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PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL AND PREVENTION
NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH

convenes

MEETING 51

ADVISORY BOARD ON
RADIATION AND WORKER HEALTH

The verbatim transcript of the 51st
Meeting of the Advisory Board on Radiation and
Worker Health held telephonically on Nov. 27, 2007.

*STEVEN RAY GREEN AND ASSOCIATES
NATIONALLY CERTIFIED COURT REPORTERS
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TRANSCRIPT LEGEND

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-- (sic) denotes an incorrect usage or pronunciation of a word which is transcribed in its original form as reported.

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-- "uh-huh" represents an affirmative response, and "uh-uh" represents a negative response.

-- "*" denotes a spelling based on phonetics, without reference available.

-- (inaudible)/ (unintelligible) signifies speaker failure, usually failure to use a microphone.

P A R T I C I P A N T S

(By Group, in Alphabetical Order)

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1 LOCKEY, James, M.D. (not present)
2 Professor, Department of Environmental Health
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4 MELIUS, James Malcom, M.D., Ph.D.
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ELLIOTT, LARRY, NIOSH
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GLOVER, SAM, NIOSH
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TACK, JEFF, DOE

P R O C E E D I N G S

(11:00 a.m.)

WELCOME AND OPENING COMMENTSDR. PAUL ZIEMER, CHAIRDR. LEWIS WADE, DFO

1 DR. WADE: We'll do a roll call. Again, Paul
2 Ziemer.

3 DR. ZIEMER: Yes.

4 DR. WADE: Josie Beach.

5 MS. BEACH: Here.

6 DR. WADE: Brad Clawson.

7 MR. CLAWSON: Here.

8 DR. WADE: Mike Gibson.

9 MR. GIBSON: Here.

10 DR. WADE: Mark Griffon.

11 MR. GRIFFON: Here.

12 DR. WADE: James Lockey.

13 (No response)

14 Jim sent me a note that for family illness he
15 would not be with us. Jim Melius.

16 DR. MELIUS: I'm here.

17 DR. WADE: Wanda Munn.

18 MS. MUNN: Here.

19 DR. WADE: Robert Presley.

20 MR. PRESLEY: Here.

1 **DR. WADE:** John Poston. John sent me a note
2 saying he would not be with us for reasons of
3 conflict with his academic schedule. Gen
4 Roessler.

5 **DR. ROESSLER:** Here.

6 **DR. WADE:** And Phillip Schofield. Phillip sent
7 me a note saying he would join us within an
8 hour. So I make it that we have nine in
9 attendance, which is certainly a quorum.
10 Before we go forward, I won't ask everyone on
11 the line to identify themselves, but I -- I
12 will ask for particular people, particularly
13 those that will be heavily involved in the
14 discussion, to identify themselves for the
15 record. I'll also give everyone a chance who
16 would want to identify themselves to do that.
17 First of all, let me ask for the NIOSH people
18 who will be involved in the call to identify
19 themselves for the record.

20 **MR. ELLIOTT:** This is Larry Elliott, the
21 Director of the Office of Compensation Analysis
22 and Support for NIOSH.

23 **DR. NETON:** This is Jim Neton from NIOSH.

24 **MR. RUTHERFORD:** LaVon Rutherford from NIOSH.

25 **DR. WADE:** Any other folks from NIOSH who want

1 to identify themselves for the call?

2 **MS. BLACK:** Hi, this is Flo. I just -- hello?

3 **DR. WADE:** Yes, Flo. How are you?

4 **MS. BLACK:** Oh, hi.

5 **DR. WADE:** This is Flo Black with the
6 Procurement and Grants Office of CDC. Welcome,
7 Flo.

8 **MS. BLACK:** Thank you.

9 **MR. SUNDIN:** It's Dave Sundin.

10 **DR. WADE:** David, how are you? How about SC&A
11 folks who will be participating in the call?

12 **DR. MAURO:** Yes. Hey, Lew. It's John Mauro
13 from SC&A.

14 **DR. WADE:** Welcome, John.

15 **DR. OSTROW:** Steve Ostrow from SC&A.

16 **DR. WADE:** Welcome, Steve.

17 **MS. BEHLING:** Kathy Behling from SC&A.

18 **DR. BEHLING:** Hans Behling, SC&A.

19 **DR. WADE:** Welcome to the Behlings.

20 **DR. MAKHIJANI:** Arjun Makhijani, SC&A.

21 **DR. WADE:** Always a pleasure, Arjun. Any other
22 SC&A folks?

23 Might I ask who's on the line and will be
24 participating from the Department of Energy?

25 **MR. LEWIS:** This is Greg Lewis from the

1 Department of Energy.

2 **MR. ELLIOTT:** Lew, I know that Gina Cano was
3 going to participate. We just got off a call
4 together so she may not be -- she may not have
5 called in yet.

6 **DR. WADE:** Okay.

7 **MR. LEWIS:** Yeah, we should have two more
8 people calling in from DOE.

9 **DR. WADE:** Okay. I'll ask again for the
10 Department of Energy. Department of Labor?

11 **MR. KOTSCH:** Jeff Kotsch.

12 **DR. WADE:** Jeff, always a pleasure to have you
13 with us. Thank you. Are there any other
14 federal employees who would like to identify
15 themselves for the record?

16 **DR. BRANCHE:** Christine Branche, Principal
17 Associate Director, NIOSH, Office of the
18 Director.

19 **MS. HOWELL:** Emily Howell, HHS.

20 **MR. BROEHM:** Jason Broehm, CDC.

21 **DR. WADE:** All right.

22 **UNIDENTIFIED:** (Unintelligible) NIOSH.

23 **DR. WADE:** Welcome.

24 **MR. STAUDT:** David Staudt, CDC.

25 **DR. WADE:** A pleasure to have you with us,

1 David.

2 **MS. HOMOKI-TITUS:** This is Liz Homoki-Titus
3 with HHS.

4 **DR. WADE:** Welcome, Liz.

5 **MR. ROLFES:** This is Mark Rolfes, NIOSH.

6 **DR. WADE:** Are there any petitioners or worker
7 -- worker reps who would like to identify
8 themselves for the record? You don't need to
9 do that, but if you would like to have your
10 name on the record, please do that.

11 **DR. MCKEEL:** This is Dan McKeel. I'm the Dow
12 SEC.

13 **DR. WADE:** Welcome, Dan. Glad to have you with
14 us. We'll be hearing from you a bit later when
15 we talk about Dow.

16 **MS. BARRIE:** This is Terrie Barrie with ANWAG.

17 **DR. WADE:** Welcome, Terrie.

18 **DR. WADE:** Is there anybody else on the line
19 who would like to be identified on the record?
20 Again, it's not required.

21 (No responses)

22 Okay. Just a few things of phone etiquette.
23 Please, you know, if you are speaking, speak
24 into a handset if at all possible. Try and
25 avoid the use of speaker phones. They do

1 collect background noise. If you're not
2 speaking actively, then mute the instrument
3 that -- that -- that you're using. Again,
4 background noises can be very distracting, and
5 each of us should just give a moment of thought
6 to our environment and -- and noises in our
7 environment and how that might affect the call.
8 I -- I think it is important for this Board and
9 -- and its multiple tasks to meet by telephone,
10 but in order to do that effectively we all have
11 to obey some fundamental rules of courtesy. So
12 I'd ask you to give some thought to your -- to
13 your environment and manage it effectively.
14 Might I go back and ask if there are others
15 who've joined us from the Department of Energy?
16 **MS. CANO:** Yes. This is Regina Cano with the
17 Department of Energy.
18 **DR. WADE:** Welcome.
19 **MS. CANO:** And I believe Jeff Tack is on the
20 call and Greg Lewis from the Department of
21 Energy.
22 **MR. LEWIS:** Hi, Gina. Jeff -- Jeff hasn't
23 joined us yet, but I did talk to him this
24 morning so he should be calling.
25 **MR. TACK:** You know what, I just got on.

1 **MR. LEWIS:** Oh, there we go. Okay. Good.

2 **MS. CANO:** Thank you.

3 **MR. TACK:** You're welcome.

4 **DR. ZIEMER:** How -- Jeff -- how do you spell
5 your last name?

6 **MR. TACK:** Tack.

7 **DR. ZIEMER:** Okay. Okay. Lew, are we all set
8 then?

9 **DR. WADE:** I think, Paul, it's yours to go.

10 **DR. ZIEMER:** Very good. Thank you very much,
11 everyone, for joining us this morning. We'll
12 officially call the -- the Board meeting to
13 order. The agenda has been distributed by e-
14 mail to the Board members. It is also present
15 on the web site. So hopefully any members of
16 the public who've joined us can access the
17 agenda from the web site. As is our practice,
18 the -- the times on the agenda are approximate.
19 They are based on an estimate of sort of the
20 outside amount of time or the -- the -- the
21 total length of time that a given topic might
22 take. However, we can expand and contract as
23 the need arises, and if we do complete an item
24 early, we will simply move on to the next item.
25 Our first item following the introductions on

1 the agenda is an update on the Chapman Valve
2 SEC. I was going to call on the workgroup
3 chairman to do that but Dr. Poston isn't here,
4 and I -- I think probably we can have a staff
5 update on that. Who was going to handle that?

6 **DR. WADE:** I think we were going to hear from
7 the Department of Energy and Department of
8 Labor.

9 **DR. ZIEMER:** The questions that were sent to
10 them regarding the --

11 **DR. WADE:** Correct. They'd given us reports --

12 **DR. ZIEMER:** -- possible presence of enriched
13 uranium.

14 **DR. WADE:** Right.

15 **DR. ZIEMER:** Well, let's start with Energy.
16 Let's see, who can report to us from Energy?

17 **MR. GRIFFON:** Hey Paul? Is this a new agenda?
18 'Cause it's not the one on the web. I mean we
19 -- I had -- I have starting with the -- it
20 doesn't matter that much for me. But I'm just
21 trying to --

22 **DR. BRANCHE:** We changed the agenda on
23 Wednesday of last week to accommodate our
24 colleagues from the Department of Labor.

25 **MR. GRIFFON:** Okay. Okay.

1 **DR. BRANCHE:** And that was distributed in an e-
2 mail on November 20th.

3 **MR. GRIFFON:** Okay.

4 **DR. WADE:** Thank you.

5 **MR. GRIFFON:** Thank you.

6 **DR. ZIEMER:** Was that updated on the web?

7 **MR. GRIFFON:** Paul, apparently not.

8 **DR. WADE:** Apparently not.

9 **MR. ELLIOTT:** No, it was not updated on the
10 web. Our -- our person who assists us with the
11 web had a death in her immediate family and was
12 not available to -- to get that up.

13 **DR. ZIEMER:** Okay. I -- so those -- those who
14 are relying on the web, I apologize. There was
15 a modification to accommodate the -- the folks
16 from Energy and Labor. So we have the -- a
17 couple of items earlier than they might have
18 been.

19 **DR. WADE:** Why don't I, Paul, just do a very
20 quick reading of the agenda so everyone will
21 know what's coming?

22 **DR. ZIEMER:** Sure.

23 **DR. WADE:** At 11:00 we were to do our welcome
24 and introductions. At 11:15 a Chapman Valve
25 SEC update. At 11:30 a Dow Chemical SEC

1 update. At noon we were to talk about FY '08
2 tasks for SC&A, including site profiles,
3 procedures and DR reviews. At 12:45 a
4 discussion of the procedures to be used to
5 select the Board's support contractor for next
6 year. As you know, the SC&A contract runs out
7 this year. At 11:15 there was an update on the
8 Sandia SEC.

9 **DR. ZIEMER:** Wait, wait, wait, wait. You've
10 gone backwards in time, Lew.

11 **DR. WADE:** I'm sorry. At 1:15 -- I'm sorry.

12 **DR. BRANCHE:** Yeah, one o'clock is
13 (unintelligible).

14 **DR. WADE:** Okay. Let me go back. At 12:45 a
15 discussion of procedures --

16 **DR. BRANCHE:** Huh-uh.

17 **DR. WADE:** -- to select the Board's support
18 contractor. At 1:15 Sandia SEC update. At
19 1:30 a discussion of Board procedures on
20 interviews. At 2:00 an update on the tracking
21 matrices. At 2:30 a subcommittee update on the
22 fourth and fifth sets of DRs and an overview of
23 the first hundred cases that were reviewed. At
24 3:00 workgroup updates. At 3:45 Board working
25 time, and at 4:00 adjourn. Again, all those

1 times are -- are approximate. The last -- the
2 change that didn't get on the web site was
3 really done to accommodate our busy friends at
4 the Department of Energy.

5 **CHAPMAN VALVE SEC UPDATE**

6 **DR. ZIEMER:** Okay. Thank you for that review,
7 Lew. That's helpful to everyone, I think. So
8 let's return then to the Chapman Valve issues
9 and let us hear first from the Department of
10 Energy.

11 **MS. CANO:** Thank you. This is Regina Cano. Pat
12 -- Dr. Pat Worthington was unable to be on the
13 call today, so I will be providing our update
14 on Chapman as well as Dow.

15 **DR. ZIEMER:** Okay.

16 **MS. CANO:** At any rate, again, thank you for
17 accommodating our schedule. We have to be on a
18 plane for Seattle this afternoon, so we really
19 do appreciate you making the -- the change.
20 In regards to Chapman, I also have Jeff Tack on
21 the phone, who has done a lot of research on
22 our behalf, not only for Chapman but for Dow.
23 So he will be able to provide some additional
24 information regarding his research activities
25 for both facilities. But since the last

1 meeting in October -- let me go ahead and --
2 what was -- what was actually sent to DOE and
3 that -- what we are trying to respond to is
4 back in September 5th -- I believe it was
5 September 5th, maybe I've got the wrong date,
6 but NIOSH had actually sent us a -- a letter
7 asking us to clarify whether or not any kind of
8 radioactive material was actually -- let me see
9 -- radioactive material -- was whether or not
10 any additional sources of radioactive material,
11 examples: transfer points of manifolds from Oak
12 Ridge for testing at Chapman Valve Dean Street,
13 which may have contained enriched uranium, and
14 whether or not any of that type of work took
15 place at Dean Street. We have actually been --
16 we have actually done a lot of research since
17 the October meeting, which basically included
18 going out to Y-12. Jeff Tack actually went out
19 to Y-12 and performed some research. We were
20 able to obtain 37 drawings that show that
21 Chapman Valve produced valves and manifolds
22 during that specific time frame, but basically
23 what it does substantiate is that yes, that
24 there were manifolds and valves being produced
25 on behalf of Y-12 at Chapman.

1 We also in that time frame contacted Savannah
2 River Site and queried them to see if they had
3 any information on Chapman Valve. We had no
4 responsive information from them or responsive
5 records. Jeff also contacted the Springfield
6 Economic Development Center to see if basically
7 they had any information or records pertaining
8 to the Dean Street facility. Although Dean
9 Street -- what -- I guess what they were only
10 able to show was that in -- in '44, '46 and '47
11 Chapman Valve owned a building on Dean Street.
12 We have -- however, even though Dean Street
13 still exists, the building was torn down in the
14 late 1940s, and the state archives have no
15 record about the mission at this location. So
16 we are still unclear what kind of work the Dean
17 Street facility would have performed on behalf
18 of Chapman.

19 We also contacted -- let's see -- we contacted
20 -- Jeff, do you want to talk about Stone and
21 Webster?

22 **MR. TACK:** Sure.

23 **MS. CANO:** Since you talked to them.

24 **MR. TACK:** We did -- we -- you know, one of the
25 -- the documents that we received indicated was

1 a reference to a purchase that was done by
2 Stone and Webster for the Y-12 facility, acting
3 as an agent for the Department of Energy. So I
4 went back to Stone and Webster to confirm or
5 determine if they had any additional
6 information on the site, what role they played
7 at that time and, you know, they were kind of
8 surprised that we were calling them because of
9 the fact that they didn't have anything and
10 indicated to me that, Jeff, you know, those
11 were government records and would have went
12 back to the government so we have nothing more
13 in our control or possession.

14 The other one that we contacted -- I recall
15 that we had a request to take a look possibly
16 at some responsive information for the facility
17 that was in the basement of Western
18 Massachusetts Committee on Occupational Safety
19 and Health. We since spoke to them last week.
20 However, the material or information in their
21 possession was primarily specific to employees
22 and did not -- what we believe did not contain,
23 from my review, any responsive information that
24 would change our position on the site right
25 now.

1 **MS. CANO:** And also, in regards to those 37
2 drawings, I believe (unintelligible) may have
3 already provided those to NIOSH.

4 **MR. TACK:** You know what, actually we were
5 scanning those for you, and I believe that they
6 would be sent to you this week.

7 **MS. CANO:** Good.

8 **MR. TACK:** We were still putting those in -- I
9 obtained copies of the drawings and it was
10 clear that Chapman, in support of, you know,
11 producing valves and manifolds, clearly
12 produced those products for the Y-12 facility
13 during its construction and -- you know, but
14 there was no indication on the drawings or the
15 material specs that are included on those that
16 any of that material would have been produced
17 from anything other than common product: iron,
18 bronze, cast iron, low carbon steel, stainless.
19 But we did not see anything that would have
20 indicated that the drawings would have
21 requested, you know, products to be
22 manufactured out of any radioactive materials,
23 or could I determine that there was any other
24 source of material that was going back and
25 forth at that time.

1 **DR. ZIEMER:** This is Ziemer. Let me insert a
2 question here, and maybe the Chapman Valve
3 workgroup can help us on this, but wasn't one
4 of the early indications that there might have
5 been some contamination of a shipment versus
6 the idea of its actually being -- incorporating
7 radioactive materials?

8 **MR. CLAWSON:** Paul, this is Brad Clawson. Part
9 of our issue was was that there -- that a lot
10 of these valves had gone to Y-12 and so forth,
11 and been a part of the process and then be --
12 had been brought back to be repaired or
13 refurbished.

14 **MR. TACK:** Right. And you know, that was
15 difficult for us to determine as I looked at
16 the information that was provided to us or what
17 we were able to obtain. Actually the only
18 reason that these 37 drawings still existed is
19 that those valves are still in place at the
20 site, even though it's going under remediation.
21 That was probably the only reason why those
22 drawings were still in the -- in the record
23 system or, you know, preserved or still
24 retained by Oak Ridge. No other documentation
25 was available. We queried a couple of the

1 retired individuals that may have been involved
2 with it, didn't have any recollection that
3 intentionally there was any transfer of
4 material back and forth and, you know, it's
5 difficult to determine that only because of the
6 time frame. It would appear that the contracts
7 and the production of the valves were probably
8 prior to Oak Ridge operation. So it looked to
9 me like, from what we could determine, that
10 they were primarily providing common valves, no
11 different than any other construction or design
12 program, and so, you know, it's difficult or we
13 were not able to ascertain whether or not
14 anything was returned to them for rework after
15 the plant would have went into operation. But
16 it was very clear that most of the products
17 that Chapman was sending were in support of
18 plant construction and design.

19 **MR. CLAWSON:** And I understand that. This is
20 Brad again. One of our questions that came up
21 was from some of the petitioners and so forth.
22 This is where Dean Street came into the process
23 was some of these valves and manifolds
24 especially have been into the process and, for
25 them to be able to rebuild them or whatever

1 like that, they were sent back, they were off-
2 loaded and then went to the Dean Street to be
3 refurbished and worked on and -- and turned
4 back. So you understand what our issue is, is
5 we've got a group of (loss of transmission) and
6 quite a bit of evidence going to something like
7 this. I realize it would be hard, but we've
8 got to -- we've got to be able to try to look
9 at this and make sure that we're getting all
10 the information that we can.

11 **MR. TACK:** Well, and I think, you know, as I
12 looked at the information and the period of
13 production and operations of the Y-12 facility,
14 you know, Chapman also played a significant
15 role in the Navy. You know, there were some
16 discussions or indications that, with a couple
17 of the retirees -- again, they're not real
18 clear on what transpired, but they're very
19 clear that -- that they had a significant
20 mission on providing valves to and manifolds to
21 the Navy, to the Army and, you know, I -- you
22 know, it could be very well that it's at the
23 same period that the Navy nuke program started,
24 which was in the late '40s. So I -- there was
25 no way for us to determine -- Y-12 did, you

1 know, extensive searches on their holdings to
2 determine -- we were never able to substantiate
3 anything that went back and forth to Dean
4 Street by record. We were never able to show
5 that if anything went to Chapman Valve it would
6 definitely have went to the Indian Orchard
7 facility, you know, and again then that -- of
8 course Dean Street was, by the city record --
9 was no longer shown as a facility owned by
10 Chapman after 1947. In the '48, '49 and '50
11 registers it appeared that the building was
12 dismantled, so there was no way for us to
13 substantiate what transpired at that facility.

14 **MR. GRIFFON:** I -- I don't -- this is Mark
15 Griffon. Yeah, I heard you mention that
16 earlier, and I don't think that's accurate. I
17 think we have people from the positioning group
18 that actually said the Dean Street facility
19 still exists, the -- the -- the building itself
20 is still up and, as a matter of fact, they said
21 it was an auto shop or something -- an auto
22 body shop. The Chapman Valve -- the main
23 Chapman facility has been torn down.

24 **MR. TACK:** All right. Well, they gave the
25 indication that the --

1 **MR. GRIFFON:** It wasn't owned by Chapman
2 anymore. I agree with that part.

3 **MR. TACK:** Right.

4 **MR. GRIFFON:** But I don't think it was
5 dismantled and torn down. It was -- it still
6 exists, it's there.

7 **MR. TACK:** We show that if it was, it was no
8 longer owned by Chapman as of 1948.

9 **MR. GRIFFON:** That -- that's probably accurate.
10 Yeah.

11 **MR. TACK:** Right. And it -- and we went back -
12 - there -- actually the gentleman that was with
13 the State went down there - Brian Connors of
14 the Springfield Economic Development Center
15 went down for me and tried to determine, in
16 support of our effort -- they're going through
17 a big redevelopment of Dean Street right now
18 and all of that surrounding area -- went down
19 to the facility and tried to determine, only
20 because it -- they really didn't have anything
21 more than an address. A lot of those areas
22 have changed. We believed it was on a corner
23 between two streets. He went down to determine
24 if there was any way that they could ascertain
25 whether that was truly, you know, the same

1 facility that was shown in the register and
2 they weren't able to do that. The buildings
3 had been remodeled. The directory, even though
4 it shows a building there, if anything, it --
5 you know, it was only on the same parcel or
6 combined parcels and so it wasn't easy for him
7 to determine, you know, what happened to the
8 facility, was it still there. They had no
9 other records about a mission there or anything
10 about Chapman Valve owning the facility, other
11 than a directory.

12 **MS. CANO:** Jeff, this is -- this is Gina.
13 We're also going to be traveling out to
14 Massachusetts within the next couple of weeks
15 to interview one of the former employees for
16 Chapman just to see if she can give us any --
17 any additional leads, any other -- any other
18 information -- identifying information that we
19 can actually go out and research. But that is
20 going to take place in the next couple of
21 weeks, and it may be one or two former
22 employees.

23 **DR. ZIEMER:** So there could be some additional
24 information surface by the time of our full
25 Board meeting.

1 **MS. CANO:** In January, correct.

