEMBER ZIEMER: Of January?

11 MR. MARSCHKE: No, of March.

12 MEMBER ZIEMER: March? But what
13 was the date on the document?

14 MR. MARSCHKE: The date on the
15 document, Steve Ostrow wrote it on January
16 25th.

17 MEMBER ZIEMER: It shows the 23rd,
18 but --

19 MR. MARSCHKE: The 23rd on the
20 name, but if you're looking at the document
21 itself, it comes to --

22 MEMBER ZIEMER: Anyway, I think you

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1 can find it. It's called, I think the file
2 that was attached is called, it was called,
3 "2009-01-23 NIOSH responses to SC&A comments".

4 CHAIR MUNN: Then I must have it
5 on --

6 MEMBER ZIEMER: Actually, "SC&A
7 comments on OTIB-0066." It goes on,
8 "Comments," dah, dah, dah, dah, with a
9 disclaimer, and so on. It's a long, long
10 title.

11 CHAIR MUNN: Yes. I obviously --

12 MEMBER ZIEMER: It was an
13 attachment to an email. It has the findings
14 and the SC&A responses in red.

15 MR. MARSCHKE: If you look in your
16 email inbox, Wanda, on March 23rd, you should
17 have an email from me. Or, actually, there
18 should be two emails from me. Or not the
19 23rd; it's the 10th, right? March 10th. Yes,
20 March 10th. I'm sorry.

21 If you look on March 10th, you
22 should have two emails from me, and this is

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1 attached to the one that has, in the email
2 name, it has "OTIB-0066" in the email name.

3 MR. HINNEFELD: I just sent them
4 both to her again.

5 CHAIR MUNN: I have two, you are
6 correct.

7 MR. MARSCHKE: And one of them
8 should be for OTIB-0066 and the other one
9 should be on the third set of procedures.

10 CHAIR MUNN: And I thought I had
11 already downloaded this to my personal data,
12 but -- I have already downloaded it, as I
13 thought. I guess it has to be downloaded
14 again.

15 It's a long way to get to the
16 information. But I now have the January 16th
17 document. Fine.

18 And so we need to go through these
19 responses one by one to identify whether we
20 can, as a work group, accept them or not
21 before we go further.

22 So the first issue was, NIOSH

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1 agreed. SC&A says it is in abeyance.
2 OTIB-0066 will be corrected in the next
3 revision.

4 Is there any objection to that
5 finding and that status?

6 MEMBER ZIEMER: I have no
7 objection.

8 MEMBER GIBSON: No.

9 MEMBER ZIEMER: Mike has none.

10 CHAIR MUNN: All right, next item,
11 No. 2, NIOSH says, "It's not within the scope
12 of 66 and should be addressed in the site
13 profile." SC&A agrees with that assessment.

14 "Selection of the appropriate
15 fitting compound must usually be based on
16 process notice. No further action required
17 with respect to the OTIB."

18 This is the discussion we just had,
19 John, correctly?

20 DR. MAURO: Yes, Wanda.

21 CHAIR MUNN: So, from the
22 standpoint of this current discussion, the

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1 item is closed. The outstanding issue here is
2 how we transmit this information to the
3 respective site groups, correct?

4 DR. MAURO: That's my
5 understanding.

6 CHAIR MUNN: Has anyone at NIOSH
7 given any real thought to how we can make sure
8 this happens?

9 MR. HINNEFELD: Not terribly much.
10 Other work groups don't use similar
11 databases, so you can't just write it onto a
12 database.

13 As a general rule, there is a
14 findings matrix at some sites, sites that have
15 had either a site profile review that's under
16 discussion or an SEC evaluation report that's
17 under debate. There will be an issues matrix
18 assembled for that that this could
19 theoretically be added to. I mean, it just
20 has to be a manual system because those
21 matrices are kept up-to-date manually, no
22 matter what. What do you think, Jim?

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1 DR. NETON: I'm not sure there's an
2 issue here. I mean, if a site profile review
3 that addresses a tritium dose reconstruction
4 has a finding that says we -- and I think this
5 relates to an inappropriate solubility type --
6 it would be handled in that fashion. I mean
7 it's a site-specific issue at that point.
8 It's no different --

9 CHAIR MUNN: And OTIB-0066 will
10 automatically come into play?

11 DR. NETON: Right. It's no
12 different than Super S. I mean what we don't
13 say here is all the sites in the DOE complex
14 where Super S plutonium might exist. It's up
15 to the individual site profiles to identify
16 the existence of those types of materials, and
17 that would bring in the OTIB to address it.

18 CHAIR MUNN: I think there's an
19 entirely different issue than the one that we
20 have where we specifically transfer any
21 procedure --

22 DR. NETON: Yes. I don't think

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1 there's a transfer, unless I'm missing
2 something, I don't see a transfer issue.

3 CHAIR MUNN: Yes, it doesn't look
4 like it is, either. It shouldn't
5 automatically come into play.

6 DR. NETON: I mean, the only thing
7 I could think of is that one might put a
8 caveat in the OTIB itself that one needs to be
9 careful about applying this and developing an
10 adequate source term at the individual sites
11 to which it applies, or something to that
12 effect.

13 CHAIR MUNN: But that still would
14 not get to the root of the real issue
15 necessary for the technical people involved to
16 know and understand the caveats that exist in
17 OTIB-0066.

18 We have to rely on professional --

19 MEMBER ZIEMER: Do you recall if in
20 OTIB-0066 is there already a statement, a
21 general statement about the fact that specific
22 dose-bounding for a site is not within the

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1 scope of OTIB-0066?

2 DR. NETON: That was certainly in
3 our comment to the SC&A comment.

4 MEMBER ZIEMER: Yes, I mean, does
5 the profile or does the OTIB --

6 DR. NETON: I don't recall if it
7 says that.

8 MEMBER ZIEMER: -- give the reader
9 a heads-up that this is --

10 DR. NETON: I don't know.

11 MEMBER ZIEMER: -- was not expected
12 to be -- I mean SC&A is kind of saying, okay,
13 you've talked about developing -- how did they
14 word it? You've talked about bounding
15 techniques, but you haven't developed any or
16 something, but they're saying you can't do
17 that, and you're saying, yes, it wasn't
18 intended for that.

19 DR. NETON: Well, "The purpose of
20 this OTIB is to provide guidance" -- I'm
21 reading from the OTIB -- "on how to use your
22 bioassay data to calculate the best estimates

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1 of the annual organ dose for intakes of
2 tritium-bound organic compounds and tritium in
3 a metal matrix."

4 So, if one encounters those at a
5 site --

6 MEMBER ZIEMER: Yes.

7 DR. NETON: -- then one would apply
8 this OTIB.

9 MEMBER ZIEMER: Right.

10 DR. NETON: It's not in the scope
11 of this OTIB to go and delineate all the
12 existence of those types of compounds
13 throughout the DOE complex. I think that is
14 what we are saying.

15 CHAIR MUNN: Yes.

16 DR. NETON: And it would be
17 impractical to do so.

18 CHAIR MUNN: The title of the OTIB
19 itself should be the flag to any future
20 activities at any site.

21 The calculation of dose from
22 intakes of special tritium compounds would

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1 automatically be a reference for anyone who is
2 dealing with a site where intakes of special
3 tritium compounds were a potential.

4 DR. NETON: Right, and I think
5 SC&A's concern -- and maybe just apparently so
6 -- is, how would we guarantee that we would
7 always use tritides appropriately throughout
8 the complex? I think that Ted mentioned that
9 it is the subject of this meeting today in
10 Washington, is what we can or cannot say.

11 If best practice with other
12 radionuclides like Super S plutonium is any
13 indication, we would probably default very
14 conservatively to the presence of tritides if
15 we didn't know, and where it would tend to
16 bound with dose. It's not that it would
17 always be a bounding case, but if there were
18 selection of organically-bound tritides and
19 water-borne tritium, we would run the dose
20 reconstruction three different ways and pick
21 the dose that is highest.

22 So I don't really see that there is

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1 an issue here.

2 DR. MAURO: Jim, I don't think the
3 protocol that is written up right now says
4 what you just said. I think there might be
5 good reason for that because my understanding
6 from at least a couple of the sites is that
7 the use of tritides, because of the total
8 curie through-put, the curies moving through a
9 facility being handled for various reasons,
10 the amount of tritides is
11 minuscule -- minuscule -- compared to the
12 amount of tritium or tritiated water.

13 As a result, it was my
14 understanding that it might be difficult to
15 parse workers whose bioassays, when you take
16 the urine sample and you look for tritium in
17 the conventional techniques, and you don't see
18 anything, it might be because there was none
19 there or there could have been a considerable
20 amount of tritides, but it doesn't show up.

21 In a way, it is a lot like -- I
22 guess you're right, it's a lot like the high-

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1 fired plutonium, but I think, in the case of
2 the high-fired plutonium, there was a large
3 fraction of the exposures, especially from the
4 fire.

5 In terms of scale, my understanding
6 is that the quantities are very, very small.
7 Depending on the facility and the time period,
8 and the job the person was doing, you know,
9 you certainly may want to use the approach you
10 described, but it would be what I would
11 consider to be off the charts bounding.

12 DR. NETON: Well, John, I think --
13 and I haven't looked at this in a while, but
14 my recollection is that this would really only
15 apply to lung doses.

16 DR. MAURO: Yes.

17 DR. NETON: So really, you're only
18 lung doses, which are already compensated
19 approximately 80 percent of the time in this
20 program to begin with. So I don't know that
21 it would make a huge difference overall.

22 DR. MAURO: Yes, I think you're

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1 right. The systemic doses, I don't think they
2 are affected by any means the way the lungs
3 are.

4 DR. NETON: Right.

5 DR. MAURO: And I think that is
6 what your model shows.

7 DR. NETON: Right.

8 DR. MAURO: Yes.

9 DR. NETON: Yes, I guess our
10 response is this is outside of the scope --
11 the document, I think, clearly defines the way
12 to address dose symmetrically. How
13 operationally we address it I think is a
14 different issue.

15 MR. SIEBERT: Well, and the OTIB
16 itself in the recommendations does
17 specifically state that it's not its position
18 to make that decision. It says, in the
19 recommendations, the first one is, "Therefore,
20 the selection of an appropriate tritium
21 compound in an intake evaluation must usually
22 be based on process knowledge of the source

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1 terms in the workplace."

2 MR. KATZ: Can you hear that, Wanda
3 and John?

4 DR. MAURO: Very clearly.

5 MR. SIEBERT: Right. But that's
6 different than saying load the bounding
7 assumption, you see. I agree with -- the
8 words that are in the OTIB right now are right
9 on target. I guess the question becomes:
10 that's easier to say than done in terms of
11 knowing who you're going to assign this to. I
12 guess that was our concern.

13 There's really a question, I guess,
14 for the work group, whether this is something
15 that they want to hand off and make sure is
16 picked up by the affected ones or treated the
17 way you treated the other OTIB -- was it
18 49? -- on high-fired plutonium. There was not
19 a handoff.

20 CHAIR MUNN: No, there was not.
21 The procedure exists. It will be used in
22 situations where it is applicable.

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1 DR. NETON: I mean I can think, for
2 example, there's Mound on the table with that
3 potential issue, maybe Pantex, maybe Pinellas.

4 So there are sites already we know that are
5 currently undergoing review for other issues,
6 including tritium exposures, and that would be
7 up to the individual Working Groups themselves
8 to identify the appropriateness of those
9 reconstructions.

10 MEMBER ZIEMER: I don't see a
11 handoff here because it's really not an open
12 issue.

13 CHAIR MUNN: It doesn't appear to
14 be.

15 I have no objection to accepting it
16 as closed, item 2 as closed. Any objection?

17 (No response.)

18 If not, let the record show that we
19 have closed that item.

20 Item 3 is in abeyance until NIOSH
21 incorporates the air monitoring data.

22 MEMBER ZIEMER: Yes, we need to

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1 agree to that, too, right?

2 CHAIR MUNN: I believe so.

3 Any disagreement with the in
4 abeyance status of No. 3?

5 MEMBER ZIEMER: I think that's
6 appropriate.

7 CHAIR MUNN: Then item No. 4, NIOSH
8 made the recommendation -- "It is not possible
9 to identify the compound responsible,
10 including excretion resulting from intakes.
11 Most claimant-favorable models consistent with
12 the source terms. SC&A agrees. Closed."

13 Any objection?

14 (No response.)

15 Thank you.

16 MEMBER ZIEMER: No objection.

17 CHAIR MUNN: Thank you for getting
18 me back to your original information, Steve.
19 I'm sorry that it is not coming up for me on
20 the ORAU database, but it's not.

21 MR. MARSCHKE: Well, it has been
22 changed in the ORAU -- when you can get to it,

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1 Wanda, I have made the changes. I have made
2 the four changes that the Subcommittee has
3 just agreed upon.

4 CHAIR MUNN: Excellent.

5 MR. MARSCHKE: So the database has
6 been updated.

7 CHAIR MUNN: Thank you.

8 Can we now move on to OTIB-0070?

9 MR. KATZ: Can I ask a question of
10 process here with respect to -- I mean, so you
11 all disagreed and closed all the issues for
12 OTIB-0066 with the Subcommittee --

13 MR. HINNEFELD: Two are closed and
14 two are in abeyance.

15 MR. KATZ: Oh, two in abeyance,
16 okay.

17 MEMBER ZIEMER: But that just means
18 they are moved into --

19 MR. KATZ: So my process question
20 is just, does the Subcommittee then just
21 report back to the full Committee of the Board
22 as a recommendation? Is that what happens

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1 next?

2 CHAIR MUNN: We have not
3 traditionally done that.

4 MR. KATZ: Okay.

5 MEMBER ZIEMER: I think we can
6 close these out.

7 MR. KATZ: Independently?

8 MEMBER ZIEMER: The Board is not
9 going to be looking at these all in detail.
10 My recommendation is that Wanda report what
11 we're recommending, and if there's any
12 objection or something like that -- but I
13 don't think the Board is in a position to look
14 at these procedures and all these in detail.

15 MR. KATZ: Right.

16 CHAIR MUNN: Yes, we've
17 traditionally not done that. We worked on the
18 assumption that that's the purpose of our work
19 groups and our subcommittees, to do this
20 detailed work, and only bring a very general,
21 broad --

22 MEMBER ZIEMER: We did provide in a

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1 report to the Secretary the status of the
2 first set of procedures.

