**THE SUBCOMMITTEE FOR DOSE RECONSTRUCTION REVIEW
OF THE
ADVISORY BOARD ON RADIATION AND WORKER HEALTH
NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH
CENTERS FOR DISEASE CONTROL AND PREVENTION**

**Summary Minutes of the Third Meeting
April 11, 2007**

The Third Meeting of the Subcommittee for Dose Reconstruction Review (the subcommittee) of the Advisory Board on Radiation and Worker Health (ABRWH or the Board) was held at the NIOSH offices in Cincinnati, Ohio on April 11, 2007. The meeting was called to order by **Dr. Lewis Wade**, the Designated Federal Official, Centers for Disease Control and Prevention's (CDC) National Institute for Occupational Safety and Health (NIOSH), the agency charted with administering the ABRWH. These summary minutes, as well as a verbatim transcript certified by a court reporter, are available on the internet on the NIOSH/Office of Compensation Analysis and Support (OCAS) web site located at www.cdc.gov/niosh/ocas.

Those present included the following:

Subcommittee Members:

Mr. Mark Griffon, Chair; Mr. Michael Gibson (telephonically); Dr. John Poston; Ms. Wanda Munn.

Designated Federal Official: Dr. Lewis Wade, Executive Secretary.

Federal Agency Attendees:

Department of Health and Human Services:

Representing NIOSH: Mr. Dave Allen, Mr. Larry Elliott, Mr. Stuart Hinnefeld; Representing the Office of General Counsel: Ms. Liz Homoki-Titus, Ms. Emily Howell (telephonically).

Contractors:

Dr. Hans Behling, Ms. Kathy Behling (telephonically); Dr. John Mauro, Sanford Cohen & Associates (SC&A).

Ms. Liz Brackett, Mr. Mutty Sharfi, Mr. Scott Siebert, Oak Ridge Associated Universities (ORAU).

Other Participants:

Mr. Jim Key, United Steel Workers, Paducah, Kentucky.

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Opening Remarks

Dr. Lewis Wade,
NIOSH

Dr. Wade opened the meeting by thanking everyone for their attendance, after which he announced the subcommittee's chair and individual members. Attendees were asked to introduce themselves and the entity they represent, first around the table and then those participating by telephone. Reminding everyone to observe proper phone etiquette throughout the day for the benefit of the court reporter and preparation of a clear transcript, **Dr. Wade** turned the meeting over to the subcommittee chair, **Mr. Mark Griffon**.

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Agenda Outline

Mr. Mark Griffon,
Subcommittee Chair

Mr. Griffon announced that, in absence of expected written materials, the fourth set of cases would not be reviewed as planned. However, NIOSH and the ORAU team would give an update on actions and perhaps clarify technical aspects of the task.

A first preliminary review of the fifth set of cases is planned, as well as a discussion of the dose reconstruction guidelines, the DR templates used by dose reconstructors for certain sites.

As an agenda item for the May subcommittee meeting, **Mr. Griffon** proposed a discussion of the blind and advanced review protocols. **Dr. Wade** agreed that could be done the morning of May 2, 2007.

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Individual Dose Reconstruction Review
Fourth Set of Cases

Mr. Griffon acknowledged SC&A had just received the updated matrix for the fourth set this morning, but asked if they could quickly scan to

see if the resolution column prepared by NIOSH agreed with their understanding from the previous discussions.

Dr. Hans Behling, SC&A, commented that this fourth set was the first time best-estimate dose reconstructions were reviewed. In doing so, some cases were noted where the POCs came close to a point where correction of deficiencies might bring the person over the 50 percent level. **Dr. Behling** indicated his hope was that NIOSH's action would be to address those findings and then report back that they had essentially reworked the entire case, showing the change in the POC, if any.

Ms. Homoki-Titus reminded the subcommittee that the Board's purpose is not as an appeals board in any way. Furthermore, it is not within the purview of SC&A's contract to bring individual cases forward to NIOSH for a rework. That is for the Department of Labor to determine. **Ms. Wanda Munn** agreed, indicating the Board had been clear it would not assume any task that could be perceived as an appeal function, and this caused her real concern.

After much discussion, **Dr. Wade** asserted the Board was clear it didn't want SC&A's review function to go to the issue of compensability, but the focus should be on a scientific review of the product.