2 **DR. ZIEMER:** Yeah.

3 **MS. CANO:** We hope to have this final decision
4 to you by the next Board meeting.

5 **DR. ZIEMER:** Right. But what you're telling us
6 so far is you don't have any information that
7 would change your classification at the moment.
8 Is that correct?

9 **MS. CANO:** That's correct.

10 **DR. ZIEMER:** Does Labor have anything at this
11 point to report or are you awaiting the DOE's
12 outcomes?

13 **MR. KOTSCH:** Paul, yeah. We -- we were going --
14 -- we were awaiting, you know, information from
15 DOE on, you know, on the Dean Street facility.

16 **DR. ZIEMER:** Right.

17 **MR. KOTSCH:** Before we would --

18 **DR. ZIEMER:** You can't do anything until you
19 get their designation, I guess is what you're
20 saying.

21 **MR. KOTSCH:** Right, yeah. I mean it is our
22 responsibility that -- to extend the -- you
23 know, the covered period if -- if --

24 **DR. ZIEMER:** If there's ever --

25 **MR. KOTSCH:** -- if it is indeed necessary.

1 Yeah. If there was evidence. But like I said,
2 we are -- we're still awaiting DOE's input.

3 **DR. ZIEMER:** Yeah. Okay. Let me ask if any
4 other Board members or -- particularly
5 workgroup members, is there any other questions
6 at the moment?

7 **MR. GRIFFON:** This is Mark Griffon.

8 **DR. ZIEMER:** Yeah.

9 **MR. GRIFFON:** One follow-up for DOE. Did --
10 did you -- were you able to find any shipping
11 records from Y-12? I know we had specifically
12 mentioned that. Someone did at one of the
13 Board meetings.

14 **MR. TACK:** We were not.

15 **MR. GRIFFON:** No?

16 **MR. TACK:** We had no other records other than -
17 - actually the drawings had never shown up on
18 previous searches.

19 **MR. GRIFFON:** Right.

20 **MR. TACK:** When we got there, we looked in
21 their holdings, had them do some additional
22 searches for me while I was there and in one of
23 the drawing files -- in an archived drawing
24 files. An active plant file that -- is the
25 only way that they were able to find these

1 drawings that showed that same covered period.
2 There was no reference to the purchase orders
3 on there or any information of contracts, other
4 than they were procured by Stone and Webster
5 during the period for the facility, and
6 buildings that are still in and actually were
7 in -- still currently standing at the facility
8 with the valves probably still installed.
9 Otherwise they had nothing else, no other
10 records from that period.

11 **MS. CANO:** Other than what we already have.

12 **MR. TACK:** Right.

13 **MS. CANO:** I mean we do have some -- you know,
14 those -- of the invoices that I believe that
15 you have, as well. But we haven't found
16 anything new.

17 **MR. TACK:** Nothing new.

18 **MR. GRIFFON:** And were you able to follow up --
19 I don't know if we specifically -- if the
20 letters asked for this, but were you able to
21 find any or follow up on the remediation
22 contractors and what reports they might have
23 had? Specifically -- I know I mentioned the
24 question of, you know, when they cleaned up
25 they had to ship the waste somewhere and

1 probably had to manifest it as radioactive, and
2 that might help us to determine whether there
3 was any significant quantity of enriched
4 uranium or whether there was a sample.

5 **MR. TACK:** There's not. We provided Genie last
6 -- to Gina last week copies of the remediation,
7 both the characterization plans, the pre-, the
8 post- and an independent survey; and all those
9 documents were forwarded to her last Thursday.
10 Actually Thanksgiving morning. We didn't show
11 that that one enriched sample of dust or soil
12 that was found actually changed our remediation
13 approach. They -- they didn't show any concern
14 or implement any additional changes to the
15 approach for remediation as a result of that.

16 **MR. GRIFFON:** Well I wouldn't expect that. I
17 was more interested whether -- how they
18 manifested the material.

19 **MR. TACK:** You know what, it didn't have -- we
20 no longer had the custody of that. We've gone
21 back --

22 **DR. NETON:** Mark, this is Jim Neton. We've
23 obtained a copy of the certification document
24 docket for the remediation effort and it's out
25 there on the O drive now.

1 **MR. GRIFFON:** Okay. I think I just got an e-
2 mail from Mark Rolfes --

3 **DR. NETON:** It just went out. It's a 785-page
4 document --

5 **MR. GRIFFON:** Oh, okay.

6 **DR. NETON:** -- that goes through a lot of what
7 was just described and --

8 **MR. GRIFFON:** It's on the O drive? I'm looking
9 on the O drive and I don't see it. Maybe it's
10 a delay in --

11 **DR. NETON:** Yeah. Sometimes there's a half-day
12 delay in those things popping up there.

13 **MR. GRIFFON:** Okay.

14 **DR. NETON:** But I looked through it, admittedly
15 fairly quickly, but I -- I did a search on
16 enriched and saw nothing except the reference
17 to the, you know, the document -- the 1991
18 survey where there was that enriched sample
19 discovered. But pretty much the tone of the
20 whole document was they were re-mediating the
21 effort in building 23, which was as -- you
22 know, as we wrote our dose reconstructions on,
23 which was for the cleanup of the uranium slug
24 operation. I -- I found no indication that
25 there was anything else there at all, but of

1 course I didn't look at every page.

2 **MR. GRIFFON:** Yeah. Okay.

3 **DR. NETON:** But it's out there for -- for
4 people to look at now.

5 **MR. GRIFFON:** Thank -- thank you.

6 **DR. NETON:** It should be shortly.

7 **MR. GRIFFON:** Appreciate it.

8 **DR. ZIEMER:** Thank you. Any other questions or
9 comments on -- on Chapman? And Lew will be
10 sure to add -- or have this on the agenda then
11 for our next meeting.

12 **DR. WADE:** Correct. This is Lew Wade. I would
13 like to just thank DOE for their persistence in
14 this matter and their responsiveness to -- to
15 our requests.

16 **MS. BLOCK:** This is Sharon Block from Senator
17 Kennedy's office, and I apologize. I got on
18 the call a little late. I didn't realize that
19 you had changed the timing of when you were
20 going to discuss Chapman Valve. I just want --
21 so I didn't hear the beginning of your
22 discussion, but I assume that -- that you all
23 received the letter from Senator Kennedy and
24 Senator Kerry and that -- that those were the
25 issues that you were discussing. Is that

1 right?

2 **MS. MUNN:** We did receive the letter.

3 **DR. WADE:** I think that's an accurate
4 characterization, yes.

5 **MS. BLOCK:** And so in -- in -- just if you
6 wouldn't mind, just for -- just for our -- our
7 benefit, the first item in the letter -- the --
8 following up on those contracts that we had
9 talked about at the last meeting. Am I
10 understanding that -- that -- from Regina that
11 you haven't found anything else relating to
12 those contract numbers?

13 **MS. CANO:** That's correct. But we are -- we
14 are in the process of responding to your --
15 your letter. And you'll -- we'll provide any
16 additional information we have in our
17 possession to NIOSH and the Advisory Board.
18 But I believe we have actually provided
19 everything that we have, other than with the
20 exception of these 37 drawings that we -- that
21 we just recently found. But that is -- that
22 will be provided to NIOSH.

23 **MS. BLOCK:** Okay, great. Thank you. And
24 again, I apologize. I didn't know that the
25 time had changed.

1 **DR. ZIEMER:** And Sharon, this is Paul Ziemer.
2 The -- the DOE folks have some additional
3 follow-ups that they're -- that they are doing
4 so we're going to follow up at our regular
5 meeting next time on this further. So --

6 **MS. BLOCK:** Do you -- do you anticipate a vote
7 at the next meeting or will it be just another
8 update?

9 **DR. ZIEMER:** I think that's going to be very
10 dependent upon what is found.

11 **MS. BLOCK:** Okay. If you could just obviously
12 keep us in the loop on that, we'd appreciate
13 it.

14 **DR. ZIEMER:** Yes.

15 **MS. REALE:** Excuse me, Dr. Zimmer (sic).

16 **DR. ZIEMER:** Yes?

17 **MS. REALE:** This is Mary Ann Reale, petitioner
18 for Chapman Valve.

19 **DR. ZIEMER:** Yes.

20 **MS. REALE:** You're discussing the Dean Street
21 property and I understand that someone
22 indicated that had been demolished.

23 **DR. ZIEMER:** I think the DOE folks had
24 suggested that. Jeff, is that correct?

25 **MR. TACK:** It is. The only thing, though -- I

1 mean we weren't able -- we did not travel up
2 there. We talked about that, but the - Brian
3 Connors of their Economic Development Center
4 took the information that they had for me and
5 he went down to the facility and tried to
6 determine from the addresses that were shown,
7 what is there, did anybody, you know, have any
8 information in their State archives or within
9 in their possession that would show anything on
10 that facility, the Dean Street, what it did,
11 how it was -- what was the relationship with
12 Chapman. They had no records on that. They
13 only had the directories from the period
14 identified. He felt that it could be -- again,
15 he stressed to me, Jeff, you know this area has
16 been -- you know, over time of course, has
17 evolved and that part of -- you know, the
18 building could still be on part of land that
19 was in that area, but they never had any
20 indication as they evolved over time that --
21 you know, as of 1948 that facility was no
22 longer shown in their records. So he wasn't
23 able to determine for me whether or not -- you
24 know, of course the building would be owned by
25 somebody else, anything more than what we were

1 able to provide to you.

2 **MS. REALE:** Well up until a month ago I was in
3 the building, and the building does exist and
4 it is 12 Dean Street. It's almost at the
5 corner of Parker Street and Dean Street.

6 **MR. TACK:** Right.

7 **MS. REALE:** And it is a working auto repair
8 shop at the present date.

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

10 **MR. CLAWSON:** Dr. Ziemer, this Brad. I -- I
11 just -- as one of the working group, when we
12 get this letter from DOE, could we please have
13 a copy of that letter sent to us to make sure
14 that (broken transmission) covered?

15 **DR. ZIEMER:** We can certainly do that. Who
16 will that letter go to?

17 **MR. CLAWSON:** Well, when DOE -- when DOE
18 (broken transmission) report on it, I would
19 like to have it in a letter either to the
20 Advisory Board or -- or you to be able to be
21 put out to the working group, but there --
22 there -- to me there's a lot of questions still
23 out there, and you've heard me say this before.
24 This whole process is like a big computer. If
25 we don't have sufficient information into it,

1 what we get out is going to be flawed at the
2 end, and I want to make sure that we have
3 covered every rock, everything else, to be able
4 to make sure that this is the best that we can
5 be able to do. But I'd just like to be able to
6 have DOE's report of what they've found, so
7 forth, in a formal manner to us.

8 **DR. ZIEMER:** I think the DOE letter -- let's
9 see, perhaps Gina can confirm this. Your --
10 your -- your letter would be a response to
11 NIOSH directly?

12 **MS. CANO:** That's correct.

13 **DR. ZIEMER:** And NIOSH in turn I assume would
14 make that available to the Board.

15 **DR. WADE:** Right. I wrote to them on the
16 Board's behalf, so --

17 **DR. ZIEMER:** Right, right.

18 **DR. WADE:** -- if you respond to me, then I'll
19 certainly see that all Board members receive
20 it.

21 **DR. ZIEMER:** We'll make sure it gets
22 distributed.

23 **MR. CLAWSON:** Okay. I appreciate that.

24 **DR. ZIEMER:** And then it'll be back on the
25 agenda at the next meeting for follow-up.

1 -- on Dow. In regards to Dow Chemical from --
2 in Madison, I believe at the last Board meeting
3 we had briefed to you on the fact that we had
4 actually gone out to the NNSA* sites, the
5 weapons facilities, to -- and requested some
6 information from them. We have received some
7 information back from them, and we are in the
8 process of reviewing that information.
9 In addition, we have also received the results
10 from the FBI. We sent the five purchase orders
11 in question to the FBI to see if they could
12 actually help us decipher the text. We did
13 receive the information back from the FBI.
14 However, we had some problems with the way they
15 actually -- they characterized their -- their
16 report and asked them to go back and -- and go
17 ahead and -- and rewrite that report for us to
18 clarify some of the issues that we had. They
19 just weren't thorough enough in their
20 evaluations. So they are doing that now. They
21 have accommodated our request. They have been
22 very cooperative and we -- we really do
23 appreciate the work they've been doing on our
24 behalf.
25 In addition, like I said, we have received the

1 information from the labs. We are reviewing
2 that information now and hope to have something
3 to you as well in January.

4 **DR. ZIEMER:** Specifically from which labs?
5 From --

6 **MS. CANO:** From Livermore.

7 **DR. ZIEMER:** From Livermore.

8 **MS. CANO:** That's correct.

9 **DR. ZIEMER:** Okay. Okay, let's -- let's go
10 ahead and hear from Dr. McKeel.

11 **DR. MCKEEL:** Dr. Ziemer, good morning to you --

12 **DR. ZIEMER:** Good morning.

13 **DR. MCKEEL:** -- to you and the Board. I wanted
14 to also thank the Department of Energy for
15 doing its investigations and we have had a
16 conversation about FBI reports in particular.
17 And I just wanted to make a couple of comments
18 about that.

19 The FBI did get the five purchase orders from
20 Mallinckrodt. Apparently they -- in the first
21 instance they were not tasked to interpret what
22 they found. But they did some image analysis
23 manipulations of the text to see if they could
24 define in particular that passage that we think
25 is so critical which would identify which type

1 of magnesium plate* alloy was sent to
2 Mallinckrodt Chemical Works Uranium Division.
3 And their image that they sent back to us -- I
4 think what we reported to the Board in May was
5 even supported more strongly because you could
6 clearly read the letters 21XA-TA*. So as I
7 pointed out in May, the real question is the
8 preceding letters to 21A and I -- I personally
9 couldn't read them, even with the enhanced
10 version, so part of what we asked the FBI to do
11 -- or what Regina and the Department of Energy
12 is asking (unintelligible) rewrite is to
13 clarify their interpretation of what those
14 letters may be. It appears to me, at least,
15 that there may be three letters there. But in
16 any case, we've asked them to provide further
17 interpretation of that.

18 I will mention that between the last meeting
19 and today, I heard from a former employee at
20 Dow, who is an interesting woman because she
21 was the [redaction] employee between 1973 and
22 1986 who was actually paid by Dow. [Statement
23 redacted.] But that was during the period that
24 Consolidated Aluminum Company owned the plant,
25 and so all the purchase orders to Dow went

1 through her. And so we were discussing what
2 she had done and what -- who the clients were
3 and so forth, and she said that one thing she
4 remembered vividly was that HM21A
5 (unintelligible) thorium/magnesium alloy, that
6 that was a major product of Dow Madison, and
7 that the men -- the workers there had said the
8 same thing. She also said that she did not
9 remember -- during that period, at least -- any
10 shipments from Dow Madison to Rocky Flats and
11 so, you know, that's just one person but she
12 was in a rather unique position to monitor
13 everything in and out of that plant. So, you
14 know, that -- there still is a possibility,
15 which I felt strongly about, that -- that some
16 of those records and shipping manifests may be
17 in the classified files at the Department of
18 Energy.

19 The second thing I'd like to mention about the
20 Dow SEC is that on April the 17th, following
21 issuance of the NIOSH SEC evaluation report, I
22 submitted a FOIA request which was given the
23 number 07-000569 to the CDC/HTSDR* Atlanta
24 office, and actually the -- originally what I
25 sent was a set of quest-- 14 questions to Mr.

1 Elliott at OCAS, and eight of those were
2 converted into FOIAs, which were then forwarded
3 to Atlanta. And I just wanted to mention that
4 those eight that are responsive to my request
5 in April still have not been received. So
6 we're past months and it is absolutely crucial
7 to get those answers soon before the Board
8 (unintelligible) -- I mean we should have those
9 in hand and the Board should have them and I
10 should have them before the Board votes, which
11 of course we hope would be in January. So I
12 understand that the Board -- that's not the
13 Board's responsibility to get those answers
14 back, but I -- I -- I have a -- this is a
15 dreadful situation where you have to wait six
16 months for a FOIA request when the law says
17 that they have 20 days to respond.

18 Another thing to comment on is --

19 **DR. WADE:** Before you go forward, Dr. McKeel --
20 this is Lew Wade -- I would ask everyone to
21 please mute your phone if possible. We're
22 hearing papers rattling and sort of coughing in
23 the background. If -- if you could, please.
24 Go ahead, Dr. McKeel.

25 **DR. MCKEEL:** Okay. The other items say -- is

1 that I have sent a series of questions to
2 Regina Cano and Pat Worthington and I hope that
3 they will be able to answer those. We -- we
4 also need those answers and -- and one of them
5 is a response to my letter to Pat in July,
6 which -- which was a response to the letter she
7 had sent to Mr. Elliott responding to his May -
8 - his May questions to the Department of
9 Energy.

10 So the other thing I wanted to comment about --
11 I don't know how we can do this; I think we
12 could send a comment to the Board -- but the
13 workers at Dow have shared with me a number of
14 concerns they have about the SC&A report on the
15 NIOSH SEC evaluation of Dow Madison. And in
16 particular there are some odd occurrences in
17 that report, such as the mention of buildings
18 that, to their knowledge, never existed at Dow
19 Madison being attributed to that site. So I --
20 I think I need to say that we -- I guess what
21 we can do is to send in our comments to that
22 document.

23 And a final thing I'd like to say is indirectly
24 related to the SEC, and that is that of course
25 the whole purpose of the SEC was to get as many

1 Dow people as possible compensated. And thus
2 far I'm very pleased to say I think 36 people
3 have been approved under the SEC and we hope
4 there will be at least ten -- or a few more,
5 maybe, than that -- eventually approved. But
6 what concerns me is that there are 90
7 additional claims from Dow at NIOSH awaiting
8 dose reconstruction. And as of a couple of
9 days ago -- depending on which web site you
10 look at, NIOSH or DOL -- nine of those claims
11 have been assigned to a health physicist, 81
12 have not, and there have only been two to four
13 completed dose reconstructions ever at the Dow
14 Madison site. So we're extremely concerned
15 that those other dose reconstructions proceed
16 even as the SEC awards are being made and as
17 we're debating and trying to provide the
18 evidence that the Department of Labor and
19 Department of Energy need to change the
20 coverage period. But in any case, there's --
21 there's still those people who fall outside of
22 the present definition. And we're hoping very
23 soon to see dose reconstructions begin on that
24 group. It will be very tough because there is
25 no site profile for Dow. There is no appendix

1 -- site-specific appendix to TBD 6000.
2 Anyway, I appreciate very much the opportunity
3 (broken transmission) and once again,
4 appreciate the efforts of the Department of
5 Energy.

6 **DR. ZIEMER:** Okay. Thank you for those
7 comments, Dan, and let me ask now, Board
8 members, do any of you have any follow-up
9 questions or comments on Dow?

10 (No response)

11 If not, again, Lew, we need to make sure that
12 Dow is back on the agenda for the next meeting
13 so we can follow up on these issues.

14 **MR. STEPHAN:** Dr. Ziemer?

15 **DR. ZIEMER:** Yes.

16 **MR. STEPHAN:** This is Robert Stephan with
17 Senator Obama's office. I just --

18 **DR. ZIEMER:** Oh, good morning, Robert.

19 **MR. STEPHAN:** Good morning. Could I make a
20 quick comment?

21 **DR. ZIEMER:** You certainly can.

22 **MR. STEPHAN:** I -- I want to just echo what Dan
23 said about DOE. You know, they are working
24 hard on this FBI revised report, I guess you
25 would call it, and we -- we certainly

1 appreciate that. If Gina's still on the line,
2 Gina, could I ask, do -- do you have a time
3 frame as to when you think that they may come
4 back to you with a revision of this FBI report?

5 **DR. ZIEMER:** Regina, are you still with us?

6 (No response)

7 Robert, they may have left because they were
8 going to have to catch a plane. It's one
9 reason we moved them up on the agenda.

10 **MR. STEPHAN:** Okay.

11 **DR. ZIEMER:** Any of the other DOE people on
12 line? Jeff or Greg?

13 **MR. TACK:** You know, I'm still here but I'm --
14 I'm not exactly sure what our expectations were
15 in having that re-- their information back.

16 **DR. ZIEMER:** Yeah. Maybe you could respond
17 off-line to Robert at Senator Obama's office
18 and let -- give him an estimated timetable if
19 you would.

20 **MR. TACK:** Sure. I'm not in the office but
21 I'll -- I'll leave a message for Gina. How's
22 that?

23 **MR. LEWIS:** This is Greg. I'll be seeing Gina
24 later today and I'll make sure that she follows
25 up with you, Robert.

1 **MR. STEPHAN:** Thank you. And then also on
2 Dan's comment about these FOIA requests that
3 are --

4 **MS. CANO:** Robert?

5 **MR. STEPHAN:** -- eight months now. Yes?

6 **MS. CANO:** Hi, it's Gina. Sorry, I meant to
7 hit the mute button and I hung up on you guys.
8 Could you repeat your question?

9 **MR. STEPHAN:** We were just talking about that
10 FBI report and I was wondering if we could get
11 Dr. McKeel an estimate of when, you know,
12 roughly that you might be expecting, you know,
13 this revised report, so to speak.

14 **MS. CANO:** I can't give you a time frame. I
15 did leave a message with the gentleman last
16 week. I haven't heard back from him. So he
17 might just be out for the holidays, but I will
18 follow up with him and I will send you an e-
19 mail.

20 **MR. STEPHAN:** Okay.

21 **MS. CANO:** Okay?

22 **MR. STEPHAN:** And then -- thank you -- and then
23 also, on Dan's comment about these FOIA
24 requests with the CDC, if Jason Broehm is on
25 the line, or Larry Elliott, we had had some

1 dialogue about this a few weeks ago and -- and
2 they seem to indicate they were making some
3 headway and I'm just wondering if they could
4 give us an update as to, you know, the time
5 frame for those -- those FOIAs, because they
6 are eight months past -- you know, since --
7 since when he turned them in.

8 **DR. ZIEMER:** Jason, are you there? Or Larry?

9 **MR. BROEHM:** Yeah, I'm here. I don't have a
10 status report that I can give. The last I
11 checked in, it sounded like what I related to
12 Robert, that they were making headway. I don't
13 know if Dave Sundin is on the line and can
14 speak to that.

15 **MR. SUNDIN:** Jason, I am. Yeah, I think that's
16 accurate. There was a partial response given
17 early on and some of these requests are fairly
18 far ranging, so they do require extensive
19 searches. But I have another partial request I
20 believe working its way through right now.

21 **MR. STEPHAN:** Dave, do you think that -- that
22 we're looking at 30 days, 60 days? Do you have
23 a guess, at least?

24 **MR. SUNDIN:** Our next partial response will be
25 there within 30 days.

1 **MR. STEPHAN:** Okay. Okay.