3 CHAIR MUNN: Yes, but that was
4 essentially what their status was --

5 MEMBER ZIEMER: Right.

6 DR. NETON: -- not the individual
7 items.

8 MEMBER ZIEMER: But, in essence,
9 the Board was signing off on what the work
10 group had done, yes.

11 DR. NETON: I thought a Working
12 Group, though, could not independently come to
13 the conclusions or decisions.

14 MEMBER ZIEMER: At some point, we
15 would have to get the Board's blessing, which
16 would be, for example, a wrap-up and say,
17 "Here's the package."

18 CHAIR MUNN: The other thing that
19 we could do is we made a point of providing
20 information on how to access this database and
21 how to follow each of these items for any
22 individual who was interested in doing that.

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1 That's been presented to the entire Board,
2 with the hope that anyone who has specific
3 concerns over any one of these issues that has
4 been cleared by both NIOSH and our contractor
5 would have an opportunity to see the entire
6 history of where we've gone with it.

7 MR. KATZ: Yes. Well, my point is
8 this: I mean it's clear. It's just that it
9 seems to me there needs to be at some point
10 closure on these procedures from the Board's
11 perspective. That's all. How that gets
12 done --

13 MEMBER ZIEMER: I don't think it
14 has to be incremental.

15 MR. KATZ: No, that's right. It
16 could be in wrap-ups.

17 MEMBER ZIEMER: Wrap-ups
18 periodically, yes.

19 CHAIR MUNN: I am also not getting
20 OTIB-0070 coming up for me for my summary. I
21 do not know why.

22 MR. MARSCHKE: Well, it's the same

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1 problem again. It could be the same problem
2 that you had with 54 and 66.

3 CHAIR MUNN: Yes.

4 MR. MARSCHKE: If you didn't get
5 one of them, you're not going to get any of
6 them.

7 CHAIR MUNN: No, I don't think I'm
8 going to get --

9 MR. MARSCHKE: And I didn't send
10 you a -- well, actually, am I correct, Stu,
11 that we haven't received NIOSH's responses on
12 OTIB-0070 yet?

13 MR. HINNEFELD: That's correct.
14 OTIB-0070 is re-suspension, right? We did
15 radioactive, yes, not re-suspension of jobs,
16 but dose reconstruction where there's no
17 radioactive period; then we have not submitted
18 our initial report.

19 MR. KATZ: So I guess, similarly,
20 there can I just get a message from you, Stu,
21 about timeframe?

22 CHAIR MUNN: I still get nothing

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1 when I do that.

2 So what can we do with OTIB-0070?

3 MEMBER ZIEMER: Well, since we're
4 awaiting NIOSH responses --

5 DR. NETON: Was there one issue
6 that was transferred to OTIB-0070 from the GS
7 5 -- TBD-6000 working group meeting?

8 MEMBER ZIEMER: I'm trying to
9 remember.

10 DR. BEHLING: This is Hans Behling.
11 Yes, it is -- there were really 15
12 findings that I introduced into that review,
13 but many of which are shared findings because,
14 essentially, they center around four issues.

15 The first is the source term
16 depletion factor that was assumed at 1 percent
17 per day.

18 The other real important one that's
19 multiply-involved in these findings is the re-
20 suspension factor of $1E-6$, and there was also
21 some concern about the use of the Battelle
22 team -- I guess it's referenced here, but it's

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1 the TBD-6000 that raised some question.

2 Lastly was NUREG-1400 that was also
3 an issue that I cited as a finding.

4 So those are real four common
5 issues, and they represent all of the 15
6 findings.

7 DR. NETON: No, I understand that,
8 Hans, but my recollection was that we had a
9 Working Group meeting a week or so ago on
10 TBD-6000.

11 CHAIR MUNN: Yes.

12 DR. NETON: One of the findings in
13 TBD-6000 had to do with the re-suspension
14 factor or handling the re-suspension of
15 material at AWE facilities. I thought that we
16 had agreed that, since we were going to change
17 TBD-6000 to just reference OTIB-0070 for its
18 approach, that way the finding in TBD-6000
19 could be captured in the OTIB-0070.

20 MEMBER ZIEMER: Right. That's
21 exactly correct.

22 DR. NETON: So I don't know what

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1 action would need to occur with this
2 Subcommittee, but I think that needs to
3 somehow get transferred. Maybe we're not
4 prepared to do that today, but we probably
5 need to remember that.

6 DR. MAURO: Jim, this is John.

7 Yes, I remember when we discussed
8 that, and I could say, I mean if this helps
9 any, when we get to the point on OTIB-0070
10 where we address the re-suspension factor and
11 we get to the point where we come to some
12 resolution, whatever that might be, that
13 would, for all intents and purposes, resolve
14 the issues on TBD-6000. So I mean, it's
15 almost like automatic.

16 DR. NETON: Right, but, I mean,
17 does there not need to be a crosswalk here
18 somewhere in the database to say that that
19 TBD-6000 finding is now tied in with a
20 resolution of comments on OTIB-0070?

21 MR. MARSCHKE: The question is, is
22 it addressed in -- is TBD-6000 addressed in

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1 the OTIB-0070 findings or is it kind of a new
2 finding from TBD-6000 that is being
3 transferred to OTIB-0070?

4 MEMBER ZIEMER: Sort of the same
5 finding in both. I think in TBD-6000, we said
6 in the hierarchy this is an overriding one
7 that's more system wide. So we're not going
8 to separately develop a response and impose it
9 upward. Rather, we will bow to the hierarchy
10 of this one being the response from NIOSH,
11 whatever that is.

12 So we're not transferring it so
13 much as saying that we are -- we don't even
14 have a word for it. Did we put in abeyance?
15 I don't remember, but we said, basically, we
16 are going to accept whatever their approach is
17 as the proper one and would refer to that
18 finding.

19 But I don't think we're
20 transferring ours to you because you already
21 had it as an issue, right?

22 MR. MARSCHKE: Right. If you can

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1 go through and tell me which of the OTIB-0070
2 findings you think addresses this one, we can
3 then put a little, you know, into one of
4 the --

5 DR. NETON: That's what I was
6 getting at.

7 MR. MARSCHKE: Into one of these
8 boxes here, we can put a little thing saying,
9 when this is closed or in abeyance, please
10 notify the TBD-6000 Work Group, so that they
11 can handle theirs.

12 MEMBER ZIEMER: In fact, it might
13 apply to other work groups as well.

14 DR. NETON: The findings, any
15 finding in TBD-6000 as related to estimation
16 of residual contamination at an AWE facility
17 would be transferred to OTIB-0070 because
18 that's what OTIB-0070 is.

19 MEMBER ZIEMER: Right.

20 DR. NETON: OTIB-0070 is, how do
21 you calculate residual contamination in a
22 facility? It gives you different methods,

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1 approaches.

2 So there's no reason to have this
3 depletion model, for example, in TBD-6000
4 because that's what's in OTIB-0070. So we're
5 going to take -- our comment resolution for
6 TBD-6000 is to say, if you want to calculate
7 resuspension in a residual contamination
8 period, go look at OTIB-0070.

9 MEMBER ZIEMER: OTIB-0070. Yes,
10 that will be our solution.

11 DR. NETON: Our addressing that
12 finding is to say we're going to the OTIB to
13 say it's --

14 MEMBER ZIEMER: So it, basically,
15 puts it in abeyance by saying it's being
16 addressed there.

17 MR. MARSCHKE: Basically, yes,
18 you're --

19 MEMBER ZIEMER: We didn't transfer
20 the findings there. They were already dealing
21 with it.

22 MR. MARSCHKE: It's basically

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1 referring to the OTIB-0070 --

2 MEMBER ZIEMER: Right, as the
3 hierarchy of --

4 DR. NETON: But it can't be closed
5 really because it's still --

6 MR. MARSCHKE: It's in abeyance.

7 DR. NETON: It's in abeyance? Is
8 that the right word?

9 MR. MARSCHKE: It will be closed as
10 soon as this is resolved --

11 MEMBER ZIEMER: It is like saying
12 you are going to modify some other thing.

13 DR. NETON: Okay.

14 MEMBER ZIEMER: But it would be
15 fine to have the note, but I think it's going
16 to apply to other facilities, not just 6000 or
17 not just that particular --

18 MR. MARSCHKE: And it sounds like
19 it applies to generically many of the comments
20 that were made on -- it will go through all
21 the comments that were made on OTIB-0070.
22 Basically, you're waiting for OTIB-0070 to be

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1 resolved.

2 DR. NETON: But anything to do with
3 residual contamination in these populations is
4 going to be -- OTIB-0070 is the repository of
5 that approach.

6 DR. MAURO: I would go as far as to
7 say there are probably a hundred findings out
8 there, and all the site profile reviews, all
9 the dose reconstruction audits, they're all
10 where there are comments made that all pertain
11 to how you do your dose in the residual
12 period.

13 When we close out OTIB-0070, we're
14 going to close out a hundred other issues all
15 over the place. So I think this is the very
16 efficient way to achieve a great deal of
17 progress very quickly, if we can engage this
18 particular OTIB.

19 MR. KATZ: So it's a high priority,
20 Stu.

21 MR. HINNEFELD: Okay. I'll put it
22 on a list of high priorities.

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1 DR. MAURO: I'll take it a step
2 further though. Since it deals with the
3 residual period, it is sort of like a tempest
4 in a teapot.

5 MR. HINNEFELD: You can take a
6 number.

7 DR. MAURO: The doses during the
8 residual period, unless that's the only
9 exposure a person experiences, usually are
10 dominated by the operations period. But
11 nevertheless, we commented on all the dose
12 reconstructions. Whenever a person had a
13 residual exposure, it's in there.

14 If you look at them, and if it was
15 only exposures during the residual period,
16 well, then, of course, that was the dominant.

17 But very often, the person is exposed across
18 from operations, and then you will see the
19 residual period is always very small compared
20 to the operations period.

21 So in a funny sort of way, we have
22 an issue that is not of that great magnitude

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1 in terms of affecting the outcome of doses,
2 but there are an awful lot of findings out
3 there that, once we close this, they are going
4 to all close out. All of sudden, progress is
5 going to just leap in terms of SC&A's ability
6 to sort of like clear the backlog, carrying
7 over from the last contract, something that I
8 would like to do. Yes.

9 CHAIR MUNN: All right. So
10 OTIB-0070 becomes focus for what we're going
11 to be doing.

12 In our next session, hopefully, my
13 database will be the same database everyone
14 else is looking at.

15 I do see that in my version of the
16 TBD-6000 information our work group meeting
17 discussions simply say issue transferred, and
18 all of the TBD-6000 issues, apparently, are
19 carrying the transferred designation, but it
20 does not say what it is transferred to.

21 MR. MARSCHKE: It was transferred
22 to the Working Group. All the TBD -- you're

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1 looking at the database, Wanda?

2 CHAIR MUNN: Yes, I am. It's what
3 it is presenting itself to me as the database.

4 MR. MARSCHKE: Right. The first 13
5 or so were --

6 MEMBER ZIEMER: Transferred from
7 issues to the TBD-6000 Work Group.

8 MR. MARSCHKE: Yes, they were
9 transferred from the Procedures Work Group to
10 the TBD-6000 Work Group.

11 CHAIR MUNN: We probably should say
12 where they were transferred to.

13 MR. MARSCHKE: Let me see.

14 CHAIR MUNN: My follow-up just
15 simply says the issues have transferred. It
16 does not say to whom.

17 The Work Group Directive says to
18 transfer it there, I see. The SC&A follow-up
19 did not. I guess one place is fine enough.
20 Sorry. All right.

21 MR. MARSCHKE: Yes, it says that it
22 transferred to the -- yes.

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1 CHAIR MUNN: Yes, in the Work Group
2 Directive it says where it goes to. I was
3 just looking under the follow-up and didn't
4 see it there.

5 So the action item for 70 is whose?

6 MR. MARSCHKE: Stu is going to
7 notify me when he has sort of a timeframe, and
8 then we will put it on the agenda for this
9 work group.

10 CHAIR MUNN: Okay.

11 MR. KATZ: When we have NIOSH
12 responses, in other words.

13 CHAIR MUNN: Okay. Very good.

14 Do you want to take a 15-minute
15 break?

16 MR. KATZ: There's nods positive,
17 affirmative.

18 CHAIR MUNN: All right, very good,
19 15 minutes. We'll be right back, when we will
20 start with the comments on the third set of
21 procedure reviews.

22 MR. KATZ: Okay, so about 10 past.

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1 CHAIR MUNN: Thanks.

2 MR. KATZ: I'm just putting the
3 phone on mute. I'm not breaking the line.

4 (Whereupon, the above-entitled
5 matter went off the record at 2:55 p.m. and
6 resumed at 3:10 p.m.)

7 CHAIR MUNN: We're ready to start
8 with the third set of responses that SC&A
9 provided us earlier this month, which,
10 remarkably, seem to show up on the database
11 that I have in front of me.

12 So the first item that we have is
13 OTIB-002-14, the SC&A recommendation.

14 MEMBER ZIEMER: Now which version
15 of the third set are we looking at?

16 CHAIR MUNN: We are looking at
17 the --

18 MEMBER ZIEMER: Is this the
19 December 5th version?

20 MR. MARSCHKE: No. It should be a
21 version that I sent to you on March --

22 CHAIR MUNN: 3/9/09 is what shows

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1 on my database.

2 MEMBER ZIEMER: Okay.

3 MR. MARSCHKE: Right. Yes. And
4 the email that came was -- I sent the email
5 out on March 10th. So there should be an
6 email from me to the Subcommittee on March
7 10th, a second one, and the name of it should
8 be --

9 MEMBER ZIEMER: Is it "Selected
10 Issues, Third Set" or is it --

11 MR. MARSCHKE: That's correct,
12 "Selected Issues, Third Set - SC&A" -- yes.

13 CHAIR MUNN: So we have a
14 recommendation from SC&A on finding
15 OTIB-002-14, that "the issue status be changed
16 to In Progress. NIOSH needs to state that
17 OTIB-002 should be used only as a last resort
18 and for denial only."

19 Does NIOSH have a response to that?

20 MR. HINNEFELD: I don't think so.
21 I mean we got these -- what? -- two weeks ago.
22 So we have not prepared anything after that.

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1 CHAIR MUNN: So our action here is
2 to -- essentially, we don't have any agreement
3 or response on the --

4 MR. MARSCHKE: Changing the status
5 to in progress means that we're still, I
6 guess, negotiating the resolution.

7 MS. BRACKETT: This is Liz
8 Brackett.

9 I can say that the dose
10 reconstructionists have already been told that
11 this is a last resort. It doesn't state that
12 in the OTIB, but they've been given that
13 verbal direction.

