U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR DISEASE CONTROL NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH

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ADVISORY BOARD ON RADIATION AND WORKER HEALTH

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SUBCOMMITTEE ON PROCEDURES REVIEW

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THURSDAY
JULY 14, 2011

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The Subcommittee convened in the Zurich Room of the Cincinnati Airport Marriott, 2395 Progress Drive, Hebron, Kentucky, at 9:30 a.m., Wanda I. Munn, Chair, presiding.

PRESENT:

WANDA I. MUNN, Chair PAUL L. ZIEMER, Member

ALSO PRESENT:

TED KATZ, Designated Federal Official ROBERT ANIGSTEIN, SC&A* HANS BEHLING, SC&A* ELIZABETH BRACKETT, ORAU Team* STU HINNEFELD, DCAS JENNY LIN, HHS* STEPHEN MARSCHKE, SC&A JOHN MAURO, SC&A* TOM NEELY, DCAS JIM NETON, DCAS STEVE OSTROW, SC&A* YEMI OYEDIRAN, DCAS Contractor MUTTY SHARFI, ORAU Team* SCOTT SIEBERT, DCAS* JOHN STIVER, SC&A ELYSE THOMAS, ORAU Team* BRANT ULSH, DCAS

^{*}Participating via telephone

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1	P-R-O-C-E-E-D-I-N-G-S
2	(9:05 a.m.)
3	CHAIR MUNN: I believe that we had
4	scheduled for 10:00, after our instructions or
5	the new database, Norton Company SEC for the
6	residual period. We have Jim Neton here to, I
7	believe, lead that discussion. And in light
8	of the fact that he is here and the database
9	we want to reach is not, we will move forward
LO	that item, if that is amenable with all
11	present.
L2	MR. KATZ: Okay, and let me just
L3	note we didn't do conflict of interests. We
L4	are talking about a specific site. As I am
L5	aware, there are no Board Members conflicted
L6	with Norton, and I believe that is true for
L7	NIOSH, ORAU team, as well as SC&A team. So we
L8	have no conflicts with the individuals
L9	involved with the discussion.
20	DR. NETON: I did just think of
21	one thing, though. There were some support
22	people that were going to call in from ORAU,

- 1 as well as from NIOSH at 10:00.
- 2 MR. KATZ: Can we get a hold of
- 3 them?
- DR. NETON: If the ORAU folks that
- are on the phone, could you maybe get a hold
- 6 of Mutty Sharfi?
- 7 MR. NEELY: Mutty's on.
- DR. NETON: Oh, he's on? I wasn't
- 9 listening. Okay, well he is there. And Chris
- 10 Crawford is the only other one from NIOSH that
- I was hoping that would be available, but we
- 12 could start without. Mutty is important
- 13 beyond Chris.
- MR. KATZ: Okay.
- DR. NETON: And we can start.
- 16 CHAIR MUNN: Very good. I believe
- 17 that we all have a copy of the material that
- was sent to us recently. If not, we will see
- 19 if we need it once Jim has addressed the
- 20 issues that were raised in that review of the
- 21 petition. Do you want to take the lead on
- 22 that, Jim?

1	DR. NETON: Well, I think it might
2	be better if SC&A would just summarize, I
3	think Hans is on the phone who is the author
4	of this document, might summarize their
5	findings. They are fairly brief. And then we
6	could start the discussion from there.
7	CHAIR MUNN: Are you prepared to
8	do that, Hans?
9	DR. BEHLING: Yes, I am.
10	CHAIR MUNN: Very, good. Then it
11	is all yours.
12	DR. BEHLING: Okay, this document
13	that you may have only received a few days ago
14	should have been, obviously, forwarded to you
15	earlier, it was completed much earlier than
16	you might believe. But through an error on
17	our part, it was somehow or other not passed
18	through the proper channels and unfortunately,
19	you didn't receive it until a few days ago.
20	So on behalf of SC&A, I do apologize for that.
21	But hopefully everyone has had a
22	chance to read the document, and it, by and

1	large, identifies two findings. The issue
2	here is one of how do we reconstruct doses
3	during the period when there is really no
4	data. For the Norton Company, there was no
5	Site Profile and for the reconstruction of
6	both internal and external dose, NIOSH had
7	basically proposed to use OTIB-70 as well as
8	TBD-6000 to reconstruct both internal and
9	external doses.
10	In my review of the SEC ER I came
11	to understand what methods and what data were
12	being used to try to establish both the
13	internal and external doses. And I think the
14	focus initially for us was to assess the use
15	of OTIB-70 in reconstructing the doses during
16	the time frame when there was no data.
17	And of course, the OTIB-70 is
18	still a document that has not been properly
19	resolved. So the initial focus was to really
20	address the issue regarding the use of OTIB-
21	70. But in the process, I also came to

something that goes beyond the OTIB-70, and

1	that is the use of air sampling data to
2	construct the internal exposure as well as
3	external exposure. And I don't know if
4	everyone has a copy of the report. I car
5	possibly follow it page-by-page. If not, 1
6	will try to at least summarize a couple of the
7	issues here.

NIOSH proposes to establish an SEC 8 Class for the time period of January 1, 1958 9 through October 1962. 10 And that in itself, I didn't really talk about that but that in 11 represents something of a 12 itself because the data that were used to actually 13 provide information that would allow the dose 14 15 reconstruction to begin during the period of 16 1962 through the end of 2009 actually was data that was taken during the time period that is 17 the SEC time period. And so there is, in 18 19 itself, a certain amount of paradox involved here when you have an SEC Class that starts 20 with January 1, 1958 and through October 1962 21 to use that air sampling data that was taken 22

1	on October 13, 1958 and then say we can't
2	apply that data for the SEC time period but
3	then we will actually use that data for the
4	time period that follows the SEC period.
5	So in itself, that becomes a
6	paradox. If you have data during the time
7	period when you say we can't reproduce the
8	doses and, therefore, declare an SEC Class,
9	how can you use that as the data taken during
10	that time period when you say you can't
11	reconstruct doses and then apply it for a time
12	period that starts years later in 1962 through
13	the year 2009. So that in itself is a
14	paradox.
15	But beyond that, the issue of
16	finding number one really centers around the
17	use of air sampling data that were taken on a
18	single day and involves a very limited number
19	of air samples and in a very limited number of
20	locations.
21	As I explained in section four of
22	my review, not only were the air samples

1	extremely limited when you realize they were
2	only eight air samples for a building that was
3	50,000 square feet and if you look at the
4	actual exhibit that I included in my review
5	that is Exhibit 1 on page nine, you realize
6	that these were all taken, generally speaking,
7	in the same general area at the end of the
8	hood in the thoria area. There were three
9	samples there in the processing area at the
10	bench, et cetera. So there were only really
11	four locations identified for air samples that
12	were taken on a single day that defines a
13	collective area of 50,000 square feet where
14	potential exposures may have taken place over
15	a period of many years that define the time
16	period of 1962 through 2009.
17	So a limited number of air
18	samples, the restricted air sampling time. I
19	reviewed the actual original data and realized
20	that the air sampling, the eight air samples
21	involved air samples taken for a limited
22	number of hours. The lowest number of hours

1	was 1.15 hours, and the longest was 11 hours.
2	Even more troubling, to some extent, is the
3	flow rate of air, which was not really
4	identified in the air sampling data for that
5	day, but there were other time periods during
6	which the flow rates were defined, and they
7	were, essentially, about 20 liters per minute.
8	And so in my review of it, I
9	looked at that data and said what is it that
10	you are really gaining if you are looking only
11	at a 1.15 hour air sampling time at 20 liters?
12	You are only going to be identifying a total
13	air volume of about 1.4 cubic meters, and that
14	is really not enough time to really assess the
15	air concentration for a variable location
16	areas over time.
17	The other thing is that I
18	identified was the fact that these air
19	sampling data do not really give you enough
20	information that will allow you, would for
21	instance be, the counting efficiency was the
22	MDA values for air sampling, et cetera.

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1 So in essence, my real finding or 2 the first finding was focused on the limited 3 data, the limited time for air sampling and flow rates, and the lack of information that 4 would allow you to say what do these numbers 5 6 really represent in terms of the actual numbers that you would have to have in order 7 to establish the credibility of the -- naming 8 the MDA value. 9 10 The second finding that Ι identified was again now the focus of the 11 12 request for us to review this to begin with, and that is the use of OTIB-70. 13 As has been discussed on many occasions, SC&A has taken 14 15 exception to the OTIB-70 values that involve two issues, two parameters, the resuspension

value of 1E minus six per meter and of course a depletion rate of one percent per day. somehow or other, they have to make sense in a

You can't have an E minus six resuspension 21

factor and then still consistently assume that 22

way where the two values mesh with each other.

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1	that represents a depletion factor of one
2	percent per day.
3	So as I identified in my write-up,
4	yes both for internal and external doses that
5	were derived by modeling the TBD-6000
6	approach, we do use, in fact, a factor that
7	involves the one percent per day for both
8	internal and external. And as has been
9	already acknowledged, the use of OTIB-70 in
10	those two parameters have not been properly
11	resolved.
12	So to answer the Committee's
13	question, yes, OTIB-70 has been used or is
14	used in this particular SEC ER, and we have
15	not resolved that issue, obviously, to the
16	satisfaction of everyone concerned. So that
17	is pretty much my summation of the two
18	findings.
19	CHAIR MUNN: Any questions? Not
20	at this time. Jim?
21	DR. NETON: Okay. Everything Hans
22	said makes a lot of sense, but I think we need

1	to go back and look at what was being
2	accomplished here in the Evaluation Report for
3	the Norton facility.
4	The Norton facility has an SEC
5	Class for all the production period already,
6	and this particular 83.13 was written to cover
7	some D&D operations. This is not unlike what
8	we did, what ended up happening at Linde
9	Ceramics where the site had been cleaned up
10	during the D&D period between 1958 and 1962, I
11	believe, which is when the operator of this
12	facility went and made a very rigorous attempt
13	to clean up all of the AEC-related thorium and
14	dispose of it.
15	And that is well described on page
16	15 of the Evaluation Report. I won't read it
17	all. But they did a lot of things like they
18	cleaned up the debris. The refractory kilns
19	and furnaces were dismounted brick-by-brick,
20	transferred to barrels. And all 287 barrels
21	representing 18 to 20 tons of material were
22	removed from that building and buried

1	somewhere	offsite	or	somewhere	а	far	distance

- 2 from the original building.
- We had a situation here where we
- 4 could not with any confidence reconstruct the
- 5 exposure that occurred during the D&D
- 6 operations, but we knew very well that they
- 7 had made some very rigorous attempts to clean
- 8 it. So that is why this SEC was added and the
- 9 Board voted on that at the last meeting and it
- is going to be added for that purpose.
- Now you come to the situation
- 12 starting in 1962 where the facility had been
- 13 cleaned. Unfortunately though, we have no
- 14 surveys that were taken to document how clean
- is clean at that time. So what we did to
- 16 bound the exposures was to use air samples
- that were taken during the operational period
- and said it certainly can be no higher than
- 19 what was measured during the operational
- 20 period. That is somewhat consistent with the
- 21 Act that says if you can't distinguish between
- the two, you have no way of distinguishing,

1	you	just a	assume	that	t what	was	there	was	all
2	AEC	relate	d and	that	is wha	at we	did.		

3 So we used the air sample data that was taken in 1958 as the starting point 4 for reconstructing or for determining what the 5 6 upper bound for the air concentration, keeping in mind that all we are really trying to 7 is material that had 8 reconstruct resuspended from the floor or from deposition 9 10 at that facility, even though we full well know that it had been very well cleaned. 11

> So we felt that these air samples that Hans reported in his document that were taken during that operational period representative of an upper bound. In fact, SC&A knows that in the past we have often used general area air samples that were taken at the facility to represent the starting point for the residual period because you are not really trying to look at what was generated from the product airborne but what resuspended from the floor, the thinking being

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might be more

2	representative than that.
3	But we didn't have that, so we
4	took the eight air samples that were taken in
5	a very confined area it is true, but we are
6	taking an area that in our opinion represent
7	the area with the highest potential for
8	producing airborne activity. I mean, if you
9	look at some of the stations, it was air
10	samples were taken by the cutting wheel,
11	thorium-producing area, the thoria area near
12	the hood itself, so they represent to a large
13	extent samples taken near the generator, where
14	the material is generated. I think the fact
15	that the building is a 50,000 square foot
16	building is somewhat irrelevant.
17	So we used those to set the
18	bounding value for the start of the SEC
19	period. I think it is totally appropriate.
20	It does provide an upper bound. I think if
21	one wants to do somewhat of a sort of
22	reasonableness check on this, if one takes the

that general area samples

1	4.7 dpm per cubic meter, which was the end
2	result of using those air samples, you end up,
3	if you assume, and I know this is going to be
4	somewhat contentious, but assume a sometimes
5	ten to the minus six resuspension factor, you
6	end up with a predicted surface contamination
7	on the floor of about five million dpm per
8	square meter.
9	I mean, so we clearly know that
10	the material, the facility is cleaned up to
11	better to that, I mean, given the nature of
12	the description of the cleanup activity. We
13	don't believe that is unreasonable, though
14	because, again, we can't distinguish between
15	AEC and commercial operations. And these
16	commercial operations, I forgot to mention,
17	continued well into, I think, the early '70s.
18	So they cleaned it up, and then they
19	immediately started doing commercial
20	operations again.
21	So that is about all I have to say
22	about those samples. We can talk a little

1	more but I would like to get the second point,
2	which was the use of the TIB-70 one percent
3	per day depletion value and the sometimes ten
4	to the minus six resuspension factor.
5	We have taken a very close look at
6	this, and after looking at some of the other
7	sites where we had empirical data to derive
8	depletion values, it is now our opinion that
9	the one percent per day is not appropriate.
10	It is too fast for the clearance, based on at
11	least three other sites that we have developed
12	an exponential clearance using data at the
13	facility.
14	We looked at Blockson, Dow
15	Madison, and General Atomics. And in fact, at
16	the end of the day if one looks at those, on
17	average the depletion rate that was used for
18	those was 0.06 percent per day, somewhat more
19	than a factor of ten lower.
20	So we proposed in moving forward
21	to modify TIB-70 to use an empirically derived
22	depletion rate from the three facilities that

1 we have already looked at and adopt that for 2 situations that make sense, where you have 3 this uranium sort of sitting around and clearing over time. 4 So that is going to help resolve that issue. 5

6 The second issue though, the one 7 times ten to the minus six, we feel very strongly that that still represents, in our 8 opinion, a reasonable resuspension factor. 9 10 know that SC&A has commented in the past that the NUREG where we obtained those values was 11 12 actually written to be used for what considered to be clean facilities. Well, that 13 14 may be true, but the data they used were not. In fact, if you look at the values that were 15 16 relied upon to develop that one times ten to the minus six value in NUREG-1720, three of 17 the five studies that were used were uranium 18 19 facilities that were in operation during the time and were either shut down on the weekend 20 or were not operating during that period, had 21 not been cleaned up, and they evaluated those 22

1	facilities. Those specifically are the
2	Breslin study, the Eisenbud study, and the
3	Spangler study. In each of those operations,
4	he derived for what they call aged
5	contamination now. It is a little different.
6	Aged contamination means it is just not
7	freshly deposited, and I submit that is
8	more like what we have in our AWEs, in each of
9	those cases, the resuspension factor was much
10	less than ten to the minus six. It ranges
11	from 0.3 to 0.4 times ten to the minus six or
12	what we consider to be fairly equivalent
13	uranium operations or very similar operations
14	to what we observed in our AWE.
15	So because of that, I think that
16	we still feel that one times ten to the minus
17	six is appropriate.
18	DR. BEHLING: Jim, can I make a
19	comment?
20	DR. NETON: Sure.
21	DR. BEHLING: I agree with it. If
22	you look at page 12 of my report, I will quote

1	to what I wrote. I said in the case of
2	Norton, the resuspension factor of 1E minus
3	six per meter seems more appropriate. I agree
4	with it because of the fact that there was a
5	concerted effort to clean up, which is not
6	consistent with 1E minus six resuspension
7	factor. It is a depletion factor. And you
8	just mentioned that you also agree with that.
9	So as far as I am concerned, the
10	issue has been addressed properly.
11	DR. NETON: Well, I think, Hans, I
12	think for Norton that is true. But more
13	generically, I think we would still propose to
14	apply one times ten to the minus six for a
15	facility that had not been cleaned up. And
16	our basis for that is looking at the
17	references that were actually used in NUREG-
18	1720 to develop the one times ten to the minus
19	six, and those facilities were not cleaned up.
20	DR. BEHLING: Well, there are also
21	other documents where E minus four is commonly
22	observed, especially when there is a lot of

2	as, obviously, active ventilation systems,
3	foot traffic, other activities that would stir
4	up the contamination levels on floors.
5	I don't know. I am not willing to
6	concede that E minus six is appropriate for
7	every location, but I will say at least for
8	Norton, it appears to be an appropriate value
9	
10	DR. NETON: And maybe we should
11	DR. BEHLING: there was that
12	concerted effort.
13	DR. NETON: Maybe we should focus
14	on the Norton issue at hand because that needs
15	to be decided for the next
16	DR. BEHLING: Yes. And as far as
17	I am concerned, what you stated here was that,
18	yes, in order to accommodate the E minus six,
19	we need to at least modify the depletion
20	factor of one percent per day. And as you
21	said, I would agree with that.
22	DR. NETON: In fact, we have gone

activity that may aid in the resuspension such

1	back and done sort of a back of the envelope
2	calculation that will formalize where if you
3	use a one times ten to the minus six
4	resuspension factor, given the 0.06 percent
5	per day that we are proposing to use, given
6	certain building ventilation rates, some
7	normal parameters, you end up one times to ten
8	to the minus six is not inconsistent with that
9	type of a depletion.
LO	DR. MAURO: Jim, yes that is
L1	exactly the question I was going to ask. That
L2	is good. That answers my question that they
L3	are in fact coupled. You know, they are
L4	compatible with each other.
L5	DR. NETON: Yes, you are never
L6	going to get the exact
L7	DR. MAURO: Sure.
L8	DR. NETON: solution. But in
L9	general, we pick these approximate values and
20	run them through. It is not inconsistent with

MAURO: I would like to say

that at all.

DR.

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1	one more thing. The other half of the
2	question had to do with the air sample that
3	you use as your starting point. And I think
4	you, from my perspective, certainly anyone
5	else could express their opinion, but it
6	sounded like you made a pretty good case that
7	the air samples that you used as your starting
8	point represented fairly high values during
9	the D&D period. In other words, the samples
10	that were collected, even though they were
11	limited in space and time, what I am hearing
12	is there is a pretty good evidence that they
13	probably represented fairly high-end values
14	that were experienced in that large area
15	during the D&D.
16	That being the case, that coupled
17	up with the change in the rate of depletion,
18	in my opinion, sounds like you have hit on the
19	issues that we were concerned with, at least
20	for Norton.
21	CHAIR MUNN: Paul, you
22	MEMBER ZIEMER: Well I was just

	1	going	to	reinforce.	I	think	Jim	is	right.	W∈
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- 2 need to focus on this facility because I think
- 3 the -- is it TBD -- 70 --
- DR. NETON: It's TIB-70.
- 5 MEMBER ZIEMER: -- TIB-70 rather,
- that is addressing resuspension generically, I
- 7 believe. And, John Mauro, I think in the past
- 8 there has been at least one other case where
- 9 SC&A has agreed, for a cleaned up facility,
- 10 ten to the minus six, at least, was
- 11 appropriate.
- 12 DR. MAURO: Yes. Yes, we have.
- 13 And I guess we view this facility --
- 14 MEMBER ZIEMER: I think on Norton
- 15 --
- DR. MAURO: -- and Hans certainly
- 17 could confirm this as one of those where ten
- to the minus six will work, as long as the
- 19 depletion rate is compatible with that.
- 20 MEMBER ZIEMER: Right. And since
- 21 NIOSH now has a new value, which is more than
- the factor of an order of magnitude less, it

1	seems to me that that's resolved. And if SC&A
2	is willing to agree that air sampling data
3	taken during the active period around the
4	active part of the plant certainly is bounding
5	for the residual period, then it seems to me
6	that we have addressed the three issues that
7	are before us on Norton.
8	DR. MAURO: I agree, Dr. Ziemer.
9	I think that the SC&A's position on this is
LO	we the issues have been resolved, you know,
L1	in principle, based on this conversation.
L2	CHAIR MUNN: So we have no further
L3	comment. Anyone else want to weigh in or
L4	this? Yes, Paul.
L5	MEMBER ZIEMER: I don't. We may
L6	need to get the other Work Group or
L7	Subcommittee Members' input, but it seems to
L8	me that we should recommend to the Board that
L9	they accept the NIOSH recommendation. I am
20	assuming the change in the depletion rate,

Jim, will be incorporated into that.

