Effective Date:	Revision No.1 (Draft)	Document No. SCA-TR-SP2013-0040	Page No. 1 of 4
5/20/2014			

Finding	Report	ort			
Number	Section	Finding Description	NIOSH Response		
1	4	Rev. 00, with regard to the 250-workday requirement for SEC Class inclusion. Revision 00 of ORAUT-TKBS-0052, Summary Site Profile for the Pacific Proving Grounds, was issued on August 30, 2006. At that time, SEC status for presumptive cancer claimants required employment with at least 250 workdays. The 250-workday requirement for PPG workers was subsequently amended by the Department of Labor (DOL) in EEOICPA Bulletin No. 06-15 issued on September 27, 2006, and EEOICPA Bulletin No. 07-05 issued on January 11, 2007. Additionally, there may be a need for further discussions pertaining to the surrogate use of film badge dosimetry for PPG employment period(s) as recommended in DOL's EEOICPA Bulletin No. 07-05.	worked or lived) on the PPG or on ships (evacuated prior to a nuclear weapon testing), the CE would credit the employee with the equivalent of three (8-hour) work days. If there is evidence the employee was present at the PPG or on ships for 24 hours in a day for 83 days, the employee would have the equivalent of 250 work days and would meet the 250 work day requirement."		
Observation 1	5	There is a need for more definitive guidance pertaining to the assignment of occupational medical dose in behalf of claimants with no formal affiliation with a DOE or AWE facility.	The next revision of ORAUT-TKBS-0052 will include provisions from ORAUT-OTIB-0079 which states the NIOSH interpretation is that the EEOICPA defines covered radiation as the radiation received by a covered employee at a covered facility during a covered period. Section 2.0 of ORAUT-OTIB-0079 also states that "For most cases in which energy employee medical records are not provided, dose reconstructors should assume that any occupational medical X-ray exposure occurred at the covered facility where the energy employee worked." Therefore, if a covered employee cannot be affiliated with a covered facility and there are no records of X-rays being administered at a covered facility, then occupational medical exposures should not be assigned. In addition, the next revision of ORAUT-TKBS-0052 will delete reference to the guidance found in ORAUT-PROC-0061 for covered employees "hired on location."		
2	6	Section 4.0 "Occupational Environmental Dose" completely ignores occupational environmental doses for PPG locations from fallout. (Note: For PPG locations, occupational external environmental dose is for all practical purposes an integral part of the occupational external (as well as internal) dose and should be assessed as such in Section 6.0 of the PPG Site Profile.)	NIOSH agrees with the finding and Section 4 of the next revision of ORAUT-TKBS-0052 will be revised to instruct dose reconstructors that external dose should be assessed in Section 6.0 of the PPG Site Profile. Under the current SEC, in the absence of bioassay data, internal doses cannot be reconstructed.		

Effective Date:	Revision No.1 (Draft)	Document No. SCA-TR-SP2013-0040	Page No. 2 of 4
5/20/2014			

Finding Number	Report Section	Finding Description	NIOSH Response
3	7.4.2	Available DOE records for a claimant may not only be incomplete/inaccurate, but more importantly may not include unmonitored exposures associated with cohort badging, exposure to fallout, etc.	NIOSH understands there are serious deficiencies related to film badge dosimetry data and procedural practices identified by the NRC (1989), SAIC (1989 – 2006), and Perkins and Hammond (1980). In light of these deficiencies, NIOSH finds it intractable to achieve more accurate dose assessments than those provided by the DNA and reduced in Attachment A of ORAUT-TKBS-0052, with realistic uncertainty ranges; too many data have been lost or never captured to make such an effort feasible. However, the next revision ORAUT-TKBS-0052 will include revisions to the Attachment A to provide 95% doses as appropriate (see response to Findings 8 and 9 below). For cases where occupation on the various islands is documented in the dosimetry records and their stay times are known, either by personal or cohort film badges or reentry logs, additional dose can be calculated in accordance with the information provided in Figures 7-6 through 7-10 and added to doses assigned using Attachment A to account for unmonitored exposure to fallout. It should be noted that during Operation Castle in the first half of 1954, 85% to 90% of all personnel were issued operational film badges. In addition, all personnel involved in reentry activities were also issued mission badges that were read at the end of each mission. (Castle Series, 1954, DNA 6035F). For Operation Wigwam on May 15, 1955, and all subsequent tests at PPG, 100% of all personnel involved in reentry activities were also issued mission badges that were read at the end of each mission badges that were read at the end of each mission badges that were read at the end of each mission badges that were read at the end of each mission badges that were read at the end of each mission badges that were read at the end of each mission badges that were read at the end of each mission badges that were read at the end of each mission badges that were
4	7.4.2	ORAUT-TKBS-0052 does not provide a definition for unmonitored dose as it applies to PPG participants or any specific guidance.	The next revision of ORAUT-TKBS-0052 will revise this statement to read as follows: "Covered employees that participated in the various PPG operations and were not badged can be assigned coworker dose as outlined in Attachment A."
5	7.4.2	are well above >250 keV. Depending on what	Although ISO or ROT geometries might be more realistic, the general approach taken with all EEOICPA claims is to apply the DCF yielding the highest POC. Except for the lung, esophagus, red bone marrow, and bone surfaces (as discussed in IG-001, Section 4.4) the highest DCF is typically associated with the 30-250 keV photon energy range and the AP geometry. In addition, as described in Table 5A of the <i>NIOSH –IREP Technical Documentation</i> (2002), the radiation effectiveness factor (REF) is significantly higher for photons in the 30-250 keV range when compared to the > 250 keV range. These two factors lead to the recommendation given in Section 6.0.