2 **DR. MCKEEL:** Can I make one final comment about
3 that? You know, I think that's fine to make
4 promises. But the law is real clear. There's
5 supposed to be a final response, and I
6 understand that that's often not done. But
7 this is really approaching a ridiculous
8 proportion. And I have to put in for the
9 record that the office -- Tim Armstrong's
10 office at CDC FOIA simply will not respond to
11 (unintelligible). So I am appealing -- I thank
12 Robert for his efforts. Anything that Mr.
13 Elliott can do or anybody at NIOSH, but this is
14 not fair to withhold answers like that and
15 expect there to be anything like a fair playing
16 field, and you know, the remedy of course is to
17 file a motion to compel in Federal District
18 Court. And you know, it's just expensive,
19 time-consuming and hard to do that for a
20 petitioner.

21 **DR. ZIEMER:** Well we appreciate that and
22 certainly don't want to have to do that. So --

23 **DR. MCKEEL:** No, okay.

24 **DR. ZIEMER:** -- we appreciate the efforts that
25 Jason and Robert have made to -- to spring

1 things loose as well.

2 **DR. MCKEEL:** All right. Thank you very much.

3 **DR. ZIEMER:** Any other comments, Board members,
4 on Dow?

5 (No response)

6 Okay. We will return to it at our next meeting
7 and see what progress has occurred in the
8 meantime. Thank you.

9 **FY08 TASKS FOR SC&A: SITE PROFILES, PROCEDURES, DR**

10 **REVIEWS**

11 Let's move on then. The next item is the
12 Fiscal Year '08 tasks for SC&A and, Board
13 members, you should have received from Lew some
14 recommendations. They are -- the
15 recommendations from Lew are based partially --
16 or maybe completely -- on the -- the fact that
17 there's -- the funds that have been set aside
18 for this -- this coming year for SC&A may not
19 be adequate to do all the tasks that we had
20 hoped for. And I refer you to Lew's memo of
21 November -- I think 21st.

22 **DR. WADE:** Paul, maybe I could just -- this is
23 Lew, maybe I could just walk people through
24 this. Yeah.

25 **DR. ZIEMER:** Maybe, Lew, you could lead us

1 through this. Yeah.

2 **DR. WADE:** Let me start by painting just a very
3 general picture, and then I'll go into some
4 specific details, and then I'll get us to the
5 point where we can start to consider decisions
6 and actions.

7 But this Board tasked SC&A with some general
8 work for the fiscal year that we're currently
9 in now. That's fiscal year '08. If you'll
10 recall, what we instructed the contracting
11 officer to -- to build into the contract for
12 this year was, relative to Task I, the start
13 and complete of four new site profile reviews.
14 For Task III, to undertake the beginning and
15 completion of 30 new procedures reviews,
16 including one review of a PER. For Task IV,
17 the review of 60 new dose reconstructions and
18 two blind reviews. I'll point out to you that
19 there is still carried over from last fiscal
20 year two blind reviews that SC&A is supposed to
21 do. For Task V we set up the mechanism for
22 SC&A to undertake six SEC reviews, as
23 instructed by the Board. Again, those -- those
24 were the general parameters we established for
25 the work this year. We have not tasked SC&A

1 with the specific reviews in all categories
2 that we want them to do. That remains in front
3 of us.

4 John Mauro has very respectfully asked the
5 contracting officer if we could begin to assign
6 work to them in that they have people who are
7 anxiously awaiting that work. And I think it's
8 time for us to put our shoulder to that and to
9 do some of that assignment.

10 John sent us a monthly report on November 15th
11 that outlined his telling of where they stood
12 in terms of all of the -- the contract tasks
13 that they had, were expecting to have, and what
14 that meant in terms of their ability to
15 complete all work relative to the available
16 monies. That report is in your possession as
17 well. John pointed out that to start and
18 finish everything that was on their plate
19 previously and would be put on their plate this
20 year -- and I again stress start and finish --
21 John saw a potential shortfall of about
22 \$1,200,000.

23 Again, my interpretation is that that's not as
24 alarming as it might seem. We have constantly
25 elongated the review process and the steps that

1 have gone through and it's very unlikely in a
2 given fiscal year we would start and finish the
3 work. The work almost always carries over.
4 But John is giving us a heads-up that this is a
5 potential concern and I think we need to heed
6 that concern.

7 What I did was to take all of that information
8 and to share back with you some recommendations
9 as to how we could proceed in this. Again,
10 giving John and his people some work to begin
11 and yet preserving the need to watch the money
12 to see that we don't get in a position to --
13 where we would run out of money. And that was
14 contained in the e-mail that Paul referred to
15 you, my e-mail dated November 21st.

16 I asked John also to send you his thoughts as
17 to the assignment of new work, and he did that
18 in an e-mail sent to you dated also November
19 21st.

20 The other piece of paper I asked be shared with
21 you was just a list of all of the site profiles
22 that NIOSH has completed and that have not been
23 taken on for review by the Board, and that was
24 sent to you by Stu Hinnefeld and I also sent
25 you a second copy of it in an e-mail from Jim

1 Neton.

2 So you have all the material in front of you.
3 Again, I'm proposing that we consider the
4 possibility of assigning SC&A a site profile or
5 two to begin to review now. If you're not
6 comfortable now, then January is an opportunity
7 for us, but I'd like us to talk about that to
8 do now.

9 With regard to the procedures reviews, I think
10 there, as the workgroup is functioning on
11 procedures, new procedures to be reviewed are
12 coming up. I would suggest that we -- we don't
13 attempt to assign 30 new procedures, but we
14 hold open the fact that procedures would be
15 assigned to SC&A to review as the workgroup or
16 the Board felt it appropriate. I think, for
17 example, we have TBD 6000 and its -- its
18 appendices that need to be considered for
19 review. That's something I think we could talk
20 about today.

21 I think it would be also appropriate to think
22 about the assignment of one PER for SC&A to
23 begin to review. Remember, these program
24 evaluation reports really are sort of a new
25 wrinkle in the mix. This is where NIOSH takes

1 the changes that have been made through the
2 review process and other mechanisms, and sets
3 out a path for the redoing of individual dose
4 reconstructions affected by those changes. I
5 think it would be reasonable for us to -- to
6 think about assigning a PER for SC&A to begin
7 to review now.

8 With regard to the individual DRs, John is
9 suggesting that we go to the January meeting,
10 prepare to select as best we can the next 60 to
11 be reviewed. I think we also need to give
12 serious thought to tasking them with two or
13 four blind reviews. I say two or four because
14 we have two blind reviews carried over from
15 last year and we have two new blind reviews to
16 be done.

17 On the -- the fifth task, the SEC task, I think
18 there it's always been our process to assign
19 SECs to SC&A as they become topical with us,
20 and there are a couple that are looming in
21 front of us as John has pointed out. It could
22 be the Board would want to ask SC&A to begin to
23 review those now. So again, a long-winded
24 introduction. If we could have a discussion of
25 those points, that would be good. If we could

1 -- if the Board could find its way clear to
2 begin to task SC&A, I think that would be good
3 from a contract administration point of view.
4 But again, I'm not trying to rush the Board to
5 judgment there. But I do think that a
6 discussion of this now is appropriate, actions
7 as appropriate, and certainly coming to closure
8 on all of these issues in January would be a
9 good idea.

10 Let me just ask John Mauro if I miscategorized
11 anything, John, or if there's anything you
12 would like to add to the background for the
13 discussion we're about to have.

14 **DR. MAURO:** Yes. Lew, this is John. No, I
15 think your characterization of the status of
16 the budget and the -- the need to move forward
17 was -- was right on. The only thing I would
18 add is with respect to task order one in the
19 site profile reviews and the possibility of
20 falling short in resources, the way I project
21 it right now is that's something that is
22 associated primarily with the close-out process
23 where we're projecting that eventually we will
24 be moving forward on the close-out of a total -
25 - right now there are approximately 18 site

1 profiles, some of which have begun the close-
2 out process, some of which we haven't. And my
3 projection is that at some time in the future
4 we will be taking on more and more of those and
5 I envision that we probably will run into
6 resource problems toward the end of the fiscal
7 year, which is also, as you know, the end of
8 our contract. So I think the -- with regard to
9 task order one in particular -- it's very
10 difficult to project, but based on previous
11 experience, it is -- there's a real possibility
12 that we will run into resource problems when we
13 get to the point where we're starting to close
14 out many of the site profile reviews that are
15 currently on our plate.

16 **DR. WADE:** And that's part of my motivation for
17 holding off on the assignment of four new site
18 profile reviews. But I think it would be, in
19 my opinion, appropriate to assign one or two
20 now or soon.

21 (Pause)

22 So Paul, I'm sorry to have monopolized, but
23 that's sort of the background. You know, I --
24 again, I think discussion would be in order. I
25 would be pleased to answer any questions -- or

1 John, I'm sure -- as we -- as we move forward
2 in this.

3 (Pause)

4 Hello?

5 **DR. MELIUS:** Yes. This is Jim Melius.

6 **DR. WADE:** Hi, Jim.

7 **DR. MELIUS:** I have a question. I don't seem
8 to be able to locate the -- I believe you'd
9 said that this initial e-mail from John Mauro
10 regarding his -- the potential shortfall issue
11 was forwarded to us by Paul Ziemer?

12 **DR. WADE:** It was forwarded by me. I sent it
13 to you as an attachment to my e-mail on
14 November 21st.

15 **DR. MELIUS:** Okay. Let me look for it again.
16 Thanks.

17 (Pause)

18 **MR. GRIFFON:** Lew, this is Mark Griffon.

19 **DR. WADE:** Yes, Mark.

20 **MR. GRIFFON:** Yeah. I -- I -- I was just going
21 to -- I think it might be beneficial as far as
22 site profiles go, to -- to get at least a few
23 queued up now and I was looking at your
24 listing. And in comparing it to our dose
25 reconstruction review, we've actually had a

1 couple of these sites come up in dose
2 reconstruction review, and some of the
3 questions, you know, could fall back to the
4 site profile review questions. So I think --
5 the sites include Huntington, Bridgeport Brass,
6 Harshaw, and Superior Steel, so you know, of
7 those I think, you know, if we had to pick two
8 I'd probably say Harshaw and -- and Bridgeport
9 Brass. But that's only because of the driver
10 of the fourth and fifth set contain some of
11 those reviews and some remaining questions on -
12 - you know, that were derived from the dose
13 reconstruction review process.

14 **DR. ZIEMER:** Okay. That's a fine
15 recommendation, Mark. Thank you. Mark, what
16 are your thoughts about the assignment of blind
17 reviews to be part of the blind review process?

18 **MR. GRIFFON:** Yeah, well, we did -- we did pick
19 two blind reviews. I have to actually get
20 together with -- we -- we have that two-person
21 workgroup, Wanda and I, and I think Stu
22 Hinnefeld indicated to me that one of the blind
23 reviews was actually no longer available. It
24 was being contested I believe, or -- or -- so
25 it was taken out of the available cases for us

1 to review.

2 **MS. MUNN:** Yeah, that's correct.

3 **MR. GRIFFON:** Yeah. So -- but we -- we, you
4 know, we have a couple of others. I just have
5 to talk to Wanda privately and get that number
6 to Stu, and then we have -- and then we would
7 have two. We can certainly make it a goal for
8 our, you know, next meeting to select two more
9 and at least get them in the queue. That -- I
10 thought we were sort of trying to do the
11 initial two and see how -- how that worked out
12 as far as our protocol.

13 **MS. MUNN:** Yeah, that was our general
14 discussion --

15 **MR. GRIFFON:** Yeah.

16 **MS. MUNN:** -- in procedures group is that --

17 **DR. WADE:** So you -- your expecta--

18 **MS. MUNN:** -- that we needed to get a feel for
19 how that was going to go, since this is the
20 first one we've (unintelligible).

21 **MR. GRIFFON:** Right.

22 **DR. WADE:** So it would be your expectation,
23 Mark, to -- was to get those -- the information
24 necessary to SC&A to begin the two blind
25 reviews as quickly as possible?

1 **MR. GRIFFON:** At least to start the first two.
2 I think the general consensus from -- from all
3 members of the Board was that let's do two, and
4 make sure that we're getting out of this
5 process what we expect, you know, or -- or is
6 the process appropriate, are we asking the --
7 that SC&A do the right kind of, you know, thing
8 with their blind review.

9 **DR. WADE:** Okay. So to SC&A, two cases to be
10 blind reviewed as quickly as possible. Then in
11 January we would set to the task of trying to
12 cull out another 60 cases to be reviewed. I
13 think that handles, from my perspective, the --
14 the DR task completely.

15 On procedures, Wanda, as chair of the
16 procedures workgroup, does it make sense to you
17 to assign procedures to be reviewed as they
18 come up, as opposed to trying to develop a
19 laundry list of 30 now, or what's your take on
20 that?

21 **MS. MUNN:** Yes, it really does. And I -- I
22 can't think of a better example of that than
23 PROC-92. That's -- and as you mentioned
24 earlier, the 6000 series, those -- those things
25 which arise as a result of our maturing process

1 are sometimes very critical to ongoing
2 activities and certainly of extreme interest to
3 the petitioners and our claimants. So it -- it
4 only makes very good sense to me that we choose
5 these things not only in terms of their
6 immediacy, but also in terms of the progression
7 we've made on others that we have in the
8 pipeline. It -- it's taking -- it takes a
9 great deal of time and a great deal of
10 contractor time and effort to address each of
11 these findings that we are moving through in
12 our procedures activity. And that is -- I
13 think you know, we'll speak a little later to
14 some of the processes that we're attempting to
15 change and internally to help us have a better
16 long-term grip on how to address those things.
17 But yes, it makes perfect sense. The short
18 answer -- yes, it makes sense to me.

19 **DR. WADE:** John, what -- what is the status of
20 the assignment of 6000 and the appendices to
21 you right now?

22 **DR. MAURO:** Okay, yes. We have delivered to
23 NIOSH and the Board our document review of TBD
24 6000. Keep in mind TBD 6000 is the uranium
25 metal working TBD that has been delivered, and

1 you folks have it. Of course, there is
2 appendix BB to that, which is General Steel
3 Industries and the issues related to Betatron.
4 I had indicated that we had actually hoped to
5 have that report in your hands, everyone's
6 hands, today. We have run into a couple of
7 corrections that have to be made, so that
8 appendix BB deliverable is -- as I indicated in
9 my e-mail, will be the week of December 3rd.
10 But for all intents and purposes, that work is
11 completed.
12 Bear in mind that it only addresses TBD 6000,
13 not TBD 6001, which deals with uranium
14 processing facilities, which is a substantially
15 different type of issue. And of course, the
16 only -- of the various appendices, site-
17 specific appendices, the only one that we have
18 been tasked to look at is General Steel
19 Industries, which is -- emphasizes the concerns
20 regarding the Betatron exposures, and that is
21 very close to completion. We're in the home
22 stretch right now. We were hoping to get it
23 out quite a bit earlier than this, but it's
24 emerged into a little bit more complicated
25 problem than we anticipated.

1 contractor in the sense of -- of there are some
2 resource limitations, but we don't want them
3 twiddling their thumbs.

4 John, would that take care of that task for the
5 -- for the time being?

6 **DR. MAURO:** We, as a matter of fact, have the -
7 -

8 **DR. ZIEMER:** 'Cause you have some others you're
9 working on.

10 **DR. MAURO:** No, just the opposite. We've
11 basically cleared our backlog, to the point
12 where we have a number of individuals that are
13 waiting for work.

14 **DR. ZIEMER:** Okay.

15 **DR. MAURO:** So yeah, the -- as much as you're
16 comfortable...

17 **DR. ZIEMER:** Well, then let me also suggest, if
18 the Board is agreeable, that we ask the
19 workgroup to -- to review any other procedures
20 that they could begin the reviews on.

21 **MS. MUNN:** We can do that, yes.

22 **DR. WADE:** Okay. Thank you. While we're on
23 that --

24 **DR. ZIEMER:** Is that agreeable with everyone?
25 No objections?

1 (No response)

2 Okay. I did want to just backtrack a minute on
3 Task I 'cause I guess I made some remarks that
4 nobody heard because I was on mute. Well, that
5 may be the best way to do this. On Task I,
6 Mark had mentioned several facilities. John
7 Mauro had also suggested Sandia National Lab,
8 Lawrence Berkeley and Brookhaven. Mark, you
9 had suggested Huntington and --

10 **DR. WADE:** Harshaw and Bridgeport Brass, I
11 think.

12 **DR. ZIEMER:** -- and Bridgeport's not on the
13 list that we got.

14 **MS. MUNN:** No.

15 **DR. ZIEMER:** Which means what? There's
16 probably not a site profile. I don't have my
17 web site open.

18 **MS. MUNN:** We don't have Harshaw --

19 **MS. BEACH:** It's actually on Stu Hinnefeld's
20 list.

21 **MR. GRIFFON:** It is on the list, yeah.

22 **DR. WADE:** There were two lists, remember now.
23 There were two tabs in what I sent you. One
24 was DOE facilities and one was AWE.

25 **DR. ZIEMER:** Oh, okay. Yeah.

1 **MS. MUNN:** Yeah and I only got -- I only got
2 one tab, for some reason.

3 **MS. BEACH:** Well if you look, you can go down
4 at the bottom and flip over to the AWE or the
5 DOE --

6 **DR. ZIEMER:** Oh, okay, I'm --

7 **MS. BEACH:** -- so there's --

8 **DR. ZIEMER:** I think I missed the other tab on
9 that.

10 **DR. WADE:** Sorry.

11 **MS. MUNN:** Yeah, I didn't get it.

12 **DR. ZIEMER:** Okay.

13 **MS. MUNN:** Even though I was warned to look for
14 it, I couldn't find it.

15 **DR. ZIEMER:** But I -- I do want to ask John
16 Mauro on these -- on these site profiles, I
17 guess we can't always anticipate issues, but
18 some like Huntington I think are in a sense
19 simpler than a facility like Brookhaven.

20 **DR. MAURO:** Yeah, I was going to offer up a --
21 a suggestion. When we do dose reconstruction
22 reviews, audits, under task order four, for AWE
23 facilities, that usually involves reviewing the
24 exposure matrix/site profile, to a certain
25 degree. What I have been doing recently -- in

1 fact this is one I just completed related to
2 Bridgeport Brass, wherein the -- I guess in the
3 spirit of an advanced review, when I did that
4 review of that case I went into considerable
5 detail looking at not only the exposure matrix,
6 but also the dataset that stood behind the
7 exposure matrix, the actual measurements. So
8 to an extent, where -- where -- where I'm going
9 with this is when it comes to AWE facilities,
10 they're -- and the need and the level of effort
11 required to review the -- the exposure matrix
12 and its supporting data, which I consider to be
13 the most important aspect of these reviews,
14 ultimately getting to the database -- it is a
15 much simpler problem than let's say, looking at
16 one of the large complex DOE facilities. So
17 one of the ideas that certainly, you know,
18 we'll take our lead from you folks is that
19 perhaps the AWE facilities like Huntington,
20 Superior Steel, Bridgeport Brass, in theory, we
21 -- I believe we can do a very thorough review
22 of the exposure matrix as a part of our task
23 order four work when we do -- 'cause we do have
24 a number of case -- real cases that are now --
25 we're starting to see realistic cases which do

1 use the exposure matrices. In the past many of
2 those cases relied on maximizing approaches,
3 such as OTIB-4, where we really were never
4 tasked -- we -- we -- at that time, I would say
5 that was like a year ago, so when we have those
6 cases we really -- there was not an exposure
7 matrix available for review. But now, the last
8 round where I reviewed Superior Steel, I
9 reviewed Bridgeport Brass -- what I'm getting
10 to is it may be most cost effective and
11 efficient to relegate the review of those
12 exposure matrix as part and parcel to an
13 advanced review under task order four. This is
14 something that I believe is doable within the
15 budget of task order four, and it will not
16 infringe upon doing what I consider to be the
17 more -- the more complex. If we only have four
18 site profile reviews that have been earmarked
19 and approved for fiscal year 2008, and in my
20 mind I think I had in mind that those four
21 would be major reviews, such as Sandia. And so
22 I think we can accomplish a lot by whereby we
23 relegate -- and this is certainly your -- your
24 decision. There are a number of site profile
25 reviews, exposure matrices, for AWE facilities

1 that certainly would benefit from a review.
2 But I think those reviews could be done to the
3 satisfaction of the working group and the Board
4 as part of an advanced review under task order
5 four for cases that are active.

6 **DR. ZIEMER:** Okay.

7 **MR. GRIFFON:** Let me -- let me -- can I just --

8 **DR. ZIEMER:** Yeah, Mark, go ahead.

9 **MR. GRIFFON:** I discussed this at length
10 actually with John and -- I mean I -- I -- I
11 had in -- in the process of going through the
12 DR review, you know, my question was -- 'cause
13 I -- I've sort of been -- the reason we
14 selected a lot of these cases was that we may
15 never do the entire site profile review, so I -
16 - we were at least getting one case from that
17 site in question. That's some -- some of the
18 reasons when we select a case we say we've
19 never done this site, let's select it. And I
20 was terming them sort of mini site profile
21 reviews rather than advanced reviews, but --
22 but, you know, the same sort of concept as what
23 John's describing. The only reason I -- I said
24 this for -- for this particular time -- John,
25 if you recall when we went through this review

1 we had Harshaw, the case we were reviewing
2 actually was done before a site profile or
3 before the revised site profile was complete so
4 we've got a situation where we reviewed a
5 Harshaw case but it didn't rely on the latest
6 version of the site profile and there's a new
7 site profile out.

8 **DR. MAURO:** Yes.

9 **MR. GRIFFON:** So I thought either we should do
10 a -- pick it up in a site profile review or we
11 can find another case from Harshaw that relies
12 on the new site profile and then do as John
13 described. And -- and the same thing -- I
14 think there's a similar question for -- for --
15 the Huntington I think also had a revised site
16 profile which was -- you know, again, the case
17 that we had was done either with a overarching
18 OTIB or -- or -- or before the site profile was
19 -- was available so, you know, that was the
20 reason I raised it here specifically, because
21 of our last set of reviews -- it's actually the
22 fourth and fifth set of cases that we've been
23 looking at. So I -- I -- I -- I agree with
24 John. It doesn't really -- you know, as long
25 as we cover it, I don't care what -- what tasks

1 it falls under. But in this particular case we
2 -- we covered the site but we really didn't get
3 to some of the site profile reviews. That's my
4 concern, 'cause just because you have a case
5 from a particular site doesn't necessarily mean
6 that we covered that site profile review
7 because there was a site profile that came out
8 after the -- the case that we reviewed.

9 **DR. ZIEMER:** Let me ask David -- David Staudt a
10 question, if he's still on the line.

11 **MR. STAUDT:** Yes, I am.

12 **DR. ZIEMER:** David, from a contracting point of
13 view, is -- is there any problem or advantage
14 or disadvantage, for example, if -- if the SC&A
15 folks do need to do what's an advance review
16 plus, in a sense, or -- or what -- what Mark
17 described as a mini site profile review, in
18 part it depends on which pocket the money's
19 coming out of I guess.

20 **MR. GRIFFON:** Yeah.

21 **DR. ZIEMER:** But it seems to me this could be
22 tasked in terms of large sites versus the
23 smaller AWEs or something like this under Task
24 I, or if it's not an issue, go ahead and keep
25 it under the dose reconstruction task,

1 understanding that it in a sense takes care of
2 that site's review. What -- from a contracting
3 point of view, is there any guidance you want
4 to give us on that?