DR. NETON:

21

22

That raises a question

	1	in	mУ	mind	as	to	how	we	need	to	move	forward
--	---	----	----	------	----	----	-----	----	------	----	------	---------

- with that, whether we need to revise the
- 3 Evaluation Report and provide it back to the
- 4 Board. Stu, you might have --
- 5 MR. HINNEFELD: Well, I think we
- 6 have to check and see what the current, what
- 7 the Evaluation Report says about that. Does
- 8 it specifically say --
- 9 MEMBER ZIEMER: It uses the one
- 10 percent per day.
- MR. HINNEFELD: Okay.
- DR. NETON: The only change would
- 13 be --
- MR. HINNEFELD: Yes, we need to
- 15 revise it. We will need to revise that in
- 16 addition to whatever Site Profile or guidance
- we have for doing the dose reconstruction.
- DR. NETON: Yes, it is just not
- 19 clear in my mind whether it would be a
- 20 revision or an addendum. I kind of get
- 21 confused.
- MR. HINNEFELD: Well, we will talk

1	to	OGC	about	what	specifically.	Ιt	sounds
---	----	-----	-------	------	---------------	----	--------

- 2 like a revision to me.
- DR. NETON: But I think that we
- 4 are going to agree to provide that revision to
- 5 the Board for the August meeting. Is that
- 6 correct?
- 7 MR. HINNEFELD: Well, I --
- 8 DR. NETON: It shouldn't take much
- 9 time.
- 10 MR. HINNEFELD: It shouldn't take
- 11 much time, no.
- DR. NETON: It's a paragraph or
- 13 two to change.
- 14 CHAIR MUNN: So you are going to
- 15 change the one percent item in --
- DR. NETON: Yes, we are going to
- 17 adopt a new depletion rate that I just
- 18 proposed.
- 19 CHAIR MUNN: That will be a NISOH
- 20 action item for our next meeting.
- DR. NETON: Well it will be for
- the Board meeting.

1	CHAIR MUNN: For the Board
2	meeting.
3	MR. KATZ: We have scheduled for
4	the August Board meeting you reporting out for
5	the Subcommittee on Norton ER.
6	CHAIR MUNN: And, Ted, you will
7	report this to our two missing Subcommittee
8	Members and
9	MR. KATZ: Right. Well, it is a
10	bit of an issue, I think. We are in session
11	and actually there is just two Members here.
12	And it is a Subcommittee; it is not a Work
13	Group. Work Groups are informal. But this is
14	a Subcommittee, and so I believe there is a
15	quorum issue. Right? If you have half
16	membership. Paul, you know Robert's Rules.
17	MEMBER ZIEMER: Is it a four-
18	person
19	MR. KATZ: Yes, it is Mike Gibson
20	is on this. Well, you have Bob Presley is an
21	alternate.
22	MEMBER ZIEMER: Well, my

1	suggestion would be that you simply report
2	MR. KATZ: And you have Dick Lemen
3	
4	MEMBER ZIEMER: what we did and
5	indicate that those present supported it.
б	MR. KATZ: Right. Right, so it
7	won't be a formal recommendation, I think,
8	since you don't have a quorum. But you car
9	report out the discussion that was had and the
LO	results of that discussion.
L1	MEMBER ZIEMER: And indicate that
L2	there is agreement between NIOSH and the
L3	Board's contractor on these technical issues.
L4	MR. KATZ: Right. That will do
L5	it.
L6	DR. NETON: And then at that time
L7	the Board will take up the revised ER.
L8	MR. KATZ: Right. And really, the
L9	Subcommittee then doesn't need to weigh in
20	further, but the missing Members can weigh in
0.1	with the rest of the Board on the matter

CHAIR MUNN: And NIOSH will have

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- 2 DR. NETON: It will be completely
- 3 -- it will be revised and reissued as early as
- 4 possible before the meeting.
- 5 CHAIR MUNN: All right.
- 6 MR. MARSCHKE: Wanda?
- 7 CHAIR MUNN: Yes.
- 8 MR. MARSCHKE: Just as an
- 9 administrative type of thing, I don't -- I
- 10 think you are going to have to track these
- 11 three issues by hand. I do not think the
- 12 database is set up to track ER reviews.
- So you are going to have to do --
- MR. KATZ: It is not necessary in
- 15 this case, Steve.
- 16 MR. MARSCHKE: Okay. I just
- 17 wanted to make sure that -- you know, don't
- 18 expect it.
- MR. KATZ: Yes.
- MR. MARSCHKE: We are not going to
- 21 be able to --
- MR. KATZ: No, that's fine, Steve.

1	You know for the Procedures, that is one
2	thing, but for this is an SEC, basically,
3	that this Subcommittee has taken up
4	MR. MARSCHKE: Right.
5	MR. KATZ: just as a Work Group
6	might take up an SEC.
7	CHAIR MUNN: The timing also is
8	such that since this is an immediate issue
9	that will come before the Board, hopefully
10	there will not be any outstanding issue
11	following the Board's discussion and activity.
12	So we will bring that to the Board
13	in Richland in August. And Ted will see to it
14	that it gets on the
15	MR. KATZ: And it is on the
16	agenda.
17	CHAIR MUNN: Good.
18	MR. KATZ: It is on the agenda
19	already.
20	CHAIR MUNN: How are we doing with
21	our database? Are we up and running?

HINNEFELD:

MR.

22

is

not

CITGO

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	Opcilling	y C C •

- 2 MR. MARSCHKE: I'm on CITGO. I'm
- 3 in there.
- 4 (Simultaneous speaking.)
- 5 CHAIR MUNN: Well as long as the
- 6 one we have is --
- 7 MR. MARSCHKE: I'm in the database
- 8 right now.
- 9 CHAIR MUNN: Oh, this is very
- 10 good.
- 11 MR. MARSCHKE: I don't know what
- is the matter with you guys.
- 13 CHAIR MUNN: Let's hold just a
- 14 moment and see if we are successful in doing
- 15 that. Let's see.
- 16 (Simultaneous speaking.)
- 17 MR. KATZ: Well, done. Proud
- 18 moment.
- 19 CHAIR MUNN: Let's hold just a
- 20 moment to see if any of the rest of us are
- able to get in there.
- MR. KATZ: Well, Jim, does there

1	need to be more discussion though about the
2	generic OTIB-70 matters?
3	DR. NETON: Well, there does, but
4	that will come later. I think what I put or
5	the table is that we are holding firm, I
6	think, with our position that one times ten to
7	the minus six is representative. I think we
8	probably need to put that in writing, rather
9	than just throw it out there.
LO	We looked at NUREG-1720, and we
11	believe that it supports our use of that
L2	value.
L3	MR. KATZ: So you will be putting
L 4	
L5	DR. NETON: We will be putting a
L6	
L7	MR. KATZ: You will be revising
L8	OTIB-70 or a White Paper or what?
L9	DR. NETON: Well the one times ter
20	to the minus six is not different. It would
21	just be a defense of the use of that value.

But TIB-70 will be revised to incorporate the

1	change	of	one	percent.	per	dav	depletion	rate
-	0110111	<u> </u>	0110	P C T C C T T C	P	G.G. 7	0.00 - 0 - 0 - 1	

- 2 to this new value that I proposed. I suspect
- we will write that up in one document.
- 4 MR. MARSCHKE: I believe there is
- issues on OTIB-70 and there will probably be a
- 6 response to one of the issues.
- 7 DR. NETON: Well there's only two
- 8 outstanding issues that I am aware of. One is
- 9 the TIB-70, one percent per day, and the
- 10 other one is one times ten to the minus six.
- MR. MARSCHKE: So as a response to
- the second issue, you can issue that paper.
- 13 We can attach it to the database.
- 14 MR. KATZ: Right, and SC&A can
- 15 respond to it.
- MR. MARSCHKE: We can respond to
- 17 it. And then, you know, butt heads.
- 18 CHAIR MUNN: This was what I was
- 19 hoping we could do. I was hoping we could get
- 20 into the database and take a look at what
- OTIB-70 had there before you ran away. But we
- 22 don't need to do that. I think we have

1	resolved what we really need
2	DR. NETON: The ball is in our
3	court to draft a I guess I will call it a
4	White Paper on the outstanding TIB-70 issues
5	that I am pretty sure are a path to those two
6	papers.
7	DR. MAURO: This is John. I would
8	like to just point out that I think we are
9	converging nicely. I think the one percent
10	per day issue has now been resolved. The
11	other issue is ten to the minus six.
12	I think that what we are hearing
13	is that there is more nuance to it. That is,
14	as Hans pointed out, we could certainly could
15	point to data where resuspension factors of
16	ten to the minus three are observed in some
17	settings and ten to the minus six, and our
18	original position was well that is certainly
19	appropriate for a site that is cleaned up.
20	And what Jim points out now is
21	that well, it may be more than that. The
22	place may still be a little contaminated or

1	somewhat contaminated but it is aged. And as
2	a result, what Jim is saying is you don't
3	really see ten to the minus four or ten to the
4	minus three under those circumstances. Ten to
5	the minus six might work there also.
6	And I think that, Jim, when you
7	put your response out on this matter, the
8	second issue related to OTIB-70, you know, if
9	approved by the Subcommittee, we will take a
10	look at that and dive a little more deeply
11	into the original work, the work that you had
12	cited, Eisenbud and the other names.
13	DR. NETON: Breslin.
14	DR. MAURO: Yes, and we will take
15	a look at that. And it may be I am
16	optimistic that we could converge on a place
17	where we are all comfortable with the approach
18	to resuspension factors.
19	DR. NETON: Yes, well I am
20	starting to come to the conclusion now that we
21	need to start talking about effective

resuspension rates. I don't deny that if

22

1	you're sweeping, broom sweeping in an area
2	that is highly contaminated, you are not going
3	to get ten to the minus three, ten to the
4	minus four. But the effective resuspension
5	rate I think is about ten to the minus six is
6	about right, given what I have looked at in
7	those references.
8	DR. MAURO: When you say
9	effective, are you referring to breathing zone
10	five micron? In other words, the concern is
11	not with the total mass loading but with the
12	mass loading that is over a protracted period
13	of time and of a particle size that is within
14	the breathing zone, within five microns?
15	DR. NETON: I am actually kind of
16	thinking about more like more as if this
17	was sort of a time weighted value. In effect,
18	you know, you don't have people broom sweeping
19	an entire ship where you could have ten to the
20	minus three the whole day.
21	DR. MAURO: You know, when you put
22	your response together where, you know, it

1	certainly is a reasonable thing to look into
2	and, if approved by the Subcommittee, we will
3	take a look at that when it is issued.
4	DR. BEHLING: Just to comment in
5	context with what both John and Jim Neton just
6	talked about, I would like to go back and look
7	at, for NIOSH to look back at the table that I
8	believe you cited and I cited as Exhibit 9 in
9	my write-up, which gives you a whole range of
10	resuspension factors. And I am looking at my
11	own write-up here, as defined in Exhibit 9.
12	And when you have things and you already
13	mentioned it, vigorous sweeping, walking,
14	changing, fan only, machining, stacking
15	sheets, and other activities, there are in
16	fact reported resuspension values of ten to
17	the minus three and then a whole range of ten
18	to the minus four and ten to the minus five.
19	And so there are various values
20	documented in the scientific literature
21	inclusive of the one citation that NIOSH used,
22	the Stewart 1967 or is it '64, which has

1	resuspension values for a facility that is
2	still operational that certainly is well above
3	the E minus six value.
4	So anyway, I would still have some
5	reservations about the universal value of E
6	minus six.
7	DR. NETON: Well we will write it
8	up and discuss from there.
9	CHAIR MUNN: Any other thoughts?
10	If not, we will let Jim go and we will move
11	backward to our originally scheduled
12	instruction on database, now that Citrix seems
13	to be operating for us, we will see whether
14	everybody can get to our tracking system.
15	They are having distributed to us
16	here some basic instructions, which are very
17	helpful for folks who are not on a daily or
18	weekly basis interacting with this database.
19	And I am going to let the experts
20	who are going to lead us through this take the
21	discussion from here. And do we need to start
22	with these instructions? It looks like we do.

1	DR. ULSH: Well, I Will Just key
2	it up just a little bit.
3	CHAIR MUNN: All right. Thank
4	you.
5	DR. ULSH: We have been working or
6	this database for quite some time, and I think
7	we are at a point now where kind of the first
8	major iteration is done. There are still some
9	tweaks to be made, things that we would like
LO	to be able to do that we are not quite sure if
L1	we know how to do it yet. And that is why
L2	Yemi is here. He is the developer of the
L3	system.
L4	Elyse is on the line. I'm here.
L5	Steve Marschke is here. We are the main
L6	people who troll around in this thing.
L7	So I think what I would like to do
L8	maybe is let Yemi goes through these
L9	instructions that he just handed out. And
20	Elyse and Steve and I, maybe if you want to
21	bring up things that we would like to be able
22	to do but we are not quite sure if we are

1	there	yet,	you	can	bring	those	up.	And	we

- 2 will just drive around a little bit, kind of
- 3 get a test drive.
- 4 CHAIR MUNN: Thank you very much.
- 5 And, Yemi, you want to introduce yourself to
- 6 us? You are new to me. I don't know you.
- 7 MR. OYEDIRAN: Well good morning,
- 8 everyone. My name is Yemi Oyediran. I have
- 9 been working on this application for some
- 10 time, and I am ready to walk you guys through
- 11 the usage of this application.
- 12 For the record, the term web-based
- application or application is more precise,
- just to be pedantic, than database. Just to
- 15 assist everyone.
- 16 MR. HINNEFELD: See, now only the
- 17 computer people care about that.
- 18 (Laughter.)
- 19 MR. HINNEFELD: I will instruct
- them not to be offended when we continue to
- 21 refer to it as a database.
- 22 CHAIR MUNN: Please do not be

1	offended.	
T	orrenaea.	

- 2 MR. OYEDIRAN: Oh, I'm not. I
- 3 just wanted to break off some education.
- 4 that's all.
- 5 CHAIR MUNN: You see, we put it
- 6 together as a database.
- 7 MR. OYEDIRAN: I'm just very
- 8 pedantic.
- 9 CHAIR MUNN: This is fine, as it
- 10 should be. And thank you very much. And it
- is wonderful to be able to put a face and a
- 12 personality behind all of the mystery that has
- 13 been going on.
- 14 MEMBER ZIEMER: How do you spell
- 15 Yemi?
- 16 MR. OYEDIRAN: Y-E-M-I is how you
- 17 spell my name. I'm world famous.
- 18 CHAIR MUNN: Or will be soon.
- 19 (Laughter.)
- 20 CHAIR MUNN: Right on cue.
- MR. OYEDIRAN: Before we proceed,
- the first thing I want to bring as a point for

1	everyone to catch is that this application is
2	not very well viewed in what is called
3	compatibility view. And it is the view that
4	Microsoft created for Internet Explorer
5	browser to allow web-based applications to be
6	viewed with standards that were previously
7	that work on previous versions of the
8	application.
9	So the first thing I always
10	recommend people to do is to first click here,
11	which turns on and off or toggles the
12	compatibility view on and off.
13	CHAIR MUNN: Where are we? Let's
14	start from where most of us novices
15	DR. ULSH: The way you are going
16	to get there is go into the
17	CHAIR MUNN: Start from the
18	DR. ULSH: staff tool login.
19	MR. OYEDIRAN: And my instruction
20	back to we will just start with the
21	instructions and I will take you there.
22	So using the Start Menu, you want

1	to	open	up	the	Internet	Explorer	browser,
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- 2 using the icon that is located generally on
- 3 the top left-hand side of the menu. I will
- 4 get confirmation.
- 5 (Simultaneous speaking.)
- 6 Okay now is everyone familiar with
- 7 how to navigate to staff tools?
- 8 MR. KATZ: Then you might want to
- 9 save it as your favorite.
- 10 MR. HINNEFELD: Yes, once the
- 11 screen comes up, click favorites and save and
- it will show on the favorites list.
- MR. KATZ: Yes.
- 14 CHAIR MUNN: Okay. The screen
- 15 comes up that tells me you're on sacred
- 16 ground, and you say okay, I know that. Then
- 17 we can get -- now that is interesting because
- 18 I have -- that is not what I just looked at.
- 19 MR. MARSCHKE: I know they changed
- it on us on the tools menu, it used to be --
- 21 the other thing is further up.
- 22 CHAIR MUNN: Yes.

1	MR. MARSCHKE: The document
2	MR. HINNEFELD: document
3	tracking because we were going to build this -
4	- document tracking. We abandoned that and
5	built our own application.
6	MR. MARSCHKE: So that is still
7	there, so a lot of people are still clicking
8	on that.
9	MR. OYEDIRAN: We have built
LO	something very special for you and you alone,
L1	Dr. Munn.
L2	Are we ready to proceed?
L3	CHAIR MUNN: I believe. Is
L 4	everybody now at the same point that we have
L5	gotten to a screen that says Board Review
L6	System?
L7	MR. OYEDIRAN: I will assume that
L8	is a yes.
L9	CHAIR MUNN: And the next heading
20	is Documents Under Board Review.
21	MR. OYEDIRAN: So as you see, the
22	first thing that it brings you up to is to

1	what I am referring to as the document list.
2	And it brings up the, in the document list,
3	this document list is by default everything
4	that deals with this particular Subcommittee,
5	Procedures Review. We will go through how we
6	can navigate through other Subcommittees if
7	you would like.
8	But in the document list, it can
9	be ordered by title, number, and findings by
LO	clicking on the column headers. So these
11	column headers give you the ability to be able
L2	to re-order. If you wanted to navigate by
L3	document title, it will give you an
L4	alphabetical order.
L5	CHAIR MUNN: So if we click on
L6	document title, we get alphabetical.
L7	MR. OYEDIRAN: Correct.
L8	CHAIR MUNN: And if we click
L9	MR. OYEDIRAN: Document number
20	CHAIR MUNN: document number,
21	which is the way we were tracking it in the
22	original.

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1	MR. OYEDIRAN: It will order the
2	document list for you by document number, by
3	total findings, and also by total active
4	findings.
5	CHAIR MUNN: by document number
6	and it gives me the same order that I had in
7	previous times, except that OCAS has changed
8	to DCAS. Trying to stay correct in all
9	matters is not easy.
10	MR. MARSCHKE: If you click on it
11	once, you get from, well the numbered ones,
12	the findings, the total findings. If you
13	click on it once you get from low to high.
14	MR. OYEDIRAN: It will be
15	ascending and then if you click on it twice,
16	it will be descending.
17	CHAIR MUNN: Okay.
18	MR. MARSCHKE: I find that useful.
19	CHAIR MUNN: Yes, I'm sure one
20	could. So
21	MR. OYEDIRAN: I am here to be
22	useful.

1 CHAIR MUNN: You are already	very
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- 2 useful. Thank you, Yemi.
- MR. OYEDIRAN: Thank you, Dr.
- 4 Munn.
- 5 CHAIR MUNN: So I will let you
- 6 proceed. Yes.
- 7 MR. OYEDIRAN: Okay. Thank you so
- 8 much.
- 9 So as you see the documents can
- 10 also be manipulated by using the two filters
- located at the top of the document list. And
- 12 at that top of the document list, you will see
- the Work Group filter located in the top left-
- 14 hand side of the list. This Work Group filter
- 15 allows for the document list to display
- 16 documents that are associated with a
- 17 particular Work Group. Right now, it defaults
- 18 to our current Work Group, but the Work Group
- 19 filter can allow you to filter by other Work
- 20 Groups. If you choose another Work Group, it
- 21 will be empty.
- 22 CHAIR MUNN: That is going to be

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1	very	nelpi	:u⊥ down	the	road.	Thank	you.