14 It's only ever been used for denial
15 only. I haven't gone back and looked at the
16 wording, but I thought that it already said
17 that in the OTIB. I think indirectly it does
18 because an overestimate is not allowed to be
19 used for a compensable case, and I'm pretty
20 sure it does say an overestimate.

21 We can make it more clear, but we
22 pretty much do this already.

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1 CHAIR MUNN: Is there any problem
2 with changing -- does NIOSH have any objection
3 to changing the status from open to in
4 progress?

5 MR. HINNEFELD: No.

6 CHAIR MUNN: Any objection from
7 anyone else?

8 DR. MAURO: It sounds like -- and
9 I'm looking at the words right now -- it
10 sounds like we're almost at an in abeyance
11 state. That is, in concept, we agree on what
12 the intent is of this OTIB. That is after
13 denial only as a last resort for placing an
14 upper bound on internal dose. I mean it
15 sounds like we're in agreement with that, the
16 concept.

17 So I don't know, I'm just making
18 the suggestion that maybe this is actually in
19 abeyance.

20 DR. NETON: But John, wouldn't in
21 abeyance imply that we were going to modify it
22 to state that or --

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1 MR. HINNEFELD: Yes.

2 DR. NETON: I don't have any
3 fundamental --

4 MR. HINNEFELD: Abeyance promises
5 that we'll change it.

6 DR. MAURO: Okay.

7 MR. HINNEFELD: I think, sitting
8 here today, we would -- normally, what happens
9 is we come back with a response that says,
10 okay, we will change this thing, something,
11 and that's usually what prompts something to
12 be placed in abeyance, awaiting that change.

13 So in this case, you know, just
14 strictly speaking pro forma, we do agree
15 pretty much with the findings. We haven't
16 come back with our response on top of this
17 latest one that says, yes, we agree we're
18 going to change it.

19 We may take a look at it and say,
20 you know, "It really says everything it needs
21 to say. We don't really think it needs to be
22 changed." Because we don't really like to go

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1 around and change things if we don't feel like
2 they're really called for.

3 These tend to be fairly low-
4 priority changes, if it's just to reflect what
5 we're doing anyway.

6 DR. MAURO: Yes, and I guess, on
7 that basis, I mean if the work group -- I mean
8 I'm comfortable with that -- I guess I'm
9 speaking on behalf of myself and Joyce -- with
10 that resolution. That is, you know, in
11 effect, you're saying you believe the language
12 as it is right now, for all intents and
13 purposes, says what we would like it to say.

14 MR. HINNEFELD: Actually, I don't
15 know. I mean we've got this --

16 MR. SIEBERT: Right now, the OTIB
17 does say, "If the outcome yields a probability
18 causation greater than 50 percent of dose
19 reconstruction, using more reasonable
20 assumptions will be performed."

21 DR. MAURO: Okay.

22 MR. SIEBERT: So the use for denial

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1 is already in there.

2 DR. MAURO: So for all intents and
3 purposes, it says these are denial only? I
4 guess what you just read to me, I'm fine with
5 that.

6 CHAIR MUNN: Yes, in the absence of
7 a written response, a formal response from
8 NIOSH, in progress is probably the appropriate
9 designation right now.

10 DR. MAURO: Okay.

11 MEMBER ZIEMER: But we don't have
12 -- is that the official response? I think Stu
13 is saying they haven't really --

14 CHAIR MUNN: No, that's what I
15 said: in the absence --

16 MR. HINNEFELD: In progress is the
17 appropriate thing.

18 MEMBER ZIEMER: Oh, in progress,
19 yes, okay.

20 MR. HINNEFELD: Because we haven't
21 decided yet whether we think, yes, this
22 warrants change or no, it doesn't warrant

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1 change. If we say, yes, it warrants change,
2 then when we say that, then I would think it
3 would go to in abeyance. If we say, no, it
4 doesn't warrant change, then there is going to
5 have to be some sort of agreement whether
6 everybody agrees with that. Then it could be
7 closed that way, right?

8 DR. NETON: It sounds like we have
9 that agreement here.

10 DR. MAURO: I think we've got it.

11 DR. NETON: Is it so formal that we
12 have to have this all in writing or can the
13 record of the meeting serve as --

14 MR. MARSCHKE: It's okay with me if
15 you guys want to close it. We've got the
16 transcript of the meeting, which basically --

17 DR. NETON: Yes, if we're all in
18 agreement, I say we close it.

19 CHAIR MUNN: The record of the
20 meeting should suffice.

21 DR. NETON: Yes.

22 MR. HINNEFELD: That's fine by me.

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1 DR. MAURO: And Steve, you can
2 actually load that into the database, I mean
3 if the work group is okay with that.

4 MEMBER ZIEMER: I'm okay with that.

5 CHAIR MUNN: Any objection?

6 MEMBER ZIEMER: No.

7 MR. KATZ: Mike's nodding his head.
8 He's in agreement, too.

9 CHAIR MUNN: There is no objection?

10 (No response.)

11 MR. MARSCHKE: It's closed.

12 Then, Steve, you're authorized to
13 make the appropriate change.

14 The next item we have is
15 OTIB-005-03.

16 We have SC&A's recommendation
17 following NIOSH's response. They agree with
18 the NIOSH response and recommend the issue be
19 closed.

20 Does anyone want to take additional
21 time to review the response and the closure
22 statement?

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1 (No response.)

2 Any objection to accepting it as
3 closed?

4 (No response.)

5 Hearing none --

6 MR. MARSCHKE: Which one are we
7 closing?

8 MEMBER ZIEMER: 005-03.

9 CHAIR MUNN: 005-03.

10 MR. MARSCHKE: Got it, and we're
11 closing that. Thank you.

12 CHAIR MUNN: The next response that
13 they had was OTIB-0015, items 1 through 4.

14 "SC&A recommends all issues be
15 closed in accordance with the March 2 email
16 from NIOSH Document Control that OTIB-0015 has
17 been canceled because Bayesian methods are no
18 longer used for dose reconstruction.
19 Therefore, information in OTIB-0015-00 is no
20 longer relevant."

21 Any objection to having this
22 closed?

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1 MEMBER ZIEMER: It has to be closed
2 if it's not used anymore.

3 CHAIR MUNN: That's true.

4 MEMBER ZIEMER: How is that going
5 to show up here now? It just shows up as
6 closed --

7 CHAIR MUNN: Items 1 through 4 will
8 show this recommendation and will show as
9 closed.

10 DR. MAURO: I think the language
11 that's in why it's closed, Steve, could that
12 be put in as --

13 MR. MARSCHKE: It's already in
14 there, John.

15 DR. MAURO: Oh, I'm sorry. I'm
16 looking at your email.

17 CHAIR MUNN: Yes. No, it's in the
18 recommendation.

19 MR. MARSCHKE: It's already in this
20 database, John.

21 CHAIR MUNN: Yes.

22 DR. MAURO: It's in the database?

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1 Great. Thank you.

2 CHAIR MUNN: It's a mystery to me
3 why this material of Steve's is in the
4 database, but I'm glad it's there. Thank you,
5 Steve.

6 DR. MAURO: So Steve, I could work
7 from the database as opposed to your email?

8 CHAIR MUNN: Yes.

9 MR. MARSCHKE: You can, but it's a
10 little -- you have to jump around a little
11 bit.

12 DR. MAURO: Oh, I'll stay with the
13 email then. Okay.

14 CHAIR MUNN: Then the next item is
15 OTIB-0027-1.

16 SC&A's recommendation is that the
17 issue be closed, but there are number of
18 issues in the finding. Some issues were
19 corrected, and other issues are no longer
20 applicable because of changes in wording of
21 the procedure in the revised Rocky Flats Site
22 Profile.

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1 The information in the document
2 NIOSH had said was transferred to the Rocky
3 Flats Profile document.

4 Any objection to showing item 1 as
5 closed?

6 MEMBER ZIEMER: Well, I have one
7 question on this. It's not clear to me if
8 there are some items that are in abeyance. I
9 mean there's a number of parts to the finding,
10 right?

11 CHAIR MUNN: Yes.

12 MEMBER ZIEMER: And some are
13 corrected; others are no longer applicable,
14 but does that cover everything or are some of
15 them being addressed still by the Rocky Flats
16 Group and thus, are in abeyance?

17 MR. MARSCHKE: No. What this
18 means, Ron Buchanan looked at the Rocky Flats
19 Site Profile. He filed this issue over to the
20 Rocky Flats Site Profile, and he's comfortable
21 with the way the Rocky Flats Site Profile has
22 addressed -- either the Rocky Flats Site

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1 Profile has either addressed all the issues or
2 they're not really -- what are his words
3 there? What does he say?

4 MEMBER ZIEMER: Well, that's what
5 I'm asking. Are any of them still open in the
6 Rocky Flats --?

7 MR. MARSCHKE: Not in Ron
8 Buchanan's mind. Not in SC&A. In SC&A, we
9 think all the issues have been addressed.

10 MEMBER ZIEMER: But has the work
11 group agreed with that?

12 MR. MARSCHKE: No. That's what
13 we're talking about now.

14 MEMBER ZIEMER: Then I think
15 they're in abeyance. Some of them must be.
16 If they haven't been closed out by Rocky
17 Flats, aren't they still in abeyance?

18 MR. MARSCHKE: Well, that's two
19 separate questions.

20 MR. HINNEFELD: They weren't really
21 on the list at Rocky Flats, right? I mean
22 Rocky Flats didn't raise these during the

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1 Rocky Flats debate specifically.

2 CHAIR MUNN: This is only item 1.
3 Item 2, 3, 4 are all still open.

4 MR. HINNEFELD: As I understand it,
5 these fines came up because of a review of
6 this document independent of the work that was
7 going on at Rocky. Independently, there was
8 work going on with Rocky to resolve the
9 questions associated with Rocky. That
10 resolution, be it the Rocky Flats side,
11 arrived at a revised site profile and probably
12 several other technical documents as well, in
13 order to get that whole discussion over.
14 Okay?

15 Then, in looking at these findings
16 from this OTIB, the findings from the OTIB
17 could be found, and the resolution to these
18 findings could be found in these revisions to
19 the site profile and the other technical
20 documents that were prepared as part of the
21 discussion on Rocky Flats. I think that is
22 the status now.

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1 But the Subcommittee has not gone
2 back to see where in the Rocky Flats documents
3 are these findings taken care of. Ron doesn't
4 point that out. You know, Ron says, yes, it's
5 taken care of, but he didn't say -- he didn't
6 really point out where it was taken care of in
7 the Rocky Flats documentation.

8 So that's how we got where we are.

9 So I don't know what that makes the status of
10 the finding.

11 CHAIR MUNN: If you read the
12 original finding, Paul, the original finding
13 was that it was written fairly clear and
14 unambiguously. However, some of the errors
15 contained in the text create confusion and
16 require several re-reads to clarify the
17 issues. SC&A's pages 123 and 124 of their
18 report list the errors that were identified
19 during their review, and many of the issues
20 raised in the finding were addressed when they
21 transferred the documents.

22 MEMBER ZIEMER: Well, that's my

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1 point. It says, "Many of the issues were
2 addressed," and it implies that they were not
3 all addressed, which implies some of them are
4 still open in the Rocky.

5 Let's assume there was one issue,
6 for example, and we moved it, transferred it,
7 quote, "to Rocky." In your mind, the Rocky
8 thing has come to resolution, but the Rocky
9 Flats Work Group has not yet signed off on it.

10 What's its status? That's what I'm saying.

11 MR. MARSCHKE: If the Rocky Flats
12 Work Group has not signed off on it, that's
13 different.

14 MEMBER ZIEMER: In other words, are
15 any of these issues still officially open in
16 the Rocky Flats Site Profile or have they all
17 been closed? Have they been transferred?

18 CHAIR MUNN: This is the question
19 that we discussed at considerable length in
20 our last meeting in December when we were
21 discussing precisely this question: whether
22 SC&A had the responsibility to follow through

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1 to see that those things did, in fact,
2 transpire, and it was agreed -- I believe John
3 Mauro and I actually had a brief email
4 correspondence recently verifying their
5 understanding that when we make a transfer of
6 this sort, it's SC&A's responsibility to
7 follow that through to its conclusion, only
8 that part, not the entire new procedure, not
9 the entire new document, but to follow the
10 items that we had said were closed through to
11 the new document to assure that that portion
12 of the document did, in fact, address the
13 original finding. We did have that exchange,
14 John and I.

15 MEMBER ZIEMER: Do we call them
16 closed at that point or in abeyance?

17 CHAIR MUNN: They're closed at that
18 point because SC&A has followed through to see
19 that their concerns were addressed in the new
20 document, whatever it is. They haven't
21 reviewed the new document in its entirety.

22 MEMBER ZIEMER: Oh, no, I

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1 understand that part.

2 MR. MARSCHKE: In abeyance is
3 usually when we're waiting for a document to
4 be issued that implements an agreed-upon
5 resolution. In this case, we have a
6 resolution that we already agreed upon and
7 it's already in a published document. So
8 we're really not in abeyance on this type of
9 thing.

10 The way I read what Ron wrote here
11 is he's got -- we had this list of issues on
12 pages 123 and 124 of our original report. Ron
13 is saying some of those issues were corrected
14 and other of those issues are no longer
15 applicable. When you add the "some issues"
16 and the "other issues" together, you have the
17 total list of -- that constitutes the total
18 list of issues. So all the issues are either
19 corrected or they're no longer applicable.

20 MEMBER ZIEMER: Corrected by?

21 MR. MARSCHKE: By the site profile.

22 MR. SIEBERT: They're all

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1 editorial issues. So the first one, it says,
2 "Page 5, 'occupational external dosimetry'
3 should read 'occupational environmental
4 dose.'"

5 So what I'm assuming he did was
6 crosswalk over to the other document. If that
7 section isn't named that way anymore, that
8 would be one where it's not applicable
9 anymore.

10 MEMBER ZIEMER: Got you.

11 MR. SIEBERT: Whereas, if that
12 section is in the new site profile
13 information, he would have checked to make
14 sure it was accurate, and then he said it was
15 correct on it. So it would be one or the
16 other.

17 CHAIR MUNN: What this finding is
18 telling us, what SC&A's comment is telling us
19 is that they have tracked their concerns to
20 the document that was to address their
21 concerns, and it does, in fact, do so. They
22 are now recommending that this item be closed

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1 because it's been done.

2 It's a part of their job to track
3 that through.

4 MEMBER ZIEMER: Right, and I was
5 sort of asking it this way: let's suppose it
6 was -- in this case, it's editorial. So it
7 seems fairly simple.

8 But let's suppose it was not
9 editorial. Maybe it was a technical issue.
10 Suppose the NTS Work Group had not yet weighed
11 in on the SC&A recommendation to close it.
12 What is its status? Is it still closed for
13 our work group here?