5 **MR. STAUDT:** Well I mean, you know, some of
6 these are kind of a cross in between the task
7 and what we were trying to do is -- is to,
8 where it most fits is the task that we were
9 trying to put, where most of the effort is, so
10 there could be some of the -- some of the work
11 may fall on other tasks but where predominantly
12 the work to be done, that's the task that John
13 should be charging.

14 **DR. ZIEMER:** Okay. So you're comfortable
15 either way that we go on this.

16 **MR. STAUDT:** Yes. Yes, I am.

17 **DR. ZIEMER:** Okay. Also, Lew was suggesting
18 that we hold off on the final decisions till
19 the January meeting. Is there any need for us
20 to -- to pin any of this down today or not?

21 **DR. WADE:** Well, this is Lew. I would like, if
22 it's possible, to assign a site profile or two
23 to SC&A on this call. If the Board's not
24 comfortable doing that, of course we'll wait
25 till January. But I mean we --

1 **DR. ZIEMER:** And if we're going to do that,
2 would it -- would it not be useful for that to
3 be one of the larger sites so they could get
4 underway on a task that's going to take longer?

5 **DR. WADE:** Right. And John suggests in his e-
6 mail -- he -- he gives us four potential
7 candidates, Sandia, Brookhaven, ANL East or
8 Berkeley -- Lawrence Berkeley lab.

9 **MR. PRESLEY:** This is Bob Presley. One of my
10 thoughts on this is, is what are we going to
11 get the most bang for our buck there by using
12 some of these bigger sites.

13 **DR. ZIEMER:** That's a tough one to answer.

14 **MR. PRESLEY:** You know, maybe somebody from SC
15 -- not SC&A, but CDC could tell us which ones
16 that would benefit our people doing the dose
17 reconstruction more.

18 **DR. WADE:** NIOSH, do you have any perspective
19 on this?

20 **DR. ZIEMER:** Well, I think in terms of numbers
21 of cases, for example, Robert, that --

22 **MR. PRESLEY:** That's correct, Paul, yes.

23 **DR. WADE:** Larry, are you on the line?

24 **MR. ELLIOTT:** I am on the line, yes. I would
25 offer that -- that if we -- I don't believe we

1 have any perspective, unless Jim Neton thinks
2 we do. He can counter me here, but we -- we --
3 once we put a site profile and our Technical
4 Basis Documents into play and start using it,
5 if -- we've got a number of dose
6 reconstructions completed under these that
7 you've spoken about, so any -- pick any one you
8 want and, you know, I'm sure that we would --
9 we would benefit from the review.

10 **MR. PRESLEY:** If I've got a vote on it, I'd
11 like to see Sandia done, is one of them.

12 **MR. SCHOFIELD:** This is Phil. I'd just like to
13 see, whichever sites we pick, that -- ones that
14 have a varied work history, just because that -
15 - I think that covers more people. Information
16 from that site might be applicable to another
17 site.

18 **MR. PRESLEY:** That's correct.

19 **DR. WADE:** You have a recommendation, Phil,
20 amongst the list in front of us?

21 **MR. SCHOFIELD:** Sandia I think is actually a
22 good one. I'm not familiar with all the sites,
23 so -- I mean, you know, most of the big ones
24 I've familiarized myself with, but some of
25 these others are --

1 **DR. ZIEMER:** Well, Brookhaven is more of a
2 multi-purpose site, a lot of different -- more
3 of a research site. Argonne East is a reactor
4 facility mainly, is it not?

5 **MS. MUNN:** Yes.

6 **MR. PRESLEY:** Yes. Brookhaven --

7 **MS. MUNN:** Brookhaven really is a broad-based
8 one.

9 **MR. PRESLEY:** Right. Brookhaven being one of
10 the national labs would be -- definitely be a
11 broad-based one and then Sandia, with their
12 diverse manufacturing facilities.

13 **MR. SCHOFIELD:** So for my vote then, I would go
14 with Brookhaven, because Hanford is -- with all
15 the reactors we have up there, and the deal
16 with that site, that's pretty well going to
17 cover a lot of the other facilities.

18 **MR. CLAWSON:** ANL East did a lot more than just
19 reactors, if you guys remember that. That's
20 where a lot of the stuff started up back there.
21 If it was me, I'd -- my personal opinion --
22 this is Brad -- I'd be looking at -- you know,
23 any of them are good, Sandia and stuff, but I -
24 - I think ANL East we ought to be looking into,
25 too.

1 **MR. PRESLEY:** This is Bob. I've got no problem
2 with it.

3 **DR. ZIEMER:** I'm okay with that, too. If
4 actually -- well...

5 **MS. MUNN:** We're talking about four here,
6 aren't we?

7 **DR. WADE:** No. We're -- eventually four. I
8 think now we're talking about one or two.

9 **DR. ZIEMER:** We -- we're just -- well, maybe
10 getting one under way now.

11 **DR. WADE:** It's possible, and then another in
12 January.

13 **DR. ZIEMER:** In January. It -- it doesn't look
14 like there's a strong consensus one way or the
15 other.

16 **MS. MUNN:** Any one of those three would be --
17 certainly serve the purpose that we are aiming
18 for, and January's not that far away in terms
19 of picking up the third one.

20 **MR. PRESLEY:** I make a suggestion that we go
21 with Sandia, then. This is Bob.

22 **MS. MUNN:** Sandia and --

23 **DR. ZIEMER:** Well, and Brad thought Argonne
24 East. Any others, pro or con, let's see if we
25 can get some kind of consensus here.

1 **DR. WADE:** You want me to read the list of --
2 Board members, and you just tell me your
3 preference and we'll see what the list shows?

4 **DR. ZIEMER:** We can do that.

5 **MR. ELLIOTT:** Before you start that, Lew, let
6 me offer, in response to Mr. Presley's
7 question, I've looked this up now. Sandia
8 National Lab, we have had 236 claims for dose
9 reconstruction and we've seen 126 of those
10 completed. Brookhaven, we've had 52 and we've
11 completed 31. I don't know if that really
12 helps or not.

13 **DR. ZIEMER:** How about Argonne East?

14 **MR. ELLIOTT:** Argonne East, let me go to
15 Illinois real quick.

16 **DR. ZIEMER:** No, no. Argonne --

17 **DR. WADE:** East.

18 **DR. ZIEMER:** Oh, this is -- I thought it was
19 Argonne West, it's --

20 **MR. CLAWSON:** Argonne West is --

21 **DR. ZIEMER:** It is Argonne East on the list,
22 Brad.

23 **MR. CLAWSON:** Yeah, (break in transmission)
24 that.

25 **DR. ZIEMER:** Yeah. So that is the -- that's

1 the Chicago --

2 **MR. ELLIOTT:** Argonne East with 168 claims.

3 **DR. ZIEMER:** How many?

4 **MR. ELLIOTT:** We've finished 116.

5 **DR. ZIEMER:** 168?

6 **MR. ELLIOTT:** 168, and 116 completed.

7 **DR. WADE:** Just for the record, Larry, would
8 you read the three again, just in order?

9 **MR. ELLIOTT:** Sure, Argonne East, 168 claims
10 sent to us for dose reconstruction. We've
11 completed 116. Brookhaven Lab, 52 claims for
12 dose reconstruction, 31 completed. Sandia
13 National Lab, 236 claims, 118 completed.

14 **MS. BEACH:** Do you have Lawrence Berkeley,
15 also?

16 **MS. MUNN:** We didn't get to (unintelligible) --

17 **MR. ELLIOTT:** I do, just a moment.

18 **MS. MUNN:** We had talked about it at our last
19 meeting.

20 **MR. ELLIOTT:** Lawrence Berkeley Lab, 151 claims
21 and 106 completed.

22 **DR. ZIEMER:** Thank you.

23 **DR. WADE:** Okay, so --

24 **DR. ZIEMER:** Board members, do you have enough
25 information to tell Lew your preference here?

1 Let's try it.

2 **DR. WADE:** Okay. I'm going to be asking for
3 your preference amongst Berkeley, Sandia,
4 Argonne East and Lawrence Berkeley. I'll just
5 do this alphabetically, holding Ziemer's vote
6 to the last. Josie Beach, your preference?

7 **MS. BEACH:** Sandia.

8 **DR. WADE:** Okay. Mike Gibson?

9 **MR. GIBSON:** Sandia.

10 **DR. WADE:** Brad Clawson?

11 **MR. CLAWSON:** With the numbers that were told
12 to me, I'd prefer Sandia.

13 **DR. WADE:** Okay. Mark Griffon?

14 **MR. GRIFFON:** Sandia's fine.

15 **DR. WADE:** Dr. Melius?

16 **DR. MELIUS:** Argonne.

17 **DR. WADE:** Wanda Munn?

18 **MS. MUNN:** Sandia.

19 **DR. WADE:** Robert Presley?

20 **MR. PRESLEY:** Sandia.

21 **DR. WADE:** Gen Roessler?

22 **DR. ROESSLER:** I would go with Argonne East
23 first, but I'm really comfortable with Sandia.
24 So I -- I think I'll go -- I'll say Sandia.

25 **DR. WADE:** Okay. For the record, you're saying

1 Sandia?

2 **DR. ROESSLER:** Yes.

3 **DR. WADE:** Phillip Schofield?

4 **MR. SCHOFIELD:** Sandia.

5 **DR. WADE:** And Dr. Ziemer?

6 **DR. ZIEMER:** Sandia's fine for me.

7 **DR. WADE:** Okay. So a strong --

8 **DR. ZIEMER:** I think that's the consensus.

9 **DR. WADE:** -- a strong leaning toward Sandia.
10 Dr. Melius, is that acceptable to you?

11 **DR. MELIUS:** Yes.

12 **DR. WADE:** Okay. So with the way --

13 **DR. MELIUS:** Do I get to choose next time?

14 **DR. WADE:** It's clear that that's the case.

15 **MS. BEACH:** Can I propose -- can we pick two
16 today, or do we just want to stick with one?

17 **DR. WADE:** I think we could pick two, if that
18 would be the preference.

19 **MS. BEHLING:** This is Kathy Behling. Can I add
20 a different perspective from -- for the AWEs?
21 I've been working with the -- the dose
22 reconstruction reviews, and I know that this
23 topic we're going to discuss later is the
24 closing of the fourth and the fifth sets. And
25 as Mark has indicated, we have still a few

1 outstanding issues. In fact, we could close
2 out the fifth set if we were willing to look at
3 the AWEs from the site profile review
4 perspective because we have about ten
5 outstanding findings from the fifth set that
6 are all associated with the Huntington Pilot
7 Plant. And it was at least my perspective that
8 what we would do from dose reconstruction
9 review is an advanced review that would do, as
10 Mark indicated, a mini site profile. But then
11 if we found that we had a lot of findings --
12 and most of our findings are methodologies
13 associated with the internal and external dose
14 reconstruction, so these are some significant
15 findings. I would -- contrary to some of the
16 things I've heard, I would actually propose
17 that we do Huntington under the Task I, and as
18 you indicated, it is a smaller -- it's a
19 (unintelligible) exposure matrix and I believe
20 it's a 17-page. So I just was, as I said,
21 under the impression that we would only go so
22 far in the dose reconstruction Task IV project,
23 do a mini site profile. If we determined that
24 this was a facility that maybe needs to be
25 looked at a little bit closer, then it would

1 get moved into Task I. Just a thought,
2 something I thought I would suggest.

3 **MS. MUNN:** Thank you, Kathy.

4 **DR. ZIEMER:** Kathy, I think what you're
5 suggesting here -- and this kind of relates to
6 the conversation I had with David Staudt
7 earlier -- at what point does it move from one
8 task to the other. You're saying on this
9 particular one, although you've reviewed that
10 matrix for -- for some dose reconstruction
11 reviews, it's perhaps at the point where we
12 should consider it as a site profile review.
13 Is that --

14 **MS. BEHLING:** That's correct. As a matter of
15 fact, during the issues resolution process for
16 the fifth set, I believe we put into the matrix
17 that -- there's approximately ten findings
18 remaining on our tab -- I believe it was 84,
19 which is Huntington Pilot Plant, that would be
20 resolved through a site profile review. So in
21 order to close out the fifth set, it seems to
22 me that we should be looking at Huntington
23 under Task I.

24 **MR. GRIFFON:** Yeah, and Paul, if I could -- I
25 mean I -- I backed off a little bit 'cause John

1 was -- seemed to be in opposition of the
2 recommendation, but if I can say, the -- the
3 Huntington -- I don't think, Kathy, that you
4 really looked at the exposure matrix because it
5 wasn't available when this case came out. It
6 wasn't done under that exposure matrix, really.
7 In the resolution process we might have looked
8 at the matrix a little bit, but I -- I think
9 that's the question. The matrix came way after
10 the case was done, so it was kind of a new -- a
11 new thing in the mix. And when I asked the
12 question as to whether we have reviewed, you
13 know, the Huntington -- you know, could we
14 consider the same mini site profile, I think it
15 came up that it -- it had -- it wasn't.

16 **MS. MUNN:** Yeah, we did discuss this at --

17 **MR. GRIFFON:** Yeah, so I -- I would -- I would
18 also agree Huntington would be worth doing, and
19 I don't think it's as Kathy described. I think
20 it's a fairly small -- it's a sort of a major
21 rather than a full-blown (unintelligible).

22 **DR. ZIEMER:** (Unintelligible) impact as much on
23 the overall picture.

24 **MR. GRIFFON:** Right. Right, right.

25 **DR. WADE:** So maybe a proposal would be Sandia

1 and Huntington coming out of this meeting, and
2 hold judgment on an additional two till January
3 or later?

4 **MS. MUNN:** That would seem to be a reasonable
5 thing to do, especially in view
6 (unintelligible) --

7 **DR. ZIEMER:** Any objections to adding
8 Huntington at this point?

9 **MR. PRESLEY:** This is Bob Presley. I think
10 that's fine.

11 **DR. MAURO:** This is John Mauro. Could I offer
12 a minority opinion on this? See, the way --
13 the way I see the closeout process, even though
14 Huntington may not -- you know, the case that
15 was done and is a closeout process in place, I
16 could see very readily one of the directions we
17 get from the working group is to proceed with
18 an advanced review of the site profile, see how
19 that case now would play out during the
20 closeout process if we were to trigger what I
21 would call an advanced review of the site
22 profile or the exposure matrix for Huntington.
23 The only reason why you're hearing resistance
24 is that I see the magnitude of the level of
25 effort, and the -- and the benefit that we get

1 from reviewing a major site like Sandia or
2 Argonne East or Brookhaven. These are large,
3 complex sites and we -- and I see -- we only
4 really have four under Task I. And in my mind,
5 to invest -- you know, basically -- even though
6 we probably will hope to do Huntington in a
7 relatively modest level of effort, that would
8 eliminate one -- one large one that we won't be
9 able to do. In other words, the scope is very
10 clear right now, we can only do four. So what
11 would happen there is that if we -- if one of
12 those or two of those four for Task I were
13 converted into a -- a -- an AWE review, you
14 know -- the good news is that's certainly going
15 to help us with our budget problem because
16 we're going to be able to knock that off in a
17 matter of a few hundred work hours, as opposed
18 to perhaps as much as 1,500 work hours, which a
19 full-blown large, complex site requires. But
20 of course at the same time, that means that
21 there are going to be some large sites, perhaps
22 Lawrence Berkeley or Brookhaven, that will not
23 get a review this fiscal year.

24 **DR. ZIEMER:** John, you're suggesting that in
25 fact Huntington could be done as part of the

1 dose reconstruction resolution process under
2 the other task.

3 **DR. MAURO:** With all respect to Mark and Kathy,
4 yes, I do disagree with the position they've
5 taken. I think that within the scope and
6 mandate of Task IV we could do a very effective
7 review of the matrix as part of the closeout
8 process for these other sites. And -- and this
9 is what I would recommend, only because of it
10 leaves us with four full-blown site profile
11 reviews for Task IV where we can take on the
12 biggest sites. And I don't think I -- you
13 know, I believe it's pos-- I think it's within
14 our scope and mandate that we could trigger an
15 advanced review of Huntington, for example, as
16 part of the closeout process for the existing
17 cases that we currently have.

18 **MR. GRIFFON:** Yeah, John -- John, I -- I
19 actually withdraw that. I think you're right.
20 I was thinking of -- I was thinking of overall
21 budget, but you're right that we -- we limit
22 you by the number (unintelligible) --

23 **DR. ZIEMER:** The number as well as budget.

24 **MR. GRIFFON:** -- and I was thinking in terms of
25 budget and not number, and I -- I don't --

1 **DR. ZIEMER:** Basically this puts the Huntington
2 under the other task, is what it does.

3 **MR. GRIFFON:** Right.

4 **DR. ZIEMER:** And saves the-- the dollars for --

5 **MR. GRIFFON:** So we probably are better off
6 leaving Huntington there in that case, because
7 you're right, we don't want to burn one of your
8 -- one of your four sites with that --
9 Huntington. It would be a small effort. Yeah.

10 **DR. WADE:** Okay, so --

11 **MS. BEACH:** This is Josie. I have one quick
12 question. If Huntington does get the review
13 under Task IV, and then it looks like we're
14 going to have to do a full-blown, what does
15 that do to our four for Task I? Will it --
16 will we be able to do Huntington as a full-
17 blown?

18 **MR. GRIFFON:** I think we would just -- as
19 John's describing, even if we did ask for a
20 more thorough review of that Huntington matrix,
21 we would do it under the DR task. Yeah.

22 **MS. BEACH:** Okay. I understand. Thank you.

23 **DR. ZIEMER:** Okay. So if -- if we accept that,
24 that it certainly can be done, Kathy, and that
25 in fact that the dose -- the dose

1 reconstruction resolution process may be a
2 convenient place to do it, what do you want to
3 do on the second site, folks? Do you want to
4 hold off till January?

5 **DR. WADE:** Or we can try to pick one now. We
6 have Sandia. Josie asked the question if we
7 might not want to try for a second. Would you
8 like to try for a second, or would you rather
9 wait till January?

10 **MS. MUNN:** This is Wanda. My concern was
11 simply that we get Huntington done. It doesn't
12 really matter, I think, where we get it done as
13 long as it gets done. And if it can be done
14 under Task IV, then I see no reason why we
15 shouldn't look at -- my choice would be then
16 probably Argonne East.

17 **DR. WADE:** Do you want me to poll the group on
18 a second possi--

19 **DR. ZIEMER:** Let's poll the group on Argonne
20 East -- folks, if you don't -- if you want to
21 hold off till January on this second one, just
22 say pass. Otherwise, name a lab.

23 **DR. WADE:** Okay, and I'll go back down the list
24 again. Josie Beach?

25 **MS. BEACH:** Yeah, my second choice was Argonne

1 East also.

2 **DR. WADE:** Okay. Mike Gibson?

3 (No response)

4 Mike, you might be on mute.

5 **MR. GIBSON:** I'll pass.

6 **DR. WADE:** Okay. Brad Clawson?

7 **MR. CLAWSON:** Argonne East.

8 **DR. WADE:** Mark Griffon?

9 **MR. GRIFFON:** Argonne East.

10 **DR. WADE:** James Melius?

11 **DR. MELIUS:** Lawrence Berkeley. No, actually
12 Argonne.

13 **DR. WADE:** Wanda Munn?

14 **MS. MUNN:** Argonne East.

15 **DR. WADE:** Robert Presley?

16 **MR. PRESLEY:** Argonne East.

17 **DR. WADE:** Gen Roessler?

18 **DR. ROESSLER:** Argonne East.

19 **DR. WADE:** Phillip Schofield?

20 **MR. SCHOFIELD:** Argonne East.

21 **DR. WADE:** And Paul Ziemer?

22 **DR. ZIEMER:** Well, I'm certainly going to
23 support Argonne East. The peer pressure's
24 tremendous here.

25 **DR. WADE:** Okay. So you have all but one --

1 **DR. ZIEMER:** We have those two then.

2 **DR. WADE:** Okay. So the sense of the Board is
3 we would ask under -- ask SC&A to undertake,
4 under Task I, site profile reviews for Sandia
5 and Argonne East.

6 **DR. ZIEMER:** Okay.

7 **DR. MELIUS:** This is Jim Melius. Can I just
8 bring up an issue -- I think it's actually
9 related somewhat to the next agenda item, but
10 it -- it's also an ongoing issue, and that is
11 the -- some of the problems we have linking
12 individual dose reconstruction reviews with
13 site profiles, site profile updates, you know,
14 procedure reviews, procedure update reviews and
15 so forth, and I am -- I get concerned when
16 we're in -- that some of our review function on
17 individual cases sort of falls between the
18 cracks because we sort of defer to other
19 reviews that are ongoing or, you know, the
20 resources aren't there to deal with -- you
21 know, in an individual dose reconstruction
22 review, to deal with some of the bigger issues
23 raised by the -- a site profile update or
24 whatever. And I think it would be helpful,
25 both consider going forward in terms of this

1 sort of budget issue that -- or task issue that
2 came up with what -- John Mauro's suggestion in
3 -- with Huntington, but -- but in a broader
4 sense to think about are there ways that we
5 could better link the dose -- individual dose
6 reconstruction reviews with making sure that
7 we're keeping up with what are the important
8 and key, you know, site profile updates,
9 procedure updates and so forth, so we're not --
10 you know, we don't, you know, get a few years
11 down the road -- you know, missed and never
12 have reviewed an important issue. And I -- I
13 think John and his staff gets caught trying to
14 decide how much effort to put in. Do you, you
15 know, defer till it gets assigned as a site
16 profile review or procedure review or do you
17 take it on partially now and -- I think -- I
18 think we could do a better job given --
19 especially given all the updates that are, you
20 know, continually being produced by Larry and
21 his staff and contractors. So I think it's
22 just something to think about, both in terms of
23 what we do this year, but also maybe how we at
24 least assign the money for tasks for the next
25 contract.

1 **DR. ZIEMER:** Okay. Thank you. Good comment,
2 Jim.

3 **DR. WADE:** There's one open issue, Paul, if I
4 might, from -- on this task before we move into
5 the next one, and that is this question of
6 assigning a PER for review. Again, we asked
7 SC&A to give us an estimate for one PER review
8 and they've done that. I think it's my take on
9 the Board's intention that they intend to
10 assign a PER this year for SC&A to review. Do
11 we want to do that now or do we want to wait
12 for that till January? John suggests in his
13 letter the target organs for lymphoma as a
14 possibility. That's PER 009. I'm not, again,
15 pushing. It's something we can talk about now
16 or something we could do in January.

17 **DR. ZIEMER:** Okay. What -- what we have so far
18 in this particular item is I think authorizing
19 the working group to review the need for TBD
20 6001 and to authorize them, if they feel it's
21 appropriate, to go ahead and task SC&A for
22 6001, and other procedures that they deem
23 necessary. So this -- I don't know that that
24 included the PER, but if we have a PER today
25 that we want to identify, we can do that. Such

1 as 009.

2 **DR. WADE:** Pragmatically, let me ask John --

3 **DR. ZIEMER:** (Unintelligible) the PERs before
4 you to -- to help you make that decision.