- 2 MR. OYEDIRAN: It will. To the
- 3 right of that, you will see that I have a
- 4 document type filter.
- 5 CHAIR MUNN: Yes.
- 6 MR. OYEDIRAN: And it allows for
- 7 the document list to display documents that
- 8 meet a type criteria that you have selected.
- 9 I keep forgetting this is
- 10 interactive. So here is the Work Group
- 11 filter, and here is the document filter. So
- 12 you have Technical Basis Documents. I'll
- 13 choose one, for instance.
- 14 CHAIR MUNN: Will the OTIBs be
- 15 listed under -- as well?
- MR. OYEDIRAN: Yes.
- 17 CHAIR MUNN: I just want to make
- 18 sure, since we have problems with that
- 19 sometimes in our original set-up.
- 20 MR. OYEDIRAN: Okay. And --
- 21 CHAIR MUNN: I see one thing
- 22 missing.

1	MR. OYEDIRAN: Ma'am?
2	CHAIR MUNN: That is a request
3	that we had made previously. I don't see a
4	filter for date. In the past, the report that
5	we have made to the Secretary has been based
6	on groups that we have received in lots
7	essentially, so that we sort of kept track of
8	how well we had done from one group of
9	procedures to another, based on when we got
LO	them.
L1	We won't use that very frequently,
L2	but we have asked, as we were putting this
L3	together, that we not lose that ability to
L4	track by date of receipt.
L5	DR. ULSH: Are you talking date of
L6	the actual procedure or the date of the
L7	CHAIR MUNN: No, we are talking
L8	about
L9	MR. HINNEFELD: The date of the
20	SC&A review, the document that includes the
21	review of that procedure. The SC&A procedure
22	come over in a series of large reports,

1	that include each one complete and includes
2	very many procedures in it. And so you take
3	the date of that report and you put that in
4	that field for the procedures that are listed
5	in that report.
6	MR. MARSCHKE: You cannot really
7	do that on this screen because this screen is
8	a document-driven screen, as opposed to an
9	issues-driven screen.
10	Some documents, for example, IG-1
11	I believe, have been reviewed by SC&A twice.
12	We have reviewed I think Rev. 2 and Rev. 3 of
13	those documents. So there would be two dates
14	associated with IG-1, for example.
15	Now the issues themselves, you
16	could be able to do a sort. Eventually when
17	we get to the point right now the database,
18	as I understand it, is not set up to generate
19	reports. When we get to the point where we
20	are generating reports, that could be one of
21	the things that we could be looking for a
22	report that covers issues that were generated

1	between certain time periods.
2	CHAIR MUNN: Now the dates that we
3	have been using in the past have been dates
4	when that particular item was assigned to this
5	Subcommittee for work. Our first documents
6	were assigned to us in two different lots.
7	And then we had some miscellaneous ones in-
8	between. And then there were a third group.
9	So we had been tracking, on
LO	occasion, by that criterion, that is to say,
11	when we received it, because it gives us a
L2	feel for the amount of time that we can report
L3	out, do our final closure of these specific
L4	items.
L5	Of course, each finding is going
L6	to may be an entirely different thing, but
L7	what we are looking at is from the time we get
L8	it, how long does it take us to wrap up the
L9	entire issue, not just an individual finding.
20	So we have I will be glad to
21	get back to you with we had Group 1, Group
22	2, some miscellaneous and Group 3 items that

22

1	we were working on. Some of those have been
2	completely closed out now. And I can see that
3	this is, as we now operate, we think we
4	don't get these things in groups so
5	frequently, although as an example we will be
6	we received the PERs that we are getting
7	and the two-pagers that we are getting from
8	SC&A, we are having those assigned to us in
9	blocks as well.
10	And it's I guess this is
11	something which if it is going to be
12	impossible for us to do, then it's impossible
13	for us to do. From my point of view, trying
14	to keep track of when we got things and how
15	well we are doing, it has been useful in the
16	past.
17	So if it is something that we can
18	do, fine. If we can't, then if you go back
19	to the old, excuse me, database, you will be
20	able to look at it and see that there is a
21	period during a given year when we received,
22	we started to work on 20 items. And that is

1	the kind of categorization that I am talking
2	about. It doesn't matter to anybody anytime
3	except pretty much to me when I start to
4	report to those in power over us.
5	Paul?
6	MEMBER ZIEMER: Well under the
7	search part up there in the corner, do we have
8	the ability to search the date that we
9	received the SC&A review?
10	MR. OYEDIRAN: Currently that was
11	not a requested feature.
12	MEMBER ZIEMER: What are the
13	features of search? What is it looking for,
14	key words?
15	MR. OYEDIRAN: We will get into
16	that.
17	MEMBER ZIEMER: Oh, okay. I'm

getting ahead. I was just thinking if you could search for a date, the date of the SC&A report, then you can say okay, or maybe all reports received up to a date or something like that, then you could do that without

1	having	а	new	field	or	something.

- 2 CHAIR MUNN: Well, I'm sorry. I
- 3 have thrown a monkey wrench in Yemi's
- 4 presentation. I didn't mean to do that.
- 5 MR. MARSCHKE: I think you can do,
- 6 Wanda, I think you can do what you want to do
- 7 and get the information you need for your
- 8 report. I just don't think you can get it on
- 9 this particular screen.
- 10 CHAIR MUNN: Okay. Let's just
- 11 keep going with the hard work that has been
- done up to this point. And I will try not to
- interrupt you again.
- 14 MR. OYEDIRAN: Oh, no. Feel free.
- 15 I am here for you. So whatever questions at
- 16 whatever time you want to ask them.
- 17 CHAIR MUNN: All right.
- 18 MR. OYEDIRAN: So after the
- 19 document type filter, to the right of that,
- 20 you will see that there is a clear button,
- 21 which allows you to clear out those filters
- and set them back to their initial states.

1	If you scroll down to the bottom
2	of the screen, you will see that there to
3	the bottom of the document list, you will see
4	that there is a sequence of numbers that allow
5	for pagination of the document list. So we
6	are currently on page one. We can navigate to
7	page two.
8	CHAIR MUNN: All right now, let me
9	ask you something before we leave the filters
10	issue.
11	MR. OYEDIRAN: Okay.
12	CHAIR MUNN: If I ask for reports,
13	what kind of reports am I going to get? I
14	just click and find out.
15	MR. OYEDIRAN: The reports
16	functionality is currently we are currently
17	awaiting to proceed on working on the reports,
18	once SC&A has given us the go ahead to
19	continue. We are kind of going through first
20	just kind of managing the documents and kind
21	of the crux of the application before we move
22	on to the document to the reports portion.

1	DR. ULSH: I think we're talking
2	about different things. If you click on
3	document filter type, the dropdown
4	CHAIR MUNN: See, I understand
5	TBDs, TIBs, forms, Implementation Guides,
6	policies, procedures, but I don't understand
7	what reports
8	MR. MARSCHKE: RP, RPRT, like
9	Report 44, we reviewed Report 44.
10	CHAIR MUNN: Okay, thanks.
11	DR. ULSH: Yes, we have got two
12	different definitions of report floating
13	around here.
14	What Wanda, I think, is asking
15	about is the type of document that we have
16	already generated, kind of like a TIB but now
17	this is a different type. It is called an
18	RPT, I think.
19	CHAIR MUNN: Right. It would help
20	me if that said RPT rather than report.
21	Because the heading of the entire list is
2.2	reports. And if under reports we have another

1	item	that	says	reports,	this	simplistic	mind

- 2 says what kind of reports. RPTs would be --
- just as we have say TIBs. That would be
- 4 helpful in addition.
- 5 MR. HINNEFELD: Well if we made it
- 6 again, this TIB, what we would just do is put
- 7 in parenthesis after report --
- 8 (Simultaneous speaking.)
- 9 MR. HINNEFELD: If you just put on
- 10 this menu here, after the word report, if you
- just put in parenthesis RPRT. I think most of
- 12 them are RPRT.
- 13 MR. MARSCHKE: It's both. OCAS is
- 14 RPT, ORAU is RPRT.
- MR. HINNEFELD: Okay.
- MR. MARSCHKE: So you might want
- 17 to put RPT comma RPRT.
- 18 CHAIR MUNN: Yes.
- 19 MR. HINNEFELD: Just put in there
- the way you had these parentheticals up here.
- MR. OYEDIRAN: Okay.
- 22 MR. HINNEFELD: Just put it in

1	there like that and that will, I think
2	CHAIR MUNN: Thank you.
3	MR. OYEDIRAN: Is there anything
4	else you see on the filters that is not clear?
5	CHAIR MUNN: No, but I haven't
6	worked with them yet.
7	(Laughter.)
8	CHAIR MUNN: Thank you.
9	MR. OYEDIRAN: Oh, no problem.
10	So with the pagination, one thing
11	that is interesting about the pagination is
12	that whatever filter that you applied to, we
13	decided to go by alphabetical order, and you
14	continue to paginate, it will keep your
15	alphabetical order as you move on.
16	One thing I wanted to bring to
17	you, I want to move on to viewing the
18	document, if that is okay.
19	CHAIR MUNN: Yes.
20	MR. MARSCHKE: You didn't talk
21	about the search capability.
22	MR. OYEDIRAN: I won't get to that

1	quite yet. Search capability is on all the
2	pages, and it is the last thing to touch on.
3	MR. MARSCHKE: Okay.
4	MR. OYEDIRAN: To be able to view
5	the document information, there are two issues
6	I wanted to bring up. First when you click on
7	that plus, it gives you what Subcommittee, the
8	document that you are discussing is currently
9	involved is what it is currently referring to.
10	So in this case, it is the
11	Subcommittee on Procedures Review. To be able
12	to view the rest of the information about the
13	document, you just click anywhere in this row,
14	and it will take you to this page, which is
15	where the document, in essence, lives.
16	To view the actual documents, what
17	you need to do is you come to the title, and
18	it will display the actual document in a pop-
19	up screen, individually. And here is the
20	document of which we are referring to.
21	So there is a PDF icon. Do you
22	see the red PDF icon?

1	CHAIR MUNN: Yes.
2	MR. OYEDIRAN: To the right of the
3	icon, you will see the title of the document.
4	(Simultaneous speaking.)
5	If it looks a little odd, it is
6	because you are in compatibility view. And to
7	the right of the address bar on the
8	application, just click right there. It will
9	be over here where my mouse is on the screen.
10	Clicking that button will normalize your page
11	for you.
12	CHAIR MUNN: So there is the
13	magic, the document is there.
14	(Simultaneous speaking.)
15	MR. OYEDIRAN: Hit enter, please,
16	sir.
17	CHAIR MUNN: Oh, that is going to
18	be so helpful.
19	MEMBER ZIEMER: Got you. Okay.
20	CHAIR MUNN: I have literally
21	spent hours searching for a document.
22	MR. HINNEFELD: If you have

1	reviewed	-i +-	4 +-		+horo	2005.7
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- 2 MR. OYEDIRAN: It will be right
- 3 there for you.
- 4 CHAIR MUNN: Thank you.
- 5 MR. OYEDIRAN: Oh, no problem. So
- 6 that is how you will view the document.
- 7 To view the finding, as you see,
- 8 it will have a list of findings that are there
- 9 for you to see below the document title. In
- 10 the message area, the blue icon represents the
- 11 user who initiated the finding with her name
- 12 below it. Also as a quick note, findings are
- also displayed in the order of which they came
- 14 in.
- To the right of that name, you
- 16 will see the title, date, and the finding
- 17 details which will appear in this comments
- 18 bubble. So we have a comment bubble, and we
- 19 have a user. We kind of wanted to set up this
- 20 up similar to forms you might see on other
- 21 websites.
- To be able to -- I apologize. To

1	view the current status of the finding, it
2	will be up here on the bottom right-hand
3	corner. So in my example here, you see that
4	it is in abeyance, which has a blue dot by it.
5	If I scroll down further, you have another
6	one that the status is closed, which has red.
7	Each status has a different color dot to help
8	you specify that.
9	CHAIR MUNN: Oh, that is helpful,
LO	too. Thank you very much.
L1	MR. OYEDIRAN: Oh, no problem.
L2	CHAIR MUNN: I love those red
L3	buttons.
L4	MR. OYEDIRAN: Now to view the
L5	actual responses, click on the blue plus sign,
L6	which is going to be on the bottom left-hand
L7	corner of the message area. And you will see
L8	some animation, which will bring down the
L9	responses that you see from the application.
20	The responses will appear with the
21	corresponding user's name in the top left-hand

side of the response. So in this example, you

22

1	will	see	the	unspecified	OCAS	, OD	user.	Also
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- as a note to also bring up, every response has
- a different color based on its response type.
- 4 So there is a highlighted area around here.
- 5 We have a blue highlighted area. Here we have
- 6 something that is a little bit more gold.
- 7 This lets you know that you have a different
- 8 response type for each one of these response.
- 9 It is just to give a little difference just
- 10 for viewability.
- Now this is where the general
- 12 based information kind of stops. There are
- 13 some -- for certain users with certain
- 14 permissions, they have ability, as you can see
- in this example, to edit a status, edit a
- 16 response. They are given extra -- add a
- finding is another one that some of you might
- 18 see on your screen, and some of you might not
- 19 see. These are given to particular users that
- 20 have been given the permissions to be able to
- 21 do some of these things. Your standard users
- 22 -- and we are not going to cover what those

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- 2 users. But I am just bringing that up to let
- 3 you know when you see this on my screen, this
- 4 is really given to Brant, who has those
- 5 permissions.
- 6 DR. ULSH: Steve and Elyse should
- 7 have those permissions.
- 8 MR. OYEDIRAN: They do have those
- 9 permissions.
- 10 (Simultaneous speaking.)
- 11 MR. OYEDIRAN: John has those
- 12 permissions.
- 13 CHAIR MUNN: Okay, if I say add
- finding here, it's going to tell me that I can
- 15 or can't?
- MR. MARSCHKE: Add findings is up
- on some of the wrong screens.
- 18 MEMBER ZIEMER: The coveted add
- 19 finding status.
- 20 CHAIR MUNN: I just want to see --
- 21 I'm sorry.
- 22 MEMBER ZIEMER: Well we are taking

1 your	status	away	then.
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- 2 CHAIR MUNN: Thank you very much.
- 3 I quess I can go home now.
- 4 MR. OYEDIRAN: You do have these
- 5 permissions.
- 6 CHAIR MUNN: Yes, I understand. I
- 7 just wanted to see if it told me.
- 8 MR. OYEDIRAN: She is the chair.
- 9 CHAIR MUNN: I wanted to see if it
- 10 told me that other people --
- 11 (Simultaneous speaking.)
- 12 MR. HINNEFELD: I believe I was
- involved in the discussion from the very start
- of permission and I believe that we decided,
- 15 we being, I think, Tom James and me, or I
- 16 decided and I told Tom that let's give the
- 17 permissions to the chairman.
- 18 CHAIR MUNN: Yes.
- 19 MR. HINNEFELD: Wanda, did you
- 20 hear me? I said let's give the -- well we
- 21 picked out several people. I think I have got
- these permissions, although I don't use them

1 really a	at al	Ll.
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- 2 CHAIR MUNN: Yes, I had assumed
- 3 that I would have.
- 4 MR. HINNEFELD: Yes, and I think
- 5 we decided to give it to the chairman of each
- 6 Work Group and Subcommittee.
- 7 CHAIR MUNN: Yes, we had discussed
- 8 that earlier, and that is what we had agreed
- 9 upon. Yes.
- 10 MR. MARSCHKE: Wanda has kind of a
- 11 half permission. She has a permission to add
- 12 findings, but she does not have permission to
- 13 edit findings or edit status.
- DR. ULSH: I think that is in line
- 15 with what we discussed when you came to
- 16 Cincinnati that you would kind of be Wanda's
- 17 designee. But we can change that if you want
- 18 to do that.
- 19 MR. MARSCHKE: No, I just want to
- 20 make sure that that is -- you know, so there's
- 21 really three levels here that we are talking
- 22 about. One level is you can't do anything but

1	view	it.	And	actually,	that	should	be

- 2 available to anybody --
- 3 CHAIR MUNN: To anybody.
- 4 MR. MARSCHKE: -- in NIOSH, in
- 5 SC&A, anybody who can get to the tools.
- 6 Anybody who can get on to the OCAS or the DCAS
- 7 tools screen and click on that button, should
- 8 be able to see what is out there.
- 9 And then the second level is, I
- 10 guess, like Wanda has, where she can add
- 11 findings but she can't edit anything.
- 12 CHAIR MUNN: But I can't mess with
- 13 anything. Yes.
- MR. MARSCHKE: And then the third
- 15 level is --
- 16 CHAIR MUNN: Is people who
- 17 actually work it.
- 18 MR. MARSCHKE: Screw up
- 19 everything.
- 20 (Laughter.)
- 21 MR. OYEDIRAN: That is by design.
- Where was I? I am so sorry. I apologize.

1	CHAIR MUNN: Before I interrupted
2	you.
3	DR. ULSH: Well is that kind of
4	the way the status the capability of the
5	database to set status
6	MR. OYEDIRAN: Pardon?
7	DR. ULSH: The capability you just
8	described, is that the way it is now?
9	MR. OYEDIRAN: Yes, that is the
10	ordering that is, in essence, the ordering.
11	DR. ULSH: Okay.
12	MR. OYEDIRAN: Let's briefly kind
13	of talk about the search. Okay?
14	MR. MARSCHKE: That's not quite
15	the way we described it. Basically we
16	described it as I should be the only one that
17	has the capability to set status. And then I
18	should have that capability only when I am
19	working under the as a representative of
20	the Subcommittee.
21	DR. ULSH: See, I think that might
22	have caused some problems.

1	MR. MARSCHKE: Yes, this will be a
2	logic there is going to be logic problems
3	there. I understand that. But you know, I
4	could see John Stiver here has the capability
5	to edit status as well, which may not be a bad
6	thing because maybe I want John to do it, but
7	I don't know that that is what we agreed to.
8	Right now we just wanted to
9	basically be able to change the status when we
10	are in this room meeting together as a
11	Subcommittee and not, you know, SC&A can't go
12	back and start closing out all these issues on
13	their own.
14	CHAIR MUNN: We wanted to be able
15	to sit around the table and watch the status
16	change.
17	MR. MARSCHKE: And watch the
18	status change.
19	MR. KATZ: You can handle that
20	administratively. You don't need to reprogram
21	to do that.
22	MR. MARSCHKE: We can. If you

1	trust us to basically go that route, then we
2	can handle it that way.
3	MEMBER ZIEMER: Well in fact when
4	you change it, there is a tracking of the
5	dates and times somewhere in the system. So
6	if you fiddled around with this between
7	meetings, it would show up. Right?
8	MR. STIVER: Sure, you would be
9	able to see who made the change.
LO	MR. OYEDIRAN: Okay? So we'll
11	talk. I will take you guys through the edit
L2	status approach, and I will explain to you
L3	what is going on here. But I think there has
L4	been some misunderstanding in how this process
L5	works and it is a bit obfuscated.
L6	When you want to change the status
L7	of a user, you will be given the ability to be
L8	on behalf of another user while you are doing
L9	this. Because of authentication, you cannot,
20	in the way that you are thinking of how you
21	would be on behalf of somebody else, that is

not actually legal to the way that we operate

1	with our applications. No application
2	actually allows you to log in as another user.
3	You have to be logged in as yourself. And
4	the way that we have the only solution we
5	have for that is giving you the ability to be
6	on behalf of another user when you are
7	entering this information.
8	So for instance, I want to be on
9	behalf of my fearless leader, Mr. Leroy
10	Turner. This now gives me the ability to now
11	edit the status because I am now working on
12	behalf of him when I am entering this
13	particular piece of information.
14	MR. MARSCHKE: Why does that give
15	you the authority to edit the status?
16	MR. OYEDIRAN: Pardon?
17	MR. MARSCHKE: Why does that give
18	you the I don't see the logic behind that.
19	I don't understand the logic.
20	Why should Leroy Turner have the
21	ability, the authority to allow you to change
22	the status?

