Miller, Diane M. (CDC/NIOSH/EID)

From: DanMcKeel2@aol.com
Sent: Thursday, June 24, 2010 7:26 AM
To: Neton, Jim (CDC/NIOSH/OD); melius@nysliuna.org; Katz, Ted (CDC/NIOSH/OD); NIOSH Docket Office (CDC); Hinnefeld, Stuart L. (CDC/NIOSH/OD); Sundin, David S. (CDC/NIOSH/OD); Rutherford, LaVon B. (CDC/NIOSH/OD); Howell, Emily C. (CDC/OCOO/OD); jmauro@scainc.com; NIOSH Docket Office (CDC)
Cc: DanMcKeel2@aol.com; Wade, Lewis (CDC/NIOSH/OD) (CTR)
Subject: NIOSH Docket 112: Texas City Chemicals dose reconstructions and SEC-88

June 24, 2010

NIOSH DOCKET 112 (Texas City Chemicals, Inc.) office
National Institute for Occupational Safety and Health (NIOSH)
Docket Office, Mail Stop C-34
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[1] Docket Office: Please accept this as a submission to the Texas City Docket number 112.

[2] Board members, NIOSH and SC&A:
Dr. Melius
Dr. Neton
Mr. Katz
Board members, NIOSH and SC&A

Dr. Neton on 5/27/10 writes: **"At the Niagara meeting, the Board deferred completion of these items until their July teleconference. In keeping with their role under EEOICPA, the Board will at that point provide their recommendation to the Secretary of HHS."** This statement does not jibe with the fact that work groups at ABRWH interim teleconferences between full meetings have never, to my knowledge, voted to make a recommendation to the full Board.

Dr. Neton on 5/27/10 further states **"In keeping with their role under EEOICPA, the Board will at that point provide their recommendation to the Secretary of HHS. NIOSH's future course of action in this case will ultimately be determined by the Secretary's action on the Board's recommendation. Because of this, NIOSH feels it is appropriate to wait for complete resolution of the Blockson radon issue prior to making a final decision at Texas City."** This policy, if pursued, will likely prolong a final SEC-00088 decision for months. The decision is capricious and not consistent with the way other SECs have been managed. Texas City is a special Surrogate Data test case because the site has zero site for individual monitoring data of any kind. SC&A applied the Board's SD draft criteria there first of all AWE and DOE sites and found NIOSH's application of the draft Board criteria lacked justification on 2 of 4 criteria.

I object so strongly to Dr. Neton's stated logic that I have decided to share my response with the Surrogate Data work group and the entire Board, and as a submission to the Texas City NIOSH DOCKET as a comment. **I am hereby asking DFO Ted Katz to please distribute this e-mail to all current Board members and to ensure it gets to the Surrogate Data work group that has the responsibility of making a recommendation on TCC SEC-00088 to the full Board.** I also ask Dr. Melius to consider taking a similar approach to the TCC SEC as was done at Bethlehem Steel at the last ABRWH meeting. Dr. Melius brought Bethlehem Steel to a vote by the full Board before the Surrogate Data work group had made a formal recommendation to the full Board did. The full ABRWH 16 member Board voted 10 to 4 with 2 members being recused to overturn NIOSH's very long standing recommendation to deny the Bethlehem Steel SEC petition at its May 2010 meeting just concluded.

Dr. Neton's response again sidesteps my question, which is, **"Why have no dose reconstructions been completed**

in the last three years at Texas City Chemicals?" As a refutation to the idea you might claim that NIOSH often postpones DRs while SEC petitions are pending as it is doing at TCC, I point to GSI as an example to the contrary. There, NIOSH aggressively began doing DRs after Appendix BB was published in mid-2007. A total of 4 "GSI" DR were completed by 2004 with no more started until mid-2007. GSI DR continued through the SEC-00105 qualification, preparation and presentation of the NIOSH evaluation report to the Board, and by now 94% of GSI DRs have been completed. This was despite the fact that NIOSH had individual monitoring data as film badges for only 3 of 13 AEC contract years on only 108 (~2/3) of workers. Only a single job category (Radiographer, Betatron and isotope, but not Magnaflux operators) was badged with no females being represented in this minute fraction of a work force that was said to be as many as 3,000 in peak years and still numbered 1,200 workers when GSI ceased operations at Granite City in 1973.

I recorded in my notes of the May 20, 2010, ABRWH meeting that the Blockson radon model had been rejected by the 9 to 7 vote against NIOSH's recommendation to deny SEC-00105. It is highly unlikely that NIOSH can justify use of a radon model it did not create (SC&A did), that the Board rejected as being validated, and that has no real TCC site monitoring data to support it than was present at Blockson. So, I fail to see any valid rationale for postponing a decision to abandon use of the Blockson radon model at TCC. That is, unless NIOSH has reason to believe the HHS Secretary might reject the Board's recommendation. I believe that is a remote possibility. I also see no valid reason for NIOSH to postpone completing TCC DR with the methods it has now that NIOSH claims justifies a recommendation to deny the TCC SEC-00088. Why would it delay, unless NIOSH believes its methods are do not make sufficiently accurate dose reconstructions feasible? It is extremely unfair to TCC claimants to postpone this decision months more until the HHS Secretary takes final action on the Blockson SEC. If NIOSH was not able to develop a validated radon model for Blockson that the Board would accept, why is there any reasonable expectation NIOSH will be able to develop a derivative radon model for TCC? The volume of the TCC AEC uranium recovery building is not known, only the length and width of the concrete slab. No good photos or floor plans exist for the TCC Recovery building. I have registered this sentiment in my comment on the NIOSH Ten Year Review.

Thank you,

-- Dan McKeel 6/24/10

SUBMITTED TO NIOSH PUBLIC DOCKET #112 BY:
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In a message dated 5/27/10 12:43:10 PM, jfn2@cdc.gov writes:

Dear Dr. McKeel,

As indicated in a past response to your inquiry on this subject, NIOSH has been waiting to hear definitive advice from the Advisory Board on the use of a probabilistic source term model in the reconstruction of radon exposures at Blockson Chemical. Because NIOSH is using the same approach at Texas City (with appropriate facility-specific modifications), we feel that it is prudent to wait for the Board's decision prior to moving forward with dose reconstructions at Texas City.

It is my understanding that, while the Board voted to reject NIOSH's position that dose reconstructions can be completed with sufficient accuracy at Blockson Chemical, they have not yet completed their formal deliberation on the definition of the class of workers for the SEC and the technical basis for adding such a class. At the Niagara meeting, the Board deferred completion of these items until their July teleconference. In keeping with their role under EEOICPA, the Board will at that point provide their recommendation to the Secretary of HHS. NIOSH's future course of action in this case will ultimately be determined by the Secretary's action on the Board's recommendation. Because of this, NIOSH feels it is appropriate to wait for complete resolution of the Blockson radon issue prior to making a final decision at Texas City.

Jim Neton, Ph.D., CHP
Associate Director for Science, DCAS