5 **DR. WADE:** Maybe I could just ask John Mauro on
6 the record. John, with what the Board has done
7 today, are you in a better position to -- to
8 keep -- to proceed keeping your people busy and
9 moving forward and making progress or is there
10 more you would require?

11 **DR. MAURO:** In regard to Task III, what I'm
12 hearing is that TBD 6001 is of interest, and I
13 would -- I would like to move forward with the
14 -- with the one -- the PER regarding thoracic
15 lymphomas as being one of the really important
16 ones that we can take on right now. So we're
17 prepared to take that on. Out of the -- in
18 other words, I realize Task -- Task III, you
19 know, involves these 30 procedures and one PER.
20 It sounds like that if we were to be authorized
21 to do this one review for TBD 6000, and we
22 consider that one of the procedure reviews, and
23 then the PER, that would be a relatively modest
24 portion of the Task III, but it would be --

25 **DR. ZIEMER:** Would get you underway, though.

1 **DR. MAURO:** Let's get them underway, yeah.

2 **DR. WADE:** Okay. Thank you.

3 **MS. MUNN:** From my -- my memory, and I'm not
4 sure that it's accurate, is that in the working
5 group when we looked at the PERs, we had
6 decided -- at the working group level -- that
7 we'd withhold any in-depth reviews until
8 reworks were done. And I guess I'm hearing
9 from you, John, that you now feel that we're in
10 a position to move forward with at least this
11 PER.

12 **DR. MAURO:** Yeah, that particular PER, based on
13 the work that we've done looking into the PER,
14 seems to be a very mature one, where there have
15 been a number of cases that have undergone the
16 review process under the PER, so not only could
17 we review the PER, but also the cases that were
18 re-reviewed and in our -- in our proposal, you
19 may recall -- and the PER review would -- would
20 actually have these two aspects to it. One is
21 the front end, what I call the PER process, and
22 then the back end where they actually did a re-
23 review. So we actually -- what would actually
24 happen is we would look at real cases as part
25 of this, and I -- I offered up that we would

1 look at about three. That is, after we do the
2 -- what I call the front end work, we would
3 also include the review of three cases that
4 were affected by that PER -- three thoracic
5 lymphoma cases that were re-reviewed and that
6 would con-- so it -- it -- it is a -- it is a
7 substantial piece of work. But I think that
8 that particular PER and the cases associated
9 with it are very mature at this point, and I
10 would certainly look to -- to NIOSH to see if
11 that interpretation is valid.

12 **DR. WADE:** Larry?

13 **DR. ZIEMER:** Yeah, Larry, or Jim?

14 **MR. ELLIOTT:** Yeah, this is Larry Elliott. I -
15 - I agree with John Mauro's assessment there.
16 I'm not -- I'm not prepared today to say that
17 we're completely done with all of the lymphoma
18 PER review, but it's certainly at a stage where
19 I think, you know, it's close to being
20 complete, if not -- if not already complete.
21 So...

22 **DR. WADE:** Thank you.

23 **DR. NETON:** Yeah, this is Jim Neton. The PER
24 you referred to is PER 009.

25 **DR. ZIEMER:** Right.

1 workgroup to review this further?

2 **MR. PRESLEY:** This is Bob Presley. I have no
3 problems with it.

4 **DR. ZIEMER:** Anyone else?

5 **DR. ROESSLER:** No problems from Gen.

6 **MS. BEACH:** No problems with me. This is
7 Josie.

8 **MR. CLAWSON:** I think we should proceed. This
9 is Brad.

10 **MR. SCHOFIELD:** I agree with (unintelligible)
11 consensus.

12 **DR. ZIEMER:** Okay, then the consensus is that
13 we'll add PER 009 to Task III and authorize
14 that to proceed. And that's together with TBD
15 6001 following workgroup review, and also any -
16 - workgroup can -- I believe we agreed could
17 add any other items to that list if they felt
18 it was mandatory after their next meeting. Is
19 that -- is that the consensus? I haven't taken
20 a formal vote, but I think that's what we
21 heard.

22 Okay, I hear no objections --

23 **MS. MUNN:** (Unintelligible) with PER 0009.

24 **DR. ZIEMER:** Let's go to Task IV. We've
25 already discussed the two blind reviews, which

1 are basically close to underway. Where --
2 where -- where did we end up on that?

3 **DR. WADE:** My understanding was that as soon as
4 the subcommittee was prepared to pass on the
5 materials to start the two blind reviews with
6 SC&A, they would feel free to do that. Then we
7 would work in January --

8 **DR. ZIEMER:** Try to get a new set of 30?

9 **DR. WADE:** -- to do a -- well, we'll try for 60
10 and see if we can get them all launched. If we
11 can't, then we'll do 30, but we'll -- we'll
12 come to January's meeting attempting to select
13 a brace or two of DRs to start the review
14 process.

15 **DR. ZIEMER:** Okay. Mark, is that agreeable?

16 **MR. GRIFFON:** Yes, that's fine.

17 **DR. ZIEMER:** Thank you. We'll proceed on that
18 basis.

19 Task V, assign SEC work as appropriate, so
20 that's just kind of open-ended at the moment.
21 Anything need to be assigned today?

22 **DR. WADE:** Well, I think John Mauro is trying
23 to look down the -- the pike and see what's
24 coming, and has offered, for example, the
25 possibility of Mound or Rocketdyne or NTS, the

1 underground test phase, and LLNL. That's your
2 list, isn't it John?

3 **DR. MAURO:** Yes, correct, you have that before
4 you.

5 **DR. WADE:** Hanford has currently been assigned
6 under 2008. Fernald you're reviewing, but
7 you're reviewing that as a 2007 assignment.

8 **DR. MAURO:** Correct.

9 **DR. WADE:** So the question for the Board is do
10 you want to pick one of those that's looming on
11 the horizon and get your contractor started, or
12 do you want to wait until you've -- it's come
13 to you, you've commissioned a workgroup and
14 you're starting your deliberations?

15 **DR. MAURO:** As an aid in your deliberations,
16 bear in mind we have six -- six SECs for fiscal
17 year 2008. We still have three that are open
18 and undefined for 2007. So in theory there are
19 nine that are within scope and can be
20 authorized, so we really have an abundance in
21 terms of what's authorized within the scope of
22 the contract. But bear in mind that in terms
23 of budget, I think realistically, given the
24 budget we currently have, we're probably only
25 really able to do three -- I'm sorry, six.

1 Three we are just -- not going to be possible
2 within the existing budget. That's primarily,
3 by the way, the major reason for the projection
4 -- that is, when we did our projection of the
5 resources, where we might run into trouble, it
6 -- it's here that we run into trouble. That
7 is, we -- we believe that it's going to be just
8 about impossible to do all nine. We -- we --
9 we believe we can do six, but we're not going
10 to be able to do nine.

11 **DR. WADE:** And of those six, John, one you've
12 already been assigned and that's Hanford.
13 Correct?

14 **DR. MAURO:** Well, not really, because we
15 shifted the Hanford from 2007 scope into 2008,
16 so that -- that's what lea-- that's why we --
17 so we -- we really opened one up in 2007. So
18 where we stand is yes, the -- the 200-- we've
19 shifted the Hanford -- originally was under
20 2007.

21 **DR. WADE:** Right.

22 **DR. MAURO:** It's been moved to 2008, but what
23 that does is it opens one up in 2007. So what
24 I'm saying is that -- okay, got -- another way
25 to look at it is in the gra-- in the big

1 picture, that is, if you just look at the
2 integrated authorization, right now the Board
3 can authorize up to a total of nine when you --
4 when you look at what is availab-- what can be
5 authorized in combination between -- was not --
6 was not yet authorized under 2008 and what --
7 yet to be authorized under -- under 2007. But
8 the pro-- the problem is -- reality, especially
9 in this particular task order is, you know,
10 we're not going to be able -- we do not have
11 the resources to complete all that work, which
12 includes nine new ones and completing the
13 Hanford and the Fernald, which is currently
14 active.

15 **DR. WADE:** So in your professional judgment,
16 John, slots open for assignment -- Hanford is
17 underway, Fernald is underway. Slots open for
18 an assignment from this point forward, the
19 number is five or six? What --

20 **DR. MAURO:** Six -- I would say that, you know,
21 five or six is something we could handle.

22 **DR. WADE:** Okay, that's fine. Thank you.

23 **MS. MUNN:** And have we not defined a group for
24 you already?

25 **DR. MAURO:** No.

1 **MS. MUNN:** I -- oh, that's odd. I -- all
2 right.

3 **MR. PRESLEY:** This is Bob Presley.

4 **DR. ZIEMER:** Yeah, Bob.

5 **MR. PRESLEY:** I'm just wondering if we don't
6 want to put this off until we've got the full
7 Board. We're not going to be holding John up
8 with his -- if he's got three that they need to
9 work on right now and we put just a little bit
10 more thought into the ones that we want to do,
11 if we could put that off until our January
12 meeting, 'cause we're not -- we're not going to
13 be holding John up, sounds like.

14 **MS. MUNN:** John, was that list in your proposal
15 that you just sent out?

16 **DR. ZIEMER:** About the third paragraph down.

17 **MR. PRESLEY:** Yeah.

18 **MS. MUNN:** I'm -- well, I'm having a hard time
19 pulling up the proposal. For some reason it
20 didn't --

21 **DR. WADE:** I can read you what John said.
22 Under SEC petition reviews, LLNL, NTS, Mound,
23 and Rocketdyne, paren, Hanford is currently
24 being done under FY 2008 resources, but Fernald
25 is being done under 2007 resources. The scope

1 of work for 2008 is limited to six new -- he
2 says site profile reviews; I think he meant --

3 **DR. MAURO:** Yeah, I --

4 **DR. WADE:** -- SEC petition reviews.

5 **DR. ZIEMER:** I think SEC is what you meant
6 there.

7 **DR. MAURO:** A typo, yeah.

8 **MS. MUNN:** Okay.

9 **DR. MAURO:** We -- we -- one of the reasons I
10 mentioned NTS is I know that we are -- we -- we
11 are certainly active, very active, on issues
12 related to the site profile. And of course 250
13 work day series of investigations is moving
14 along, all of which is applicable to NTS. But
15 we have not yet taken on the ac-- confronted
16 directly the NTS SEC issues. And the reason I
17 brought it up was, given that we will be
18 meeting in January in -- in Las Vegas, I -- you
19 know, I thought that might be an area where
20 making some progress on that might be helpful.

21 **MR. PRESLEY:** John, this is Bob Presley. I'd
22 have no problem with that. Hopefully we'll
23 have some progress on our working group out
24 there.

25 **DR. ZIEMER:** What about the rest of you?

1 Comments, pro or con?

2 **DR. MELIUS:** (Unintelligible) we need to get
3 going on that. I mean I -- again, I'm not
4 familiar with what the workgroup's doing. I
5 know -- I know they've been very active, but I
6 think (break in transmission) ready to start
7 dealing with the SEC 'cause certainly it'll be
8 the issue of discussion in our next meeting.

9 **DR. ZIEMER:** Might be good to -- to have on
10 record that we do have the contractor looking
11 at that.

12 **DR. WADE:** And since --

13 **DR. MAURO:** This is John again. One of the
14 things that we did that I think was very
15 effective -- cost-effective on Hanford was when
16 we were authorized to begin the SEC aspect of
17 the Hanford review, we were in a position
18 where, in a relatively short period of time --
19 given that we had done so much work on Hanford
20 previously -- we were able to zero in on what
21 we considered to be the major issues and put
22 together a relatively brief report that you all
23 have now for the purpose of our next conference
24 meeting on -- on the SEC. What I'm getting to
25 is that we are in a very similar position with

1 Nevada Test Site. That is, we're very mature
2 in looking at the issues -- many of the issues.
3 And with a relatively modest effort, we will be
4 able to make some inroads into crystallizing
5 what might be the SEC issues, and so that's why
6 I suggested it.

7 **MR. PRESLEY:** Can I make -- this is Bob
8 Presley. Can I make a motion that we go ahead
9 then and put the Nevada Test Site -- NTS on the
10 table so John can go ahead and start working on
11 it?

12 **DR. ZIEMER:** It's certainly appropriate. Is
13 there a second?

14 **DR. ROESSLER:** Second. This is Gen.

15 **DR. ZIEMER:** Okay. So this would be to task
16 SC&A to proceed with the SEC petition review
17 process for NTS?

18 **MR. PRESLEY:** That's correct, sir.

19 **DR. ZIEMER:** And any discussion?

20 (No responses)

21 Apparently not. Lew, you want to take a roll
22 call?

23 **DR. WADE:** Josie Beach?

24 **MS. BEACH:** Yes.

25 **DR. WADE:** Brad Clawson?

1 vote, but the motion carries. That will go on
2 for -- for this task.

3 **MS. BEACH:** And this is Josie. I'd like to
4 recommend LANL also. We have a workgroup but
5 we haven't met yet, but it's -- it will be
6 coming up.

7 **MR. PRESLEY:** This is Bob Presley. I think
8 that's a good suggestion.

9 **DR. ZIEMER:** Let me ask -- before we go any
10 further on that, let me ask John Mauro, is
11 there any advantage for you in having LANL on
12 the slate now versus our next meeting in terms
13 of --

14 **DR. MAURO:** Well, bear in mind --

15 **DR. ZIEMER:** -- (unintelligible) work assigned?

16 **DR. MAURO:** LANL is currently active as --
17 under Task V, so we are already on that. We
18 haven't moved forward because I think it's a
19 lot of work and I know that Joe and Mark have
20 been talking about it. But LANL is within the
21 scope of our fiscal year 2007.

22 **DR. ZIEMER:** It's already on the list.

23 **DR. MAURO:** It's already on the list, so -- so
24 LA-- LANL is an active -- well, when I say
25 active, it has been approved by the Board

1 already for us to move forward.

2 **DR. ZIEMER:** You included it in your list so it
3 probably shouldn't have been there then.

4 **DR. MAURO:** Did I have that in there? That --
5 that might have been a mistake, yeah. It
6 wasn't -- LA--

7 **DR. WADE:** You have LLNL on your list.

8 **DR. ZIEMER:** Oh --

9 **DR. MAURO:** It's Lawrence Livermore, and that -
10 -

11 **DR. ZIEMER:** Oh, that's Lawrence Livermore, not
12 -- is that -- Josie, were you talking LANL or
13 Lawrence Livermore?

14 **MS. BEACH:** Yeah, I mistakenly thought that was
15 LANL.

16 **DR. MAURO:** Okay. No, Lawrence Livermore is
17 not on our list for -- for SEC, so yes --

18 **DR. WADE:** So Josie's recommendation was LANL,
19 and that's already on your list.

20 **DR. MAURO:** No, but I think -- Josie, did you
21 mean Lawrence Livermore or Lawrence -- Los
22 Alamos?

23 **MS. BEACH:** Los Alamos.

24 **DR. MAURO:** Oh, Los -- Los Alamos is already on
25 the list and is active as an SEC review. We

1 haven't made much progress because I believe
2 there's a lot of work still going on related to
3 that, so it's sort of been on the back burner.
4 But yes, we've already -- we're already
5 authorized to -- to work on that.

6 **DR. ZIEMER:** Well, I'm wondering if this isn't
7 adequate for today, to have this one new
8 assignment, and then we can add as we need to.

9 **DR. WADE:** It seems reasonable to me,
10 certainly.

11 **DR. ZIEMER:** Any objections from others?

12 **MS. MUNN:** No.

13 **DR. ZIEMER:** Lew, I think that completes the
14 immediate --

15 **DR. WADE:** Right --

16 **DR. ZIEMER:** -- work.

17 **DR. WADE:** -- and I thank the Board for your
18 willingness to do that on the telephone. I
19 think it is important that -- that we keep your
20 contractor tasked, and I think this was a
21 productive time and I appreciate it. It's not
22 easy to do on the telephone.

23 **DR. ZIEMER:** Right.

24 **DR. WADE:** I think you were very effective.

25 I'd like to segue to the next item -- and

1 again, I almost hesitate to have this
2 discussion, but let me start it with you.
3 Again, we are -- the SC&A contract is running
4 out this year. We will recompetete and we'll see
5 what comes of that. You know, there's one
6 possibility, SC&A will be back serving the
7 Board. There's another possibility, it might
8 not be back serving the Board. I would like to
9 talk just briefly -- if SC&A is not selected
10 and there is work left to be done, some of this
11 closeout, then the government would have to
12 extend the performance period of SC&A's
13 contract and we'd have to do what was
14 appropriate contractually to see that that work
15 was brought to completion.
16 Again, it's also possible that the government
17 could decide not to task SC&A to bring that
18 work to completion, but to bring that work to a
19 new contractor. All of those possibilities are
20 in front of us. I don't want to muddy the
21 water with that, but I think it's worth having
22 at least one discussion of that. If SC&A was
23 not to be selected as the contractor, the
24 provisions exist for the government to pursue
25 closure on all the things John talked about by

1 extending the contract, in time or in dollar
2 value, as appropriate, or not to do that.
3 David, did I speak correctly on that?

4 **MR. STAUDT:** That's correct.

5 **MS. BLACK:** This is Flo. You can extend the
6 period of performance for each of the
7 appropriate tasks. You don't have to extend
8 the period of performance for the whole
9 contract if it's not necessary.

10 **DR. WADE:** Okay. Thank you, Flo. Again, I
11 don't want to prejudge anything, but thought
12 we'd -- it'd be worth having that at least
13 discussion that we have thought about the end
14 game of this, depending upon how it plays out.

15 **DR. ZIEMER:** It seems to me, especially on the
16 matrices -- the closeout matrices, that it
17 would be difficult and awkward to have issues -
18 - trying to close out issues that were findings
19 of SC&A for which a new contractor had no input
20 and, you know, how do you go about closing
21 those?

22 **DR. WADE:** Correct, we -- I think the -- the
23 most expedient way is to make use of --

24 **DR. ZIEMER:** We almost have to have SC&A at the
25 table to -- to, as it were, defend their

1 positions or elaborate or clarify on all of
2 those issues.

3 **DR. WADE:** Correct, that's what -- yes, Paul,
4 very well said.

5 **MR. PRESLEY:** Hey, Paul, this is Bob Presley.

6 **DR. ZIEMER:** And so the law would allow for --
7 or the procurement procedure would allow for
8 that in the worst -- in the case where another
9 contractor was selected for the --

10 **DR. WADE:** Correct.

11 **DR. ZIEMER:** 'Cause to me, that's part of the
12 closeout process.

13 **DR. WADE:** Correct.

14 **DR. ZIEMER:** Okay. Somebody else had a
15 comment.

16 **MR. PRESLEY:** This is Bob. I agree with you
17 100 percent there. I think we would -- we
18 would probably be run off if -- if -- if we
19 started a new contractor and started all this
20 stuff over again. I would love to see us close
21 this stuff out, and then if we have to start
22 with another contractor, start from scratch on
23 -- on items.

24 **MR. CLAWSON:** I -- I agree. One of my issues
25 is is the timeliness on this. We're always

1 fighting against that issue. If we bring a new
2 contractor in, by the time they get up to speed
3 and going, we will have lost an awful lot of
4 valuable time. And where SC&A has brought
5 these issues up and have been dealing with
6 them, I feel that it's very important we keep
7 them going to the end.

8 **DR. ZIEMER:** Well, another piece of this, and
9 it seems to me it's a -- poses a kind of
10 difficulty in the procurement process, but we
11 ha-- we have site profile reviews that we
12 haven't even begun the resolution process on.
13 And certainly if a new contractor comes in, we
14 don't want them to re-review something, yet
15 they'd have to be in a position of, you know,
16 sort of helping us close out a review that
17 somebody else did.

18 **DR. WADE:** So we -- we can cross those bridges
19 when we come to them.

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

21 **DR. WADE:** I just wanted to put them on the
22 table for general intellectual consideration.
23 We'll make the appropriate and prudent
24 decisions on a case-by-case basis as we go, but
25 all prerogatives will be open to us.

1 **DR. ROESSLER:** Lew or Paul, this is Gen, do we
2 know when we'll find out what the decision is?

3 **DR. WADE:** On the new contractor?

4 **DR. ROESSLER:** Right.

5 **DR. WADE:** That's what we're going to talk
6 about next.

7 **DR. ROESSLER:** Oh, okay. Thanks.

8 **DR. WADE:** I was segueing from the old to the
9 new.

10 **PROCEDURES TO SELECT BOARD SUPPORT CONTRACTOR**

11 If I might start on the next agenda item then -
12 -

13 **MR. PRESLEY:** Hey, Lew --

14 **DR. WADE:** Yes, sir?

15 **MR. PRESLEY:** -- this is Bob. Do we want to
16 break for about five or ten minutes?

17 **DR. WADE:** Here the heads are all nodding, but
18 I leave that to the wisdom of Dr. Ziemer.

19 **DR. ZIEMER:** Well, we can certainly take a
20 break. I need some advice here. Do we just
21 keep the lines open?

22 **DR. WADE:** I would keep the lines open.

23 **MR. PRESLEY:** Yeah, I'm just going to lay my
24 phone down.

25 **DR. ZIEMER:** Let me suggest a five-minute

1 We'll come back to Mark. Dr. Melius?

2 **DR. MELIUS:** Here.

3 **DR. WADE:** Wanda Munn?

4 **MS. MUNN:** Here.

5 **DR. WADE:** Robert Presley?

6 **MR. PRESLEY:** Here.

7 **DR. WADE:** Gen Roessler?

8 **DR. ROESSLER:** Here.

9 **DR. WADE:** Phillip Schofield?

10 **MR. SCHOFIELD:** Here.

11 **DR. WADE:** Paul Ziemer?

12 **DR. ZIEMER:** Here.

13 **DR. WADE:** Mark Griffon?

14 (No response)

15 Mark Griffon?

16 (No response)

17 **DR. ZIEMER:** He'll probably be back shortly.

18 **DR. WADE:** Yes.

19 **DR. ZIEMER:** Oh, is that Mark?

20 **DR. WADE:** Mark Griffon, are you with us?

21 (No response)

22 I promise you he'll be back.

23 **DR. ZIEMER:** Okay, well, let's -- let's
24 proceed. We're still on the Board contractor
25 selection.

1 **DR. WADE:** Right, that's the new item, which is
2 the new contract.

3 Let me again paint you a picture. Before our
4 last face-to-face meeting I shared with you a
5 draft statement of work, evaluation criteria,
6 we had a discussion of the possible formation
7 of a technical evaluation committee. We gave
8 you some time to look at those documents and
9 react if you would on this call.

10 Let me tell you that we don't have to finalize
11 anything on this call, but we do need to
12 finalize things during the January meeting. We
13 need to come out of the January meeting with
14 the government moving forward with the
15 statement of work, evaluation criteria and a
16 plan. So the Board's input now, between now
17 and the January meeting, at the January
18 meeting, is -- is needed if you want to have an
19 impact upon this. We can have a discussion
20 now. I resent the documents to you. There's
21 no change from the documents that you had
22 before the last face-to-face meeting.

23 Flo Black and -- and David Staudt are on the
24 line and can answer questions. I don't know
25 if, Flo or David, you want to create a time

1 line in -- in the Board's mind as to how this
2 would proceed, leading to award of new contract
3 by the end of this fiscal year. If you would,
4 please, why don't you just paint us a picture
5 of that time line.