1	DR. ULSH: Okay, here's why.
2	Because you sent a list of comments some time
3	ago, and I think number 9 was I should only be
4	able to change I, Steve Marschke, should
5	only be able to change the status when I am
6	acting for Wanda, when I am acting as the
7	designee for the Committee Chair. The way
8	that that request is interpreted is what Yemi
9	has just said.
10	Now maybe that is not what we
11	intended, but that is the way it was
12	interpreted. That was the response to that
13	particular comment. Right?
14	MR. MARSCHKE: Then Wanda should
15	be the only one that is in the on behalf drop-
16	down box.
17	DR. ULSH: What Steve is saying is
18	that the only thing that should be able to
19	change status, according to the way he is
20	thinking is if it says from Steve Marschke
21	acting on behalf of Wanda Munn. That is the
22	only combo that would let you change the

1	status.	Right?	Is	that	what	you	are
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- 2 thinking?
- 3 MR. MARSCHKE: That is what I am
- 4 thinking.
- DR. ULSH: Now, we can talk about
- 6 whether we want to do it that way, but that is
- 7 kind of what you are saying.
- 8 MR. MARSCHKE: Yes, that is the
- 9 way I was thinking it was going to operate.
- 10 DR. ULSH: I know. I think we --
- 11 MR. HINNEFELD: As a practical
- matter, we're not going to build a system that
- we don't have complete control over.
- 14 CHAIR MUNN: Yes.
- MR. HINNEFELD: I mean we are just
- 16 not. We are not going to set up an
- 17 authorization for a Chairman that we cannot in
- 18 our developing process --
- 19 MR. MARSCHKE: Well I know that
- 20 the developer will be able to change the
- 21 status. Yemi will be able to do anything he
- 22 wants to the data.

Τ	MR. HINNEFELD. So what you are
2	saying, though, is that now well, here is
3	an issue, Steve.
4	We could conclude that we want to
5	enter a particular finding. We want to edit
6	it. So we NIOSH want to enter a particular
7	thing in the database. And I don't want to
8	mess with it. Brant is on vacation. I give
9	it to somebody else and say this is all you
10	have got to do because we are going to get
11	more people familiar with the database. You
12	clip this response from Word and you stick it
13	in the database. That is all you have got to
14	do, and you can act on my behalf when you do
15	it.
16	MR. MARSCHKE: I have no problem
17	with that, Stu. On editing responses and
18	bringing it now you are talking about
19	but this is something we are talking about
20	changing the status.
21	MR. KATZ: That is my point. We
22	don't need to design a software specific only

1	to the needs of this one Subcommittee and its
2	very narrow approach. We can deal with that
3	with administrative procedures, whatever the
4	Subcommittee wants to do administratively, in
5	terms of who has authority to do what, we can
6	establish that and everyone will behave
7	accordingly. And we can trust everyone. We
8	don't need to build a system that is Fort Knox
9	to prevent people from doing things that they
10	are not allowed to do. Because I am not
11	really worried about people behaving badly or
12	whatever you want to call it.
13	DR. ULSH: So moving forward, if
14	everyone agrees with what Stu and Ted have
15	just said, moving forward, is there any
16	continuing need for this on behalf of, or can
17	we just make that go away and say who is
18	making these changes and, like you said, deal
19	with it administratively?
20	MR. HINNEFELD: Well is it built
21	in there yet? Do we have it in there now? If
22	we have got the capability in there, let's

1 don't take it out.

MR. MARSCHKE: Basically, this
comes into more again, this is another
thing. This comes in when you start editing
the messages and adding responses. I think
this same screen is more important then.
Because as we talked back in whenever it was
we came down, a lot of times somebody like
myself is going to be entering the stuff, the
responses into the database, but I did not
generate the response. Maybe Bob Anigstein
generated the response. And so I am going to
be that is where I thought that this was
coming from. I am going to be the person
entering it. It will be from Steve Marschke
on behalf of Bob Anigstein.
And so from that point of view, I
think it is important to keep the on behalf
of. In fact, I think it is important to
expand the on behalf of because right now we

have it limited to whoever is on that drop-

down menu, but in reality it could be anybody.

21

1	SC&A could generate a response. Anybody at
2	NIOSH could generate a response.
3	So there should probably, there
4	can be a drop-down menu, but there should also
5	be an overwrite capability so that you can put
6	in names of people who generate responses who
7	don't happen to be on that drop-down menu.
8	CHAIR MUNN: Yes, and we have
9	already had the experience of having a
10	response in an exchange that is going back and
11	forth between the Agency and the contractor.
12	And we have had a response which was not
13	entirely accurate; it needed to be edited.
14	And it was edited by someone else, but in
15	order for that edit to be made, an entirely
16	new it was not possible to edit what was
17	there. It was necessary to make an entirely
18	new response.
19	MEMBER ZIEMER: Just replace the
20	old one.
21	CHAIR MUNN: But it didn't even
22	replace the old one. It was in addition to.

1	So	we	had	this	continual	list	of	minor
2	cor	rect	ions	to edit				

- MR. MARSCHKE: Wanda, I think they
 have taken care of that. I think Yemi has
 taken care of that. Right now we are looking
 at the edit status menu, but there is also an
- 7 edit message menu, where you can go in and
- 8 actually do what you are asking for.

to a conclusion.

11

20

- 9 CHAIR MUNN: Okay. Let's just 10 keep looking at the status menu until we come
- 12 Purely from administrative an point of view for the Subcommittee, our key 13 14 issue is to assure that there is someone 15 sitting around this table anytime the 16 Subcommittee meets that has the authority to 17 enter in real time comments and to change is our administrative glitch 18 status. That 19 here, is we want to make sure that is what can
- DR. ULSH: Most commonly, that is going to be Steve acting on behalf of you.

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happen.

1	CHAIR MUNN: Right, as it has been
2	in the past. Paul?
3	MEMBER ZIEMER: Well and I like
4	Steve's comment. The other Subcommittees, not
5	Subcommittees, Work Groups, really do not have
6	Steve's equivalent.
7	So for example, if Bob Anigstein
8	does develop something, say, for General Steel
9	Industries, I would want the record to show
LO	that Steve entered it on his behalf. And that
L1	would show up, I guess. Wouldn't it?
L2	DR. ULSH: It looks like it would
L3	now. I mean, that is the way it is set up
L4	right now.
L5	MEMBER ZIEMER: Yes, and I think
L6	that also, in a sense, protects Steve. He is
L7	SC&A's guy to enter the stuff, but he is not
L8	working on all these other Subcommittees. So
L9	it's other people generating this stuff, and
20	the record needs to show who generated the
21	material.

CHAIR MUNN: Right.

1	DR. ULSH: So I think, to
2	summarize, we are not requesting a change in
3	the application for this issue right now. Is
4	that correct?
5	CHAIR MUNN: Not at this moment.
6	It looks like we may need to expand it a
7	little. But I didn't hear a request for any -
8	_
9	MR. OYEDIRAN: For the on behalf
10	of, to come to that really quickly, you can
11	only be on behalf of a user that is in your
12	group. So currently, I am Brant. Pretend I
13	am Brant. Brant can only see other NIOSH
14	people. Everybody on this list is a NIOSH
15	person. If you are an SC&A person, you can
16	only see SC&A people.
17	MR. MARSCHKE: But I can't see all
18	the SC&A people. I mean, I can only see the
19	SC&A people who
20	MR. KATZ: So we can put in more
21	names.

MR. MARSCHKE: I mean, if you want

1	to	put	in	the	whole	SC&A	directory,	that	is
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- what you are going to end up doing.
- 3 MR. KATZ: Well the whole SC&A
- 4 directory doesn't -
- DR. ULSH: We'll put in the
- 6 authorized users.
- 7 MR. MARSCHKE: It is not really
- 8 authorized users. That is what we are getting
- 9 at. Not all the authorized users -- not only
- 10 the authorized users are going to be
- 11 generating responses to findings. Like Ron
- 12 Buchanan might generate a finding. Joyce
- 13 Lipsztein may generate a finding. You know,
- 14 anybody who works for SC&A can generate a
- finding, and they are not necessarily going to
- be an authorized user of this database.
- 17 MEMBER ZIEMER: Well everybody can
- 18 use the database.
- 19 MR. STIVER: I'm not sure that --
- 20 (Simultaneous speaking.)
- 21 CHAIR MUNN: Wait. Everybody is
- 22 talking at the same time.

1	MR. HINNEFELD: What are we trying
2	to indicate by an on behalf of? You know,
3	what is that?
4	MR. MARSCHKE: It indicated who
5	wrote the response.
6	MR. HINNEFELD: Well now that is
7	your take. There are kind of two different
8	approaches. When you are changing a status
9	and the meat and you are doing that on behalf
10	of Wanda, you are essentially doing it on her
11	authority.
12	In other words, you have the
13	authority to do that action because she gave
14	you the authority to do that action. That's
15	the way I used it a while ago. I said I want
16	this response to go in the database. I ask an
17	employee, put this in the database on my
18	behalf. And so I gave them the authority to
19	enter that.
20	What you are talking about is
21	identifying the commenter, filling in the name
22	of the person who wrote the comment, who

1	originated the comment because presumably, I
2	would think that presumably there is this a
3	sort of SC&A imprimatur on the responses that
4	go into the database, either because John said
5	this one is good to go or because they said I
6	feel like Hans is capable of writing a good
7	response and so whatever Hans says is good to
8	go.
9	So presumably, there is a sort of
10	institutional support for those items. So
11	what we are getting here is in order to
12	facilitate the discussion and resolution is to
13	have the name of the commenter, which is a
14	little different than, in my view, of on
15	behalf of. Because to me on behalf of speaks
16	of that person has given me the authority.
17	CHAIR MUNN: The authority, yes.
18	MR. MARSCHKE: Well, let's go
19	back. I mean, I am not talking really about
20	this status change screen. I am talking
21	really more about the comment change screen
22	and entering the comments. I agree with you

_	wholeheartedry on the status change screen it
2	should be on behalf of Wanda or somebody else
3	on the Subcommittee.
4	I mean, the original intent of
5	having two individuals identified was to
6	identify who actually put it into the database
7	and who actually made the comment. And that
8	was what came out at the database development
9	meeting that we held back in March.
LO	MR. HINNEFELD: I missed that.
11	MR. MARSCHKE: And you which
L2	you weren't now your interpretation is a
L3	different interpretation, but it really wasn't
L4	the, if you will, the design spec.
L5	MR. HINNEFELD: Well, then I
L6	should have just kept my mouth shut.
L7	(Simultaneous speaking.)
L8	DR. ULSH: We talked about it in
L9	both contexts. So we need to sort it out and
20	interpret it in terms of how do you want the
21	database to act. I mean, if there is an issue
22	here that needs a change to the database, then

т	iet s ligure out what it is and get it done.
2	CHAIR MUNN: There is an article
3	that you have on the screen right now, which
4	is a good example, I think. That gives us the
5	name of the author of the information that has
6	gone onto it. And it also gives us the name
7	of the person who put the information on
8	there. It says Brant put the information on
9	there, and it says the data is from Anigstein.
10	So if we use that particular
11	format, it should clarify our issue.
12	Shouldn't it, Steve? Don't you think?
13	MR. MARSCHKE: If you want to go
14	with that format, that is kind of the way we
15	had been doing it, you know, previously. And
16	that is basically just typing it in, brute
17	force typing it in every time. And that is
18	the way we have been doing it. And if we want
19	to go that way, then really you don't need an
20	on behalf of. I mean, from that perspective,
21	you don't need an on behalf of identifier.
22	MR. STIVER: Steve, at the front

1	of the meeting, as I recall, this was kind of
2	a QA issue. Sometimes that information was
3	being put in, and other times it wasn't.
4	MR. MARSCHKE: That's right.
5	MR. STIVER: So we wanted to have
6	some kind of methodology where you could
7	identify, in this case, the permissions, the
8	authority but also who the original commenter
9	
10	MR. MARSCHKE: If you have it like
11	it is up there on the screen now with Bob
12	Anigstein in parentheses in the message field,
13	there is no guarantee that somebody is going
14	to always write that in to the message field.
15	CHAIR MUNN: Right.
16	MR. STIVER: And at the time, we
17	didn't have identified users. It was just an
18	unidentified SC&A user or unidentified OCAS
19	user, and so you didn't really know who was
20	putting those in.

when you would find out somebody would, you

MR. MARSCHKE:

21

22

So a lot of times

1	know whoever enters this then would end up
2	being like we would think that Brant was
3	responsible for this because it is basically
4	from him. But in reality, it is not. It is
5	not his response. He just happened to type it
6	in.
7	CHAIR MUNN: Yes, Paul?
8	MEMBER ZIEMER: Well there are
9	really two issues I think that Stu kind of
10	clarified that. Who is giving the authority
11	to put the data in?
12	For example, if Bob generated
13	something, initially someone at SC&A must have
14	authorized that. That becomes SC&A's
15	position. Right?
16	So the authorization has to do
17	with something about by whose authority
18	something was done, as opposed to the
19	information about who generated the material.
20	When you are here in the meeting and you enter
21	something on Wanda's authority, it still
22	might be something generated by maybe Dick

т	Delileii ilad solle wordring and we adopted it and
2	Wanda gave you the authority to put it in.
3	So there is a difference between
4	by whose authority and who generated the
5	information.
6	CHAIR MUNN: Well there is also
7	the fact that often you encounter a situation
8	where the comment that is going in there has
9	not been generated by a single person. It is
LO	the result of much conversation that has gone
L1	on and it is the general consensus of, for
L2	example, SC&A. It is the general consensus of
L3	the Subcommittee It is the general consensus
L4	of the Agency. In which case, no specific
L5	name is required.
L6	But in cases where we are
L7	essentially reporting out from some
L8	authority's White Paper, for example, as to
L9	what the resolution or what the issue happens
20	to be, then it seems to be not a necessary
21	thing but an advantageous thing to have that
22	individual's name there. I would not think

1	that	would	ordinarily	be	the	case.

- 2 I would think it would ordinarily
- 3 be SC&A says this. NIOSH says this.
- 4 MR. MARSCHKE: But the thing
- 5 though, Wanda, that is why we usually start
- off with SC&A and then we put in parentheses,
- 7 you know, Steve Ostrow, or Bob Anigstein or
- 8 Steve Marschke or whoever because it is SC&A's
- 9 position. But it really comes more down to a
- 10 tracking point of view is, you know, I want to
- 11 be able to look at the comments or look at the
- messages and be able to say, oh, okay. The
- 13 one I happen to show on the screen now is
- 14 Steve Ostrow. So when I get a response back
- 15 from NIOSH, I know to go to Steve Ostrow to
- 16 say look at this response and see whether or
- 17 not it addresses your concern. If he is not
- identified in the previous SC&A interchanges,
- 19 if he is just identified as SC&A, I am
- 20 sometimes scratching my head saying well who
- 21 made the original finding and who is
- 22 responsible for this.

1	So it is more it kind of grew
2	out of just for my own convenience, I wanted
3	to be able to keep track of who is making
4	these responses so I can go back to them.
5	Because sometimes there is a great deal of
6	delay between the time the finding is opened
7	and the finding is finally closed. So it
8	could be a couple of years and during that
9	time period, we want to keep track of who
LO	wrote the initial finding.
11	DR. ULSH: And it seems to me that
L2	that is really going to be the most
L3	appropriate use for the on behalf of feature.
L4	Because anytime a status changes, it's going
L5	to be on behalf of the chair of the
L6	MR. STIVER: You never really need
L7	to keep of track of it. It is understood that
L8	the authority is coming from
L9	DR. ULSH: The way this is going
20	to play out in practice is SC&A has a lot of
21	people who generate comments but not all those
22	people are going to know how to use this

1	database and they are going to come to Steve
2	and say hey, put this comment in. And Steve
3	will type it in.
4	The same thing on the ORAU side.
5	Elyse Thomas is going to know how to do this
6	and someone is going to make a response. She
7	can put it in and track who the originator
8	was. That is the way it is going to play out.
9	So maybe that on behalf of, if Bob
10	Anigstein comes to Steve Marschke and says
11	here is my comment, then Steve will log in as
12	him, type in a comment on behalf of Bob
13	Anigstein. That seems to me the way this will
14	work.
15	MR. STIVER: Seems reasonable.
16	The only problem I see is that just to have a
17	complete listing available for Bob and people
18	to be commenters. So maybe we should have
19	some ability to write in a name for somebody.
20	MR. KATZ: It's easy to solve. We
21	can get a complete listing in there as a drop-
22	down list so you don't have to write it in.

1	Right?

- 2 MR. OYEDIRAN: Right.
- 3 MR. KATZ: So you supply a list of
- 4 everyone who writes technical comments. It's
- 5 not all of SC&A. It is actually a subset of
- 6 SC&A, and we will have that list in there.
- 7 MR. HINNEFELD: It can be fixed at
- 8 the time. A new person makes a comment who
- 9 hasn't before, you just let us know and we'll
- 10 add that name.
- MR. KATZ: We'll add that name.
- MR. STIVER: Call or whatever and
- 13 say we have got to add this person to the
- 14 list.
- MR. HINNEFELD: Sorry I caused a
- 16 problem.
- 17 CHAIR MUNN: Okay, everybody
- 18 understands what we are doing except me.
- 19 That's good. That means we are clear. Okay.
- 20 MR. OYEDIRAN: Okay, I wanted to
- 21 go to the search. The search is very similar
- 22 to the way that a Google search works, at

1	least the way I wrote it, but it currently
2	only I believe I wrote this two months ago,
3	so some of these things are not completely on
4	the top of my head.
5	The search items it allows you to
6	search on are the title and anything that is
7	part of the message or comments in there. So
8	for instance if I wanted to search, this will
9	bring us back up for us. But just this phrase
10	right here, it will take me to a search screen
11	that brings me to this looks a little weird
12	because of the resolution. To make it larger
13	up there, I had to zoom in. This will take
14	you to I'll show you what a better
15	example of what it looks like. This is a
16	better example of what it looks like normally.
17	It will take you to the message or the
18	documents that has that information in it.
19	So as I said before, it takes us
20	to the place where we found that text in
21	there. You can also search by the title. So
22	let's say we wanted to search on this, this

1	TBD.	Ιt	will	bring	us	to	this,	and	it	will

- 2 bring us anyplace that information is -- that
- document's name is in.
- 4 And it will also give you a
- 5 message search. It gives you two different
- 6 searches. So it allows you to give a message
- 7 search and lets you search anything that is
- 8 relating to that document.
- 9 So if you ever do run into some
- 10 issues and a name is mentioned, the
- 11 gentleman's name --
- 12 MR. STIVER: Anigstein.
- 13 MR. OYEDIRAN: How do I spell
- 14 that?
- 15 MR. STIVER: A-N-I-G-S-T-E-I-N
- MR. OYEDIRAN: S-T-I-E-N?
- 17 MR. STIVER: No, E-I-N.
- 18 MR. OYEDIRAN: E-I-N. Believe it
- 19 or not, it -- I cannot find -- well maybe it
- is in the message. And it is mentioned in the
- 21 message. And it is mentioned in these two
- 22 messages and somewhere in here. After digging

1	through for a while it will lead you to where
2	you are looking for.
3	That is how the search works. The
4	search is just very similar to Google search,
5	but it only does it for messages and document
6	information. It also can let you do partial
7	document information. So if I wanted to do
8	TIB-010, I don't believe that actually exists,
9	but it gets everything in there that has that
LO	TIB-010 in it and any messages that are
11	dealing with that as well.
L2	So you can also search because
L3	here is we have an OTIB that is TIB-0010 but
L4	it will help you along the way.
L5	CHAIR MUNN: That's great.
L6	MR. STIVER: That's kind of
L7	interesting. I typed in TIB-24 and I get some
L8	other things that don't seem to be related
L9	here.
20	MR. OYEDIRAN: There is going to
21	be what it is going to have to do because

algorithmically it is going to have to try to

1	guess what the statistical likelihood of what
2	you're aiming for. So it is going to grab a
3	lot of information. And some of that
4	information may be necessary and some of it
5	might not be.
6	The better, the more clear and the
7	more exact you are, the better your searches
8	are going to be, just as like as in Google.
9	But the more broad you are, the less precise
10	it is going to be.
11	MR. STIVER: Because I get
12	something PER-011, which has nothing
13	whatsoever to do with TIB-24 in terms of the
14	characters.
15	MR. OYEDIRAN: Well you are going
16	to have those characters mentioned somewhere
17	in the message or
18	MR. STIVER: In the title there is
19	
20	MR. KATZ: It could be in the body
21	of the document, though. Right?