14 CHAIR MUNN: The point I'm trying
15 to make is it's not an outstanding issue
16 anymore, either for us or for the other work
17 group.

18 MEMBER ZIEMER: Well, that's what I
19 meant. Do we know that that's the case?

20 DR. MAURO: Paul, you're raising
21 something that's a first, and I think it is an
22 important question.

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1 MEMBER ZIEMER: I mean, it may be
2 editorial, but has it been accepted?

3 DR. MAURO: Well, I mean your laws
4 say that, well, this case is editorial, so
5 it's not as looming. But let's say it was a
6 technical issue in our review of a procedure,
7 and the answer is, well, that problem has been
8 solved in the site profile of some other OTIB,
9 and we go look at it.

10 Let's say it's a site profile,
11 which means it leaves the Procedures Work
12 Group area of responsibilities. But we go
13 take a look at it in the site profile and it's
14 technical. What does it mean? It looks like
15 they did a good job. They solved the problem
16 the way we would like to see it solved. We
17 recommend it be closed in the Procedures Work
18 Group.

19 MEMBER ZIEMER: Right.

20 DR. MAURO: You're asking a
21 question, is it legitimate? I guess it's a
22 procedural question.

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1 Should we be closing out Rocky
2 Flats issues in a Procedures Work Group when
3 isn't that the job of Rocky Flats Work Group
4 to close out --

5 MEMBER ZIEMER: Oh, yes. Yes,
6 but --

7 DR. MAURO: That's a great
8 question.

9 MEMBER ZIEMER: How are we showing
10 other ones that are transferred? Once they're
11 transferred out, how do we show them here?

12 CHAIR MUNN: Well, but you see, all
13 this depends upon several things. One of it
14 is whether we're transferring an action out to
15 another -- whether we're transferring an open
16 issue out to some other work group or whether
17 the closure of our open item requires a piece
18 of our documents that are being corrected, are
19 being revised in any case?

20 If there is a Rocky Flats Profile
21 Work Group that has their own set of issues,
22 then that should be clear to SC&A at the time

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1 that they follow through their closure of our
2 outstanding issue.

3 MEMBER ZIEMER: Yes, and I
4 understand. If it is a matter of we said it
5 ought to read this way, and they go to the
6 Rocky Flats thing and it says, yes, in that
7 document it already reads that way, so it was
8 never an issue there, and it's already taken
9 care of.

10 I was basically asking if there's
11 anything that is still in that the Rocky Flats
12 Group hadn't already covered or was somehow
13 open there. That's all I was really asking.
14 In other words, if it is already, like this
15 editorial thing, and you go and look at their
16 documents and say, well, they have it correct
17 in their document already, so it's a done
18 deal.

19 But if that weren't the case, what
20 do we do with it? Or maybe it's that way for
21 everything. If it is, I'm good with it.

22 DR. MAURO: This is John.

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1 Could I offer a suggestion?

2 MEMBER ZIEMER: Yes.

3 DR. MAURO: I think that the
4 Procedures Work Group could certainly transfer
5 items out to a Sites Profile Work Group. It
6 sounds to me, though, what we're asking
7 ourselves is, can we track a technical issue
8 raised in the Procedures Work Group? Then the
9 answer is, well, this is something that is
10 addressed, will be addressed or is addressed,
11 in the Rocky Flats, which we just left the
12 domain of the Procedures.

13 It seems to me that we can't -- I
14 would say that, procedurally, it would be
15 inappropriate for us to sort of leave our
16 domain, go into someone else's domain, go read
17 the technical issue, decide we think it's
18 good, come back and report to Procedures that
19 everything is okay, close.

20 We just sort of went into somebody
21 else's domain. I don't think we could do
22 that. If it stays within our domain, namely,

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1 Wanda says, okay, this particular issue that
2 we're looking at right in front of us was
3 transferred to a different procedure, so it is
4 still within our domain, then we can go over
5 to that other procedure, review it, and come
6 back and report, because it's all within our
7 domain.

8 But I would say what you just
9 brought up, Paul, is it would be inappropriate
10 for us to go and leave our Procedures domain,
11 go into the Site Profile domain on some
12 technical issue, and then report back that
13 everything is okay. This is really something
14 that we really can't say. This is something
15 that should be transferred to the Rocky Flats
16 Work Group.

17 MEMBER ZIEMER: Unless it's a
18 technical issue they've already addressed.

19 DR. MAURO: Exactly. Absolutely.
20 Unless they have already taken care of it,
21 then we could report back to the work group,
22 listen, the Rocky Flats people have resolved

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1 the issue or it has been resolved or it will
2 be resolved. Then, of course, we have to
3 decide whether we want to close it or put it
4 in abeyance.

5 But I don't think we could follow
6 the trail out of the Procedures and into a
7 Site Profile Work Group or an SEC Work Group
8 and say, we looked at the site profile and we
9 think that it does a good job in solving this
10 problem, and we should close it.

11 I think it's something we have to
12 transfer.

13 MEMBER ZIEMER: Well, for example,
14 where Ron Buchanan, talking about the
15 probability of distribution, goes to the Rocky
16 Flats Site Profile and says, "They already
17 covered this topic. It's not an open issue,"
18 just confirming that they have covered it,
19 then I'm okay with us closing it.

20 I was really asking, are all of
21 these issues that status or are any of them in
22 the category of open issues at Rocky? Is

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1 everything closed?

2 CHAIR MUNN: Once more, we're
3 getting back to the concern that we've
4 expressed many times and have not come to
5 closure on, which is the details of how
6 transfers are communicated to other work
7 groups. Whether it's in Procedures, whether
8 it's an SEC or a Site Profile, or some other
9 document is secondary in my mind. The issue
10 remains, we have not codified our process for
11 notifying others of this transfer.

12 It seems imperative that we close
13 this loop and that we make that decision once
14 and for all. We may not have, as John has
15 said, the authority to say: "This is closed
16 for us and therefore, closed for you," whoever
17 you are, but we certainly need to identify
18 that we have notified the appropriate
19 individual or individuals of some other work
20 group or if a work group does not exist, to
21 whom do we send this information? We need to
22 be notifying people when we are transferring,

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1 and we're not doing that.

2 DR. MAURO: Wanda, it's really an
3 action item that the work group has to decide
4 what you would like to do.

5 CHAIR MUNN: Exactly.

6 DR. MAURO: Let's say we had
7 something we would like to transfer over to
8 Rocky right now, or whatever. It's leaving
9 our domain, our Procedures domain, and it's
10 going into a Site Profile or an SEC domain. I
11 think it is the work group that, if you wanted
12 to make it an action item and then report
13 back, that NIOSH does or SC&A does, or it is
14 something that you, as the Chairperson of this
15 work group, may want to speak to the
16 Chairperson of the Rocky Work Group.

17 CHAIR MUNN: That's what we do --

18 DR. MAURO: However you want to
19 proceed.

20 CHAIR MUNN: That's what I've been
21 trying to identify that we should define for
22 at least the last year, are we doing this

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1 appropriately, and we're not doing it
2 appropriately.

3 DR. MAURO: Why not make that
4 decision right now? How do you want to do it?

5 CHAIR MUNN: I would like to do
6 that.

7 DR. MAURO: Okay.

8 MR. KATZ: Wanda, let me make a
9 suggestion.

10 CHAIR MUNN: Yes.

11 MR. KATZ: There are really two
12 different cases here, because we're not
13 talking about a transfer here necessarily, but
14 there's transfer cases, too. I think they
15 both can be handled similarly.

16 I mean, where the Procedures
17 Subcommittee comes to a finding and they close
18 their issues, whether it applies to another
19 work group or not, if they close an issue that
20 applies, that may apply to another domain,
21 like you say, John, a Site Profile Group, for
22 example, I mean if this Procedures Group

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1 decides, okay, it's addressed in the Site
2 Profile; we're happy with it; we close our
3 issue. It's not a transfer, but they're
4 closing it because it was a Procedures issue
5 in the first place, not that Workgroup's.

6 The Procedures Subcommittee can
7 close it on their books and simply send a
8 memo, an email, to the Chair of that work
9 group informing them that we had this issue
10 that relates to your site profile. We believe
11 -- you know, this was our findings; we've
12 closed it.

13 If that Chair of that other work
14 group decides there's something there for them
15 to pursue further, they can. Otherwise, it's
16 a non-issue for them. But they're informed.

17 On the other hand, if you have a
18 transfer, where the Procedures Work Group is
19 working on an issue and you say, "Oh, this is
20 really just germane to this other work group
21 dealing with this site profile, and it's not
22 really necessary to be handled by the

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1 Procedures because it's not complex-wide," or
2 what have you, then the Procedures Work Group
3 does a transfer, where they summarize the
4 issue and the information that's been
5 developed so far. They package that up and
6 email it to the Chair of that work group, and
7 that work group picks it up and decides what
8 to do with it there.

9 In either case, I think with all of
10 these, whether you close an issue that you are
11 not transferring or you're actually
12 transferring, you send a message to that work
13 group Chair letting them know what transpired
14 here, what the findings were, and that would
15 be that. It seems fairly simple.

16 CHAIR MUNN: It seems simple to me.
17 It is just that we have never formalized it.
18 I would like very much to formalize it in
19 exactly that way.

20 My only concern personally is that,
21 as long as there exists another work group,
22 then this becomes a fairly simple and

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1 straightforward thing. I can do that, as the
2 Chair of this group, or whoever succeeds me
3 can do that very easily just by sending an
4 appropriate message. That's not complicated.

5 It does become a little complicated
6 when we have an issue that we wish to transfer
7 out of Procedures, but there is not an
8 existing work group.

9 MR. KATZ: So let me supplement,
10 then, what I just suggested, which is if there
11 is not another work group, but there's an
12 issue that is just germane to a specific site
13 and a specific site profile, say, then this
14 Procedures Work Group can make a
15 recommendation to the Board that a work group
16 be formed to take up this issue for that site
17 profile, if it is something of that
18 importance.

19 If it's something that's sort of
20 minor, like we were just talking about where
21 we're just talking about editorial changes to
22 a site profile, there's no need to do that. I

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1 mean that information is communicated to OCAS,
2 and they can decide whether to make the
3 changes in the site profile.

4 But if it's an issue of importance,
5 there's no work group extant right now to deal
6 with it for that site profile, and this
7 Procedures Work Group doesn't think, the
8 Subcommittee doesn't think it's appropriate
9 because it's only related to one site. I mean
10 you make the decision as to whether you deal
11 with it here, because there is no work group,
12 or you recommend to the Board that there be
13 constituted a work group to deal with that
14 site profile. It seems like that would work.

15 CHAIR MUNN: It probably would
16 work.

17 Are there any objections to Ted's
18 recommendation?

19 (No response.)

20 MEMBER ZIEMER: We're surprised.

21 (Laughter.)

22 CHAIR MUNN: Any other suggestions?

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1 MR. KATZ: Mike, does that sound
2 okay to you?

3 MEMBER GIBSON: Tell them nothing
4 will fall through the cracks.

5 MR. KATZ: Right, absolutely.

6 Mike says okay.

7 CHAIR MUNN: Oh, I couldn't hear
8 what he said.

9 MR. KATZ: He didn't want anything
10 to fall through the cracks.

11 CHAIR MUNN: All right, very good.

12 If it doesn't fall through the cracks, the
13 Chair's responsibility is to send a message to
14 the effect that this Group has taken an
15 action, what that action is. That is directed
16 to the appropriate Chair of an existing work
17 group or if not, then to the Board. Then I'll
18 be glad to do that.

19 DR. MAURO: I assume that's going
20 to be captured in our matrix? That is, in the
21 place on the electronic database where this
22 particular issue is in this special status, it

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1 will be so indicated.

2 MR. MARSCHKE: I think we are going
3 to have one of those coming up.

4 DR. MAURO: Okay.

5 MR. MARSCHKE: Issue No. 27-3, SC&A
6 is recommending that we -- this is the same
7 type of thing where it was filed, we filed it
8 through the Rocky Flats Site Profile, and
9 we're recommending that the status be in
10 progress.

11 So in other words, we still want to
12 negotiate with NIOSH on the wording and the
13 resolution of the issue. So that one, you
14 know, I guess the better thing would be to go
15 back to issue No. 3 here.

16 Issue No. 3, SC&A, we recommend for
17 issue No. 3 -- the question remains, what is
18 the default full-time energy distribution of
19 the source material, is not listed in Table
20 6-10.

21 So on this issue, we want to still
22 negotiate, I think, and it is still open. Now

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1 the other three issues on OTIB-0027, when we
2 filed them to the Rocky Flats Site Profile, we
3 were satisfied with the way the site profile
4 addressed those three. So in our opinion,
5 they can be closed.

6 Again, if I understand what Wanda
7 is saying, we can send the Chair of the Rocky
8 Flats Work Group a memo to that effect,
9 basically, this portion of the back-and-forth
10 probably.

11 MEMBER ZIEMER: If we say here
12 that's -- I mean the statement is made here
13 that it has been transferred to them. So you
14 say, well, do they know it?

15 MR. MARSCHKE: Well, that would be
16 Wanda's --

17 MEMBER ZIEMER: Yes.

18 MR. MARSCHKE: Wanda's email would
19 be saying, you know, we feel that this issue
20 should be more appropriately resolved in your
21 work group than in the Procedures
22 Subcommittee.

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1 MEMBER ZIEMER: Right.

2 DR. MAURO: Let me jump in here for
3 a second.

4 I think I see the root cause of a
5 bit of a dilemma that I created. It goes back
6 about two years.

7 There was a time when we were
8 identifying procedures for review. We made a
9 distinction between those procedures that were
10 generic and complex-wide and those that were
11 site-specific. We were given the green light
12 to review lots and lots of procedures, some of
13 which were generic and some of which were
14 site-specific.

15 We had all of the reviews done, and
16 we had a whole bunch of Rocky's and
17 Portsmouth's that we reviewed as part of our
18 work in support of all of these different site
19 profiles.

20 I said, listen, when we put
21 together our procedure review work products in
22 our documents, in order to capture everything

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1 in one place, I said let's just gather them
2 all up and here they are. All of a sudden,
3 we're looking at a bunch of procedures we use
4 that are really site-specific.

5 Never thinking that the day will
6 come when we realize, well, wait a minute,
7 what the heck are we doing over here looking
8 at a Rocky Flats procedure, or whatever it
9 was? This has got to be a site-specific
10 procedure and here it is sitting in the
11 Procedures Work Group.