Ms. Kathy Behling commented that at the end of her presentation on each of the first three sets, she had been asked if any of SC&A's findings would have altered the determination in any cases. **Dr. Wade** noted that she should not answer the question until it's asked. **Ms. Homoki-Titus** also observed that the question was generalized, not related to a specific case.

Dr. Wade summarized by explaining the Board is chartered to review the quality of the science. Once done, it's then reasonable for the Board or subcommittee to inquire into any impact. He concluded the final test is not being avoided, it just has to be done carefully.

Mr. Griffon returned attention to the action list and suggested moving the cases as far as could be done. **Mr. Stu Hinnefeld**, NIOSH, distributed his compilation of an additional analysis of the 4th set of DRs, and an extensive discussion of the SC&A findings and NIOSH responses was conducted.

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Preliminary Individual Dose Reconstruction Review
Fifth Set of Cases

Mr. Griffon reiterated the subcommittee's review of the fifth set of cases will be a preliminary run-through, anticipating there would be issues also seen in the first four sets.

Ms. Behling explained there had been some ten Atomic Weapons Employer (AWE) sites in this group, all of which are at the front of the report, with the DOE site cases following. She reminded the subcommittee that AWE cases are approached differently, in that SC&A evaluates both the case and the exposure matrix, and looks at global issues.

Observing that often exposure matrix issues were pushed off into Task I site profile review for resolution, **Ms. Behling** expressed a need to be sure any exposure matrix issues are followed in this Task IV review matrix. **Mr. Griffon** and **Mr. Hinnefeld** agreed.

As primary reviewer on the AWE cases, **Dr. John Mauro** remarked that each of those sites is special, with its own story to be told in order to understand the context and bring the NIOSH responses to life. He asked for 30 seconds to set the stage for each site before the corresponding case was discussed.

There followed an item-by-item discussion of the "Summary of Findings Matrix (Cases 81-100)".

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DR Guidelines

Mr. Griffon explained **Mr. Hinnefeld** had provided some samples of DR instructions or guides, noting they'd had various titles depending on sites. He continued that he had come across these documents earlier and found them instructive in that they provide a template for the dose reconstructor's thought process. **Mr. Griffon** described the document, how it was used and updated, and commented it would be nice if they were a part of the claimant file.

While the suggestion received general consensus, **Mr. Larry Elliott**, NIOSH, cautioned that the use of these documents had evolved over time, earlier files would not have them, and in some instances it might be random.

Mr. Griffon suggested consideration of two things: One, the subcommittee offers a recommendation for the full Board that all cases going forward have these added to the claim file; second, and perhaps not feasible, that it also be done retroactively.

Mr. Elliott expressed reluctance regarding the retroactive aspect, but agreed it was something that could be examined to see what might be involved in making that addition to the analysis records of closed cases. Providing the document from the eighth set of cases going forward was a more achievable prospect, and **Mr. Elliott** agreed to report NIOSH's position at the May meeting. **Ms. Homoki-Titus** expressed concern about internal documents, not normally made public, suddenly becoming public.

Dr. Mauro again offered a suggestion that many questions could be answered if SC&A reviewers could contact the original dose reconstructor directly. **Mr. Elliott** responded by noting that the DR reports were signed off on by NIOSH, and any questions about those products should be directed through NIOSH.

The discussion continued, with concern expressed about the reviewers getting too comfortable with an ability to ask for the answer to a question. It was agreed there are benefits to maintaining a certain distance and having to work through issues. **Mr. Elliott** indicated NIOSH would be receptive to technical discussions as to what was done, how it was done or what was meant, particularly as it might shorten the content of the review matrices. There was consensus that these discussions should be limited in nature, with **Mr. Griffon** observing there should also be a record maintained as this Board is dedicated to conducting business openly.

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Addressing the case pool for selection of the eighth set of cases, **Mr. Griffon** proposed using the same criteria as for the seventh set. He indicated **Mr. Hinnefeld** is generating a list of best-estimate cases to present at the May meeting for a preliminary selection. From that pool a group of cases will be selected, for which **Mr. Hinnefeld** will provide some additional information. The subcommittee will select cases from that group as their recommendation to the Board. It is anticipated the eighth set will total 32 cases, which should complete the FY 2007 case review total for SC&A.

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With no further business to come before the Subcommittee, the meeting was adjourned.

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I hereby confirm these Summary Minutes are accurate, to the best of my knowledge.

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Mr. Mark Griffon, Chair

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Date