MR. OYEDIRAN:

Right.

1	MR. KATZ: Yes, you have to open
2	it up and look.
3	MR. STIVER: All right, that makes
4	sense then.
5	MR. OYEDIRAN: So I mean, it just
6	gives you a robust search. One is honed
7	towards the documents, and the other one is
8	honed towards the messages and responses. So
9	that is just where it gives you that.
10	So somewhere in there it is going
11	to give you something that will pull
12	information that may or may not be relevant,
13	but it also ranks your relevance. So your
14	most relevant, based on what you were
15	searching, goes to the top and disambiguation
16	from there.
17	MR. STIVER: So now we know how
18	Google does their search engines.
19	MR. OYEDIRAN: I am actually doing
20	my graduate research on Google search engine
21	right now. So I decided to bring in a little
22	of that. Sorry.

1	CHAIR MUNN: Great. Well done.
2	MR. OYEDIRAN: The other thing I
3	will bring to your attention. I guess since
4	we are covering, we have talked about editing
5	statuses. We have talked about editing
6	responses, I believe. Adding a finding, just
7	to show you, the edit status, edit message,
8	and all of these, basically all work off the
9	same piece of information, the same page,
10	which allows you to give the relevant
11	information. It gives you a Rich Text box so
12	you can format it very similar to Word
13	documents. It even allows you to copy and
14	paste from Word and then format it, based on
15	your Word documents. It allows you to attach
16	attachments to responses and messages, if
17	necessary.
18	MR. KATZ: So can you copy and
19	paste from other compatible
20	MR. OYEDIRAN: Yes.
21	MR. KATZ: like Excel or
22	whatever?

1	MR. OYEDIRAN: I'm not sure about
2	Excel, but you can do it from Word. I did not
3	kind of optimize for Excel, but you can make
4	it work, if you want to put in a table.
5	MR. KATZ: Great.
6	MR. OYEDIRAN: I have a zoom in
7	and zoom out for text. So if you needed to be
8	able to read better
9	MR. STIVER: Is there any way to
10	put a link in to an Excel spreadsheet?
11	MR. OYEDIRAN: If you attach it as
12	a file to a response.
13	MR. STIVER: Oh, you said put it
14	under attachments. But you couldn't just put
15	it in the finding like a little hyperlink?
16	MR. OYEDIRAN: That is another
17	thing you can do as well.
18	So we have seen the documents and
19	the Board reviews. This is also for the Work
20	Group administration, and this gives you Work
21	Group administration for every one of the Work
22	Groups for the Subcommittee on Procedures

1	Review.	You	will	see	all	of	the	people
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- 2 associated.
- 3 MEMBER ZIEMER: Where is this?
- 4 MR. OYEDIRAN: Oh, I apologize.
- 5 If you go to the menu --
- 6 MR. HINNEFELD: Main menu and then
- 7 Work Group administration.
- 8 MR. OYEDIRAN: I didn't plan on
- 9 going over some of these items, so we're kind
- of ad hoc here.
- Going to the Board Review, Ms.
- Munn, my example up top, if you go to this
- menu right here, the Board Review Menu and you
- 14 will have three choices, unassigned, queued
- 15 documents under Board review, and Work Group
- 16 admin. The Work Group admin will lead you to
- 17 the Work Group administration page.
- 18 CHAIR MUNN: Since I don't have
- 19 permission.
- 20 MR. HINNEFELD: Wanda doesn't have
- 21 permission to go to that.
- 22 MEMBER ZIEMER: Yes, it says we

1	can't see that.
2	MR. OYEDIRAN: And that is where I
3	was going. This is why I didn't plan on going
4	over this part because some people have the
5	ability and some people don't.
6	MEMBER ZIEMER: No, I was going to
7	say that it would be why can't we see this?
8	MR. OYEDIRAN: There were some
9	people that were decided to be administrators.
LO	This was in a list of requirements and I just
11	associated the list of requirements with
L2	roles.
L3	Members and alternates and Chairs
L4	do not get the ability to administrate. The
L5	administrators are given to Steve Marschke and
L6	SC&A users, as well as OCAS users and ORAU
L7	Board review members.
L8	So the particular and those are
L9	some things that you might want to hash out in
20	
21	MR. MARSCHKE: Well what is the
22	nurnose of this menu? What does this do?

1	MR. OYEDIRAN: This gives you the
2	ability to administrate permissions.
3	MR. MARSCHKE: What do you mean
4	administrate permissions? What permission? I
5	mean, I guess you mean permissions, this tells
6	you who can
7	MR. OYEDIRAN: You have a selected
8	group of users you can decide on, and they
9	have roles that you can use. And each role
10	has permissions.
11	MR. HINNEFELD: The role, the list
12	of roles there on that, Steve.
13	MR. OYEDIRAN: These are the roles
14	that I was given. So your role is your
15	permission.
16	MEMBER ZIEMER: Well if you can
17	get to this page, you can change things.
18	MR. OYEDIRAN: You can change
19	these
20	DR. ULSH: Okay, I can't change
21	anything. So only you can or Steve can?
22	MR. OYEDIRAN: I was given a list

of names that should have this ability	1	of	names	that	should	have	this	ability
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- 2 MEMBER ZIEMER: Just a comment,
- 3 though. It would be useful, I think, to all
- 4 Board Members to have access to the list --
- 5 MR. OYEDIRAN: You don't want too
- 6 many people having administrative permissions.
- 7 MEMBER ZIEMER: Not
- 8 administrative, to be able to see -
- 9 MR. OYEDIRAN: To be able to see
- 10 the list --
- 11 MR. HINNEFELD: What if any user
- 12 could just see the list.
- 13 MR. OYEDIRAN: We can -- but that
- 14 can be worrying. Because if you can get on --
- 15 his example, he doesn't have the ability to
- 16 remove users.
- 17 MR. HINNEFELD: So I think it
- 18 would be fine for all the Board Members to
- 19 have this authority, just to be able to look
- 20 at it.
- 21 MR. OYEDIRAN: Right. On this
- 22 portion, I think this was just really an old

1	list from when this was probably back in DCTA.
2	So there are things that haven't
3	been since we are, we might as well bring
4	it to your attention as to one of those things
5	that you might want to pass on to my task
6	monitor if you are interested in it working
7	differently.
8	MR. HINNEFELD: Why don't you make
9	a note of that. Let's make sure we work
10	MEMBER ZIEMER: Because otherwise,
11	Zaida ends up having to send out current Work
12	Group lists. This would be a good way to
13	who is on a Work Group.
14	MR. OYEDIRAN: It's very simple.
15	DR. ULSH: So one change is to
16	MR. HINNEFELD: Let everybody be
17	able to read that sheet.
18	MR. OYEDIRAN: That is a very
19	minor detail. It is not very big
20	The application also for user
21	ability, we did our best to kind of have icon
22	sets that give you obvious things. If you see

1 a red X, it is to cancel, close or delete.	ancel, close or delete. If
--	----------------------------

- 2 you see a green check button, it is to accept.
- 3 Green is good. Red is bad.
- DR. ULSH: Wait, red is close.
- 5 That's good.
- 6 MR. OYEDIRAN: That brings
- 7 attention to the fact of don't do anything
- 8 else to this. Move on.
- 9 So and if there are other things
- in the user ability and the usability that may
- 11 make it easier for you to use, please let us
- 12 know.
- 13 MR. MARSCHKE: I just see that a
- 14 lot of the SC&A people that I mentioned before
- 15 like Joyce are on this list. So I can
- 16 basically add her to -- and I can give her
- 17 permission --
- 18 MR. OYEDIRAN: Yes.
- 19 MR. MARSCHKE: -- if I wanted to?
- 20 And then her name would add to that drop-down
- 21 menu when I am editing on behalf of?
- 22 MR. HINNEFELD: Is Joyce an

1	authorized	110022
_	authorized	user:

- 2 MR. KATZ: No, she is not.
- 3 MR. MARSCHKE: Well that is what I
- 4 am just saying. It is on the list here that I
- 5 --
- 6 MR. KATZ: It is on the list, but
- 7 she doesn't have even internet access, I don't
- 8 believe.
- 9 MR. MARSCHKE: I don't care. I
- 10 don't care. If she really ever gets on. I
- want her name to show up on the drop-down menu
- 12 --
- MR. KATZ: Sure.
- 14 MR. MARSCHKE: -- so that when I
- 15 --
- 16 MR. HINNEFELD: Yes, Steve was
- 17 going to take care of that. Well, not Steve.
- John was going to take care of just getting
- 19 the roster of the people --
- 20 MR. KATZ: You are going to --
- 21 SC&A has an action item just to submit all of
- 22 the people who potentially could provide

1	technical	comments.	Those	will	go	in	the
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- 2 drop-down.
- MR. MARSCHKE: I'm just saying it
- 4 is already here. It may already be here in
- 5 this drop-down list.
- 6 MR. OYEDIRAN: That's a minor
- 7 augmentation.
- 8 MR. MARSCHKE: I will let Yemi do
- 9 it.
- DR. ULSH: So, Yemi, can we right
- 11 now, if I said to you I want to see all of the
- 12 in-progress findings. I don't care what
- document it is attached to. Just show me
- 14 that.
- MR. OYEDIRAN: Okay, the status,
- 16 that status filter was just brought to our
- 17 attention this week. We have been waiting for
- 18 -- we finished work on this in April, and we
- 19 have been waiting to hear back on some
- 20 feedback.
- DR. ULSH: Okay. So I'm making a
- list now of action items going forward. So it

1 is not a criticism that it's not here but t	1	is no	t a	criticism	that	it's	not	here	but	th
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- one thing that we are going to want relatively
- 3 rapidly is the ability to do that.
- 4 CHAIR MUNN: Absolutely. That is
- 5 a key ability for us here when we are sitting
- 6 around the table.
- 7 MR. OYEDIRAN: That is going to
- 8 have to be discussed with my task monitor. I
- 9 am a contractor, and I just do as I am told.
- DR. ULSH: All right. Well, we
- 11 will work that out.
- MR. OYEDIRAN: I prefer to dance
- 13 for my dinner. I don't get paid to think or
- 14 make decisions. I just get told what to do. I
- 15 prefer it that way.
- 16 MR. HINNEFELD: Brant, you are
- 17 going to take that up with Tom then?
- DR. ULSH: Yes.
- 19 MR. STIVER: I guess so far we
- 20 have a --
- 21 DR. ULSH: Sorry. Well this
- doesn't have to be an exhaustive list right

1	now.	You	are	going	to	have	to	take	this	and
---	------	-----	-----	-------	----	------	----	------	------	-----

- think about it and play around with it. But
- 3 is there any other burning feature that you
- 4 would like to have that occurs to you right
- 5 now?
- 6 MR. NEELY: Did Steve say he
- 7 wanted to expand the on behalf of lists?
- 8 MR. HINNEFELD: Yes, the SC&A
- 9 list.
- 10 MR. KATZ: SC&A is going to
- 11 provide a list.
- MR. NEELY: Okay.
- DR. ULSH: So John will send that
- to me, and I will get it to whoever it needs
- 15 to go to on our side.
- MR. OYEDIRAN: Yes, the more lead
- 17 time that you give us, the more we will be
- able to get these things done.
- 19 CHAIR MUNN: Being able to sort on
- 20 status is important.
- 21 MR. STIVER: And also by time,
- 22 weren't you interested?

1	CHAIR MONN: 165.
2	MR. MARSCHKE: I will show you
3	what we really want. I can't put it up on the
4	screen. Oh, shoot.
5	DR. ULSH: Yes, that is going to
6	be one, sorting by time, that is going to be
7	one that we are going to have to discuss a
8	little bit to nail down exactly what we want
9	to do. But I will put it on the list here.
10	CHAIR MUNN: Yes, if look back at
11	our old reports, where we used to be able to
12	just print out exactly what we were looking at
13	and when we got it.
14	MR. HINNEFELD: A thought occurs
15	to me in terms of being able to put a date on
16	there and still use a document-driven screen
17	is a different when a document's been
18	reviewed more than once it's a different
19	revision. And so you would have a Rev. 0 and
20	then you would have a rev one at the end of
21	the title it is just part of this document
22	title and then you would have a different

1	date.	That	just	occurred	to	me	as	а	way	to	do
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- 2 it on a document-driven --
- DR. ULSH: Is there ever a
- 4 situation where one document would be reviewed
- 5 by two different Working Groups or
- 6 Subcommittees or --
- 7 MR. HINNEFELD: Well, they will be
- 8 referred back and forth.
- 9 CHAIR MUNN: Yes.
- 10 MR. STIVER: -- some that become
- 11 overarching --
- MR. HINNEFELD: Yes, and some will
- 13 -- go to overarching.
- MR. KATZ: But not simultaneously,
- 15 really.
- DR. ULSH: No. We were trying to
- 17 sort by date. For instance if there was a --
- 18 a Norton Working Group?
- MR. HINNEFELD: No.
- DR. ULSH: Okay, well let's just
- 21 pretend --
- MR. MARSCHKE: Norton's not going

1	to be in here.
2	MR. HINNEFELD: Pick Rocky Flats.
3	DR. ULSH: Rocky Flats. So Rocky
4	Flats, what, ER or TBD is reviewed by the
5	Rocky Flats Working Group, but then at a later
6	time it is picked up by Procedures or somebody
7	else. If we have a date, one date that it is
8	assigned for review, there might be more than
9	one of those, depending on which
10	MR. HINNEFELD: Well but the date
11	doesn't go with that document. The date goes
12	with the review of that document. That is the
13	date that goes in the data field.
14	So I don't see I don't know.
15	We'd have to talk about later on we'll have
16	a conversation about it. I don't see this as
17	being too difficult. Because really what
18	kicks these things off is not that we publish
19	a document. What kicks these things off is

MARSCHKE:

MR.

that SC&A publishes a review of the document.

That is what kicks off this whole discussion.

Ιf

you

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look --

1	Sorry.
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- 2 CHAIR MUNN: Yes, go ahead.
- 3 MR. MARSCHKE: If you look at this
- 4 old screen, basically this is what used to be
- 5 generated from, if you go back to the Access
- 6 database. And over here we have the dates
- 7 when SC&A published their findings. This is
- 8 basically the total number of findings. And
- 9 this then is the current status of each one of
- 10 those findings.
- 11 So I mean, you could generate
- 12 this. I believe you could generate this
- 13 screen by just going through all the
- 14 documents, looking at all the findings and
- just binning them into these different bins.
- 16 CHAIR MUNN: Yes.
- 17 DR. ULSH: So it would be a
- 18 summary report, basically.
- 19 MR. MARSCHKE: And it would be a
- 20 summary report. This is what Wanda, I think,
- 21 is getting at.
- 22 CHAIR MUNN: This is what I am

1	getting at. The first finding date there, for
2	example, says 1/17/2005. And it says the
3	total number of findings is 183. Now that
4	tells you instinctively we are not talking
5	about a single report here. That was a group
6	of reports that we received that was dumped in
7	our lap to begin with. This is what you have
8	to work with. Go forward and do good things.
9	And each of those dates there,
10	there are two or three of them that are only
11	one single document that was assigned to us.
12	But the date that we were working from in the
13	past and the date that I have used in previous
14	reports to others outside of our immediate
15	Board has been a listing of how many of those
16	findings were closed. It makes a difference
17	from my perspective as to how long we have had
18	them.
19	DR. ULSH: Okay. So going
20	forward, I want to make sure that I understand
21	what you are asking for and then I can work
22	with Yemi after this meeting to accomplish it.

1	SC&A is assigned, let's say, a
2	group of five documents to review. And they
3	issue a report that says here is our findings
4	for document one, two, three, four, five, and
5	there is multiple findings in there. That is
6	the date that would go in for whatever we are
7	going to call this field, date reviewed or
8	whatever. And that date would be attached to
9	all the findings as well.
LO	CHAIR MUNN: Yes, absolutely.
L1	DR. ULSH: Okay, I think I
L2	understand what you want.
L3	CHAIR MUNN: When we get it.
L4	MR. KATZ: I mean, SC&A completes
L5	a review of each document individually. So
L6	even if they got assigned a number, each
L7	document, whether it is a TIB or whatever that
L8	they review, there will be ten findings for
L9	that TIB. They all have the same date because
20	it is when they reviewed the TIB.
21	DR. ULSH: Right. I mean, the
22	report that you would issue, might there be

1	more than one TIB in the same SC&A report?
2	CHAIR MUNN: Yes, absolutely. We
3	could have a batch.
4	DR. ULSH: All right. I think I
5	understand.
6	MR. MARSCHKE: Some of these have
7	up to 45.
8	MR. STIVER: It basically is for
9	tracking purposes.
LO	MR. OYEDIRAN: We hadn't focused
11	on the reports yet because we had been waiting
L2	for many of these items to be checked off and
L3	looked at. And that was about six to eight
L4	weeks about. And many of these things we just
L5	recently started finding out about.
L6	So it is going to take us a lot of
L7	time to kind of work through all of these
L8	issues because these aren't trivial issues.
L9	CHAIR MUNN: Understood.
20	MR. OYEDIRAN: And being able to
21	get through them, which we can do and we will

do, but we kind of have to go through a

22

1 process we have been working through to	get
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- there.
- 3 MEMBER ZIEMER: I want to
- 4 emphasize one thing. This is analogous to the
- 5 dose reconstructions. You know, we have had
- 6 this tracking of early dose reconstructions.
- 7 Have we gotten everything done on the first
- 8 thousand, the second thousand. We have had
- 9 two reports to the Secretary on closing out
- these findings, and one of the issues is what
- 11 about those early X-hundred findings. Are
- they still sitting there, or have they been
- 13 closed out? And that is where the importance
- of these dates comes in. So that when we go
- to the Secretary, we can say, yes, we don't
- 16 have some findings that are seven years old
- 17 that we haven't dealt with yet. So that is
- 18 where it becomes important to track, is for
- 19 what we tell the Secretary we have done in
- 20 terms of closing out issues that are
- 21 particularly older issues.
- DR. ULSH: Okay.