12 It's almost like an unanticipated
13 consequence of a good intention where, wait a
14 minute, here we are closing out a procedure
15 that deals with a site-specific issue. We
16 shouldn't be doing that. This is something
17 that the Rocky Site Work Group should be
18 doing.

19 I believe that's what this 27 is.
20 What's the title of 27, Steve? Do you have it
21 here, by any chance?

22 MR. MARSCHKE: Supplementary

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1 External Dose Information for Rocky Flats
2 Plan.

3 DR. MAURO: Right. So you see, you
4 have to understand, we -- me -- with the good
5 intentions of trying to put in one place all
6 our procedures reviews, so we don't lose track
7 of it, find ourselves in the very unusual
8 circumstance. Here we are in the Procedures
9 Work Group or Subcommittee
10 commenting/reviewing on a Rocky Flats
11 procedure.

12 I'm sorry to say this, but I think
13 we've got to discuss this a little bit. We
14 find ourselves in an unusual circumstance. I
15 think we have to deal with it.

16 MEMBER ZIEMER: Well, it's similar
17 to the General Steel Industries, which, by
18 reviewing TBD-6000, we end up looking at those
19 various appendices that are site-specific.

20 DR. MAURO: Right. But if this is
21 the only place --

22 MEMBER ZIEMER: When those were

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1 transferred, they show up --

2 DR. MAURO: Yes.

3 MEMBER ZIEMER: -- on a different
4 matrix.

5 DR. MAURO: Yes. Yes. That's what
6 I'm saying.

7 MEMBER ZIEMER: Yes, but we make
8 the statement here on these that they have
9 been transferred to Rocky Flats. Or is that
10 just a recommendation -- I mean it says it was
11 transferred to Rocky Flats.

12 CHAIR MUNN: Or that it was taken
13 care of in the site profile, and that's --
14 well, let's see if I can put together a
15 communication --

16 DR. MAURO: What I'm saying is
17 that, should we be just transferring the whole
18 procedure out of here?

19 CHAIR MUNN: No.

20 DR. MAURO: It shouldn't be within
21 our domain. I mean I'm just putting it right
22 out there naked before the world.

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1 I mean there are going to be a
2 whole bunch of procedures that we're going to
3 hit in our matrix here that are site-specific.

4 And the question becomes, should we be
5 looking at it?

6 CHAIR MUNN: And the answer is yes,
7 unless we change our attitude and our charter
8 with respect to what we were challenged to do
9 to begin with. What we were challenged to do
10 to begin with was to review procedures, to
11 look at selected procedures that SC&A had
12 reviewed --

13 DR. MAURO: Yes.

14 CHAIR MUNN: -- regardless of
15 whether they were site-specific or whether
16 they were general in nature. We were not
17 limiting the charter of the Procedures Group
18 to only non-site-specific procedures.

19 DR. MAURO: That's correct.

20 CHAIR MUNN: Exactly.

21 DR. MAURO: So I mean, but here we
22 are now transferring. We are in a funny place

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1 because here we are making judgments, either
2 transferring or making judgments on matters
3 that might be where -- are we stepping into
4 someone else's area of responsibility?

5 CHAIR MUNN: Well, not if we notify
6 them that we have looked -- they are
7 anticipating that we will be looking at these
8 procedures.

9 DR. MAURO: Yes.

10 CHAIR MUNN: And if we notify them
11 that we had, in fact, done so, and that our
12 current finding is thus, at that juncture,
13 certainly the Site Profiles Group can choose
14 to take issue with that --

15 DR. MAURO: Yes.

16 CHAIR MUNN: -- and move it
17 forward.

18 DR. MAURO: No, there's no doubt
19 that the Site Profile Group will benefit from
20 what we have to say. I guess I just wanted to
21 put it out on the table, that we have a little
22 bit of an unusual circumstance. As long as

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1 administratively we could deal with this,
2 great.

3 CHAIR MUNN: I think we can, given
4 what we were charged to do to begin with,
5 unless we find that it is too much for all of
6 us.

7 I will try to address both finding
8 one and finding two, and finding three is not
9 quite the same. It's in progress.

10 Four is another one of the closed
11 issues. So I will attempt to put together an
12 email that will identify the Rocky Flats folks
13 of what our finding has been. We will
14 continue to have item 3 open and in progress,
15 if that is the agreement of our Subcommittee
16 today.

17 Have you all had an opportunity to
18 look at those three, four items?

19 MEMBER ZIEMER: So three is in
20 progress in this Subcommittee or is it
21 transferred to --

22 CHAIR MUNN: It's in process in

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1 this Subcommittee.

2 MEMBER ZIEMER: Okay. And four
3 would be in abeyance?

4 CHAIR MUNN: Four is closed for us
5 because it is covered in the site profile, in
6 the newly-revised. In the revised site
7 profile it is covered.

8 So I will notify RFP of those three
9 findings; that is, Nos. 1, 2, and 4. We will
10 retain No. 3 on our database unless I hear to
11 the contrary from our Subcommittee members
12 now.

13 MEMBER ZIEMER: Well, on No. 1 now,
14 you were talking sort of theoretically, but it
15 is still not clear to me if the statement that
16 some -- let's see how it is worded. Get the
17 right one here, 27-01, the statement that,
18 "Some issues were corrected and other issues
19 are no longer applicable." Is that the whole
20 population? When he says, "some" and
21 "others," is that everything?

22 MR. KATZ: Steve indicated that it

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1 should be all others, in other words, because
2 that's the whole universe.

3 MEMBER ZIEMER: That's the whole
4 universe.

5 MR. MARSCHKE: We can double-check
6 if you want, Paul.

7 MEMBER ZIEMER: Oh, that's all
8 right.

9 CHAIR MUNN: If we insert the word
10 "all," is that --

11 MEMBER ZIEMER: All the issues?

12 CHAIR MUNN: "All other issues are
13 no longer applicable." Will that satisfy the
14 concern?

15 MEMBER ZIEMER: When you say they
16 were corrected, they had already been
17 corrected?

18 MR. MARSCHKE: Have already been
19 corrected.

20 MEMBER ZIEMER: Have been by the
21 other Group or --

22 DR. MAURO: Do you want me to give

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1 Ron Buchanan a call?

2 MEMBER ZIEMER: No, no. I'm just
3 trying to understand what is meant here.
4 These were mainly editorial?

5 MR. SIEBERT: Yes, and another
6 example is changing to "contribution was,"
7 where it says "contribution is/was."

8 MEMBER ZIEMER: Yes.

9 MR. SIEBERT: I mean they're all
10 relatively minor comments.

11 MEMBER ZIEMER: Oh, yes. Got you.

12 CHAIR MUNN: So it is the whole
13 population. Then all other issues should take
14 care of that.

15 MEMBER ZIEMER: So there's nothing
16 that the other work group would have to do
17 anyway, right?

18 CHAIR MUNN: No.

19 MEMBER ZIEMER: Okay. I'm okay
20 with closing that. I just wanted to
21 understand what it meant when we said we would
22 transfer them throughout the class.

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1 In a sense, were they really
2 transferred? The Rocky Flats people, are you
3 going to tell them that we're transferring
4 these issues, but they are closed?

5 CHAIR MUNN: Now that we have
6 determined that we have them, they are closed
7 and explain to them why.

8 MR. MARSCHKE: So the information
9 was transferred. The information in this
10 OTIB, the information in this OTIB has been
11 transferred to the Rocky Flats --

12 MEMBER ZIEMER: Oh, okay, I see,
13 yes.

14 MR. MARSCHKE: We don't ever say we
15 transferred the issues.

16 MEMBER ZIEMER: Yes. Okay. I'm
17 with you. Yes, that's the difference, I
18 think.

19 CHAIR MUNN: Okay. Again, the next
20 then would be No. 2, a different set of
21 circumstances, but the same results with
22 respect to communion with Rocky Flats.

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1 MEMBER ZIEMER: Yes. So it's not
2 an issue there for them either.

3 CHAIR MUNN: No.

4 MEMBER ZIEMER: And really it is
5 closed by assuring that it had already been
6 taken care of in their document.

7 CHAIR MUNN: And similarly, No. 4.

8 MEMBER ZIEMER: Right. So is there
9 anything that needs to be transferred to the
10 Rocky Flats Group?

11 CHAIR MUNN: No, there's no real
12 transfer. It's just notification of them that
13 we are closing issues that relate to them
14 because of changes that have been made to that
15 profile document.

16 MEMBER ZIEMER: I think what John
17 was suggesting, or maybe Steve, or what Ted
18 was suggesting is a notification process if we
19 actually transfer something or Wanda transfers
20 something. I think we're saying, now, that --

21 MR. KATZ: Or even if it is closed.
22 But if we close an issue that would be

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1 relevant to them, just to notify them that we
2 took up these issues, they related to your --

3 MR. MARSCHKE: What we can do is we
4 can print out or make a .pdf file of these
5 four issues. I can make a .pdf file of these
6 four issues that basically includes all the
7 information that's up on the screen, and I
8 will give that to Wanda. Wanda can then
9 forward that, and it will have the information
10 like, you know, that we are continuing to work
11 on this; it's in progress and we're continuing
12 to work on it.

13 Then Wanda can take that .pdf file
14 and email it to the Chair of the Rocky Flats'
15 Work Group.

16 CHAIR MUNN: Correct.

17 MR. MARSCHKE: And then we'll all
18 be on the same page.

19 CHAIR MUNN: Exactly.

20 MR. MARSCHKE: Okay. I'll take an
21 action item to make a .pdf file of these four
22 OTIB-0027 issues and send it to Wanda.

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1 CHAIR MUNN: Good.

2 All right, I think have that action
3 item.

4 Do we have any concerns with the
5 status of item 27-3, remaining with us as in
6 progress?

7 MEMBER ZIEMER: No.

8 CHAIR MUNN: All right.

9 MEMBER ZIEMER: And 4 is okay.

10 CHAIR MUNN: And 4 is okay. It
11 goes with 1 and 2 and will be a part of
12 communication with the Rocky Flats Profile
13 Group.

14 Any other issues with respect to
15 OTIB-0027?

16 If not, we will go on to
17 OTIB-0029-01.

18 The SC&A recommendation is fairly
19 long.

20 MR. MARSCHKE: Well, I guess the
21 NIOSH response was, please provide some
22 specific documents.

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1 CHAIR MUNN: Right.

2 MR. MARSCHKE: And this is what the
3 recommendation really --

4 CHAIR MUNN: And where are the
5 recommendations?

6 It appears to me that this status
7 would not change. It would be awaiting a
8 NIOSH response to the items provided.

9 MR. MARSCHKE: So you want to
10 maintain it as open?

11 CHAIR MUNN: It remains open. Or,
12 at the very least, in process, in progress. I
13 would say in progress.

14 MR. MARSCHKE: Okay.

15 CHAIR MUNN: Any objection?

16 MEMBER ZIEMER: No.

17 CHAIR MUNN: If not, then let's go
18 on to OTIB-0029-2. No, we don't have anything
19 from NIOSH yet.

20 OTIB-0029-3.

21 SC&A recommendation -- agrees the
22 full distribution is fine where people we know

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1 are not in a position to be chronically
2 exposed.

3 MR. MARSCHKE: This is one where I
4 think SC&A and NIOSH have kind of a
5 disagreement.

6 CHAIR MUNN: Yes.

7 MR. MARSCHKE: And this is where I
8 have inserted the words or I put down here
9 that we were looking for some guidance from
10 the Subcommittee on how to proceed, what the
11 next steps should be.

12 CHAIR MUNN: Well, typically, when
13 we come to this juncture, what we do is
14 request that the NIOSH and SC&A technical
15 folks have a technical exchange, that they get
16 together on the telephone and talk about it,
17 see if there is any possibility that they can
18 reach a consensus that we can move forward
19 with in this group.

20 Is there any objection to our using
21 that technique, which we've used to good
22 advantage in the past?

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1 DR. MAURO: That's fine. This is
2 John.

3 I guess I'm one of the root causes
4 for this difference of opinion on the way to
5 deal with this. Jim and I have spoken about
6 it on numerous occasions. I think, in
7 principle, we agree, but with regard to how
8 you actually are going to accomplish it -- in
9 other words, for real people, real cases -- I
10 think it's going to be a challenge.

11 The degree to which we air this
12 issue -- I mean I'm prepared to talk about it
13 now, if you would like to, or we can wait for
14 another time. But it is a very important
15 issue because it goes to the heart of using
16 your data from a site, internal dosimetry data
17 from a site in a co-worker model for internal
18 exposure, and the fundamental philosophy of
19 how to apply your pooled data of internal
20 dosimetry data for a site and apply it to a
21 worker who was not bioassayed.

22 All I am saying is that Jim and I

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1 have had quite a bit of discussion on this. I
2 think we both in concept agree. Where the
3 disagreement comes out is in its application
4 to a real person. Because I feel as if you're
5 really never going to be sure.

6 I feel that the way in which NIOSH
7 is implementing this philosophy is not
8 necessarily in the claimant's favor. This
9 issue comes up time and time again.

10 But, unlike the last one we talked
11 about, our residual radioactivity, this one,
12 whereby the significance is small, in this
13 case the significance is large. So it is one
14 of those issues that has implications for
15 many, many dose reconstructions and for many
16 site profiles.

17 When it is resolved, it's going to
18 resolve many of them, but it is an important
19 one. How it is resolved is going to have an
20 effect, significant effect, on how dose
21 reconstructions are done and their outcome.

22 CHAIR MUNN: I agree with you that

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1 this is an extremely important issue, and you
2 are correct, it does come up again and again.

3 DR. MAURO: I would say that this
4 warrants some dedicated time by the work
5 group. But, unfortunately -- I say,
6 unfortunately or fortunately -- it affects so
7 many other work groups, Site Profile Work
8 Groups. So we are in a very interesting
9 position. If we do engage this issue, it
10 bears not only on Y12, but it bears on just
11 about every other site and how co-worker
12 models are built.

13 CHAIR MUNN: Yes, it does. It is
14 extremely annoying and time consuming to
15 address the issue repeatedly in a half dozen
16 different forms.

17 DR. MAURO: Is Jim still on the
18 line?

19 CHAIR MUNN: He is.

20 DR. NETON: Yes, I'm here.

21 DR. MAURO: Jim, isn't this
22 OTIB-0060? I recall there being a generic.

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1 DR. NETON: Yes, this is the Y12
2 specifically. I can't read it from the screen
3 here.