6 **MR. STAUDT:** Yeah, this is Dave. The goal is,
7 as Lew stated, in January to come out of that
8 meeting with a -- pretty much a final statement
9 of work and evaluation criteria which we will
10 incorporate into the solicitation that would go
11 out, sometime hopefully in late January or in
12 February. And from that time line, it -- it's
13 going to take several months before proposals
14 are in, and the goal would obviously be to
15 award in -- in mid-summer, if we could. And
16 that would allow a couple months, just in case
17 another contractor was selected, that we could
18 -- could have -- you know, would get ready if -
19 - for SC&A's assistance for any turnover. So
20 we don't want -- we -- we don't want to wait
21 until end of September for that type of award.
22 So the goal was to have it done earlier, and
23 then -- so we do have some time before we have
24 to actually select members for the board, but I
25 think the main thing is, as always, is to get

1 the process started earlier because a lot of
2 things do come up in that -- in that time. But
3 I would -- it generally takes six months from
4 January to award.

5 **DR. ZIEMER:** Okay. Now Board members, we have
6 the draft statement of work, and that was
7 distributed to everybody. And I think at -- I
8 guess at our January meeting we need sort of
9 final approval. Is that correct, Lew or David?

10 **DR. WADE:** (Unintelligible) changes, now or
11 between now and the meeting from individuals,
12 just as much input as we can get, the better so
13 we can move towards closure at the January
14 meeting.

15 **MS. BLACK:** And I just -- this is Flo, and I'd
16 just like to add that I have received no
17 comments from the general public in response to
18 tho-- to those being posted on the FedBizOpps,
19 not one.

20 **DR. ZIEMER:** And you posted those in September.
21 Is that correct?

22 **MS. BLACK:** Yes. Well, it was before our --
23 the October 6th meeting, and so --

24 **DR. ZIEMER:** Is that a good thing, Flo, or not?
25 Does that mean nobody's --

1 **MS. BLACK:** I'm not --

2 **DR. ZIEMER:** -- (unintelligible) or
3 (unintelligible) so well --

4 **MS. BLACK:** -- sure, I thought that there was
5 interest in this and that someone might have
6 sent an e-mail saying, you know, this is what
7 we think or we're glad you're doing this or
8 keep us posted or something, but I haven't
9 received -- not one from the general public.
10 So that -- that was just for a point of
11 information, so whatever changes that -- you
12 know, whatever feedback you provide, you know,
13 certainly can and will be incorporated --

14 **DR. ZIEMER:** So certainly this description --

15 **MS. BLACK:** -- but we're not facing a lot of
16 concern, I guess, at this --

17 **MR. GRIFFON:** Flo -- Flo, do -- this is Mark
18 Griffon. Do you have any way of knowing how --
19 I mean I would think you would have a way of
20 tracking how many people visited the site?

21 **MS. BLACK:** Oh, no. No, there's no way for me
22 to know that. I don't even know if GSA knows
23 that, but I have no way of knowing that.

24 **MR. GRIFFON:** Okay, I thought you might know
25 how many hits or whatever on the...

1 **DR. BRANCHE:** They do (unintelligible).

2 **MS. BLACK:** No, I -- I don't -- I could
3 probably ask -- as I said, I don't even know if
4 GSA knows that, but I could ask them.

5 **DR. ZIEMER:** Now this -- this provides, I
6 thought, a pretty good overview of -- of what
7 our contractor's doing now. It's -- it's broad
8 and general, but it's -- seems to cover all of
9 the tasks. Board members, I think it behooves
10 us all to individually look at that. And
11 process-wise, David or Flo, individual comments
12 are fine from Board members, or do you need --
13 do you need anything official from the Board
14 itself?

15 **MR. STAUDT:** No, just -- e-mails are fine, from
16 individuals are fine. And if they want to --
17 if they want to route them through you, they
18 can do that, or they can be sent directly to
19 me.

20 **DR. WADE:** If the Board would want to make a
21 recommendation as a body, then they would do
22 that in January, I think.

23 **DR. ZIEMER:** Yeah, we -- we could -- we could,
24 for example, indicate that we believe that it's
25 a proper description of the statement of --

1 it's really a statement of work --

2 **DR. MAURO:** Yes.

3 **DR. ZIEMER:** -- and, you know, it would
4 probably be helpful if we agreed that is the
5 work of our contractor.

6 **DR. WADE:** Right, and you have Dr. Melius's --

7 **DR. ZIEMER:** I would hope the Board would be
8 willing to at least take some sort of action
9 formally at the January meeting.

10 **DR. WADE:** Right. You do have Dr. Melius's
11 comment earlier about integrating tasks and
12 those kinds of things. Now's -- January's the
13 time to think about that if you'd like to -- to
14 work towards that.

15 I also have sent you evaluation criteria with
16 point values -- again, that we're proposing.
17 We'd like to hear from you if you'd like to see
18 some adjustment there or not.

19 **MS. MUNN:** It seems reasonable at first blush.
20 I personally hesitate to comment on these
21 matters very much, simply because the
22 activities are so integrated and are so complex
23 in their inherent nature that it's -- it's
24 almost impossible to make a simple comment
25 about any of them. For a person who's trying

1 to follow all of the things that the contractor
2 is required to do, it becomes very difficult to
3 imagine transferring this work to someone who
4 does not have a historic understanding of the
5 point from which we've come. So it's -- it's
6 really hard to comment on this in any way other
7 than to say this looks fair.

8 As far as the point designations were
9 concerned, I only read through those very
10 quickly and did not give a great deal of
11 thought to them. But they seemed fair and
12 reasonable on the face of them.

13 **DR. WADE:** And to your comment, Wanda, there is
14 this number six on that list, which is a plus
15 or minus 20 points for past performance. If
16 it's --

17 **MS. MUNN:** Yes.

18 **DR. WADE:** -- the sense of the Board that
19 having done this work in the past is critical,
20 then that's a mechanism for bringing that
21 thought to quantitative impact.

22 **MS. MUNN:** And I believe that appropriately
23 placed.

24 **DR. ZIEMER:** Other comments at this point?

25 **DR. ROESSLER:** This is Gen. I was not able to

1 pen that document, the evaluation criteria. I
2 must have an old program or something.

3 **DR. MELIUS:** This is Jim Melius. I had the
4 same trouble. It's a newer version of Word,
5 and --

6 **DR. ZIEMER:** Well, many of us had that problem
7 and --

8 **MR. PRESLEY:** This is Bob --

9 **DR. ZIEMER:** -- Dav-- David Staudt was going to
10 resend that, was he not?

11 **DR. WADE:** Right, David -- David or Flo, if you
12 could resend that -- I mean we --

13 **MS. BLACK:** I -- I just sent it to you -- just
14 before the Board meeting started, I sent it --
15 a Word version -- an earlier Word version.

16 **DR. MELIUS:** Yeah, but that one -- whatever I
17 got just before the Board meeting required me
18 to download something and I'm still --

19 **MS. BLACK:** Oh --

20 **DR. MELIUS:** -- still trying to fix my
21 computer.

22 **MS. BLACK:** Okay.

23 **MS. BEACH:** Same -- same with me.

24 **MR. PRESLEY:** This is Bob Presley. Mine's --
25 did the same thing.

1 **DR. MELIUS:** Yeah, I don't -- I...

2 **DR. WADE:** So if you, Flo, could -- could work
3 that and we could get it to these fine people
4 in a way that they could open --

5 **DR. MELIUS:** Yeah, I mean I'm -- I'm able to
6 open it now. I'm not sure my computer will
7 recover, but --

8 **DR. ROESSLER:** Well, my computer --

9 **DR. MELIUS:** Or for that matter, I may not
10 recover, but --

11 **DR. ROESSLER:** My computer is churning away
12 doing something here.

13 **DR. MELIUS:** Yeah, yeah, it downloads something
14 and then it -- downloaded -- that all went
15 fine, and then when I went to try to get
16 anything to work after that, it churned and
17 messed around and nothing would work.

18 **DR. WADE:** Well, these are also the same
19 criteria that we'd given to you in -- in hard
20 copy at the last meeting, but we will send them
21 to you again.

22 **DR. MELIUS:** Yeah, I...

23 **DR. ROESSLER:** Thank you.

24 **DR. MELIUS:** Jim Melius, I have one other
25 comment that I would like -- it's for the

1 agenda for the meeting next time, that as part
2 of our discussion, the contract re--
3 recompetition, that we also include a
4 discussion of the budget issues related to this
5 contract. I want to make sure that we maintain
6 the flexibility in the new contract if
7 additional fundings are, you know, changing in
8 tasking made -- you know, take place and may be
9 necessary as the -- as we seem to get busier
10 and busier, and I -- and I'm concerned that --
11 much as I'm concerned about NIOSH having
12 adequate resources, I'm also concerned that
13 SC&A have adequate resources because they are
14 the main, you know, peer review for much of
15 what goes on here. So I think we need to --
16 the -- my -- so I -- I need -- like to have --
17 better understand the -- you know, what John
18 Mauro feels are, you know, limitations in terms
19 of what they'll be able to do next year or
20 (unintelligible) this year as well as how we
21 make sure this doesn't happen in the future,
22 so...

23 **DR. WADE:** Yeah, we can have that discussion
24 generally. I -- I don't know if I'd ask John
25 to answer that question because we don't know

1 **MR. PRESLEY:** Hey, Paul, this is Bob. Let me
2 ask you something.

3 **DR. ZIEMER:** Yeah.

4 **MR. PRESLEY:** The document in question --

5 **DR. ZIEMER:** The -- the point -- or which
6 document?

7 **MR. PRESLEY:** The one the Lew tried to get out
8 that none of us can review. Did they -- did
9 they by chance put that on the Board's web
10 site?

11 **DR. ZIEMER:** Don't know, but I -- I just got
12 the new Word document from Flo and it -- it
13 came through without any problems.

14 **MR. PRESLEY:** Okay, let me ask Flo to go ahead
15 and send that to my Y-12 address and see if I
16 can pull it off here at the plant.

17 **DR. ZIEMER:** I mean as soon as I clicked on the
18 attachment, it opened up in Word. I -- I don't
19 know if I have a different version or --
20 sometimes the operating systems are -- are
21 different and -- who knows.

22 **MS. BLACK:** Can I have that e-mail address and
23 I'll be happy to send it?

24 **MR. PRESLEY:** Okay, it's presleyrwl@y12.doe --
25 Paul, go ahead and I'll --

1 Breyer and I -- and I both sent e-mails to you
2 and copied the Board members, indicating that
3 all the information was there under that
4 folder, including the e-mails that we had
5 received from the petitioner.

6 Also the petitioner may be on the phone and as
7 -- and may want to add anything, I do not know.
8 I know that that petitioner had indicated that
9 they would try to call in.

10 **DR. ZIEMER:** Okay, and that -- that's Mr.
11 Giovaccini, I think.

12 **MR. RUTHERFORD:** That's correct.

13 **DR. ZIEMER:** Is he on the line? Gerry?

14 **MR. GIOVACCINI:** Yes, I'm listening.

15 **DR. ZIEMER:** Oh. Did you have some comments,
16 Gerry, at this time?

17 **MR. GIOVACCINI:** Not at this time. I'll wait
18 for the presentation.

19 **DR. ZIEMER:** Board members, did you all receive
20 the documents that LaVon distributed?

21 **MS. BEACH:** Yes, I did.

22 **MR. PRESLEY:** Yes.

23 **DR. ZIEMER:** Okay.

24 **MS. MUNN:** What was the date, LaVon?

25 **MR. RUTHERFORD:** It was October 31st I believe

1 was the date we sent the e-mail. It was
2 actually -- we just sent the e-mail indicating
3 that all of the documents were available on the
4 Board's -- in the Board's folder.

5 **MS. MUNN:** Okay. Thank you.

6 **MR. RUTHERFORD:** In addition, I -- Sam -- Dr.
7 Glover is on line if there are any additional
8 technical questions that -- that would like to
9 be asked, I'm pretty sure that he is available
10 at this time as well.

11 **DR. GLOVER:** I am here.

12 **DR. ZIEMER:** Okay. Board members, any comments
13 or questions at this point? We don't have any
14 action before us. This -- we'd -- we had taken
15 action already on Sandia. This is a -- the
16 petitioner's materials were provided. We had
17 the -- we had the evaluation review and the
18 action. The -- the materials that you were --
19 received at I believe NIOSH. NIOSH's position
20 is that they considered all of these issues in
21 their evaluation report. Is that correct,
22 LaVon?

23 **MR. RUTHERFORD:** Yes, that is correct, Dr.
24 Ziemer.

25 **DR. ZIEMER:** So the only issue at this point

1 would be if the Board members believe that
2 there is information that would cause them to
3 want to -- to propose anything different than
4 has already occurred. Or if you have not had a
5 chance to review this all -- some of this came
6 in fairly recently -- then action -- or we
7 could -- we could ask for this to appear again
8 on the full Board meeting agenda. Are there --
9 are there Board members that feel that they
10 don't have enough informa-- or have not had the
11 opportunity to review all this information yet?

12 **MS. MUNN:** I haven't reviewed it in depth, but
13 I very quickly went through that material when
14 we received it. Nothing was clearly obvious as
15 being an oversight or less than thorough, less
16 than adequate -- I saw no problem with what was
17 reported.

18 **DR. ZIEMER:** That was Wanda. Others -- other
19 comments?

20 **MR. CLAWSON:** This is Brad. I've just been
21 able to get just a general over it. I don't
22 see too much right now, but I have been doing
23 other items lately.

24 **DR. ROESSLER:** This is Gen. I have not had
25 time to take a look at it.

1 **DR. ZIEMER:** I'm -- I'm concerned that -- in
2 fairness to the petitioner, that the Board
3 members have a chance to at least have reviewed
4 the material that was provided. And unless you
5 do that, there's -- you could not -- if there
6 were a motion for any action, you could not act
7 intelligently on it.

8 I'm going to suggest that we put this on the
9 agenda for the next meeting so that all the
10 Board members have had a chance to review that
11 material thoroughly and then they can decide
12 whether any action is needed.

13 **MS. BEACH:** Lew, this is Josie. I have
14 actually read it and I have a question for the
15 petitioner, if he's still on the line.

16 **MR. GIOVACCINI:** I am.

17 **MS. BEACH:** Are you going to -- are you going
18 to come back on these answers with more
19 questions, or are you satisfied with NIOSH's
20 answers?

21 **MR. GIOVACCINI:** Of course I'm not satisfied if
22 they declare that they can do it, bind the
23 dose. You have -- apparently you have your
24 resources and I have mine, and your resources
25 all say they can do a dose reconstruction. My

1 resources, and I can even contact more if you'd
2 like, say a dose reconstruction would not be
3 feasible under the circumstances. When you
4 have 33.3 percent of the information -- dose
5 re-- reconstruction information missing, how is
6 it possible to do an accurate dose
7 reconstruction? You know, individual exposures
8 were different in this particular laboratory.
9 At the time I worked there, there was no one
10 else in the laboratory. At the time my
11 successor worked, he worked with -- on his --
12 on his own, alone, et cetera. Unfortunately,
13 my -- all my dose exposures were somehow
14 missing. Sandia was unable to come up with
15 those.

16 So yes, we're at a -- at a debate here about
17 how the -- how accurate can the dose be
18 reconstructed.

19 **MS. BEACH:** Okay, I just -- I was just curious
20 on what your thoughts were on NIOSH's answers
21 to all your questions, so thank you.

22 **DR. ZIEMER:** Other Board members, comments? Do
23 -- do others of you wish us to defer action or
24 defer anything until the next meeting?

25 **MR. CLAWSON:** Paul, this is Brad. To be able

1 to give justice to this, I -- I apologize, but
2 I'm in a pretty big workload myself. I would
3 like to see it brought up at the January
4 meeting where we can really take a look at
5 what's been said and put down.

6 **DR. ZIEMER:** Any objections to deferring this
7 to the January meeting till all the Board
8 members have had a chance to -- to digest the
9 materials that have been provided by the
10 petitioner?

11 **MR. PRESLEY:** This is Bob Presley --

12 **DR. ZIEMER:** And LaVon, on the O drive --
13 everything that you have received is on the O
14 drive as well. Is that correct?

15 **MR. RUTHERFORD:** That is correct.

16 **DR. ZIEMER:** Okay. Bob, did you have another
17 comment?

18 **MR. PRESLEY:** No, deferring it's fine.

19 **MR. GIOVACCINI:** I have one other comment.

20 **DR. ZIEMER:** Yes, uh-huh.

21 **MR. GIOVACCINI:** Regarding exposure time, isn't
22 that a very crucial criteria when you're trying
23 to do a dose reconstruction calculation?
24 Without the exposure time known, how could you
25 possibly do an accurate dose reconstruction?

1 **DR. ZIEMER:** Well --

2 **MR. GIOVACCINI:** You know, there was leakage in
3 these machines. I was subject to ionizing
4 radiation on a daily basis, and none of this
5 can be quantified.

6 **DR. ZIEMER:** Well, we'd have to have the dose
7 reconstructors fill us in on that, but in
8 general they would have assumed that was the
9 case, but I don't know on your specific case
10 what -- we have to look at this in terms of an
11 SEC petition, and so that's -- that's the
12 manner in which we will do it. The total dose
13 is -- of course is the critical issue, whether
14 that came in a week, a day, a month, a year.
15 But I -- I'll take it by consent that we're
16 going to defer this to the January meeting till
17 all Board members have had an opportunity to
18 digest and review the materials that have been
19 provided, then we can proceed from there.
20 And Gerry, thank you for being present on the
21 call and you certainly would be welcome to be
22 present or participate by phone at the next
23 meeting as well.

24 **MR. GIOVACCINI:** I have one -- one more
25 comment.

1 **DR. ZIEMER:** Sure.

2 **MR. GIOVACCINI:** I've been tuning in for the
3 last hour and during the course of the meeting
4 they were bringing up a PER, I believe it's
5 number 009. Well, I am a lymphoma claimant.
6 Matter of fact, I have non-Hodgkin's lymphoma,
7 which is one of the 22 listed cancers.

8 **DR. ZIEMER:** Uh-huh.

9 **MR. GIOVACCINI:** And I have yet to be notified
10 that this PER even exists. Am I falling
11 through the crack?

12 **DR. NETON:** This is Jim Neton. I think I can
13 answer that question. That PER was applied to
14 cases that -- that were processed before a
15 certain date, before we adopted the new
16 lymphoma model, and I'm -- I don't recall the
17 specifics, but I'm very certain that your case
18 was after that fact.

19 **MR. GIOVACCINI:** It may have -- well have been,
20 but when I talked to Brad -- no last name --
21 Brad during the telephone closeout interview
22 for the dose reconstruction, Brad asked me not
23 to sign the CAS-1 (sic) form because I'd
24 presented additional information. I think my
25 lymphoma case needs to be re-evaluated.

1 **DR. NETON:** All -- all lymphoma cases were re-
2 evaluated that were processed under the old
3 model. That's -- I -- I don't have the
4 specifics for your case in front of me, but
5 that's how we approached it.

6 **MR. GIOVACCINI:** Can someone double-check and
7 make sure my case doesn't requi--

8 **MR. ELLIOTT:** Your case does not require -- it
9 was reconstructed against the new model. This
10 is Larry Elliott. I'm -- I'm familiar with
11 your claim. The construction that you have in
12 your hands was reconstructed using the lymphoma
13 -- new lymphoma model.

14 **MR. GIOVACCINI:** I presented new information
15 since then, inside of this SEC envelope.

16 **MR. ELLIOTT:** Well, that's for the SEC, and any
17 new information that you proposed in your
18 closeout interview would be considered before
19 the -- the dose reconstruction report is closed
20 out.

21 **MR. RUTHERFORD:** I would like -- this is LaVon
22 Rutherford. I would like to add that, Mr.
23 Giovaccini, your -- your claim had -- is being
24 reworked at this time, but not due to lymphoma
25 but due to changes in the Technical Basis

1 Document.

2 **MR. GIOVACCINI:** And that's all. Okay.

3 **DR. ZIEMER:** Okay. We'll have further
4 discussion on this item in terms of the SEC
5 petition at the next meeting then. Thank you
6 very much.

7 **BOARD PROCEDURES ON INTERVIEWS**

8 Our next item is Board procedures on
9 interviews, and Larry, I think maybe -- do you
10 have --

11 **DR. WADE:** I think that's --

12 **DR. ZIEMER:** -- the lead on that?

13 **DR. WADE:** -- me, Paul. Lew, I -- I can do
14 this one.

15 Let me refresh your memory as to the issue and
16 give my brief report. SC&A in their review of
17 -- I think it was Procedure 92 -- interviewed
18 some people. This had to do with the
19 effectiveness of the interview process and the
20 -- the closeout interview and those manner of
21 things. SC&A recommended that the Board re-
22 interview some of the people that they had
23 interviewed because they thought that that
24 information would be valuable and useful to the
25 Board in terms of the Board's review of

1 procedures.

2 That triggered a question as to whether it was
3 appropriate for the Board to interview
4 individual claimants or not, and -- and I was
5 asked to investigate that and report back to
6 you, and that's what I'll do now.

7 We always need to start with the Board's
8 charter, and the Board's charter says, under
9 Function (b), Advise the Secretary of HHS on
10 the scientific validity and quality of dose
11 reconstruction efforts performed by this
12 program. That's your grounding in the charter.
13 The Board has taken the appropriate step that
14 in order to fulfill that function of its
15 charter, it needs to review procedures, and I
16 think all would agree that that makes sense,
17 and the Board has done well at reviewing
18 procedures. Therefore, if the Board would want
19 to interview people or gather data that went to
20 the efficacy of procedures, that would be
21 legitimate.

22 I would caution that the Board is not an
23 appeals board, and the Board should not be
24 reviewing individual cases as an appeals board.
25 But if the Board wanted to speak to someone to

1 learn about procedures and how an individual
2 was affected by procedures so the Board could
3 critique procedures, consistent with its
4 function that I just read you, that would be
5 more than reasonable.

6 The only additional caution that I would put to
7 you is that it has been the advice of HHS to
8 the Board that the Board, when it does engage,
9 engages on adjudicated cases.

10 So with those two -- with those two caveats in
11 mind, if you're talking to individuals, it
12 really needs to be adjudicated cases. If
13 you're talking to individuals for the purpose
14 of commenting upon the efficacy of procedures,
15 that's more than legitimate. You need to be
16 very clear, though, in your interview and the
17 setup for and the conduct of it, that you're
18 not functioning as an appeals board.

19 So that's my long answer to your simple
20 question.

21 **DR. ZIEMER:** Okay. Well, that -- that's the
22 answer. Board members, any questions or
23 comments for Lew on that?

24 (No responses)

25 That was basically -- did -- did that generate

1 out of your workgroup initially, Wanda?

2 **MS. MUNN:** I believe that it did.

3 **DR. ZIEMER:** I believe it did.

4 **MS. MUNN:** And this clarification is welcome.

5 It's of some concern that we even considered

6 individual Board members ought to get

7 (unintelligible) interacting with claimants.