1	MR. OYEDIRAN: That makes perfect
2	sense.
3	DR. ULSH: I envision going
4	forward that other things are going to occur
5	to you after this meeting. Just email them to
6	me. I will work with Yemi to make sure that
7	we understand them. It is going to be an
8	iterative process. We are going to be
9	tweaking this for a bit.
LO	MR. HINNEFELD: Yes, and the
11	database is generally available. So if you
L2	are authorized to use it, you can use it
L3	anytime.
L4	CHAIR MUNN: Thank you. At first
L5	glance and at first explanation, this is
L6	impressive. And it has incorporated many of
L7	the things that will help us, I think,
L8	segregate what we want to focus on from one
L9	meeting to the next.
20	So, Yemi, to you and your
21	colleagues who have worked on it, thank you
22	very much. We appreciate we are creating

- you have done, and it is looking good so far.
- 3 Yes, Steve?
- 4 MR. MARSCHKE: John was just
- 5 looking. When you click on the edit status
- 6 button, like you did before --
- 7 MR. STIVER: It kicks me into the
- 8 new findings screen. Is that because I don't
- 9 have permissions for that?
- 10 MR. MARSCHKE: It goes to a new
- 11 finding screen. Does it really come as a new
- 12 finding or does it come as a --
- 13 MR. OYEDIRAN: You have to enter
- 14 -- this was also in our meeting. I do
- 15 remember this being specified in our meeting
- in February, February 17th, that if you were
- 17 to change status, you have to enter in some
- 18 information. That is how it works.
- 19 MR. MARSCHKE: I have no problem
- 20 with that. But up in the upper left, it says
- 21 finding. It doesn't basically generate a new
- 22 finding. This is entered as a message under

	1	the	existing	finding.
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- 2 MR. OYEDIRAN: That is simple to
- 3 fix. It is just the text.
- 4 MR. MARSCHKE: It is just an
- 5 editorial thing?
- 6 MR. OYEDIRAN: That is just copy.
- 7 MR. STIVER: Well as it stands
- 8 right now, it allows you to put in some
- 9 comment, but I don't see where you can change
- 10 it from in abeyance to resolved or in
- 11 progress.
- MR. OYEDIRAN: Once you change who
- 13 your on behalf of is, it will then give you a
- 14 list of the current status --
- 15 MR. STIVER: Okay. All right.
- MR. OYEDIRAN: Because you have to
- do it on behalf of somebody else to change the
- 18 status.
- 19 MR. STIVER: Okay. All right.
- 20 MR. MARSCHKE: Now, let's go back
- 21 to the -- let's go at the edit message screen.
- MR. OYEDIRAN: Do you want to edit

1 a	a res	ponse?
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- 2 MR. MARSCHKE: I want to edit a
- 3 response. Edit response would be fine.
- 4 Okay, it doesn't have an on behalf
- 5 of.
- 6 MR. OYEDIRAN: I don't believe
- 7 that was ever specified to have an on behalf
- 8 of for editing responses. But it was for
- 9 editing on or creating a new finding.
- 10 MR. MARSCHKE: Someplace else
- 11 where that came, where the closed came up.
- 12 Wait a minute I have to find it.
- 13 (Sound of a siren.)
- 14 MR. OYEDIRAN: That's my cue.
- 15 I've got to go.
- 16 (Laughter.)
- 17 MR. KATZ: Someone on the line has
- 18 a siren and is not on mute.
- 19 CHAIR MUNN: Incoming.
- 20 MR. MARSCHKE: Maybe it is when
- 21 you add response. When you hit the add
- 22 response you get the same kind of screen that

1	you	get		you	get	the	same	screen	that	you
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- 2 get when edit finding.
- But add response also including, I
- 4 believe --
- 5 MR. OYEDIRAN: Editing, you can't
- 6 edit on behalf of somebody else. You're just
- 7 editing.
- 8 MR. MARSCHKE: You can't edit on
- 9 behalf of someone. You are just editing.
- 10 Right. Well you can. Actually you can but
- 11 don't change it.
- But when you add a response, you
- get the same screen that you get with change
- 14 status. And including the capability to
- change the status when you add a response.
- MR. OYEDIRAN: Okay.
- 17 MR. MARSCHKE: Which I am not sure
- that you want to be able to do that.
- 19 MR. OYEDIRAN: Okay, that is
- 20 something we can resolve guickly.
- 21 MR. OYEDIRAN: Yes. Once you find
- some things, please feel free to send them to

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- DR. ULSH: Send them to me. I
- 3 just want to keep track of them.
- 4 MR. OYEDIRAN: Some of these
- 5 things are going to be easy to be fixed.
- 6 MR. NEELY: Does that complete
- 7 your presentation?
- 8 MR. OYEDIRAN: That does complete
- 9 my presentation. I would like to thank you
- 10 guys so very much for taking the time to have
- 11 me out here. If you have any questions,
- 12 please send them to Brant. I am sure he will
- 13 be more than willing to pass them on to me.
- 14 CHAIR MUNN: We thank you very
- much for taking the time to come and do this
- 16 for us.
- 17 We know it is not an easy task.
- 18 Even for the gee whiz guys, this is no easy
- 19 task. So thank you very much.
- 20 MR. MARSCHKE: And I would second
- 21 that, Wanda. I think this is a far -- great
- 22 strides have been made. And this is a very

1	good	database.	I	know	it	is	not	а	database
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- 2 but --
- 3 CHAIR MUNN: It certainly is.
- 4 Yes.
- 5 MR. MARSCHKE: It is a very good
- 6 database/application. And I think you have
- 7 done a very good job.
- 8 MR. OYEDIRAN: Thank you so much.
- 9 MR. MARSCHKE: My comments, you
- 10 know --
- 11 MR. STIVER: Everything we talked
- 12 about at meetings all fell into place.
- MR. MARSCHKE: Hopefully you were
- 14 not put off by what I have been saying. It is
- 15 just I think it is very good.
- 16 CHAIR MUNN: Much more flexible
- 17 than we originally hoped for and I think it
- 18 will be most useful for us.
- 19 So thank you.
- 20 MR. OYEDIRAN: You are very
- 21 welcome.
- 22 CHAIR MUNN: And we will talk to

1	you again the next time we meet, no doubt.
2	MR. OYEDIRAN: I look forward to
3	that, Ms. Munn.
4	CHAIR MUNN: All right.
5	MR. OYEDIRAN: The pleasure was
6	absolutely mine.
7	CHAIR MUNN: Thank you. It was a
8	pleasure to meet you. Thank you both for
9	coming.
10	MR. OYEDIRAN: Oh, these. I'm
11	actually in the process of creating screen
12	casts that will take you through a video and
13	show you step by step of how to go over these
14	things. And I will also have this this text,
15	as well as the screen casts on the application
16	for you to do.
17	MR. MARSCHKE: The one thing we
18	didn't talk on and touch on is how to get a
19	PDF file or a hard copy of this information
20	because a lot of times
21	MR. OYEDIRAN: What information?

MARSCHKE:

MR.

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All

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1	information	
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- 2 MR. OYEDIRAN: To create a PDF?
- 3 MR. MARSCHKE: Maybe for example,
- 4 you know, if I got -- if we get responses from
- 5 NIOSH on one of these documents, IG-2 or
- 6 something like that, and I want to send those
- 7 responses to, whoever at SC&A is working on
- 8 IG-2. Sometimes they may not have
- 9 capabilities or authority to get into this
- 10 database or they may not even just have the
- inclination to get into the database.
- MR. OYEDIRAN: Okay.
- 13 MR. MARSCHKE: So a lot of times
- 14 what I will do is in the past I could generate
- a PDF file of say for example all the history
- 16 --
- 17 MR. OYEDIRAN: I see where you are
- 18 going. I think once you get all of your
- 19 requirements together, because what it sounds
- 20 like, you are kind of giving me a new
- 21 requirements list for the applications.
- 22 MR. MARSCHKE: I have talked about

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7	thia	before.
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- 2 MR. OYEDIRAN: Since I have been
- working on this application, I haven't gotten
- 4 --
- 5 MR. HINNEFELD: We're not going to
- 6 get into it. Brant, take it down. It would
- 7 be the history.
- 8 MR. MARSCHKE: The history of the
- 9 file.
- 10 MR. HINNEFELD: What it would it
- 11 would print would be the history. And it was
- 12 actually very easy to navigate from one
- 13 finding of a document to the next finding.
- 14 But I think you printed them one at a time.
- 15 Right?
- MR. MARSCHKE: You printed them
- one at a time or we could print a group of
- 18 them. But I would be satisfied with just one
- 19 document at a time and every finding would be
- on a new page.
- 21 MR. HINNEFELD: Right. Each
- finding would be on a new page and you could

1	print	the	history	of	the	findings	and	all	the
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- 2 various --
- 3 MR. MARSCHKE: And all the
- 4 responses and back and forth between SC&A and
- 5 NIOSH and the Subcommittee.
- 6 MR. HINNEFELD: Yes, what you had
- 7 was a PDF.
- 8 DR. ULSH: That was going to be
- 9 the next step that we do once we set it up.
- 10 MR. MARSCHKE: All right, I just
- 11 wanted to get it on the --
- 12 MR. HINNEFELD: It kind of falls
- 13 under the reporting bin.
- 14 MR. MARSCHKE: It is in the
- 15 reporting bin.
- 16 MR. OYEDIRAN: I'll talk to your
- 17 task manager.
- MR. HINNEFELD: That's good
- 19 enough.
- 20 CHAIR MUNN: This was particularly
- important for us as we transfer responsibility
- 22 for these files from our Subcommittee -

1	MR. HINNEFELD: From the most
2	sophisticated users to less sophisticated
3	users.
4	CHAIR MUNN: From sophisticated
5	users and workgroups and back and forth. Yes,
6	we need a way to make sure that information
7	transmits completely.
8	MR. HINNEFELD: Yes, it can go in
9	writing and it can also be moved on here.
10	CHAIR MUNN: Good. Again, thank
11	you. And I think we have beaten ourselves up
12	adequately this morning in time for a brief
13	coffee break for 15 minutes.
14	(Whereupon, the above-entitled matter went off
15	the record at 11:05 a.m. and went
16	back on the record at 11:20 a.m.)
17	MR. KATZ: Okay. So we are
18	restarting after a short break. This is the
19	Subcommittee on Procedures Review, Advisory
20	Board on Radiation and Worker Health.
21	Wanda?
22	CHAIR MUNN: We covered the Norton

1	issue and our instruction period for our new -
2	- Should I continue to call it database?
3	That's the way it comes up in our Board Review
4	system electronically.
5	The one thing that we had
6	scheduled for the pre-break period that we
7	didn't close up for sure was our discussion of
8	the outstanding OTIB-0070 issues, even though
9	we touched on them during the Norton
LO	discussion.
11	Let's take a look at what our
L2	current system tells us about OTIB-0070 and
L3	the items that are in progress to see if we
L4	are where we need to be.
L5	MR. MARSCHKE: Well the first
L6	thing, Wanda, I would like to apologize, I
L7	guess. As I recall, we did work on OTIB-0070
L8	in one of the preceding Subcommittee meetings.
L9	I think it was a meeting or two ago, maybe
20	back in January or March. I'm not sure which
21	one.

We, I believe, at that time made

22

1	some changes to the statuses and the database
2	has not been updated to reflect the results of
3	that meeting. So looking at the database is
4	not going to give you, in its current form, is
5	not going to give you the current status of
6	OTIB-0070 issues.
7	CHAIR MUNN: So we are not
8	accurate with where we are.
9	MR. MARSCHKE: That's correct.
10	CHAIR MUNN: Let's run down what
11	this shows just to see if we can reconstruct,
12	perhaps in your mind, Steve, where we ought to
13	be and what the action item will be in regard
14	to this item for our next meeting.
15	This one shows Finding 1 in
16	progress; Finding 2 in progress; Finding 3 in
17	progress; 4 is closed; 5 in progress; 6 in
18	progress; 7 closed; 8 closed; 9 in abeyance;
19	10 in progress; 11 in progress; 12 addressing
20	another Finding; 13 in progress; 14 in
21	progress; and 15 in abeyance. And then memory
2.2	tells me, not actual documentation but memory

_	cerrs we may have a couple still
2	outstanding. Does your memory tell you the
3	same thing?
4	MR. MARSCHKE: I believe so and
5	that is what Jim Neton also said this morning.
6	CHAIR MUNN: I thought we only had
7	two
8	MR. MARSCHKE: Two.
9	CHAIR MUNN: but my memory was
LO	that the resuspension factors, there are two
L1	of those, were the only ones that were
L2	outstanding.
L3	But will it be your action then to
L4	verify for our next meeting that we have
L5	MR. MARSCHKE: Now that we have
L6	been trained in the operation of the database,
L7	we might continue to call it database, we
L8	would have taken an action item, SC&A, I
L9	believe I speak for John Mauro and John Stiver
20	both of them, that we will update the database
21	to reflect the activities in the meetings that
22	we had when we did not have the database

1	available	to	us.	I	think	that	is	like	just
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- 2 about three or four meetings.
- 3 CHAIR MUNN: That's three or four
- 4 meetings. Yes, it is. So that would be
- 5 great.
- 6 MR. MARSCHKE: So we will go
- 7 through the meeting minutes. We might have to
- 8 contact Ted to make sure we have copies of all
- 9 the meeting minutes, if they are not already
- 10 on there.
- 11 CHAIR MUNN: They are already
- 12 posted.
- 13 MR. MARSCHKE: Okay. All the way
- 14 up to the last one?
- 15 CHAIR MUNN: Yes.
- 16 MR. MARSCHKE: So then we will
- 17 basically go through the meeting minutes to
- 18 make sure that whenever the Subcommittee has
- 19 posed an issue or made a change to an issue,
- it is reflected in the database.
- 21 MR. KATZ: And Steve you can just
- 22 notate at the end of all that what happened

1	today since Jim committed to a White Paper to
2	close out the last two issues.
3	MR. MARSCHKE: Yes, for OTIB-0070.
4	CHAIR MUNN: That's good. All
5	right, we will look forward to seeing that at
6	our next meeting. The sooner the better.
7	The next item that we have on our
8	agenda is
9	MR. HINNEFELD: Actually, I think
10	what Jim committed to was revising the
11	Evaluation Report rather than actually a White
12	Paper.
13	MR. KATZ: But he said that
14	What he said was that the Evaluation Report
15	doesn't need much revision but he needs to
16	write a paper related to some of that that is
17	not in the Evaluation Report, some of the
18	details that he was talking about.
19	MR. HINNEFELD: Okay.
20	MR. KATZ: That is what I wrote in

MARSCHKE:

real time as he was speaking.

MR.

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- DR. ULSH: He didn't use the words
- White Paper. He said we need to write up what
- 4 we are --
- 5 MR. HINNEFELD: He needs to do
- 6 some writing.
- 7 MR. KATZ: He needs to do a White
- 8 Paper. He may not want to call it that but
- 9 that is what he said. I was writing as he was
- 10 speaking.
- 11 CHAIR MUNN: Now it was my
- 12 understanding we would have that before the
- 13 Board meeting.
- 14 MR. HINNEFELD: That is our
- 15 intention, to have an amended Evaluation
- 16 Report and supporting information.
- 17 MEMBER ZIEMER: But remember the
- 18 Evaluation Report that is going to be amended
- 19 is the Norton.
- MR. HINNEFELD: Yes.
- 21 CHAIR MUNN: It is not this
- 22 document.

1	MR. HINNEFELD: No. We have got
2	to get something in here.
3	CHAIR MUNN: Yes, we will need to.
4	MEMBER ZIEMER: I don't think this
5	will be ready for the Board.
6	CHAIR MUNN: No.
7	MR. HINNEFELD: No. We will focus
8	on the Evaluation Report. One of my notes is
9	that we need to revise OTIB-0070 for the same
10	thing.
11	CHAIR MUNN: Yes, that's good.
12	Anything else on OTIB-0070?
13	Let's move on to a very brief
14	approved two-pagers for online posting. I was
15	committed to having the clean copies to Ted so
16	that he would be working with the NIOSH folks
17	to get this brand new item online that would
18	allow people to see all of these completed
19	two-pagers that we have. Since I have not
20	provided those to Ted, that makes it
21	impossible for us to move forward on that at
22	this meeting.

1	My question would be whether there
2	has been any further discussion relative to
3	how that particular new item on our web page
4	list is going to appear. I have been told
5	several times that all we have to do is have
6	the material and then it is easy to get it up
7	there. Someone was going to give some
8	thought, I think NIOSH was going to make the
9	decision or at least make suggestions with
10	respect to nomenclature for that particular
11	bit of the website where we are going to put
12	the two-pagers.
13	MR. HINNEFELD: Yes, I don't have
14	anything to report today because there is a
15	broader effort going on to put some of SC&A's
16	original review documents on the website.
17	Whereas, some of the, you know usually the
18	site-specific reviews that SC&A has provided,
19	those usually end up on our website relatively
20	quickly. That has not always been the case
21	with these compendia of procedure requests.
22	CHAIR MUNN: Right.

1	MR. HINNEFELD: So the actions
2	that I know of as we are gathering the
3	versions and they have to be what we call 508
4	compliant,
5	CHAIR MUNN: Right.
6	MR. HINNEFELD: meaning they
7	have to be readable by people who are blind.
8	And they didn't have to be. You know when
9	these were delivered there was no requirement
10	for that.
11	CHAIR MUNN: Yes, it is my
12	understanding that is a new requirement.
13	MR. HINNEFELD: So part of it is
14	to make versions that are 508 compliant, get
15	them to us. And there are still some
16	decisions on our part about where. You know,
17	I would think they would have their own page
18	in terms of procedure reviews.
19	And in my way of thinking either
20	co-located immediately after a procedure
21	review or very easily linkable to it, is you
22	would link to one of these two, which are

1 essentially the summary of the Boar	:d's
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- 2 deliberation of the findings.
- 3 CHAIR MUNN: Not all of them will
- 4 be included there. So I had envisioned them
- 5 as having their own web page --
- 6 MR. HINNEFELD: Well I was
- 7 thinking both.
- 8 CHAIR MUNN: -- so that there is
- 9 direct access to them.
- 10 MR. HINNEFELD: I was thinking
- 11 both. If you do, you know, you can see them
- 12 all in one place but you will also be able to
- 13 -- I was thinking of a link from the findings,
- the page where you see the document findings,
- 15 a link from that page to the how was it
- 16 resolved.
- 17 CHAIR MUNN: Now, we had
- originally said that when we did put the web
- 19 page up that we would have a hotlink on the
- two-pagers that would make it possible for you
- 21 to go to the full review if that is in fact
- 22 what you wanted to see.

1	But with any luck at all by the
2	time we get to our next meeting Ted will have
3	a, hopefully we will all have a better idea of
4	where it is going to go and someone will have
5	suggested a title for what we are going to
6	use.
7	The next item on our agenda is
8	review of OTIB-0002 open items, that
9	everything that is relevant is addressed in
10	the replacement procedures. Well I think
11	everybody knows what that means. If that
12	needs further explanation, let me know. And
13	in any case, I am now going to make a brave
14	effort to use our new system to pull up OTIB-
15	0002 to see what we had to say.
16	Sure enough. Have we all been
17	able to find it? And we see we have two in
18	abeyance. This is a NIOSH action, I believe.
19	DR. ULSH: Yes. Wanda, I think we
20	had some questions about exactly what the
21	resolution would look like here. Elyse, are
22	you online?

2	me to handle it. This is Liz.
3	DR. ULSH: Oh, Liz. Okay.
4	MS. BRACKETT: That's all right.
5	Go ahead. I really don't have a clear
6	understanding of what specifically is wanted
7	for this action item to address the issues
8	here.
9	The OTIB was canceled and I think
10	there was some direction to address these
11	issues and how they were addressed in other
12	documents. But the documents that are used
13	instead are very different approaches. And so
14	I don't understand what specifically is the
15	direction.
16	CHAIR MUNN: Let me see if my
17	memory serves me well enough to be able to
18	explain it a little better.
19	It was our concern that these two
20	items that are in abeyance here waiting for
21	procedural incomplete references. I see RP-30
22	and 66 were mentioned in the text but not

MS. BRACKETT: I think she wants

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1 listed in the references and technical issued	1	listed	in	the	references	and	technical	issu
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- 2 ratings.
- 3 It was our understanding that
- 4 OTIB-0002 had been replaced primarily, is my
- 5 memory correct, with OTIB-0018? Is that
- 6 right?
- 7 MS. BRACKETT: It is an indirect
- 8 replacement. The two of them were in use at
- 9 the same time for quite some time and then
- 10 OTIB-0002 was canceled as it was slowly phased
- out. So OTIB-0018 would be something that
- could be used for the same types of cases.
- 13 CHAIR MUNN: Right. I think the
- 14 concern of the Subcommittee was that to assure
- that all of the items that had previously been
- listed in OTIB-0002 did in fact find a home in
- the appropriate way and other procedures that
- 18 had succeeded it. And I recall our primary
- 19 discussion centered around OTIB-0018, I
- 20 believe, to see whether 18 adequately
- 21 addresses the issues that were put forth in
- these findings.