4 DR. MAURO: No, I'm sorry, I'm not
5 making myself clear. It's surfacing here on a
6 Y12 proceeding, this specific procedure, but I
7 believe you do have a generic internal
8 dosimetry that is complex-wide --

9 DR. NETON: Correct.

10 DR. MAURO: -- that it affects this
11 strategy.

12 DR. NETON: Correct.

13 DR. MAURO: And perhaps the move
14 here is to transfer within our domain this
15 particular issue. Just like we've transferred
16 everything over to OTIB-0070 related to
17 residual radioactivity, everything related to,
18 I believe, how you implement an internal
19 dosimetry co-worker model --

20 DR. NETON: Right.

21 DR. MAURO: -- could be transferred
22 over, I believe it's OTIB-0060, but I'm not

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1 sure.

2 CHAIR MUNN: It is internal dose
3 reconstruction.

4 MS. BRACKETT: It's OTIB-0019.

5 DR. MAURO: It's OTIB-0019? Okay.

6 CHAIR MUNN: Yes.

7 DR. MAURO: That might be the
8 cleanest way to deal with this generic issue.

9 DR. NETON: But I don't know if --
10 Liz, this is Jim. Correct me, but did
11 OTIB-0019 specifically recommend the 50th
12 percentile?

13 MS. BRACKETT: No, I was going to
14 say that it goes through and gives that
15 example, but it leaves it open as to what you
16 choose.

17 DR. NETON: Right.

18 MS. BRACKETT: It does not dictate
19 that you must use the 50th percentile.

20 DR. NETON: Right. But I guess
21 that still could be the sort of repository for
22 all the discussion because maybe OTIB-0019

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1 does need to provide guidance at some point.
2 We've got to put it somewhere because John's
3 right, this has come up at a few different
4 sites.

5 But I would also suggest that there
6 are several different flavors of this.

7 DR. MAURO: Yes.

8 DR. NETON: There are co-worker
9 models when you have chronic exposures using
10 internal bioassay data. There are also
11 internal co-worker models using air
12 concentration data.

13 DR. MAURO: Yes.

14 DR. NETON: And we approach them
15 somewhat differently.

16 DR. MAURO: Yes, and, all of a
17 sudden, it becomes site-specific.

18 DR. NETON: Yes.

19 DR. MAURO: So, yes, Wanda, I guess
20 we sort of are on the horns of a dilemma. I
21 think that there are aspects to this issue
22 that are universal, but, like OTIB-0066, there

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1 are aspects of it that need to be implemented
2 on a case-by-case basis. The wisdom of how to
3 come at the problem on a particular site, Y12,
4 is unique to Y12. Whether you take the full
5 distribution, the 50 percentile, the upper
6 95th percentile from a pooled set of data, of
7 bioassay data, or air sampling data, would
8 very much depend on the operation and the
9 data, and the job that the guy had.

10 MEMBER ZIEMER: Yes, but hang on,
11 John.

12 DR. MAURO: Yes, yes.

13 DR. NETON: In thinking about this,
14 John, though, maybe this would be a good
15 poster child for tackling this issue because I
16 find it is helpful to have real data and look
17 at real consequences as opposed to sort of
18 modeling this on the general concepts.

19 DR. MAURO: Yes.

20 DR. NETON: I think there's a lot
21 of valid, good discussions that could come out
22 of this if we sat down, as Wanda suggested,

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1 and sort of have a frank technical discussion
2 about how this would play out for Y12. Once
3 we, I think, sort of iron that out, it might
4 sort of fall in place for the other sites
5 where we use the internal co-worker model.

6 DR. MAURO: I agree with you.
7 There's nothing like a real-world problem --

8 DR. NETON: Yes.

9 DR. MAURO: -- and see how the
10 rubber meets the road. I agree with that.

11 My recommendation would be let's
12 tackle this one.

13 DR. NETON: Let's look at this
14 specific issue with modeling chronic exposure
15 using bioassay data and --

16 DR. MAURO: At Y12.

17 DR. NETON: -- at Y12, and we will
18 see where that takes us. If we can resolve, I
19 think a lot of the other ones will fall in
20 place.

21 CHAIR MUNN: That would be very
22 helpful, especially in view of the fact that,

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1 unless my flawless database that I'm looking
2 at is incorrect, we do not seem to have
3 assigned OTIB-0019 to SC&A for review. Am I
4 correct in that?

5 MR. MARSCHKE: I don't think so. I
6 think you are correct, Wanda.

7 CHAIR MUNN: Okay. That being the
8 case --

9 MR. MARSCHKE: Oh, no, wait a
10 minute. We do some OTIB-0019.

11 CHAIR MUNN: We do?

12 MR. MARSCHKE: No, we don't.

13 CHAIR MUNN: Yes, I don't see it on
14 my database.

15 DR. NETON: Interestingly -- I'm
16 sorry, Wanda; I didn't mean to cut in.

17 CHAIR MUNN: No, that's quite all
18 right. Go ahead.

19 DR. NETON: Interestingly, I don't
20 recall that this was an issue on the Y12 site
21 profile review, which is kind of interesting
22 in itself.

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1 DR. MAURO: Remember the Y12 Work
2 Group is still active.

3 DR. NETON: Well, it is. It's in
4 the process of being reconstituted. That is
5 why I am pretty sure it wasn't an open issue
6 on the site profile review, but that may be
7 because this approach was embedded in an OTIB
8 that didn't get looked at. But,
9 nonetheless --

10 DR. MAURO: Y12, we were zeroed
11 right in on that 1960 timeframe and the co-
12 worker model to use later data for earlier
13 data and the SEC.

14 DR. NETON: Right.

15 DR. MAURO: And there was a
16 strategy developed that, in the end, we all I
17 think agreed upon.

18 DR. NETON: Yes, I think so.

19 DR. MAURO: But I think now we're
20 in -- yes, I agree with you, especially if it
21 hasn't -- even if it was OTIB-0019 Work Group
22 and it was active, I like the idea of trying

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1 to take this one on in a real-world problem at
2 a real site and see how it works.

3 DR. NETON: Yes.

4 DR. MAURO: I think it will benefit
5 the whole process.

6 MEMBER ZIEMER: Now once you did
7 that, couldn't you go ahead with the
8 -- OTIB-0019 is sort of generic, right?

9 DR. MAURO: Yes.

10 MEMBER ZIEMER: Is that the generic
11 one?

12 DR. NETON: OTIB-0019 shows how to
13 tell distribution --

14 MEMBER ZIEMER: Right. Right. But
15 then you could also talk about how to apply
16 those in different kinds of situations, could
17 you not?

18 DR. NETON: Yes, we could.

19 MEMBER ZIEMER: That would match up
20 with --

21 DR. NETON: I think part of the
22 problem is we do that sort of on an ad hoc

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1 basis, but there is no current guidance for
2 that.

3 I would like to get this 50th
4 percentile, this full distribution issue --
5 well, I don't think we can resolve it, but at
6 least we can discuss it and see where we both
7 end up, and agree to disagree if that's where
8 we end up.

9 DR. MAURO: I agree, Jim. I think
10 the whole process will benefit from engaging
11 this. It's an important one and it is time.

12 DR. NETON: Yes.

13 CHAIR MUNN: So I am recording an
14 action group for NIOSH -- I mean an action
15 item for NIOSH and SC&A to have significant
16 technical discussions with respect to
17 assigning of percentiles, and specifically as
18 it relates to OTIB--0029-03, and in a broader
19 sense as it relates to the entire site-wide
20 concern, which may crop up literally on any
21 site.

22 MR. MARSCHKE: Wanda?

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1 CHAIR MUNN: Yes?

2 MR. MARSCHKE: We did do, back on
3 June 8th of 2006, the second set of reviews,
4 did review OTIB-0019. We had one finding, and
5 the status of that one finding is closed at
6 this point.

7 CHAIR MUNN: Do you have a record
8 of what our finding was?

9 MR. MARSCHKE: The finding was the
10 OTIB's recommendation for interpreting the
11 regression R2 do not take into account -- R
12 squared -- do not take into account the fact
13 that there is a conditional dependence within
14 the data and that there is censored data. The
15 R squared value needs to be adjusted to
16 account for conditional dependence.

17 CHAIR MUNN: So it's an R squared
18 issue. We didn't have any percentiles?

19 DR. MAURO: Yes. Wanda, let me
20 help out here.

21 It's all coming back. This was
22 very much a statistical treatment of data.

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1 Harry Chmelynski, our statistician, looked at
2 it purely from a statistical point of view.
3 We are really talking about now what I would
4 call a more classic health physics
5 interpretation of, how do you assign what
6 percentile to a person?

7 CHAIR MUNN: Applications in the
8 real world for different things.

9 DR. MAURO: The real world, and
10 this is something that we really never engaged
11 when Harry was looking at it. He looked at it
12 from statistics.

13 I think Jim and I both understand
14 what the issues are. I think this whole
15 process will benefit from airing this thing
16 out, even though OTIB-0019 may very well be
17 closed. But I think that when we engage it
18 here, it will unfold in a way that will
19 benefit many sites.

20 CHAIR MUNN: Excellent. Let's do
21 that. I will leave OTIB-0019 out of it for
22 the time being and simply refer only to the

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1 site-specific issue here, which is it affects
2 numerous sites.

3 We will use that as an action item
4 for our next meeting, hopefully, or the one
5 following that. That may take more time
6 between now and then.

7 MR. KATZ: Let me just get
8 clarification about that -- does more time
9 mean more time than the Subcommittee has?

10 CHAIR MUNN: Well, I mean more time
11 than the Subcommittee may have at our next
12 meeting when we finish up with CATI.

13 MR. KATZ: Right. Okay. I just
14 wanted to be clear for agenda purposes.

15 CHAIR MUNN: Right.

16 MR. MARSCHKE: Change the status to
17 in progress from open?

18 CHAIR MUNN: In progress. Yes, and
19 indicate that there will be technical
20 discussions, extensive technical discussions
21 to try to resolve the differences in approach.

22 MR. KATZ: And do you want the work

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1 group members to be informed when discussions
2 occur?

3 CHAIR MUNN: Yes, please. We may
4 want to -- well, some may want to sit in. If
5 they are telephone discussions, they may want
6 to sit in.

7 DR. MAURO: What we usually do,
8 Wanda, is let's say Jim and I agree it's a
9 good time for us talk. At that time, we might
10 schedule something tentatively, get in touch
11 with you, let you know that -- and the rest of
12 the work group -- that we would like to have a
13 conference. This will be a technical call.
14 So it is not something that would need to be
15 recorded.

16 CHAIR MUNN: No, that's true.
17 That's true.

18 DR. MAURO: But what I would do
19 after that is I would prepare detailed
20 minutes, so that there will be a record of the
21 technical call.

22 CHAIR MUNN: Well, and some of the

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1 Subcommittee members are interested in
2 listening to that; others are not.

3 DR. MAURO: I'm sorry, I keep
4 referring to work group. It's the
5 Subcommittee.

6 CHAIR MUNN: Yes. That's all
7 right. We know who we are.

8 That would be most helpful. Thank
9 you, John.

10 MR. MARSCHKE: So, basically, it is
11 Jim Neton and John Mauro will set up the
12 conference call?

13 CHAIR MUNN: Right. Correct.

14 Moving on, OTIB-0029-04. The
15 recommendation is that the status be changed
16 to in abeyance. Asking for a demonstration
17 from NIOSH for all periods of time. Forty
18 percent or more of the samples were not
19 collected on Monday. So they're requesting
20 additional information from NIOSH. In
21 abeyance would, therefore, be the
22 appropriate -- is it in abeyance; is it in

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1 progress? Is it not in progress?

2 DR. MAURO: I think it's in
3 progress.

4 CHAIR MUNN: I think in progress
5 because we are not waiting for a specific
6 change in documentation. We are asking for a
7 technical resolution, right?

8 DR. MAURO: Yes. Wanda, I see that
9 we are recommending in abeyance, but I guess I
10 was surprised to see that because I think the
11 NIOSH response seems to say, oh, it's okay.
12 It's only 40 percent or more samples we've
13 collected on other dates.

14 But it seems to me that there is --

15 MR. KATZ: John, you seem very
16 remote from the mike.

17 DR. MAURO: I'm sorry, I'm looking
18 at my computer screen, reading it, and trying
19 to speak loud. I'm looking at the issue.

20 This has to do with this Monday
21 versus Friday sample collection and issue that
22 Joyce has brought up on other occasions. I

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1 know that it appears that the response, the
2 initial response here by NIOSH is that --
3 well, I'll read it.

4 Our review of the database shows
5 that, while many samples are collected on
6 Monday, or some timeframes, 40 percent or more
7 of the samples are collected on other days.

8 This significantly diminishes the
9 impact that we make reference to, this two-day
10 delay. But I don't know if that solves the
11 problem. I mean it may for those workers,
12 that there was a two-day delay.

13 I think that Joyce was able to show
14 that it is not insignificant. When you ignore
15 this, it could be significant for that worker.

16 So I guess I see that we're saying
17 in abeyance, but, like I said, I'm kind of
18 surprised we said that.

19 CHAIR MUNN: I disagree. I do
20 believe that it needs to be in progress.

21 DR. MAURO: Yes, me, too.

22 CHAIR MUNN: So, clearly, there is

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1 more technical discussion that needs to take
2 place here.

3 Does anyone disagree with the in
4 progress rather than in abeyance?

5 MEMBER ZIEMER: I want to ask the
6 question, it looks like NIOSH went back and
7 looked at the data and they reported on this
8 40 percent, 60 percent business. Is SC&A
9 asking to see -- what are they asking when
10 they ask for demonstrate that that's the case?
11 Do they want to see the data or --?

12 MR. MARSCHKE: I think that's what
13 Joyce is asking for, is to provide the support
14 data for the fact that NIOSH is saying that it
15 significantly diminishes the impact.

16 MEMBER ZIEMER: Oh, to demonstrate
17 that? They're not asking to see the actual
18 data that demonstrates that it was 40 percent
19 or whatever that is? They just want to see,
20 if you have a 40/60 ratio, how that -- anyway,
21 what are you asking for? It's not clear to me
22 here.

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1 MR. MARSCHKE: NIOSH should
2 demonstrate that at all periods of time 40
3 percent or more of the samples were not
4 collected on Mondays.

5 But that's documentation of the
6 fact that, you know --

7 MEMBER ZIEMER: What constitutes
8 documentation of that?

9 MR. MARSCHKE: I guess it is the
10 data.

11 DR. MAURO: Maybe I can help out a
12 little, I mean in terms of how I understand
13 it.

14 If you have a worker that, as a
15 matter of routine --

16 MEMBER ZIEMER: No, I understand
17 the Monday/Friday issue. I'm asking, is she
18 asking to show that 40 percent of the workers
19 weren't collected on Monday? What is Joyce
20 asking for?