Effective Date:	Revision No.1 (Draft)	Document No. SCA-TR-SP2013-0040	Page No. 3 of 4
5/20/2014			_

Finding Number	Report Section	Finding Description	NIOSH Response
6	7.4.2	Since claims involving skin cancer usually specify the location(s) on the body, the critical variable of distance above the source plane defined by Barss and Weitz (2006) should be included in the assignment of beta-to-gamma dose ratios for PPG claimants.	Figure C-1 in Attachment C of the NTS external TBD provides the information given in Table 7-4 of the SC&A report. In addition, with respect to the ratios in Table C-1 of the NTS document, Attachment C recommends: "These values can be modified with appropriate factors for shielding and distance (Barss and Weitz 2006)." Guidance on the assignment of betato-gamma ratios from Barss and Weitz (2006) will be added to the next revision of ORAUT-TKBS-0052 for clarity. The guidance will include, from Barss and Weitz 2006, Table 1, Beta-to-gamma dose Ratios for Pacific Test Sites, Table 3, Beta-to gamma Ratios for eye Exposures, and Table 7, Standard Distances from Source Plane for Various Anatomical Locations.
7	7.4.2	dose is based on assumptions that are not	The next revision of ORAUT-TKBS-0052 will revise the missed dose guidance as follows: "Assign missed dose based on the number of exchanges found in the dosimetry records. Also, compare the total of the recorded dose plus the missed dose to the 50% dose in Attachment A and assign the larger dose. In addition, for cases where occupation on the various islands is documented in the dosimetry records and their stay times are known, additional dose can be calculated in accordance with the information provided in DNA's 1983 report entitled <i>Operation Greenhouse 1951</i> related to calculating dose based on island occupation times and added to doses assigned as described above to account for potentially unmonitored exposure to fallout." It should be noted that in most cases where an individual's dose was assigned based on cohort badging, logs were maintained in the individual's dosimetry records which documented the location and stay times associated with reentry activities. These logs can be used to estimate potential dose received during these reentry activities.
8	7.4.2	Independent of other concerns/limitations that characterize the DNA dose distribution data (e.g., their accuracy, completeness, etc.), use of the 50th percentile dose as a coworker dose is not justified for PPG participants for Operations up to and inclusive of Operation CASTLE and for the subsequent Operations where dosimeter damage was an issue.	Owing to the large uncertainties in the operation-specific dose reported by DNA, the next revision of ORAUT-TKBS-0052, Attachment A will be revised to replace the 50 th percentile doses with the 95 th percentile doses to be used for coworker doses, as appropriate.
9	7.4.2	Operation-specific dose distributions defined by DNA must be adjusted to account for the MDA value of film dosimeters regardless of what percentile value is employed.	The next revision of ORAUT-TKBS-0052, Attachment A will be revised to ensure the coworker dose approach follows the guidance in ORAUT-OTIB-0020 with respect to the treatment and inclusion of potential missed dose.

Effective Date:	Revision No.1 (Draft)	Document No. SCA-TR-SP2013-0040	Page No. 4 of 4
5/20/2014			