1	Is that more clear or am I just
2	refusing the issue?
3	MS. BRACKETT: Well, can I give
4	you an example and see if this is the kind of
5	thing you are looking for? Because I am not
6	quite clear.
7	But I think one of the issues that
8	was listed for OTIB-0002 was the material
9	types that were chosen. And in OTIB-0002 we
10	use whatever is the most claimant favorable
11	material type. Would be that the kind of
12	thing that is being looked for or something
13	different from that?
14	CHAIR MUNN: Possibly so. Do you
15	have this finding in front of you, Liz?
16	MS. BRACKETT: No. I have the
17	two-page document, the overview of OTIB-0002.
18	But I don't have what is the title of that
19	one?
20	CHAIR MUNN: It's Tritium
21	Calculation with IMBA.
22	MS. BRACKETT: Oh, tritium

-		2 (1-	T N # T N
	calculation	พารท	IMBA

- 2 MR. HINNEFELD: That's not OTIB-
- 3 0002.
- 4 CHAIR MUNN: Oh, sorry. I pulled
- 5 up the wrong thing.
- 6 MR. STIVER: This is John Stiver.
- 7 I have the transcript in front of me from the
- 8 last meeting and on page 48, Stu had some
- 9 comments here. They had two action items.
- 10 The first one being specific findings to
- 11 provide our take on whether they are relevant
- 12 at all. And so were they addressed.
- But the one I remember, the second
- 14 finding is to decide to take a look at the
- 15 alternative approach, the approaches in OTIB-
- 16 0018 and be sure that the doses that are
- 17 calculated from OTIB-0018 would not be higher
- 18 than those calculated in OTIB-0002. Because
- 19 OTIB-0002 was this kind of a super maximizing
- 20 approach, the gigantic intake at one time and
- 21 whereas 18 is much more refined. The feeling
- 22 was that the doses calculated using OTIB-0018

1	would be much lower. And so it was going to
2	be to go and verify that that was indeed the
3	case. There wouldn't be situations where you
4	could have had a higher dose using OTIB-0018
5	as with OTIB-0002.
6	MS. BRACKETT: I guess I don't
7	understand why it would be a problem if they
8	were larger, since it is supposed to be an
9	overestimate in either case. But it is going
10	to be on a case-by-case basis. It is not
11	something that we could do through a
12	calculation and say yes this would be the case
13	for all circumstances. It would have to be,
14	we would have to look at each individual case
15	to determine if OTIB-0018 was larger or
16	smaller.
17	MR. MARSCHKE: From a purely
18	administrative point of view, if you look at I
19	guess there were 18 findings associated with
20	OTIB-0002, right now a number of them that
21	have been closed. There are a number of them
22	that are in abeyance and there still are a

1	number	of	them	that	are	identified	as	being
2	open.							

3	Eventually, we are going to want a
4	disposition all those findings to closed for
5	some reason. And I think really it is more of
6	an exercise of going to and looking at the
7	particularly the open findings and seeing
8	whether or not the finding is applicable to
9	maybe OTIB-0018 or some other OTIB or
10	basically it is no longer applicable for such
11	and such a reason and then we can close that
12	finding. Maybe the same is also true for the
13	ones that are in abeyance. Because in
14	abeyance, we have kind of come to a meeting of
15	the minds as to, well, this should be the
16	solution. NIOSH really hadn't implemented
17	that solution in OTIB-0002 but did they
18	implement that solution in some other OTIB or
19	again, is that solution no longer relevant.

Again, so we can go through them and get rid of those and close out those in abeyance findings. That is from looking at it

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<pre>1 from an administrat;</pre>	ve point of view and r	ıot
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- 2 really a technical point of view.
- 3 MS. BRACKETT: Okay. I noticed
- 4 that on the document that was sent out
- 5 summarizing it, some of the findings are the
- 6 same. Findings 8 and 18 are identical and
- 7 there is at least two others that were the
- 8 same thing.
- 9 MR. MARSCHKE: That is a good
- 10 point. We can clean it up.
- 11 MS. BRACKETT: Okay, I think I have
- 12 a better understanding now of what is being
- 13 looked for.
- 14 MR. HINNEFELD: Here is the -- I
- 15 have a question. I mean a lot of these things
- refer to things that were done in OTIB-0002
- 17 that just aren't done anymore. So I mean is
- it as simple as putting in a statement in our
- 19 response field that this practice, you know
- 20 this decision on fraction and fractional
- 21 retention values is not utilized in any --
- 22 CHAIR MUNN: Is no longer used.

1	MR. HINNEFELD: Is no longer used
2	by any other or in any approach.
3	CHAIR MUNN: Absolutely.
4	MR. HINNEFELD: And that can be
5	closed.
6	CHAIR MUNN: Absolutely.
7	MR. HINNEFELD: Okay. So our
8	action here is to put stuff in the database.
9	Because I was looking through these and a lot
10	of these, it seems to me, they just
11	automatically are going to fall off.
12	CHAIR MUNN: Yes, I think most of
13	them are.
14	MR. HINNEFELD: Okay.
15	CHAIR MUNN: I somehow had the
16	idea from our previous discussions that there
17	were only two or three in here that we needed
18	to make sure were covered by other documents.
19	And as we have already discussed, OTIB-0018
20	was the one most frequently mentioned as
21	having replaced some of these items. But if
2.2	they are no longer used, then all we need to

1	say is the practices are no longer applicable
2	to
3	MS. THOMAS: Yes, this is Elyse.
4	Stu, I did I don't see it here. I remember
5	entering that comment into the database when
6	we canceled OTIB-0002. And I am thinking I
7	entered them into what was DCTA at that time.
8	So I am not sure why they aren't showing up
9	here.
LO	The comment was just a generic one
11	about OTIB-0002 has been canceled because it
L2	is no longer used.
L3	CHAIR MUNN: Pardon me. That was
L4	not the concern of the Subcommittee. The
L5	concern of the Subcommittee was that the
L6	finding was covered in whatever disposition
L7	was made. So if the finding is covered in
L8	some other document, we need to say so.
L9	MS. THOMAS: Yes.
20	CHAIR MUNN: And it may be that
21	what you have entered previously falls in that
22	well that we have between our old system and

NIOSH action item for the next meeting on these particular items associated with OTIB- 0002, to go through and make sure that the database is updated with things that have happened. But if we have a comment that even if we made it before and it got lost in the cracks somewhere between DCTA and whatever we are calling this, we will just put it back in. And that response shouldn't be OTIB-0002 was canceled. It should be the technical content of this comment is no longer relevant because this approach is no longer used. CHAIR MUNN: Exactly. Paul? MEMBER ZIEMER: And I'm looking back at my own notes from that meeting. And one of the action items I jotted down was NIOSH was to look at the open items and see if any of those are still relevant.		
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CHAIR MUNN: Exactly. Paul? MEMBER ZIEMER: And I'm looking back at my own notes from that meeting. And one of the action items I jotted down was NIOSH was to look at the open items and see if any of those are still relevant.	L3	of this comment is no longer relevant because
MEMBER ZIEMER: And I'm looking back at my own notes from that meeting. And one of the action items I jotted down was NIOSH was to look at the open items and see if any of those are still relevant.	L4	this approach is no longer used.
back at my own notes from that meeting. And one of the action items I jotted down was NIOSH was to look at the open items and see if any of those are still relevant.	L5	CHAIR MUNN: Exactly. Paul?
one of the action items I jotted down was NIOSH was to look at the open items and see if any of those are still relevant.	L6	MEMBER ZIEMER: And I'm looking
NIOSH was to look at the open items and see if any of those are still relevant.	L7	back at my own notes from that meeting. And
any of those are still relevant.	L8	one of the action items I jotted down was
-	L9	NIOSH was to look at the open items and see if
I think the abeyance items are	20	any of those are still relevant.
	21	I think the abeyance items are
ones that we have agreed have been taken care	22	ones that we have agreed have been taken care

our new system of tracking things.

1

1	of in one way or the other but we may not I
2	guess we would have to look at them one by
3	one.
4	DR. ULSH: Yes, we have agreed on
5	a path forward but they haven't been open
6	MEMBER ZIEMER: And with these
7	open items, the question is, are they
8	relevant. And I don't know if we do that here
9	or whether NIOSH has to ask itself is it
LO	relevant or is it closed out by the fact that
11	we don't use it anymore or something like
L2	that.
L3	DR. ULSH: I think we are at a
L4	stage now where the database, it is not
L5	perfect but it is up and running to the point
L6	where a lot of time over the next meeting,
L7	maybe two meetings, are going to be making
L8	sure we have caught up with all of the status
L9	and all the developments that have happened.
20	A lot of these things are going to be closed
21	out because they were just hanging out there
22	to verify that.

T	CHAIR MONN: And there have been
2	some concerns raised over the maximizing
3	approach and how that water was not covered
4	appropriately in other documents.
5	MEMBER ZIEMER: I had also made a
6	note that NIOSH was also going to consider
7	whether a PER was needed. And I guess that
8	arose out of the fact that a lot of the early
9	cases were done with this one.
10	MR. HINNEFELD: Well the only time
11	we would do that would be
12	MEMBER ZIEMER: Right. I
13	understand. Because presumably, this always
14	gave a larger dose.
15	MR. HINNEFELD: Yes.
16	MEMBER ZIEMER: And that is why
17	that question came up is it always true.
18	MR. HINNEFELD: That's why we
19	asked that question.
20	MEMBER ZIEMER: You asked the
21	question and Liz has said that it is a case-
22	by-case basis. And it raised the question of

1	were there cases under this approach that
2	would get a higher dosage with a new approach.
3	In other words, we were assuming
4	the new approach actually gave somewhat lower
5	maximizing doses. And the question was, is
6	that always the case.
7	Liz, I think that was the context
8	before where we were wondering. Since it is a
9	case-by-case basis, does NIOSH have to
10	consider whether or not a PER is needed by
11	dropping the 0002 and going to the 0018?
12	I think that was the issue.
13	MR. KATZ: But if OTIB-0018 is a
14	maximizing
15	MEMBER ZIEMER: They are both
16	maximizing.
17	MR. STIVER: OTIB-0002 was
18	maximizing and OTIB-0018 was a little more of
19	a realistic approach.
20	MR. KATZ: Is OTIB-0018 being
21	used?
22	MS. BRACKETT: Well, they are both

_	
7	overestimates.

- 2 MEMBER ZIEMER: They are both
- 3 overestimates.
- 4 MS. BRACKETT: I don't know if
- 5 maximizing is an appropriate word but they are
- 6 both overestimates.
- 7 So if OTIB-0018 was larger than --
- 8 Well I mean they are only used for
- 9 noncompensable cases.
- 10 MR. HINNEFELD: If it is an
- overestimate, it really doesn't matter.
- 12 MEMBER ZIEMER: Yes.
- MS. BRACKETT: Right.
- 14 MR. HINNEFELD: You would never
- 15 get to a PER.
- 16 MS. BRACKETT: Right. Well, if it
- 17 made it compensable, --
- 18 MEMBER ZIEMER: Then you would go
- 19 back and do it.
- 20 MS. BRACKETT: -- then you would
- 21 have to do a best estimate.
- 22 MEMBER ZIEMER: A best estimate

1	anyway.
_	arry way.

- 2 MR. HINNEFELD: So does that
- 3 action drop off then, that compares?
- 4 CHAIR MUNN: Does what action drop
- 5 off?
- 6 MR. HINNEFELD: The action to sort
- 7 of make some sort of a decision about is there
- 8 a case or would there be a set of
- 9 circumstances where OTIB-0018 would create a
- 10 larger or smaller --
- 11 MEMBER ZIEMER: A larger estimate.
- 12 MR. HINNEFELD: -- a larger
- 13 estimate than OTIB-0002.
- 14 MR. STIVER: Really all it is
- 15 going to do is trigger a best estimate
- 16 calculation.
- 17 MR. KATZ: So it makes no
- 18 difference.
- 19 DR. ULSH: Right. So it sounds
- 20 like we might have committed to that last
- 21 meeting or maybe the meeting before and now we
- are saying there is no point.

1	CHAIR MUNN: Well what we had said
2	last meeting is that there are pieces of OTIB-
3	0002, even though it has been canceled, if we
4	have any piece of that that is still an action
5	that needs to be pursued, is that properly
6	incorporated in another document. That is the
7	bottom line.
8	MR. KATZ: And they have that as
9	an action item already to figure out which are
10	obsolete and which might still have relevance
11	because they are an element of some other
12	procedure.
13	CHAIR MUNN: Yes, that is the
14	bottom line, I think.
15	So we know what we are doing here.
16	MEMBER ZIEMER: Does that include
17	the abeyance side of things, you will take a
18	look at them as well?
19	MR. HINNEFELD: Yes. A lot of
20	those are in abeyance but the document doesn't
21	explain things very clearly.
22	MEMBER ZIEMER: Right.

1	DR. ULSH: But even with those,
2	the next development on that is for us to go
3	in and say this is no longer an issue.
4	MR. KATZ: Exactly.
5	MR. MARSCHKE: I think what we
6	hoped to do, I don't want to put words in the
7	Subcommittee's mouth, but I think what we hope
8	to do is at a future meeting of the
9	Subcommittee, go through the OTIB-0002
10	findings and close them all out.
11	CHAIR MUNN: That is what we all
12	want to do.
13	DR. ULSH: The next two
14	developments are for us to go in and say here
15	is what we think. This is no longer relevant
16	or here is where it has been dealt with. And
17	then at the next meeting of this committee,
18	you pick up those responses and say yes we
19	agree or there is another action.
20	CHAIR MUNN: We agree, closed,
21	closed, closed. That is what we hope to do.
22	MR. MARSCHKE: The other things

1	is, if you just look at the name of the two
2	documents we have been talking about OTIB-0002
3	and OTIB-0018, you can see that OTIB-0002 is
4	called a maximum internal dose and OTIB-0018,
5	if you look at it is called internal dose
6	overestimates. So there is, you know, they
7	are both overestimates but one of them is a
8	little bit
9	DR. ULSH: It has been tapped down
10	a bit in comparison.
11	MS. BRACKETT: Well, I think that
12	is more a function of when they were written.
13	Early on in the project we were talking about
14	maximizing approaches and that terminology
15	changed.
16	MR. MARSCHKE: So it is really a
17	terminology change than it is a technical
18	difference.
19	MS. BRACKETT: The methodology is
20	different and that is part of it. It is a
21	result of things changing over time. OTIB-
22	0002 is based on acute intakes; whereas over

1	time the process became to assign chronic
2	intakes and that is what OTIB-0018.
3	So it is just kind of an evolution
4	over the lifetime of the project as to see
5	what was decided to be a better method.
6	MR. MARSCHKE: Right.
7	CHAIR MUNN: And anything else on
8	that issue? Everybody understands what we are
9	doing this time.
10	All right. The next item is OTIB-
11	0010. We were going to review all the items.
12	NIOSH apparently was going to use the MCNP

- John Mauro, are you on line?
- 16 CHAIR MUNN: I recall John had

runs to show that we were able to close out

- something to say about OTIB-0010 last time we
- 18 talked about it.

all the items here.

- MR. MARSCHKE: Oh, OTIB-0010 is
- 20 not in the database. Look at the email I sent
- 21 you.

13

14

MR. HINNEFELD: It's DCAS-0010.

1 MR.	MARSCHKE:	Yes,	but	DCAS-0010
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- 2 has nothing in it.
- 3 MEMBER ZIEMER: Are they all
- 4 switched to DCAS now instead of OCAS? Yes,
- 5 here it is.
- 6 MR. MARSCHKE: DCAS-0010 and there
- 7 is nothing in the database. So the findings
- 8 that were associated with OCAS TIB-0010 did
- 9 not get carried over into DCAS TIB-0010.
- 10 MEMBER ZIEMER: I wonder if that
- is because of the title change. Are the old
- 12 OCAS numbers still in here?
- 13 MR. MARSCHKE: No. I couldn't
- 14 find it. Let's put it that way.
- 15 CHAIR MUNN: We didn't have ten
- 16 TIBs? We had eight items apparently, at
- 17 least. We talked about -- hold on.
- 18 MEMBER ZIEMER: I have a note that
- 19 we closed Finding 1 at the last meeting but
- 20 the other findings were made in abeyance. And
- 21 NIOSH to respond to Bob's analysis.
- 22 MR. MARSCHKE: Yes. Yes, I

1	believe	that	is	riaht.	Prior	to	the	last

- 2 meeting, NIOSH gave us the -- is Bob Anigstein
- 3 on the phone?
- 4 CHAIR MUNN: This is the Attila.
- 5 MR. MARSCHKE: Yes, this is the
- 6 Attila thing. Prior to the last meeting,
- 7 NIOSH gave us the Attila runs or they gave us
- 8 Revision 1 to TIB-0010 and we looked at -- it
- 9 had an appendix that had all the Attila input
- 10 not the MCNP input. Bob looked at it and we
- 11 could not duplicate the MCNP runs. We
- 12 couldn't get the input to work in MCNP.
- So I think we asked for the runs.
- 14 I'm not sure if NIOSH gave us the runs.
- 15 Perhaps they did.
- 16 DR. ULSH: We did and I think Bob
- 17 did some runs of his own. And I talked to --
- 18 MR. STIVER: Bob is going to be
- 19 calling in.
- 20 DR. ULSH: Well this is going to
- 21 be very simple. I talked to Greg Macievic and
- 22 basically in order to see what Bob's comments

1 are, we need to get the input decks tha	t he
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- 2 ran.
- MR. MARSCHKE: Oh, okay.
- DR. ULSH: Yes, we just need to
- 5 get those inputs so we can see what it is that
- 6 exactly he did and what the discrepancies
- 7 were.
- 8 MR. STIVER: I had in the excerpts
- 9 from the transcript that you guys had an
- 10 action item to verify what Bob had done when
- 11 we come back. So I guess that is where we are
- 12 at this point.
- 13 MEMBER ZIEMER: Well, did he still
- 14 get different results? Is that what you are
- 15 saying?
- DR. ULSH: At the last meeting,
- 17 Bob said he did some MCNP runs and got
- 18 different results than what we got.
- DR. ANIGSTEIN: By the way, this
- is Bob Anigstein, I am here now.
- 21 DR. ULSH: So in order to address
- 22 that, we are going to need to see the inputs

1	that	you	used	Bob.	Ιf	we	could	get	those	from
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- 2 you, we will run them. We will compare them
- 3 to see what we did and see where the
- 4 differences come from.
- 5 DR. ANIGSTEIN: I'm sorry. You
- 6 are wanting our MCNP runs?
- 7 DR. ULSH: Yes.
- DR. ANIGSTEIN: Okay.
- 9 DR. ULSH: The input decks so that
- 10 we can run them and see what --
- I mean obviously, if you got
- 12 different results from what we got, the
- 13 difference comes from the --
- DR. ANIGSTEIN: Well, if you
- 15 reviewed my -- I prepared a report. I assume
- 16 it was circulated. I don't know. Steve, was
- 17 this report circulated that I prepared,
- 18 Resolution of SC&A findings on DCAS TIB-0010.
- 19 DR. ULSH: I think it was because
- 20 that is what I gave to Greg Macievic. He said
- in order to address it, he needs to get the
- 22 input.

1	MR. MARSCHKE: That was the last
2	meeting.
3	DR. ANIGSTEIN: Let me see what
4	the date on this was. This was March 21st and
5	there were nine findings, some of which were
6	editorial and then a number were substantive.
7	And the reasons I mean, I explained the
8	reasons why we got different numbers. So it
9	is not some MCNP magic.
10	DR. ULSH: I'm not implying that
11	that is the case. It is just
12	DR. ANIGSTEIN: Excuse me?
13	DR. ULSH: I'm not staying that it
14	is MCNP magic or anything like that.
15	DR. ANIGSTEIN: No, no. I'm
16	sorry. I didn't mean to be flippant. What I
17	meant was we use different physics. So I can
18	certainly send you the input files.
19	DR. ULSH: Yes.
20	DR. ANIGSTEIN: But I think the
21	report clarifies that when we ran your files
22	we got the same results. We made some

1	improvements and various reductions, some
2	little technical refinements working with sort
3	of a professional perfectionist on this. But
4	the results were, you know, within a couple of
5	percents. There was no difference in the way
6	you ran it and the way we ran it. However, we
7	then said we don't agree with the geometry and
8	we ran what we consider a more realistic
9	geometry and we got very different results.
LO	So if we are not I mean, I
L1	don't know if it would make sense for me to go
L2	over the differences and then I can just
L3	DR. ULSH: No, we got your report
L4	and Greg has that. And in order to write up a
L5	response to that report, we would just like to
L6	have the input decks that you ran so that we
L7	can
L8	DR. ANIGSTEIN: Okay. Not a
L9	problem.
20	DR. ULSH: And then we will do
21	whatever we want to do with that but then we
22	will write up a response to your technical

1 report of March 21st.