21 DR. MAURO: We are looking for a
22 demonstration that the sampling for workers

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1 was -- in other words, there aren't any
2 workers really, for all intents and purposes,
3 that were always sampled on Monday morning
4 after a two-day retreat over the weekend.

5 The argument that can be made here
6 is that that wasn't the usual circumstance.
7 That is, the workers were sampled on Monday,
8 on Tuesday, on Wednesday, on Thursday.
9 Therefore, reality is there's not going to be
10 any one worker that over and over again worked
11 40 hours in a week, stopped work on a Friday
12 afternoon, and came back to work Monday
13 morning and delivered his urine sample. That
14 went on year after year after year.

15 In other words, our understanding
16 is that it's NIOSH's position that that really
17 didn't happen. What really happened for any
18 given worker was sometimes they took a sample
19 on Monday morning, but sometimes they took it
20 on Thursday week after week after week.

21 So, therefore, the calculations
22 that we presented showing the degree to which

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1 you could underestimate a worker's exposure,
2 if, in fact, you always took his sample on
3 Monday morning, would be significant. That
4 is, you could significantly underestimate his
5 dose.

6 NIOSH's position is, well, that
7 really never really happened. That is, there
8 really aren't any workers where that was
9 always the case, you know, week after week
10 after week, and month, year after year.

11 As a result, the degree of
12 underestimate that we showed in our
13 calculations really is overstated. We're
14 looking for some assurance that that is true.

15 Right now, we don't know that.
16 Right now, we have no choice but to say,
17 listen, as far as we know, the guy was sampled
18 on Monday morning every Monday and after the
19 weekend and, as a result, you could be low by
20 some factor. All of this is written up in our
21 detailed analysis.

22 Before we let go of this and say,

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1 okay, I see what you're saying, I'm not sure
2 how you would demonstrate it, but I think, in
3 effect, that is what NIOSH is saying; that is,
4 there really aren't any people where that
5 scenario holds, you know, month after month.

6 If that is the case, the
7 significance of this comment really greatly
8 diminishes.

9 MEMBER ZIEMER: Well, how is the 40
10 percent determined?

11 DR. NETON: I don't recall. I do
12 remember the database --

13 MEMBER ZIEMER: Did you guys take a
14 random sample of all the data and --

15 DR. NETON: It's been a long time
16 since we've looked at that. I can't comment.

17 MR. MARSCHKE: I don't know.

18 MS. BRACKETT: This is Liz
19 Brackett.

20 First, I would like to point out
21 that, keep in mind, this is for co-worker only
22 that we are discussing this. We are not

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1 looking at individual workers. We do have an
2 OTIB -- I'm not sure it was published yet, but
3 we did look at correction factors. If an
4 individual worker did have his samples
5 collected on Mondays, then that adjustment can
6 be applied to the individual worker. We were
7 looking at the dataset as a whole.

8 I believe it was Dave Allen took
9 the database, because it is electronic, and I
10 thought that that 40 percent was based on the
11 entire database, but I would have to check
12 with Dave on that.

13 MEMBER ZIEMER: So he can sort
14 readily in the database --

15 MS. BRACKETT: Yes.

16 MEMBER ZIEMER: Is that what
17 SC&A --

18 MR. MARSCHKE: I think that's what
19 SC&A is asking for. I mean exactly what Joyce
20 is asking for here is basically, if you read
21 the NIOSH's responses, they did a review of
22 the database and they came up with the fact

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1 that 40 percent or more of the samples were
2 collected on other days.

3 So the first thing Joyce is asking
4 for, well, let's show how you came up with
5 that 40 percent. How did you do the review?
6 What was your review? How did you do it? And
7 how did you come up with that 40 percent?

8 MEMBER ZIEMER: So that could be a
9 sort and give us the chart, how many came in
10 on Monday, Tuesday, Wednesday, Thursday,
11 Friday, or do you need to see the data?

12 MR. MARSCHKE: I think if we look
13 at the sort, and again I'm --

14 MEMBER ZIEMER: How you got the
15 numbers?

16 MR. MARSCHKE: How you got the
17 numbers, and so on, yes.

18 Then the second part of the NIOSH
19 response is, it says, this significantly
20 diminishes the impact of assuming that there
21 was no great prior sample collection.

22 So the next thing that Joyce is

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1 asking for here is, you know, while you say it
2 significantly diminishes the impacts, well,
3 let's show the analysis that constitutes that,
4 the basis for that statement.

5 Then the reason why she puts it in
6 abeyance is she's assuming that NIOSH will be
7 able to come back and provide those two pieces
8 of information, and therefore, QED; we're
9 really all done with this issue. It's just a
10 matter of getting the documentation in --

11 MEMBER ZIEMER: I mean that part I
12 think is fairly straightforward.

13 DR. NETON: I think I understand
14 that, and I understand the concept of why it's
15 clearly underlined all periods because it
16 could be 40 percent for the whole database,
17 but maybe they went to random samples starting
18 in the last 20 years, and the first 20 years
19 were all on Monday. I don't know.

20 We'll provide that.

21 MR. MARSCHKE: So, I mean, I think
22 what she is saying is, I think what Joyce is

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1 saying, why the recommendation was in abeyance
2 is, yes, we agree with the NIOSH response,
3 provided there is the documentation behind it.

4 MEMBER ZIEMER: I've got it.

5 DR. NETON: I think that is pretty
6 clear, at least to me, what we need to do.

7 CHAIR MUNN: So that being said, do
8 we accept the in abeyance or do we call this
9 in progress?

10 MEMBER ZIEMER: It's in progress,
11 isn't it?

12 DR. MAURO: I have to say I think
13 it's in progress. We're pretty far away.
14 It's not that we've agreed in principle on the
15 solution.

16 MEMBER ZIEMER: You want to see how
17 they got it?

18 DR. MAURO: Yes. Yes. I'm more
19 comfortable with in progress, I have to say.

20 MEMBER ZIEMER: Yes.

21 CHAIR MUNN: Any objection to that?

22 In progress it is. Can you do

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1 that, Steve?

2 MR. MARSCHKE: Done, Wanda.

3 CHAIR MUNN: Thank you.

4 The next item is 29-05. SC&A
5 recommendation -- believes that NIOSH has an
6 obligation to make sure type in S approach,
7 that it is appropriate on a case-by-case basis
8 type S can be ruled out.

9 SC&A recommends that the issue
10 status be changed to in progress and requests
11 guidance from the Subcommittee on how to
12 proceed with resolution.

13 MR. MARSCHKE: Again, I added that
14 because, again, when I read the finding, the
15 NIOSH initial response, and the SC&A
16 recommendation, it seems to me like we have
17 come to kind of an impasse between NIOSH and
18 SC&A. So, again, this may be one of the
19 topics of the telephone conversation, I guess,
20 or a technical telecon that is going to take
21 place.

22 CHAIR MUNN: It appears logical to

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1 me.

2 NIOSH?

3 DR. NETON: Could you just read the
4 finding because I can't see it from here and I
5 don't have this on my --

6 MR. MARSCHKE: Which one are you
7 looking, the finding?

8 DR. NETON: Yes, the finding.

9 MR. MARSCHKE: SC&A finds that the
10 assumption that doses should be assigned based
11 on exposures to uranium compounds with
12 solubility types M and S, without considering
13 type F compounds, not claimant-favorable for
14 many cancer sites.

15 Furthermore, this assumption does
16 not follow inhaled materials solubility
17 classification instructions given in 42 CFR
18 82.

19 CHAIR MUNN: And NIOSH's initial
20 response had said these choices were based on
21 site profiles, the TKBS 14-5, which says, all
22 the exceptional cases with unusually

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1 protracted lung clearance are important. It's
2 more important that, for the vast majority of
3 individuals, lung clearance took place in
4 approximate accordance with the ICRP
5 publication 2, 1960, insoluble model, which
6 fits within the current type M framework.

7 So it appears that there is a
8 technical discussion that needs to take place.

9 DR. NETON: I don't think this
10 would be a good place to take it up in that
11 other call, though, because --

12 DR. NETON: Oh, no. No.

13 DR. NETON: -- this is a very big
14 issue.

15 CHAIR MUNN: No, no.

16 DR. MAURO: Let's keep this
17 separate. I have to say I'm looking at the
18 response to SC&A's concern, and I guess I
19 don't quite understand how it solves the
20 problem.

21 DR. NETON: I haven't looked at
22 this in a while. I need to go back. We need

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1 to go back and revisit this issue.

2 CHAIR MUNN: I'll record an action
3 item for technical exchange to occur between
4 NIOSH and SC&A. Okay?

5 DR. NETON: Yes.

6 CHAIR MUNN: The next item
7 OTIB-0030-01.

8 SC&A's recommendation is that the
9 issue status be changed to Closed. Use the
10 1.4 factor. SC&A accepts the NIOSH response.

11 Any objection?

12 MEMBER ZIEMER: No.

13 CHAIR MUNN: If not, closed.

14 The next item, OTIB-0030-02. NIOSH
15 recommendation is that the issue status be
16 changed to Closed. Reference to other
17 OTIBs -- SC&A accepts NIOSH's response.

18 This is external co-worker
19 dosimetry data.

20 Any disagreement with closing
21 30-02?

22 DR. MAURO: It looks like this is

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1 being transferred as opposed to -- I don't
2 know whether the OTIB-0017 deals with external
3 dosimetry, non-penetrating I believe, and I
4 think Ron, who was reviewing this, is
5 certainly familiar with the other OTIB. He is
6 basically saying, listen, this issue is being
7 dealt with very well. Well, it's being dealt
8 with in OTIB-0017. But it seems to me that
9 means it should be Transferred as opposed to
10 Closed. It is not apparent to me that -- let
11 me just take a quick look. Give me one
12 second.

13 CHAIR MUNN: Okay. I took it that
14 since the staff had been instructed to use the
15 different OTIBs --

16 DR. MAURO: I believe there are
17 still lots of open issues on OTIB-0017. That
18 is what I am concerned about. If we resolved
19 all the OTIB-0017 issues, then I guess maybe
20 this goes away, but I think there is still
21 active discussion on OTIB-0017 in this work
22 group, in this subcommittee.

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1 OTIB-0017 --

2 DR. MAURO: I think this business
3 of the shielding --

4 CHAIR MUNN: We still have one,
5 two, three outstanding issues.

6 DR. MAURO: And I think one of them
7 deals with attenuation by clothing, or
8 something like that?

9 CHAIR MUNN: One of them is cancer
10 sites, skin particles --

11 DR. MAURO: Yes.

12 CHAIR MUNN: -- and logical order
13 of information. Yes.

14 DR. MAURO: I recall the clothing
15 attenuation. Well, I don't know. We may have
16 closed the issue. I have to be careful here.

17 It may turn out that the clothing
18 attenuation question, which, of course, is --
19 well, we did have concerns in OTIB-0017
20 regarding that. We might have resolved it. I
21 just don't recall. If we have resolved it,
22 then the way this should read is this

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1 particular issue is a generic issue that is
2 addressed in OTIB-0017 and has been closed
3 under the issues resolution process, under
4 OTIB-0017. I just don't know if that is, in
5 fact, the case.

6 CHAIR MUNN: Well, we have closed
7 most of them addressed in finding three --

8 MR. HINNEFELD: This is Stu, John.
9 The way this finding is written,
10 30-02, it really just says that, while the
11 OTIB-0030 says non-penetrating doses are
12 assigned such-and-such with corrections to
13 account for clothing attenuation and other
14 applicable considerations, but it just says
15 that, but it doesn't tell the dose
16 reconstructor where to go to find those.
17 That's the nature of the finding.

18 DR. MAURO: I see. So what you are
19 saying is the very fact that OTIB-0017 is the
20 place you go --

21 MR. HINNEFELD: Right.

22 DR. MAURO: -- resolved the issue.

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1 I think most of the deeper issue, which is,
2 well, does OTIB-0017 address this issue
3 adequately --

4 MR. HINNEFELD: And that's a
5 subject for a debate on OTIB-0017 --

6 DR. MAURO: Yes.

7 MR. HINNEFELD: -- but I don't
8 think that's particular relevant to this
9 finding.

10 MEMBER ZIEMER: No, it's not
11 something you can transfer, I don't think.

12 DR. MAURO: I think I understand
13 what you are saying. So this isn't really an
14 issue. This is simply saying, listen, you
15 need to say something about attenuation, and
16 the answer is, yes, this is dealt with and we
17 do say something about attenuation in
18 OTIB-0017, and that's the extent to which this
19 is an issue here.

20 That being the case, yes, then I
21 guess that would close the issue. Okay, I
22 understand what you're saying.

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1 CHAIR MUNN: Any objection to
2 close?

3 If not, will you please do that,
4 Steve?

5 MR. MARSCHKE: Closed it, Wanda,
6 yes.

7 CHAIR MUNN: Now we --

8 MEMBER ZIEMER: Now is that 30 --

9 CHAIR MUNN: It was 30-02.

10 And we've come to a decision point
11 here. We are getting close enough to five
12 o'clock, and I know we're all getting weary.

13 We do have several housekeeping
14 issues with respect especially to looking
15 forward to our next meeting. We have not yet
16 even begun to address the issues that were
17 originally planned for our earlier January
18 meeting. We know what everyone's calendar is
19 beginning to look like.

20 I would suggest, unless I hear
21 arguments to the contrary, that we stop our
22 group 3 responses at this point, with the

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1 expectation that we will take them up again at
2 our next meeting, beginning with OTIB-032, and
3 that we take a look at what we have yet to do
4 and whether we have an enforced timeframe in
5 which some of this needs to be completed. In
6 any case, give our calendars some attention.

7 Is everyone amenable to that?

8 MEMBER ZIEMER: Yes.

9 DR. MAURO: Yes.

10 CHAIR MUNN: Then let's take a look
11 at the extent of that earlier agenda for
12 January 28 and see that we have a number of
13 action items still outstanding from that that
14 we did not even begin to address here.

15 Verifying the plus and minus 10
16 percent related -- we did 60-02.

17 Take a look at your calendars and
18 see what we can do in the next month and a
19 half.

20 MR. KATZ: Keep in mind that we
21 need 30 days to announce the Subcommittee.

22 CHAIR MUNN: Yes, I recognize that,

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1 and I'm also very concerned that neither Mark
2 nor Bob are on the line, so that it's very
3 hard to try to do this with two key members of
4 the group missing.

5 MR. KATZ: We'll have to actually
6 confirm. We can just look for likely weeks,
7 but we'll confirm after we have everybody.

8 CHAIR MUNN: We can. It is
9 unfortunate that we need a full 30 days, too,
10 because we have a meeting, another work group
11 -- I'll be in Cincinnati on the 17th of April.