8 That -- I think it's clear to all of us that

9 that really is not what any of us had

10 anticipated in our original charter.

11 **DR. WADE:** Wanda, we're having difficulty

12 hearing you, I'm sorry.

13 **MS. MUNN:** I'm sorry, it must be this phone.

14 Let me switch to the other one.

15 **DR. WADE:** Okay. Thank you.

16 **DR. ZIEMER:** Okay --

17 **MS. MUNN:** Is this better?

18 **DR. BRANCHE:** Yes.

19 **DR. ZIEMER:** Okay, that's good.

20 **MS. MUNN:** I won't use the other phone then.

21 **DR. ZIEMER:** That's better. Other comments or

22 questions? I don't believe any action is

23 required at this point. That was simply for

24 clarification, as I recall. Right?

25 **DR. WADE:** Right. Now the Board can decide if

1 it wants to interview these people. The first
2 question you have to ask yourself, are these
3 adjudicated cases. I don't know the answer to
4 that, but if the Board wants to proceed, then
5 now there's a path forward. It doesn't mean
6 the Board has to proceed down that path.

7 **UPDATE ON TRACKING MATRICES**

8 **DR. ZIEMER:** Yeah, right. Okay. Are we ready
9 to have an update on the tracking matrices?

10 **DR. WADE:** This is me again. This will be my
11 last long-winded harangue that you folks will
12 have to listen to. This is a relatively
13 complex one. It starts simply with the
14 matrices that I did have Zaida send out to you
15 this morning. I apologize for the -- the
16 lateness of the transmission. Material was
17 just received yesterday, but what's in the
18 matrices is not as important as the story that
19 I'm going to tell you.

20 When last we met you asked me to put my mind
21 towards committing to the Board to when we
22 could have transcripts of Board meetings posted
23 on the web site. There was talk about 30 days,
24 there was talk about 45 days. I put my mind to
25 the task and right now I think it is possible

1 for NI-- for there to be posted transcripts of
2 Board meetings, deliberations at Board
3 meetings, 45 days after the Board meeting is
4 up. But there's work yet to be done to
5 accomplish that.

6 The -- the two parts of that are getting Ray to
7 provide his materials within a 30-day time
8 frame, and Ray has been doing that. In fact,
9 we now have all of the previous Board meeting
10 transcripts from Ray. That's what we were
11 waiting for until we updated the matrix. We
12 received those the beginning of the week.

13 The second part of the dilemma is this Privacy
14 Act issue, and I'm sure you've heard the e-
15 mails and the -- the consternation over Privacy
16 Act reviews, particularly as it goes to
17 redacting the names of individuals who provide
18 comments, during public comment period or
19 during the Board meeting. This has really
20 necessitated a laborious and a time-consuming
21 process that puts in jeopardy our ability to
22 post transcripts in a timely way.

23 What I did -- again, following up on your
24 instruction -- was that I -- I got together the
25 appropriate attorneys and people, and we looked

1 at the policy of redacting individuals' names,
2 even when they said they didn't want their
3 names redacted, and we've come up with a new
4 policy that I shared with you some days ago.
5 I'll read that policy just for everyone's
6 reason, and this is titled "A Draft Policy on
7 Redaction of Board Meeting Transcripts."

8 One, if a person making a comment gives his or
9 her name, no attempt will be made to redact
10 that name.

11 Two, NIOSH will take reasonable steps to ensure
12 that individuals making public comment are
13 aware of the fact that their comments,
14 including their name, if provided, will appear
15 in the transcript of the meeting, posted on a
16 public web site. Such reasonable steps will
17 include (a) a statement read at the start of
18 each public comment period stating that the
19 transcripts will be posted and names of
20 speakers will not be redacted; (b) a printed
21 copy of the statement mentioned in (a) above
22 will be displayed on the table where
23 individuals sign up to make public comment; (c)
24 a statement such as outlined in (a) above will
25 also appear with the agenda for the Board

1 meeting when it is posted on the NIOSH web
2 site; (d) a statement such as mentioned in (a)
3 above will appear in the *Federal Register*
4 notice that announces Board and subcommittee
5 meetings.

6 Three, if an individual, in making a statement,
7 reveals personal information such as medical
8 information about themselves, that information
9 will not usually be redacted. The NIOSH FOIA
10 coordinator will, however, review such
11 revelations in accordance with the Freedom of
12 Information Act and the Federal Advisory
13 Committee Act and, if deemed appropriate, will
14 redact such information.

15 Four, all disclosure of information regarding
16 third parties will be redacted.

17 Five, if it comes to the attention of the DFO
18 that an individual wishes to share information
19 with the Board, but objects to doing so in a
20 public forum, the DFO will work with that
21 individual in accordance with the Federal
22 Advisory Committee Act to find a way that the
23 Board can hear such comments.

24 Again, I apologize for reading all of that to
25 you, but that is the policy we're proposing. I

1 would like to hear from the Board on that
2 policy if you wish to comment. Absent your
3 comment, this is the policy we would follow. I
4 think this will cut down on the rigor and the
5 time involved in Privacy Act reviews and allow
6 us to meet this 45-day requirement that I'm
7 prepared to commit to.

8 **MS. HOMOKI-TITUS:** Lew, I just want to be sure
9 that it's clear to everyone that this is a
10 policy only for the transcripts from the
11 Advisory Board meetings.

12 **DR. WADE:** Correct.

13 **MS. HOMOKI-TITUS:** Thank you.

14 **DR. ZIEMER:** As opposed to the working groups,
15 are you saying?

16 **MS. HOMOKI-TITUS:** No, I'm sorry, as opposed to
17 say a document that someone provides by sending
18 it in via mail to OCAS or something like that.

19 **DR. ZIEMER:** Oh, that has not -- is not part of
20 the public comment period.

21 **DR. WADE:** Part of the -- the Board transcript
22 or --

23 **MS. HOMOKI-TITUS:** No, it --

24 **DR. WADE:** -- working group.

25 **MS. HOMOKI-TITUS:** -- this is as it relates to

1 a FACA committee.

2 **DR. ZIEMER:** Yeah, okay.

3 **MS. HOMOKI-TITUS:** So this is -- this would
4 relate to any document that you all receive, it
5 would relate to any of your meetings. What I'm
6 saying is if someone mails a document to NIOSH,
7 this is not the same issue.

8 **DR. ZIEMER:** That's considered a public
9 document at that point anyway.

10 **DR. WADE:** We're assuming that the -- the
11 policy that I read, Paul, would apply to
12 working group meetings as well.

13 **DR. ZIEMER:** Okay. I wasn't sure what Liz was
14 referring to there.

15 Well, thi-- this certainly is a big step I
16 think toward relieving some of the concerns
17 that some of our public commenters have had
18 about the fact that they would like in fact
19 their comments to be associated with their
20 name, and in fact it helps those I believe who
21 read the comments in knowing the source of the
22 comments in terms of how they perceive and
23 evaluate those. And it does provide third-
24 party protection if -- if somebody's name is
25 brought up and it's not clear that they even

1 know that that's occurring, why, that is -- is
2 covered here.

3 Board members, I -- well, Lew, I don't think we
4 have to officially adopt this. This is -- this
5 is going to be a NIOSH or a CDC policy, I
6 guess. Is that correct?

7 **DR. WADE:** Correct, although, as always, we're
8 interested in the Board's reaction.

9 **DR. ZIEMER:** Yeah, right, right.

10 **MR. CLAWSON:** Dr. Ziemer, this is Brad. I
11 think this is a good step forward. We've heard
12 a lot of comments on this. We've had a lot of
13 people raise issues about it and so forth, and
14 I think -- I think it's (break in
15 transmission).

16 **DR. WADE:** Brad, we lost you.

17 **MR. CLAWSON:** Hello? I -- I just -- I think
18 this is a good -- I -- I feel good with it. I
19 think it'll help a lot of issues that we've had
20 in the past and I think it's a good step
21 forward.

22 **DR. ZIEMER:** Okay. Other comments, Board
23 members?

24 **DR. MELIUS:** Yes, Paul -- Melius. I generally
25 concur with that. The -- the one question I

1 would raise procedurally to be looked into and
2 maybe it would -- would be the policy already
3 or the procedure already, but it -- in cases
4 where there are issues regarding, you know,
5 some medical information that a -- a person
6 tells us at a -- in one of the public sessions
7 or something and where they -- the privacy
8 office is going back and talking to that person
9 and -- and so forth trying -- trying to work
10 out that -- that information, I think it would
11 be helpful if we could get a -- you know, a --
12 I don't know what you'd call it, an interim
13 transcript of the Board meeting or whatever
14 that would have that in -- that part of it
15 redacted while it's being worked out, rather
16 than wait till the whole process to finish up
17 because a lot of the use of this material is to
18 have a -- you know, a -- a record of the -- at
19 least an interim record of what went on
20 procedurally or to be able to look up a
21 particular issue that, you know, I don't think
22 will be affected -- the vast majority of what
23 goes on at a meeting will not be affected, so
24 it'd be useful to have that information while
25 the Privacy Act issues with some other

1 particular comments are -- are being worked
2 out.

3 **DR. WADE:** Makes sense.

4 **DR. ZIEMER:** Yeah.

5 **MR. PRESLEY:** This is Bob Presley --

6 **DR. ZIEMER:** Jim -- Bob, just one second. I
7 just want to clarify. Jim, the medical
8 information, if the person discloses it about
9 themselves it does not get redacted, as I
10 understand it on this policy.

11 **DR. MELIUS:** Right.

12 **DR. ZIEMER:** Yeah.

13 **DR. MELIUS:** Yeah, yeah.

14 **DR. WADE:** Although -- although I am -- I am
15 hedging a bit there.

16 **DR. MELIUS:** Yeah.

17 **DR. WADE:** I couldn't anticipate all the -- the
18 types of information that would be presented,
19 and I don't want to rule out the possibility
20 that some of it might go to Privacy Act
21 concerns. But in general, the procedure would
22 not be to redact information that an individual
23 provides about themselves. But I -- the
24 privacy office asked that I not close that door
25 completely because God know what could be said.

1 **DR. ZIEMER:** Yeah. And I also want to make
2 sure that everybody understands that this
3 Privacy Act issue does not address classified
4 information. There has been -- there have been
5 concerns expressed in the past that members of
6 the public have on occasion perhaps disclosed
7 classified information. Our reviewers are not
8 reviewing for classified information, as I
9 understand it. I mean they -- the off-- the
10 Privacy Act people do not get involved in that.
11 Isn't that correct?

12 **DR. WADE:** That's correct. There are people,
13 though, at -- if they have such clearances at
14 the meetings, who are duty-bound to raise this
15 as (unintelligible).

16 **DR. ZIEMER:** Yeah, yeah, if -- if they -- if
17 they know that it has occurred, but --

18 **DR. WADE:** Right.

19 **DR. ZIEMER:** -- I just want to make sure
20 everybody understands that this document per se
21 is not being reviewed for classified
22 information. It's Privacy Act information.

23 **DR. WADE:** Correct.

24 **DR. ZIEMER:** Bob Presley, you had a comment?

25 **MR. PRESLEY:** I think this is great. I think

1 this is probably going to satisfy the public.

2 **UNIDENTIFIED:** Dr. Ziemer, may I please --

3 **DR. ZIEMER:** Others?

4 **UNIDENTIFIED:** May I make two quick

5 (unintelligible), please?

6 **DR. BRANCHE:** He needs to speak up.

7 **DR. WADE:** Yeah, you need to speak up. We
8 can't identify who that is.

9 **DR. MCKEEL:** This is Dan McKeel.

10 **DR. WADE:** Dan, could you please speak up a
11 bit?

12 **DR. MCKEEL:** I'm talking as loud as I can into
13 my telephone. Now -- now is it better?

14 **DR. WADE:** Much better.

15 **DR. MCKEEL:** Okay.

16 **DR. WADE:** That was a quantum leap.

17 **DR. MCKEEL:** I'm sorry. My -- my quick comment
18 is that this is a great step in the right
19 direction. However, there are two things that
20 would save a lot of time if we could clarify
21 right now. One is that the May Board
22 transcripts have already been redacted and,
23 speaking just for myself, I certainly would
24 want those redactions removed.

25 The second point is that in that transcript not

1 only were the public comments redacted, but
2 also the SEC for Dow presentation was redacted,
3 and I certainly would like that restored as
4 well.

5 And the third thing is, although this policy
6 has been announced today, far as I know it
7 hasn't been circulated. So could it please be
8 posted on the OCAS web site?

9 **DR. WADE:** Thank you. All -- we'll take all of
10 your questions under advisement. I did want to
11 share it with the Board first, Dr. McKeel, and
12 it will be our intention to make it more public
13 now.

14 **DR. MCKEEL:** Thank you.

15 **MS. MUNN:** This is Wanda. First, in response
16 to a comment that was just made, it was my very
17 clear understanding that the policy we are
18 looking at refers only to public comment, not
19 to any other portion of our transactions. Is
20 that not correct?

21 **DR. WADE:** No, it would apply to all of our
22 transactions -- all of the public part of our
23 meetings, be it public comment or open Board
24 deliberation.

25 **DR. BRANCHE:** Or working group deliberations.

1 **DR. WADE:** Or working group deliberations. So
2 if -- for example, during a working group if an
3 individual get up and say I'm Joe Smith and,
4 you know, I worked at Whatchamacallit facility,
5 we would not redact that.

6 **MS. MUNN:** I think you've done a fine job with
7 putting these basic thoughts together, Lew. I
8 would ask that item four be presented in bold
9 letters wherever we display these because
10 anyone who offers any information, including
11 any information that we discuss in session,
12 appears to me to be clearly of concern if there
13 are third-party issues involved here.

14 **DR. WADE:** No question.

15 **MS. MUNN:** So it's easy to miss that particular
16 statement -- even though it's very clear, it's
17 easy to miss it when it's just simply in
18 ordinary type with the rest of the statements.

19 **DR. WADE:** I understand.

20 **DR. ZIEMER:** Okay, any other questions or
21 comments?

22 **DR. WADE:** Now with this policy in place, I
23 will come to the January meeting and you'll
24 have an ability to see how we're doing relative
25 to the posting of materials. Hopefully we'll

1 have a good report to give you. If not, then
2 you can comment and we can, you know, have our
3 discussions about the appropriateness of 45
4 days or shorter. I'd like to achieve that and
5 then pursue shorter, but in order to realize
6 that, I needed to go through this step it
7 seemed to me.

8 **DR. ZIEMER:** Lew, the materials nonetheless
9 still have to go through the trans-- or the
10 redaction office process in order to catch
11 these third-party issues. Is that correct?

12 **DR. WADE:** Well, I -- we're trying to work on
13 procedures to short-circuit that --

14 **DR. ZIEMER:** Yeah.

15 **DR. WADE:** -- where possibly Christine or I, or
16 another individual, could have the
17 responsibility --

18 **DR. ZIEMER:** You might be able to --

19 **DR. WADE:** -- in real time --

20 **DR. ZIEMER:** -- spot those right at the front
21 end and -- where there are no third party
22 issues and so --

23 **DR. WADE:** I mean that -- that's a necessary
24 step --

25 **DR. ZIEMER:** -- yeah, that would be good if we

1 could do that.

2 **DR. WADE:** Right. That's -- that's our plan,
3 and we're going to try -- try out our plan over
4 the next workgroup meetings and see how it
5 goes.

6 **DR. BRANCHE:** Including this one.

7 **DR. WADE:** Including this one.

8 **DR. ZIEMER:** Incidentally, I -- I think this
9 transcript status matrix, if you want to call
10 it a matrix, is very helpful. Since we have so
11 many workgroups now meeting and it's -- it's
12 great to be able to keep track of what's --
13 what's out there, what's down the line and so
14 on, so I found it very helpful.

15 **DR. WADE:** Yeah, and don't forget, we also have
16 matrices we're tracking on --

17 **DR. ZIEMER:** Yeah, right, but this--

18 **DR. WADE:** -- site profile reviews and SEC
19 petition reviews. I didn't send them out
20 'cause that's too --

21 **DR. ZIEMER:** No, no, there's more and more
22 things to track, so we appreciate it.

23 Any final comments on that issue?

24 (No responses)

25 **SUBCOMMITTEE UPDATE ON THE 4TH AND 5TH SETS AND THE**

1 **FIRST ONE HUNDRED CASES**

2 Okay, we're ready to go to the update on the
3 fourth and fifth sets. Mark Griffon, I can
4 throw that in your lap?

5 **MR. GRIFFON:** Yeah, I -- I can give a -- I
6 think a fairly succinct report on this. We had
7 a technical phone call meeting with SC&A and
8 NIOSH just to resolve some of the standing
9 issues on the fourth and fifth matrix, and we
10 are even closer I think to completing all
11 those, with the exception possibly of the one
12 that Kathy Behling alluded to, the Huntington -
13 - we might just have to defer that somehow to,
14 you know, a -- a review of the Huntington
15 matrix under that -- under the DR task or what-
16 - we still have to work that out. But we are
17 closer to final resolution. I think there was
18 -- when we left the technical phone call we had
19 a few remaining actions for SC&A and for NIOSH,
20 but they're sharing those documents and -- and
21 we're hoping to be able to close both those
22 matrices out in the -- in the next meeting --
23 in January meeting.

24 And as far as the first 100 case report, we are
25 pla-- I -- I have actually started drafting a -

1 - a draft of a summary type of report, and I'm
2 hoping to -- and I expect to be able to bring a
3 draft to the subcommittee in the January
4 meeting for discussion, and actually to provide
5 it to the subcommittee before the -- we got --
6 get out to Vegas, at least a week prior. That
7 way people will have a chance to redline it and
8 not come with edit in hand, and hopefully the
9 subcommittee can -- can work on that report.
10 So I -- I guess that's -- that's the entirety
11 of the update.

12 **DR. ZIEMER:** Okay, very good. Questions for
13 Mark, or comments?

14 (No responses)

15 Okay, thank you very much. We appreciate the
16 work of the subcommittee. It's an ongoing
17 important activity.

18 **WORK GROUP UPDATES**

19 Workgroup updates, I guess we can go right down
20 the list here.

21 **DR. BRANCHE:** That means -- this is Christine -
22 - we would start with Rocky Flats.

23 **MR. GRIFFON:** Rocky Flats -- I just put myself
24 back on mute, sorry. The Rocky Flats
25 workgroup, we had a meeting yesterday of the

1 Rocky Flats workgroup. We haven't met in a
2 while, but for those that have not seen these,
3 the *Rocky Mountain News* has ran several
4 articles -- I think there's even one that came
5 out today -- today on the question of -- really
6 of implementing the SEC class and the question
7 of whether all the buildings -- or -- or all
8 the workers who may have been exposed -- or
9 should have been monitored for neutron
10 exposures are actually being captured in this -
11 - in the process of implementing this SEC
12 class. The artic-- the newspaper articles
13 raised some questions and we just wanted a
14 follow-up workgroup meeting yesterday.
15 Since then -- a few actions came out of that
16 phone call meeting yesterday. One was to
17 follow up with the reporter. I've done that --
18 we did that right away yesterday and Wanda
19 joined me on the phone call. And then I -- I
20 also offered that we should do a technical
21 phone call meeting with NIOSH and with the
22 source of this data which showed up in the
23 *Rocky Mountain News*, which actually came from
24 the University of Colorado study. And we are -
25 - I'm planning -- I haven't set a time for that

1 technical phone call yet. I've got to contact
2 Margaret Ruttenber, who is one of the lead
3 researchers on that study. She has agreed that
4 -- to work with NIOSH on the phone call.
5 Basically we want to understand why there's
6 apparent differences that were presented in the
7 newspaper article, and actually, you know, to -
8 - to ma-- to see whether it affects the current
9 implementation of the class. So we're -- we're
10 trying to sort some of this out and make sure
11 that everything is -- is on the right course.
12 And you know, I -- and we've -- part of the
13 reason for the technical phone call is that the
14 University of Colorado had some -- apparently
15 used the same data, but they -- they may have,
16 in the process of their research, taken the raw
17 data and -- and done some different sorts of
18 queries with the data and -- and you know, so
19 we want to understand the numbers that showed
20 up in this newspaper article where -- how
21 they're being derived and basically match those
22 with the data we've been looking at all
23 throughout the Rocky Flats workgroup process
24 and -- and then understand the impact on
25 implementing the class, if there is any impact

1 on the current way the class is being
2 implemented. So that's sort of where we left
3 it with the workgroup phone call yesterday.
4 And you know, I guess we'll just -- we'll --
5 after the technical phone call we'll -- if --
6 if need be, we can reconvene our workgroup or
7 else, you know, I'll report back from -- to the
8 full Board the -- the outcome of the technical
9 phone call. And that's -- that's the status of
10 the Rocky Flats workgroup. That's all I had,
11 Paul.

12 **MS. HOMOKI-TITUS:** Dr. Melius, this is Liz
13 Homoki-Titus. I'm sorry to interrupt. Mark,
14 have you all decided not to include DOL, even
15 though DOL implements the class?

16 **MR. GRIFFON:** I -- I'm sorry, I didn't -- I --
17 I -- yes, DOL and NIOSH and -- and -- along
18 with the University of Colorado. I'm sorry,
19 Liz, you're correct.

20 **MS. HOMOKI-TITUS:** That's all right, I just
21 wanted to make sure.

22 **MR. GRIFFON:** That was part of the action,
23 yeah, was to include DOL --

24 **MS. HOMOKI-TITUS:** That is -- yeah.

25 **MR. GRIFFON:** -- they're in -- yeah.

1 **MS. HOMOKI-TITUS:** Totally. That's their role,
2 not ours.

3 **MR. GRIFFON:** Yep.

4 **MS. HOMOKI-TITUS:** Okay, thanks.

5 **DR. BRANCHE:** Dr. Ziemer, Nevada Test Site
6 would be next.

7 **MR. PRESLEY:** This is Bob Presley. The Nevada
8 Test Site is presently going through the two
9 summaries on -- on the responses to SC&A's
10 latest comments. Mark sent those out. Each of
11 the working group members have them. We I
12 believe have a conference call set up, if I'm
13 correct here on my dates, on the 19th at 11:00
14 o'clock to discuss our findings before we go to
15 Las Vegas in January. We are still holding the
16 time open on the 7th for a possible face-to-
17 face working group meeting before the Board
18 meeting in January.

19 **DR. ROESSLER:** Bob, this -- this is Gen.

20 **MR. PRESLEY:** Yes.

21 **DR. ROESSLER:** So there is not a definite
22 workgroup meeting set up for -- in conjunction
23 with our Board meeting there.

24 **MR. PRESLEY:** What we're trying to do, Gen, is
25 if we can -- if we could get a consensus on

1 what we need to do on the 19th, then I don't
2 see a -- a need for a Board (sic) meeting on
3 the 7th. But if we go through the 19th and we
4 still don't have a consensus of what we need to
5 do, then we're going to have to try to -- to
6 get together before the Board meeting and
7 decide whether we go one way or the other on
8 this thing.

9 **DR. ROESSLER:** Okay. I already have
10 reservations made, as you know, but I think
11 I'll just stick with them and wait -- we'll
12 wait until after the phone call.

13 **MR. PRESLEY:** Okay. Is that phone call date
14 all right with everybody? I -- I've -- I've
15 got it down for the 19th at 11:00.

16 **MS. MUNN:** Yeah, that's what my calendar tells
17 me.

18 **MR. PRESLEY:** Yeah.

19 **DR. ROESSLER:** Right. Okay.

20 **MR. CLAWSON:** Robert, this is Brad. I've got
21 it down, but I didn't have the start time on
22 it, and it'd be Eastern Time, I'm sure.

23 **MR. PRESLEY:** Yes, 11:00 o'clock --

24 **MS. MUNN:** 11:00 Eastern time.

25 **MR. PRESLEY:** -- Eastern Standard Time.

1 **MS. MUNN:** And we -- we had said with respect
2 to the face-to-face on the 7th that we'd start
3 at noon.

4 **MR. PRESLEY:** Yes, and I -- I just sent John
5 Mauro a message on that the other day that if
6 at all possible I'd like to start before that.
7 Now Wanda, you -- we have a meeting on the
8 procedures. Do you think that that will last
9 till noon?

10 **MS. MUNN:** It may. And that -- you know, our
11 subcommittee usually meets --

12 **MR. PRESLEY:** Right.

13 **MS. MUNN:** -- that morning. Mark, we are or
14 are not planning a subcommittee meeting Monday
15 the 7th of January?

16 **MR. GRIFFON:** Yes, we are. We can probably
17 work out the time, but --

18 **MS. MUNN:** Yeah.

19 **MR. GRIFFON:** -- I'm hoping to be in a position
20 to close out matrices and present a draft for
21 the 100 -- first 100 cases, so --

22 **MS. MUNN:** Yeah.

23 **MR. GRIFFON:** -- we may -- I may want to leave
24 a fair amount of time there, if possible.

25 **MS. MUNN:** Yeah, I had anticipated a half a day

1 there on --

2 **MR. GRIFFON:** Yeah.

3 **MS. MUNN:** -- on Monday the 7th.

4 **MR. PRESLEY:** Are we still planning on starting
5 the meeting at 1:00 or 1:30 on the...

6 **DR. BRANCHE:** That's correct.

7 **MR. PRESLEY:** Okay. I -- I would love to -- if
8 we have to do it, I'd love to have more than an
9 hour there, if we possibly can. So Mark, maybe
10 you and Wanda and I can talk and see if we
11 can't come up with a little bit better schedule
12 for the 7th.

13 **DR. WADE:** With the wisdom of Solomon.

14 **MR. PRESLEY:** Thank you, Lew.

15 **DR. BRANCHE:** So -- this is Christine. So the
16 subcommittee, procedures and Nevada Test Site
17 site profile, all three of you would like to
18 have meetings on -- on January 7th?

19 **MR. PRESLEY:** That's what I -- that's what I
20 hear.

21 **MS. MUNN:** I am not certain about procedures,
22 but that -- that depends on what happens with
23 our face-to-face.

24 **DR. BRANCHE:** So --

25 **MR. PRESLEY:** On the 11th?

1 **DR. BRANCHE:** Is that the right way to do it?

2 **DR. WADE:** (Unintelligible)

3 **DR. MELIUS:** Yeah, hi. The -- John Mauro sort
4 of jumped the gun a little bit before. The --
5 SC&A has just provided to me as of yesterday a
6 -- a -- sort of a draft memo that sort of tries
7 to outline a schedule for how we would go about
8 reviewing the SEC petition and related issues
9 in -- in -- in the site profile, and it
10 outlines sort of what the issues are they see
11 in the -- with the SEC evaluation. And we're
12 actually getting together, doing a very brief
13 meeting myself, with Arjun and then with some
14 of the -- Sam Glover and I believe Jim Neton
15 from NIOSH on Thursday before our other
16 workgroup meeting to go over it with NIOSH and
17 -- and see -- what we're trying to do is come
18 up with a schedule of how we would deal with
19 the -- the Hanford SEC. It's a big petition,
20 covers a lots of different issues. There are
21 some we may be able to move on very quickly.
22 There are other issues related to the fact that
23 NIOSH is still revising some of the procedures
24 and so forth. So it would -- we're trying to
25 get together and see if we can -- can work out

1 a schedule with that.

2 I would add that this is further complicated by

3 the -- as I understand it, by the federal

4 budget issue, which is making it difficult to

5 access some of the records that we need to be

6 able to review whether SCA and -- and NIOSH

7 needs to be able to access at -- at Hanford.

8 And so the DOE says they do not have adequate

9 funding for that. I know Larry's working with

10 them trying to work something out, but there

11 are issues that NIOSH needs access in order to

12 be able to move on and complete what they're

13 doing at the same time SC&A needs access to be

14 able to do their job in terms of the

15 evaluation. So we'll also be talking about

16 that on -- on Thursday and trying to -- to work

17 out something with this.

18 We were hoping, and I'm not sure we'll be able

19 to do it, but if possible by the January

20 meeting to be able to at least move on with the

21 part of the SEC that NIOSH (break in

22 transmission) forward on, but we still need to

23 be able to see if we'll have enough access to

24 information in a timely fashion to be able to

25 do that.

1 **DR. ZIEMER:** Okay.

2 **DR. BRANCHE:** That would make the Savannah
3 River Test (sic) Site profile the next one.

4 **DR. ZIEMER:** That -- Mark?

5 **MR. GRIFFON:** Yeah, we have not met. We had
6 one meeting a while ago, but we need to
7 reconvene soon. It's just been a matter of
8 priorities at this point, focusing on some SECs
9 and Savannah River's been on the back burner a
10 little bit, so nothing to report.

11 **DR. BRANCHE:** The SE-- Dr. Ziemer, the SEC
12 issues group, including the 250-day issue, and
13 preliminary review of 83.14 SEC petitions would
14 be next.

15 **DR. ZIEMER:** Yeah, Melius. Jim?

16 **DR. MELIUS:** Yeah, I had to get my mute off
17 again. Yeah, we had a conference call about a
18 week ago or so of -- of the workgroup to
19 discuss some information that'd been prepared
20 by SC&A and thought it was a helpful workgroup
21 meeting. The next steps will be that -- I'm
22 actually waiting to hea-- get some reaction
23 from some of the other workgroup members to
24 some of the ideas and so forth we discussed at
25 the meeting. I will then -- took on drafting a

1 report that will look at sort of -- be
2 guidelines for the use of -- for the review of
3 the use of surrogate data and a very fast exit
4 dose re-- reconstruction and SEC evaluation.
5 This would be a report that would be similar to
6 the set of guidelines that we developed for SEC
7 evaluation review. Plan is to have that -- a
8 draft of that circulating within the workgroup
9 within the next few weeks, and then probably
10 another conference call just before our -- the
11 week before our meeting in Nevada, and we hope
12 to have something to be able to discuss with
13 the entire Board in -- at the Neva-- the Nevada
14 meeting.

15 **DR. ZIEMER:** Okay.

16 **DR. BRANCHE:** Dr. Ziemer, the subcommittee on
17 dose reconstruction is next.

18 **DR. ZIEMER:** No, we've already heard from Mark.

19 **DR. BRANCHE:** Okay, so the SEC --

20 **DR. ZIEMER:** So we're ready for -- and -- and
21 Lockey's work is completed so -- and he's not
22 on the line -- on SEC petitions. The conflict
23 of interest group is inactive at the time, so I
24 guess we're up to procedures review. Right?

25 **DR. BRANCHE:** That's -- that's what my

1 bookkeeping says.

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

3 **MS. MUNN:** As you know, this is a very complex
4 and convoluted process that we're involved in
5 in procedures. At the current time we are
6 doing very well with respect to resolution of
7 the significant number of outstanding issues
8 that we started with. On procedures of course
9 more get added as the procedures change, and as
10 suggestions that come out of -- of earlier
11 processes are incorporated into the living
12 documents that we call our procedures.
13 The major effort at this moment is in
14 completely redoing our method of recording and
15 tracking this multitude of individual findings
16 that we have. Our matrices have become so
17 complex and our terminology has become unclear
18 in some cases so that we have made an extreme
19 effort -- our contractor is currently working
20 very hard to provide an entirely new format for
21 how we are going to keep track of what we're
22 doing. Kathy Behling has been particularly
23 helpful in helping to lay out suggestions for
24 what these tracking sheets are going to look
25 like.

1 Rather than operate from a matrix like we have
2 in the past, what we will be doing is operating
3 from individual sheets indicating where --
4 first -- first we will -- we'll categorize
5 these materials alphanumerically so that it is
6 very easy for us to get to the specific
7 procedure that we're dealing with. And then we
8 will have segregate pages of findings behind
9 those particular tabs. As we clear these items
10 they will be removed from our working notebook
11 and go into essentially a library file of
12 material that will make it possible for us to
13 always go back to the record and see what has
14 transpired with respect to any given finding.
15 This is going to take us a little while to
16 accomplish, but SC&A has been moving forward on
17 it very quickly and we anticipate being able to
18 get that into place within the next few weeks.
19 As we've already mentioned, we have a face-to-
20 face meeting coming up very shortly, and at
21 that face-to-face meeting in Cincinnati we will
22 be looking at some of these new formats for the
23 first time.
24 We also intend to begin to address the issues
25 surrounding Procedure 92 -- which, as you all

1 know, is of great interest to most of the sites
2 and which is going to be significant for us in
3 addressing it. We have a matrix devised
4 already for that specific Procedure and will be
5 working to it when we next meet.

6 **DR. ZIEMER:** Okay, very good.

7 **DR. BRANCHE:** Blockson Chemical SEC petition is
8 next.

9 **DR. ZIEMER:** That's also Ms. Munn.

10 **MS. MUNN:** That's -- we are very pleased to
11 report that every issue that was brought
12 forward has now been addressed. All of the
13 issues have been resolved. There are white
14 papers substantiating the findings in each of
15 those cases. We will have the white papers
16 available for all who want to review them, well
17 in advance of the meeting in Las Vegas. It is
18 our hope that at Las Vegas -- it is our intent
19 at the Las Vegas meeting to declare that the
20 issues have been adequately resolved. We are
21 willing at that time to dissolve this
22 particular working group and stand ready to
23 hear the recommendations with respect to this
24 site.

25 **DR. ZIEMER:** Thank you.

1 **DR. BRANCHE:** Fernald site profile and SEC
2 petition.

3 **DR. ZIEMER:** Brad?

4 **MR. CLAWSON:** Yes, can you hear me okay?

5 **DR. ZIEMER:** Yes.

6 **MR. CLAWSON:** Yes, we met earlier this month.
7 We -- SC&A, been working with them, and we
8 finally got through the complete matrix on
9 this. We are awaiting from -- NIOSH is
10 performing a white paper for us and we're also
11 waiting on a tiger team interview that went on
12 at the site which Chew and Associates were
13 going to get back with us on, and we're
14 proceeding on forward. We don't have a time
15 for the next meeting due to waiting for the
16 white paper from NIOSH at this time.

17 **DR. ZIEMER:** Okay. Chapman Valve, we've
18 already discussed that today. I don't know
19 that we have anything further on that. Any of
20 the subcommittee -- or the workgroup members
21 have any comment?

22 Apparently not.

23 Surrogate data, Jim?

24 **DR. MELIUS:** I must have misheard you before.
25 I actually gave that report. I think --

1 **DR. ZIEMER:** Yeah, I was doing a double-take,
2 Jim, when you said that the SEC group met last
3 week, and I thought oh, my, I must have missed
4 a meeting.

5 **MS. MUNN:** Where were you?

6 **DR. ZIEMER:** Yeah. Well, I figured out it must
7 have been the surrogate data group.

8 **DR. MELIUS:** But we used your credit card so
9 (unintelligible).

10 **DR. ROESSLER:** I was in the same situation. I
11 thought oh, no, I'm so busy I missed something,
12 but --

13 **DR. MELIUS:** I must have misheard.

14 **DR. ROESSLER:** So we're looking now for the
15 250-day (unintelligible) --

16 **DR. MELIUS:** 250 days, we are meeting on
17 Thursday of this week in Cincinnati and we'll
18 be reviewing two reports from SC&A on that
19 issue and hopefully we'll have something to
20 report back at the January meeting.

21 **DR. ZIEMER:** Right. Very good.

22 **DR. BRANCHE:** Worker outreach is next.

23 **DR. ZIEMER:** That would be Mike Gibson.

24 **MR. GIBSON:** Yeah, Paul, this is Mike. On this
25 working group over the last couple of months

1 some of the members and I have been attending
2 various types of worker outreach meetings that
3 NIOSH puts on and just getting a feel for the
4 difference in the meetings, how they're
5 conducted, and we're going to hopefully some --
6 during some down time and the January meeting
7 the workgroup members can get together and try
8 to look at their schedules and see if we can't
9 set up a meeting, actually sit down and get
10 together and see where we need to go with this
11 sometime in January.

12 **DR. ZIEMER:** Very good. Mike, do you
13 anticipate that you would prepare some kind of
14 evaluation of what you've seen so far to...

15 **MR. GIBSON:** I'd probably like to wait till the
16 group gets together because --

17 **DR. ZIEMER:** Yeah.

18 **MR. GIBSON:** -- some of the different members
19 went to some of the different meetings.

20 **DR. ZIEMER:** Yeah, okay. Very good. Thank
21 you.

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

23 **DR. ZIEMER:** That would be Gen Roessler.

24 **DR. ROESSLER:** Okay, we had our first workgroup
25 meeting -- first and only workgroup meeting on

1 March 26th, 2007. That transcript is on the
2 OCAS web site. At that meeting we assigned
3 some tasks to NIOSH to look at. The primary
4 one was to look further into bioassay data. I
5 have learned recently that we're going to get
6 the report from NIOSH on November 30th. And
7 because that appears -- if we get it then,
8 that'll give time for the workgroup and SC&A to
9 go over it and be prepared for another
10 workgroup meeting in Las Vegas. So I have set
11 this up for January 8th from 8:00 to 10:00
12 o'clock. And unless I hear differently now
13 from John Mauro or from somebody on the
14 workgroup, that's -- or from somebody from
15 NIOSH, that -- that is the plan.

16 **DR. ZIEMER:** And you may be competing with some
17 other workgroups, it sounds like.

18 **DR. BRANCHE:** Not on the 8th.

19 **DR. ZIEMER:** Oh, that's the 8th, okay.

20 **DR. ROESSLER:** In fact, what we did at our last
21 Board meeting is I negotiated with Mark to have
22 the time from 8:00 to 10:00 and his
23 subcommittee would then meet -- I think you
24 agreed, Mark -- from 10:00 to noon?

25 **MR. GRIFFON:** I'm sure I probably agreed.

1 **MS. MUNN:** I thought we were going to -- I
2 thought the subcommittee was meeting on the
3 7th.

4 **DR. BRANCHE:** Right.

5 **MR. GRIFFON:** Yeah.

6 **DR. ZIEMER:** Well, you -- you various chairmen
7 will have to work that out.

8 **MS. MUNN:** Yeah, and Gen, you're meeting on the
9 8th. Right?

10 **DR. ROESSLER:** We're planning to meet, the
11 Linde workgroup, on January 8th from 8:00 to
12 10:00 in Las Vegas.

13 **MS. MUNN:** Yeah.

14 **MR. GRIFFON:** Yeah, so that doesn't conflict
15 with me now, right.

16 **DR. ROESSLER:** Having heard no objections to
17 that, we'll go ahead and set that up.

18 **DR. ZIEMER:** Okay, very good.

19 **DR. BRANCHE:** And then the last one is LANL
20 site profile and SEC petition.

21 **DR. ZIEMER:** That would be Mark.

22 **MR. GRIFFON:** Yeah, and we -- we have not met,
23 as was mentioned earlier, and one of the -- I
24 have to follow up with NIOSH probably on this,
25 but one of the reasons we haven't met is I

1 think there is still an outstanding question on
2 the later time period described in the SEC
3 petition and the evaluation report, and I think
4 NIOSH was doing further work on that later time
5 period. So we've kind of held off on having
6 our meeting until that was completed and...

7 **DR. ZIEMER:** Do we know at this point, Larry or
8 Jim or LaVon, has that issue been settled yet?

9 **MR. RUTHERFORD:** This is LaVon Rutherford. No,
10 the issue has not been settled yet. The -- the
11 settling that issue is -- will be with the
12 issuance of the revised site profile --

13 **MR. GRIFFON:** That's what I thought, yeah.

14 **MR. RUTHERFORD:** -- had issues with -- you
15 know, with -- resource issues that Larry may
16 want to comment --

17 **MR. GRIFFON:** Right.

18 **MR. RUTHERFORD:** -- or somebody else may want
19 to --

20 **MR. GRIFFON:** Right.

21 **MR. RUTHERFORD:** -- comment on it, that slowed
22 that process down.

23 **DR. ZIEMER:** Thank you.

24 **MR. GRIFFON:** And so we -- we -- yeah, we felt
25 it was no reason to meet until we had a revised

1 site profile and -- yeah, something in front of
2 us to --

3 **DR. ZIEMER:** Yeah.

4 **MR. GRIFFON:** -- discuss.

5 **DR. ZIEMER:** Okay. Christine, I think that
6 completes our list.

7 **DR. WADE:** That's it.

8 **BOARD WORKING TIME**

9 **DR. ZIEMER:** Thank you very much. We have now
10 Board working time.

11 **DR. WADE:** The only issue, Paul, that I had
12 binned there, and Dr. Melius has broached it
13 briefly, was this issue about DOE's funding
14 shortfall and its impact upon the ability to
15 procure Hanford data. I don't know if there's
16 anything else that needs to be said to that.
17 Dr. Melius asked that we discuss that on this
18 call. Jim, do you want to discuss it more or
19 have you done what you needed to do?

20 **DR. ZIEMER:** Jim, are you on mute?

21 **DR. MELIUS:** No -- well, the mute button wasn't
22 working -- mute off button. Yeah, I -- I don't
23 think there's any further need to disc--
24 discuss it right now. I mean I think we're not
25 (break in transmission) think there's not much

1 we can do to get (break in transmission) --

2 **DR. ZIEMER:** Can't do much about it at the
3 moment.

4 **DR. MELIUS:** -- get the (break in transmission)
5 passed at this point in time.

6 **DR. ZIEMER:** Yeah.

7 **DR. MELIUS:** And I think hopefully we -- when
8 we meet briefly Thursday morning we'll be able
9 to discuss it and figure out -- I mean it's
10 just a very real conflict and it may just serve
11 to delay things. I think we'll try to get it
12 worked out but (break in transmission) to see
13 what happens.

14 **DR. WADE:** That was the only --

15 **MR. ELLIOTT:** This is Larry Elliott. I would
16 offer that a week ago we talked with DOE folks
17 and the Hanford point of contact. We had John
18 Mauro and some of his folks on the line. In
19 that conversation we agreed to provide SC&A a
20 list of our search indices and key words so
21 that they could avail themselves of that. We
22 also I believe have set up a -- a visit -- some
23 of the staff here at OCAS are going to go out
24 to Hanford and visit the archives folks there
25 and look at some of the boxes that have been

1 retrieved and we -- we -- I believe we've
2 included in that invitation SC&A to -- to
3 participate in the -- any review that goes on
4 in that day. So we're -- we're in constant
5 communication with DOE about this and trying to
6 prioritize the work for them so that -- that
7 both the NIOSH effort and the SC&A review
8 effort move forward as -- as quickly as
9 possible. But the -- the constraints are due
10 to continuing resolution and resource
11 constraints associated with that, so...

12 **DR. ZIEMER:** Thank you, Larry. Okay, I -- is
13 there any other issue or issues that we need to
14 address at this time?

15 (No responses)

16 Apparently not. If not, then we are ready to
17 adjourn.

18 **MS. MUNN:** We're not going to do any extension
19 of our existing calendar. Right?

20 **DR. ZIEMER:** I don't think we were planning to
21 today.

22 **DR. WADE:** No, we're extended out pretty far.
23 I mean I -- I'll have --

24 **DR. BRANCHE:** February, 2009.

25 **DR. WADE:** Yeah, we're through February of

1 2009. I'll have Zaida send out the list if --
2 if everyone needs to see it again, but I think
3 we're -- we're well scheduled out.

4 **DR. ZIEMER:** Yeah, we're -- we're --

5 **MS. BEACH:** Lew, this -- this is Josie. Could
6 you have Zaida send that out, 'cause I know we
7 made some chan-- final changes at the last
8 meeting. I want to make sure I have them
9 correctly.

10 **DR. ZIEMER:** Have the right dates.

11 **DR. ROESSLER:** I'd like it, too, so maybe she
12 should send it.

13 **DR. ZIEMER:** Just resend it to everybody, make
14 sure we have the right dates.

15 **DR. WADE:** Zaida, are you on the line?

16 **MS. BURGOS:** Yes.

17 **DR. WADE:** Okay, would you take that as an
18 action and to -- to resend out the future Board
19 meeting dates out through 2009 to everyone?

20 **MS. BURGOS:** I will.

21 **DR. WADE:** Thank you.

22 **MS. BURGOS:** You're welcome.

23 **MS. MUNN:** And as long as we're sending things
24 out, I still have not received those -- all of
25 those press releases from the Denver paper, if

1 there's -- if there's someone who can send
2 those to me, especially if there-- I understand
3 there's a new one now, even newer than the
4 24th, and I -- I haven't seen the 24th and
5 certainly haven't seen the brand new one.

6 **DR. ROESSLER:** Are you speaking of the *Rocky*
7 *Mountain News*?

8 **MS. MUNN:** Yes.

9 **DR. ROESSLER:** I -- I just went on the web site
10 and I found both the one from yesterday and the
11 24th.

12 **MS. MUNN:** All right, if you want us to do that
13 individually, I can do that.

14 **DR. ROESSLER:** Oh, okay.

15 **MS. MUNN:** I -- I had just assumed that since
16 most of us don't check papers -- newspapers
17 near the sites that perhaps someone had them
18 already electronically and could forward them,
19 but I'll -- I'll do that. Not to worry.

20 **DR. ROESSLER:** Okay.

21 **DR. ZIEMER:** Any other issues?

22 **DR. ROESSLER:** That was the *Rocky Mountain News*
23 web site.

24 **MS. MUNN:** Yes, it was.

25 **DR. ROESSLER:** Yeah.

1 **DR. ZIEMER:** Okay. If not, then we'll declare
2 the meeting adjourned. Thank you, everybody.

3 **DR. WADE:** Thank you all very much.

4 **DR. BRANCHE:** Thank you.

5 **DR. WADE:** Thank you, Paul.

6 **DR. ZIEMER:** Goodbye.

7 (Whereupon, the meeting was adjourned at 2:40
8 p.m.)

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CERTIFICATE OF COURT REPORTER**STATE OF GEORGIA****COUNTY OF FULTON**

I, Steven Ray Green, Certified Merit Court Reporter, do hereby certify that I reported the above and foregoing on the day of Nov. 27, 2007; and it is a true and accurate transcript of the testimony captioned herein.

I further certify that I am neither kin nor counsel to any of the parties herein, nor have any interest in the cause named herein.

WITNESS my hand and official seal this the 21st day of December, 2007.

STEVEN RAY GREEN, CCR, CVR-CM
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