12 So either the 16th or 20th would have been a
13 good choice for me for the next meeting. But
14 that's too soon, isn't it?

15 MR. KATZ: That week is booked
16 anyway.

17 CHAIR MUNN: So we have to move to
18 the 23rd or 24th of April.

19 MR. KATZ: The 23rd and 24th I
20 believe --

21 DR. MAURO: The 23rd is NTS.

22 MR. KATZ: Oh, NTS. No, that week

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1 is smothered already.

2 CHAIR MUNN: The entire week?

3 MR. KATZ: Well, except for Monday,
4 and, frankly, I can't take the 20th through
5 the 24th in Cincinnati.

6 CHAIR MUNN: Oh, goodness, I would
7 think you would be really looking forward to
8 that.

9 (Laughter.)

10 MR. KATZ: I love Cincinnati. No,
11 don't misinterpret what I just said. It's my
12 family that I need to placate.

13 CHAIR MUNN: I understand, yes.
14 That's perfectly understandable.

15 MR. KATZ: And the next week, the
16 27th, 28th, 29th, let me just see. I've got,
17 oh, there's a NIOSH Lead Team meeting those
18 three days which I cannot miss, which means it
19 would be -- and those are out of town. So I
20 would hate to have it that week.

21 CHAIR MUNN: Which means that we
22 are already up against a rock and a hard place

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1 because no one is going to want to schedule a
2 subcommittee or a work group meeting the week
3 before we go to Amarillo.

4 DR. MAURO: When is Amarillo?

5 CHAIR MUNN: Amarillo is the 12th
6 through the 14th.

7 MR. KATZ: The 12th, 13th, 14th.

8 DR. MAURO: The 12th through the
9 14th, okay.

10 CHAIR MUNN: Of May.

11 So the week preceding that is
12 almost an impossibility to even consider.

13 MR. KATZ: I'm not sure that is
14 true. I mean I am amenable to that, but it's
15 up to --

16 MR. HINNEFELD: Normally, we've
17 prepped in advance, although Jim has a lot to
18 do.

19 DR. NETON: I'm out of town that
20 week, the 12th through the 14th.

21 MR. KATZ: That's right, he's out
22 of town.

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1 DR. NETON: I'm looking at the
2 Board meeting. The week before I'm gone in
3 Washington, Monday, Tuesday, Wednesday.

4 CHAIR MUNN: Any possibilities
5 between now and then? I see Friday, May the
6 1st, is about the only available day.

7 MR. KATZ: Well, like I said, I'm
8 out of town Monday through Wednesday. To go
9 home on Thursday and then get on a plane
10 Thursday night to come back here, I would like
11 not to face that. It would be better just to
12 push it to after the --

13 CHAIR MUNN: If we have to obey the
14 30-day rule, then we are out of luck. Our
15 people are not available between now and
16 Amarillo. That is catastrophic. We've got
17 far too much to do.

18 DR. MAURO: Let me pose a question.
19 I know that this meeting was a little unusual
20 in that many of us are on the phone. I have
21 to say we were pretty effective, even though
22 many of us were on the phone. If it turns out

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1 we are between a rock and a hard place, could
2 we do it by phone?

3 CHAIR MUNN: Well, I have found it
4 very difficult.

5 DR. MAURO: Okay.

6 CHAIR MUNN: All it takes is one
7 electronic glitch for one or our key people.

8 MR. KATZ: Wanda, here's another
9 option which isn't ideal but would work: I
10 mean we have the meeting, the Board meeting,
11 the 12th, 13th, and 14th. I'm assuming the
12 most important thing would be to get done with
13 the CATI material, computer-assisted, so that
14 you can make a recommendation to the full
15 Board?

16 CHAIR MUNN: We really do have to
17 get through that.

18 MR. KATZ: Then what about doing
19 that on a half-day? Do we think we could get
20 through that half-day on Monday, just devote
21 it to that, get that done before the Board
22 meeting?

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1 MEMBER ZIEMER: Well, we could, but
2 I think the Board is going to object to
3 getting something --

4 MR. KATZ: So late, right.

5 MEMBER ZIEMER: -- so late and
6 having to take an action on something that is
7 going to go to them.

8 MR. KATZ: No, you're right.
9 That's absolutely correct.

10 CHAIR MUNN: And the folks who are
11 involved in it probably would object to flying
12 on Mother's Day in order to get there.

13 MR. KATZ: Okay. Well, look, I can
14 do Friday, May 1st, given the circumstances,
15 if that works for everybody else. That would
16 give a whole week for the full Board to
17 consider whatever comes out of the
18 Subcommittee.

19 MEMBER ZIEMER: You have almost two
20 weeks.

21 CHAIR MUNN: If you can do it?

22 MR. KATZ: Yes.

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1 CHAIR MUNN: It looks like the only
2 alternative right now. Of course, we still
3 don't know whether --

4 MR. KATZ: We don't know whether
5 Mark can do it.

6 CHAIR MUNN: -- it's going to work
7 for Mark and Bob.

8 MEMBER ZIEMER: Well, I will pencil
9 it in.

10 MR. KATZ: May 1, okay. And I will
11 communicate with Mark and -- well, Bob doesn't
12 have to be in attendance.

13 CHAIR MUNN: That's true. He is an
14 alternate.

15 MR. KATZ: But I will communicate
16 with Mark. On the way to the airport, I'll
17 send him an email.

18 I'm just looking back, just to see
19 if there was a half-day somewhere otherwise.

20 MR. MARSCHKE: Is that going to be
21 just dedicated to CATI or --

22 MR. KATZ: Well, that would be the

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1 first priority.

2 CHAIR MUNN: We basically have to
3 do the CATI business.

4 MR. KATZ: I mean OCAS can't
5 proceed with submitting OMB a new, improved --

6 MR. HINNEFELD: We will not submit
7 a revision to the existing form until we get
8 some sort of -- until we've decided with the
9 Board's input and address the Board.

10 MR. KATZ: And the sooner, the
11 better, right? That's fairly important, I
12 think. But then if you get through with that,
13 you can continue on with others.

14 MR. MARSCHKE: Yes, because,
15 myself, I don't have to be here for the CATI
16 discussion. But if we go through the issues
17 resolutions, then I should have to be here.

18 CHAIR MUNN: One alternative that
19 we could consider is, if we did only a half-
20 day and did nothing but CATI, we probably
21 could do that on the telephone without any
22 problem, which, again, raises the idea of

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1 whether there is any time in April that we
2 could address that.

3 I hate to get to Amarillo and not
4 have addressed anything except the CATI issue
5 because we have a lot on our plate here,
6 folks.

7 MR. KATZ: Yes, May 1st, Wanda --
8 Paul is saying, what about doing that by phone
9 on May 1st? Just the CATI?

10 CHAIR MUNN: Well, and I'm just
11 saying, if all we are going to do is the CATI,
12 then perhaps we could do it some other time,
13 but we have so much that's hanging out there
14 that we have not addressed, that we really and
15 truly need to get moving.

16 I hate to go to Amarillo with
17 nothing except the CATI in hand. That's
18 pretty appalling.

19 MR. KATZ: Well, what specific
20 products does the full Board need at Amarillo
21 besides the CATI?

22 CHAIR MUNN: You know, I would have

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1 to go back and review those, especially the --
2 we have been kicking OTIB-0054 around forever.

3 The same is true of 60.

4 MR. MARSCHKE: Fifty-two?

5 CHAIR MUNN: Sixty, item 2.

6 MR. KATZ: Fifty-two.

7 CHAIR MUNN: Yes, and we need to
8 get these things off the hanging list. If we
9 don't address them, if we don't even talk
10 about them, we can't change them.

11 MR. KATZ: Yes, but I'll grant you
12 there's tons of work for the Subcommittee to
13 do, but it looks like you have very little --
14 there's not a lot of options for when to do
15 this other work.

16 CHAIR MUNN: No, we don't.

17 MR. KATZ: We just ran through the
18 weeks that are available, and they're heavily
19 booked already.

20 CHAIR MUNN: If we can possibly use
21 the whole day on Friday, the 1st, we can
22 certainly use it.

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1 MR. KATZ: Well, I'm saying I'm
2 amenable to -- I will show up for a whole day.

3 That's fine. That's what everybody, what we
4 were saying. We can do a full day. We can
5 get the CATI done as quickly as we can and
6 move on to the next priority item.

7 CHAIR MUNN: It looks like that is
8 the only option that we have. If Mark says he
9 can go, then we're probably in business for
10 the 1st.

11 MR. KATZ: But, Wanda, I'm going to
12 recommend you let OCAS, particularly OCAS and
13 SC&A know -- whatever the priority issues are
14 for the full Board to consider, those should
15 come first for that one day there --

16 CHAIR MUNN: Yes, they should.

17 MR. KATZ: -- rather than spending
18 time on set three and other things that aren't
19 really time-dependent.

20 CHAIR MUNN: Yes, they certainly
21 should. No question about that.

22 MS. HOWELL: For Federal Register

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1 concerns, you all might want to start
2 scheduling meetings a couple of months out,
3 like go ahead and put it on the calendar.

4 MR. HINNEFELD: You mean the one
5 after May 1st?

6 MR. KATZ: Yes, I'm amenable to
7 that, too. We can try to schedule -- we have
8 May 1 we are going to try to book. Let's
9 hope, keep our fingers crossed about Mark.

10 If May 1 doesn't work, you know, I
11 could conceivably do the 30th instead. That
12 April 30th, it's terrible for me, but does
13 that work for the rest of you, April 30th?

14 CHAIR MUNN: It's certainly okay
15 with me.

16 MR. HINNEFELD: May 1st would be
17 better.

18 CHAIR MUNN: Yes.

19 MEMBER ZIEMER: If May 1st is
20 better, I could do the 30th, but I would have
21 to leave early.

22 MR. KATZ: Okay, and that sort of

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1 defeats trying to get --

2 MEMBER ZIEMER: Well, by early, I
3 mean like three o'clock.

4 MR. KATZ: Okay.

5 MEMBER ZIEMER: I have to be home
6 by 6:00.

7 MR. KATZ: The 30th is a poor
8 alternative, but it's an alternative.

9 CHAIR MUNN: Let's push for the
10 1st, if we possibly can.

11 MR. KATZ: Yes, yes, that will be
12 my first -- we'll find out. As soon as I find
13 out from Mark, everybody else can comply with
14 that.

15 CHAIR MUNN: Right.

16 Oh, my, following the Amarillo
17 meeting, there's -- good grief.

18 MR. KATZ: That next week looks
19 okay.

20 CHAIR MUNN: That next what?

21 MR. KATZ: That week following
22 Amarillo in my calendar looks okay, is what

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1 I'm saying.

2 CHAIR MUNN: Well, I expected to be
3 in Texas that whole week, but --

4 MR. KATZ: That doesn't work for
5 Paul.

6 CHAIR MUNN: You get into Memorial
7 Day.

8 MR. KATZ: The Mound Work Group is
9 meeting the 27th and the 28th.

10 CHAIR MUNN: The 27th and 28th.

11 MR. KATZ: And the 26th is out
12 because Memorial Day is the 25th.

13 CHAIR MUNN: Yes, that's correct.

14 MR. KATZ: So the option that week
15 would be the 29th.

16 CHAIR MUNN: The 29th, which would
17 be fine for me.

18 MR. KATZ: May 29th, is that --

19 MEMBER ZIEMER: I wouldn't be here.

20 MR. KATZ: That wouldn't work for
21 Dr. Ziemer.

22 MEMBER ZIEMER: I'm missing the

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1 Mound, but I'm trying to call in part of the
2 time.

3 MR. KATZ: Okay. Then we're into
4 June.

5 CHAIR MUNN: We're into June. What
6 about early June, the first week in June,
7 Tuesday?

8 MR. KATZ: The first week in June I
9 have nothing, no conflicts at this point.

10 MEMBER ZIEMER: I'm out all week.

11 MR. KATZ: Dr. Ziemer is out all
12 week.

13 The second week in June?

14 CHAIR MUNN: The second week in
15 June is okay for me right now.

16 MR. KATZ: And that's okay for me
17 right now, too.

18 MEMBER ZIEMER: You have the
19 teleconference the next week.

20 MR. KATZ: Yes.

21 CHAIR MUNN: June 9th?

22 MR. KATZ: June 9th, does that work

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1 for everybody here? June 9th would be the
2 first choice then.

3 And what about elsewhere in that
4 week, if June 9th doesn't work for Mark.

5 CHAIR MUNN: I could do the 9th,
6 10th, or 11th.

7 MR. KATZ: Is everybody good for
8 the 9th, 10th, and 11th?

9 I am. I'm okay for those dates.

10 Dr. Ziemer is okay for those dates.

11 Mike, are you?

12 MEMBER GIBSON: So far, yes.

13 MR. KATZ: Okay. So the 9th
14 through the 11th, we'll see what Mark can do,
15 if he can do those.

16 CHAIR MUNN: All right, let's do
17 it.

18 If you can follow up, Ted --

19 MR. KATZ: I'll follow up with
20 Mark.

21 CHAIR MUNN: Good. I appreciate
22 that. Please do let me know so that we can

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1 get the word out as quickly as possible.

2 MR. KATZ: Absolutely.

3 CHAIR MUNN: And I'll have to do my
4 homework in doing some cherry picking with
5 respect to what we are going to focus on this
6 one single meeting that we have beforehand.

7 Anyone who has any specific
8 concerns and comments regarding the other
9 CATI, the one for survivors, please try to
10 make an effort to, at the very least, mark up
11 your copy, so that we can move through
12 everyone's concerns as quickly as possible,
13 and address as many other things as we can.
14 I'll try not to overload our plate for what we
15 hope to do on May 1st, and we'll just go from
16 there.

17 MR. KATZ: Right, and I'll remind
18 Mark about that, too, the survivor form.

19 CHAIR MUNN: I appreciate it.

20 Any other crucial item that we need
21 to address before we leave where we are?

22 I have a fairly lengthy action list

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1 here. I'm assuming that other people do as
2 well. I will not be able to get it out to you
3 this week, but I'll try to get it out to you
4 next week, so that any additions that are
5 necessary can be made.

6 Anyone else have anything that
7 needs to be addressed?

8 If not, then it appears to me that
9 it's time for us to sign off.

10 MEMBER ZIEMER: Thank you, Wanda.

11 CHAIR MUNN: To all of you, I look
12 forward to seeing you, hopefully, on May 1st.

13 Bye-bye.

14 (Whereupon, the above-entitled was
15 adjourned at 4:57 p.m.)

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