- DR. ANIGSTEIN: Okay. So we will
- 3 provide you with the input decks for -- Okay.
- 4 Probably I will try to write up a little memo
- 5 to tell you which geometry.
- DR. ULSH: Okay.
- 7 DR. ANIGSTEIN: I will key it into
- 8 the report so that it will --
- 9 DR. ULSH: Yes, that would be
- 10 helpful.
- DR. ANIGSTEIN: Or maybe the
- 12 simplest thing I will just take the report and
- 13 simply insert into it the name of the MCNP
- 14 file for each run. I will refer to it we did
- a run doing such and such and we did so. So I
- will simply put in the name of the MCNP file
- 17 into the report. I think that will be the
- 18 easiest, if that is agreeable to everyone.
- 19 And then I will -- And of course, I will
- 20 append the report.
- Yes, we can get those out to you
- 22 probably today. So who should this be

1	distributed	+ ~ 2
	aistiibutea	LUS

- DR. ULSH: Just send it to me and
- 3 I will get it to Greg. This is Brant Ulsh.
- 4 DR. ANIGSTEIN: Okay.
- 5 DR. ULSH: I think that --
- DR. ANIGSTEIN: We have a
- 7 distribution list that we put everyone on copy
- 8 as a procedure. So people will be getting it
- 9 whether they want it or not.
- 10 DR. ULSH: That will be fine. I
- 11 think that these are relevant to Findings 8
- 12 and 9.
- 13 DR. ANIGSTEIN: Let's see.
- 14 Finding -- yes. Findings 8 --
- MR. MARSCHKE: I've got Finding 9
- 16 being closed.
- DR. ANIGSTEIN: Yes, I would agree
- 18 with that.
- 19 Let's see. If I can just ask a
- 20 procedural question of Ted Katz.
- 21 MR. KATZ: Yes.
- DR. ANIGSTEIN: Is it okay for me

1	to	send	it	immediately	without	going	through
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- 2 channels?
- 3 MR. KATZ: Absolutely. That is
- 4 not a problem.
- DR. ANIGSTEIN: That is fine?
- 6 MR. KATZ: Yes.
- 7 DR. ANIGSTEIN: Good. Will do.
- 8 Okay, yes, exactly 8 and 9. Okay, you will be
- 9 getting that before the end of the day.
- DR. ULSH: Thank you.
- 11 CHAIR MUNN: So I have as action
- 12 items that SC&A is going to provide their
- documentation and NIOSH will then review and
- 14 respond back to us at our next meeting.
- 15 Correct?
- MR. HINNEFELD: Correct.
- 17 CHAIR MUNN: Very good. It is
- 18 exactly 12:00 o'clock and the agenda says
- 19 lunch. Is it your hope that we can go to
- lunch now or would you like to forge on for a
- 21 little bit?
- 22 MR. HINNEFELD: I always like to

1	eat lunch.
2	CHAIR MUNN: I'm always ready for
3	lunch myself. So unless I hear any contrary
4	remarks to that suggestion, we will adjourn
5	for one hour for lunch and be back here at
6	1:00 o'clock.
7	(Whereupon, at 12:00 p.m. a lunch
8	recess was taken.)
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3	A-F-T-E-R-N-O-O-N S-E-S-S-I-O-N
4	(1:09 p.m.)
5	MR. KATZ: Good afternoon. This
6	is the Subcommittee on Procedures Review
7	Advisory Board on Radiation and Worker Health.
8	We are just getting going again after a lunch
9	break.
10	Let me just check on the line. I
11	got an email from one Board Member saying he
12	might be joining us. Do we have any Board
13	Members on the line?
14	(Pause.)
15	MR. KATZ: Okay, not at this
16	point. Wanda, it is your agenda.
17	CHAIR MUNN: We will continue our
18	after lunch menu with the carry-over items
19	that we show on our agenda. The first one of
20	which is OTIB-21-04, responses due on the
21	partial issue partial year issue from
22	NTOSH

1	Let's just for the fun of it take
2	a look at how our new material is presented to
3	us on the electronic database. Have we all
4	reached OTIB-0021 External Coworker Dosimetry
5	Data for the X-10 Site. Are we all on? And
6	tracking just for the record, we are showing
7	the first finding to be in abeyance; the
8	second finding to be in progress; the third
9	one to be closed; and Finding 04, which is the
LO	one which we are to address today is in
11	progress, which explains why it is a NIOSH
L2	item.

13 Brant?

DR. ULSH: Yes, this is one where 14 15 we actually had a bit of a lengthy response and we could only fit part of it into the 16 database at the time of the last meeting. 17 Ι have now sent up the full response. 18 19 that out on the 11th, which is only a few days 20 It is a pretty long response, so I don't anticipate that anyone has had any time to 21 really digest it. 22

2	Scott maybe on the line to kind of walk us
3	through this?
4	MR. SIEBERT: I am on here,
5	however I don't have the information on this.
6	DR. ULSH: Oh, that's right. I'm
7	sorry. I remember now. In the email when I
8	sent this out, Matt Smith is the author of
9	this. He is out on medical leave. In the
10	short term anyway, I figured people would want
11	some time to review it. So a response has
12	been provided now. I think the next step
13	would be probably for SC&A to review our
14	response and weigh in.
15	MR. MARSCHKE: That was an email
16	that you sent?

Elyse, is anyone on the line? Is

- 17 DR. ULSH: On 7/11, July 11th.
- 18 MR. MARSCHKE: 7/11 21-04. Okay,
- 19 yes we did receive it. We have not.
- 20 CHAIR MUNN: So we should have the
- 21 response.

1

DR. ULSH: And we will be putting

1	the	full	response	into	the	database,	now	that

- 2 it is accessible. I can do that.
- 3 CHAIR MUNN: Seven when?
- 4 DR. ULSH: The 11th. It would
- 5 have been Monday.
- 6 CHAIR MUNN: I think I saw it but
- 7 did not put it anywhere. Okay. So it is now
- 8 in SC&A's hands to see and respond to next
- 9 time. Right? Do you want, for the sake of
- 10 this record, tell us, give us a brief summary
- of what the response is?
- DR. ULSH: Well, I can only tell
- 13 you what it is about. It has to do with
- 14 partial year and external dosimetry results
- and how we deal with partial years for X-10.
- 16 MR. HINNEFELD: That's because the
- 17 X-10 coworker data came out of a particular
- 18 database. CEDR. And so you get these CEDR
- 19 data fields. The issue was that with some of
- these people, there is more than one entry per
- 21 year. So how do you know that you have
- 22 covered the whole year? There might be other

1	parts that are not monitored. How do you know
2	you have got the correct interpretation of
3	what these data say?
4	MR. STIVER: I think our concern
5	was I wasn't involved in this before but
6	from what I am reading our concern was that
7	the values reported were considered to be full
8	year, 12-month doses and we were concerned
9	there might situations where someone might
LO	leave early, you know retire or for whatever
L1	reason would have a partial coverage and that
L2	would be assigned for the full year when
L3	really they may have had, they might not have
L4	covered the actual
L5	DR. ULSH: Yes, and I think the
L6	response We talked about this at the last
L7	meeting, somewhat. And I think the response
L8	said something to do with how we assigned
L9	missed dose.
20	CHAIR MUNN: Yes.
21	DR. ULSH: And at the time, it
22	sounded like, I think you indicated it sounded

1	reasonable	but	that	is	not	the	finding,	of

- 2 course.
- 3 MR. STIVER: Yes, I think we would
- 4 have to sometime put together a formal
- 5 response.
- 6 CHAIR MUNN: All right. These are
- 7 now on our carry-overs for our next meeting.
- 8 The next item that we have would
- 9 be OTIB-0051, item 01.
- DR. ULSH: All of these items and
- 11 the next three or four, 51-01, 47-02, and
- 12 OTIB-0019 are similar in that they are
- 13 database linking issues. We really made an
- 14 effort to get that done in the last foray
- before this meeting but we weren't able to do
- 16 that.
- 17 That is going to be real quick.
- 18 It is one of those items that we have
- 19 essentially closed but we just wanted to
- verify that the link is made in the database.
- 21 So that is going to be pretty quick to do,
- 22 now that the database is up and running. We

1	just	weren't	able	to	get	it	done	before	this
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- one. But you will probably be getting an
- 3 email from us within the next week or two that
- 4 says okay, it has now been linked. Here is
- 5 how you check it out. And it will be a pretty
- 6 simple matter to close.
- 7 CHAIR MUNN: All right.
- 8 MEMBER ZIEMER: And that covers
- 9 all four of those, 51-01; 47-02; and 19? Just
- 10 those three?
- DR. ULSH: Just those three, yes.
- 12 MEMBER ZIEMER: Okay.
- 13 CHAIR MUNN: They are essentially
- done but not linked properly.
- DR. ULSH: Right. We just wanted
- to close the loop on the linking issue.
- 17 CHAIR MUNN: All right. Then we
- have now, much sooner than expected, arrived
- 19 at TIB-0013, which we were going to have some
- 20 information on the rewrite of Findings 3 and
- 21 4. I wonder -- do we know if Bob has joined
- us yet?

1	MR.	KATZ: Bol	o Anigstein,	are	you
2	on the line?				
3	DR.	ANIGSTEIN:	Yes.		

- 4 MR. KATZ: Okay, great.
- 5 CHAIR MUNN: Thank you for being
- 6 early, Bob. We appreciate it.
- 7 DR. ANIGSTEIN: Huh?
- 8 CHAIR MUNN: Thank you for being
- 9 early. We appreciate it.
- DR. ANIGSTEIN: Okay. Let's see
- 11 now. I believe that these three -- Yes, we
- 12 wrote 3 and 4 and I think they have
- 13 essentially been resolved.
- MR. MARSCHKE: We, for the
- 15 Committee, Bob has rewrote 3, 4, and 5,
- 16 actually. He has 3, 4, and 5, actually.
- 17 DR. ANIGSTEIN: You are correct.
- 18 MR. MARSCHKE: And the revised
- 19 edits are now in the database. So if you want
- 20 for example on item number issue 3, I am
- 21 showing Bob's, up on the screen, edited
- version of it, based upon the discussion that

1	took	place,	I	think	it	was	back	in	January,	at
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- 2 the January meeting.
- 3 DR. ANIGSTEIN: Should I just read
- 4 that one comment?
- 5 CHAIR MUNN: Hold on for just a
- 6 moment, Bob. We are trying to get our
- 7 personal computers into the right field of
- 8 information.
- 9 MEMBER ZIEMER: Mine doesn't show
- 10 any findings.
- 11 MR. MARSCHKE: It is OCAS-TIB with
- one -- I think it is OCAS dash TIB-013.
- 13 MEMBER ZIEMER: Only one zero?
- 14 MR. MARSCHKE: Only one zero. And
- 15 I think there is a duplicate in there OCAS
- 16 TIB- 0013, which basically a cleanup issue of
- 17 the database.
- MR. STIVER: Well I've got 0013
- 19 here.
- 20 MR. MARSCHKE: Yes. Don't look at
- 21 that one.
- 22 MEMBER ZIEMER: Don't look at

	_	
7	that.	
	I MAI	

- 2 MR. MARSCHKE: I think there is an
- 3 OCAS TIB-013.
- 4 MR. STIVER: Zero, one, three.
- 5 Okay, I have zero, one, three.
- 6 MR. MARSCHKE: Yes, right now, it
- 7 is listed as in abeyance. I'm not sure that
- 8 that is the right listing. If you look at the
- 9 very end, if you look up, I think the status
- 10 was inadvertently changed to in abeyance.
- 11 MR. STIVER: It should have been
- in progress.
- 13 MR. MARSCHKE: I think it should
- 14 be in progress. But now that I understand how
- 15 to --
- DR. ANIGSTEIN: I believe that --
- 17 Are we talking about issue 3?
- MR. MARSCHKE: Yes.
- DR. ANIGSTEIN: Issue 3, I think,
- was closed.
- 21 MR. MARSCHKE: It was closed?
- 22 DR. ANIGSTEIN: Let me just read

1	the comment. I didn't want to say it is
2	closed. Let the workgroup apprise yourself.
3	The response to issue 3, the final comment of
4	issue 3 was "We wish to recharacterize our
5	findings. Review of objective 1.3 that is
6	part of our procedure asks if the procedure is
7	complete in terms of required data. We
8	construe that to mean is the DR given adequate
9	information to apply the procedure. Under
10	that interpretation, we find that the
11	procedure is complete and we changed the
12	rating from three to five. So that means we
13	no longer have an issue.
14	MR. MARSCHKE: I'm not sure how we
15	handle that, Bob, from an administrative point
16	of view. Because basically what you are
17	saying is SC&A has rescinded that issue
18	because before we had it as a three and now we
19	are basically making it in our checklist a
20	five when we make an issue of a five in
21	response to our checklist item, that means
22	there is no issue associated with it.

1	DR. ANIGSTEIN: That's right.
2	Five means good.
3	MR. MARSCHKE: Right. Now but in
4	the database, we have this issue out there and
5	if you look at the one above it, it says we
6	recommended the last change was to change the
7	status to "in progress." And I am not sure.
8	We would have to go back and look at the
9	minutes of the meeting to see whether or not
10	the Subcommittee actually changed it to in
11	progress or changed it to in abeyance.
12	But regardless of what they did in
13	the last meeting, Bob is saying that right now
14	SC&A doesn't feel that there is any problem
15	with this and if the Subcommittees were to
16	agree with that, then we can close this issue.
17	DR. ANIGSTEIN: This goes back to
18	actually January 7th.
19	MR. MARSCHKE: Right.
20	MR. STIVER: Yes, so that would be
21	let's see what we have.
22	CHAIR MUNN: And now at this

juncture we have an opportunity to	do	our
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- 2 first change of status and added information.
- 3 Can we do this online where we are right now?
- 4 MR. MARSCHKE: Well, I will click
- on the edit status button. And basically I
- 6 will do this on behalf of myself, I guess,
- 7 because I can't do it on behalf of Wanda.
- 8 CHAIR MUNN: Why not?
- 9 MR. MARSCHKE: Because Wanda's
- 10 name doesn't show up.
- 11 CHAIR MUNN: Oh my goodness.
- 12 MR. MARSCHKE: Maybe I can do it
- on behalf of John Stiver. Okay and it shows
- 14 up closed. SC&A has --
- 15 MEMBER ZIEMER: What's the finding
- 16 that we are --
- 17 CHAIR MUNN: Finding number 3,
- 18 that it was about the rating of the finding.
- 19 And after following things through, they have
- 20 withdrawn the issue. They felt the rating was
- 21 5, which is not a dire consequence to be
- 22 carried.

1	MEMBER ZIEMER: I'm looking at
2	what is in here now on yesterday's date.
3	CHAIR MUNN: On yesterday's date.
4	MR. MARSCHKE: I can't show that.
5	MEMBER ZIEMER: The status was
6	inadvertently changed. Am I looking at the
7	right one?
8	MR. MARSCHKE: Yes. Yes, I put
9	that in.
LO	MEMBER ZIEMER: Yesterday.
11	MR. MARSCHKE: I was under the
L2	impression that it was in progress. That this
L3	issue was in progress but I could have been
L 4	wrong on that. And I will go back in and
L5	maybe we can add that statement.
L6	MEMBER ZIEMER: Well, I am just
L7	reading what is written. When it says it did
L8	not work.
L9	MR. MARSCHKE: I couldn't
20	MEMBER ZIEMER: Oh, I see.
21	MR. STIVER: I think he was just
22	trying to change the status.

1	MR. MARSCHKE: I tried to change
2	the status. I didn't understand how the
3	database was working.
4	MEMBER ZIEMER: So while you are
5	looking at that, why do you said this
6	document is actually 013 not 0013. There is
7	an 0013 but each of these sub things are
8	identified as 0013 items. That is confusing
9	me because there is a separate document in our
10	system which is 0013.
11	MR. STIVER: I think I have two
12	different entries for the same document and
13	one is complete and the other isn't. I'm not
14	quite sure why that is.
15	MR. MARSCHKE: It is a cleanup.
16	We have a
17	MEMBER ZIEMER: This document is
18	actually 0013?
19	CHAIR MUNN: I thought so.
20	MR. MARSCHKE: Yes, there is only
21	one.
22	MR. HINNEFELD: Yes, there's only

1	one	TIB-13.	
1	one	TTB-T3.	

- 2 MEMBER ZIEMER: But to pull it up,
- you can't do 0013. You have to pull up 013.
- 4 MR. HINNEFELD: I think from the
- way the database is currently structured, yes,
- 6 you have to go to 013.
- 7 DR. ANIGSTEIN: This is Bob
- 8 Anigstein. I just checked on the DCAS
- 9 website. And on the DCAS website it is listed
- 10 as DCAS-TIB-0013, Rev 01, just as a point of
- 11 information.
- 12 MEMBER ZIEMER: The database here
- 13 lists both of them.
- 14 DR. ANIGSTEIN: I understand that.
- I was just, I thought I would just throw in
- 16 that additional -
- 17 MEMBER ZIEMER: If you tried to
- 18 put 0013 on the database, you don't get the
- 19 right --
- 20 MR. MARSCHKE: There is a whole
- 21 series of OCAS-TIBs that are entered into the
- database twice, once as 00 number and once as

_	the o number. So there is a whole series of
2	them.
3	MEMBER ZIEMER: Got you.
4	MR. MARSCHKE: So there is a whole
5	series of them. If you look here during the
6	beta testing, if you will, of those database,
7	we have discovered this and they have not had
8	an opportunity, the IT people have not had the
9	opportunity to make the correction yet. But
10	one of them will be removed and the other one
11	
12	Right now, the problem is the
13	issues are associated with the 013 and not the
14	0013. So the data is in there for the 013 and
15	so they either have to, you know,
16	MEMBER ZIEMER: You look up 0013
17	and you don't get anything.
18	MR. MARSCHKE: In the database,
19	you're going to get nothing. Like Bob says,
20	if you looked it up on the NIOSH website, that
21	is the one you would find.

CHAIR MUNN: Well now I have an

	1	entirely	different	response	from	mγ	searc
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- 2 My search gives me DCAS-TIB-0013: Selected
- 3 Geometric Exposure Scenario Considerations for
- 4 External Dose Reconstruction at Uranium
- 5 Facilities. And it also gives me ORAUT-OTIB-
- 6 0013, which is Individual dose Adjustment
- 7 Procedures for Y-12 Dose Reconstruction.
- 8 MEMBER ZIEMER: And that is also
- 9 the wrong one.
- 10 MR. STIVER: The one we are
- 11 looking at is the Special External Dose
- 12 Reconstruction Considerations for Mallinckrodt
- Workers.
- 14 MEMBER ZIEMER: So even though it
- is in twice, Steve, it has different titles
- 16 also. That is the confusing part.
- 17 CHAIR MUNN: And neither of those
- shows on my list as one of the TIB-0013s.
- 19 MEMBER ZIEMER: Now we want the
- 20 one that is in our database as 013
- 21 Mallinckrodt worker one. Right?
- 22 CHAIR MUNN: Well, I'm not at

<pre>1 Mallinckrodt. I'm at</pre>	other uran	nium facilities
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- 2 or at Y-12.
- MR. STIVER: One way to make it a
- 4 little easier is you can filter it on TIBs to
- 5 start with.
- 6 CHAIR MUNN: That's okay.
- 7 MEMBER ZIEMER: You have got to
- 8 pull it up as 013 is the problem.
- 9 CHAIR MUNN: There it is,
- 10 Mallinckrodt. That is bad when we have three
- 11 different 13s.
- 12 MEMBER ZIEMER: It breeds
- 13 confusion.
- 14 CHAIR MUNN: It is a big
- 15 confusion.
- 16 MR. MARSCHKE: Okay, now here is
- 17 the real test because I am going to hit the
- 18 save button.
- MR. KATZ: It worked.
- 20 MR. MARSCHKE: Closed. Great.
- 21 MR. STIVER: Let me see if I see
- the same thing you do. And low and behold, it

1	comes	ดเเ	closed.
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- 2 CHAIR MUNN: And mine still says
- 3 in abeyance. I'm assuming that digital
- 4 information is working its way through the
- 5 system and will eventually appear on my
- 6 screen.
- 7 MR. MARSCHKE: You may have to
- 8 refresh your screen. Go off the screen and
- 9 then come back on or hit the refresh button.
- 10 CHAIR MUNN: I just did. Voila!
- 11 Closed. And the next item would be 04, which
- is showing as in progress.
- DR. ANIGSTEIN: Yes, this is Bob
- 14 Anigstein. What I would suggest, if it is
- 15 appropriate, that 04 be transferred to 06
- 16 because they are one and the same and there
- 17 seems to be -- it is not our fault. It is the
- 18 fault of the SC&A review procedure that the
- 19 same issue was mentioned under two different
- 20 headings but it is the same issue. And
- 21 therefore, it would make sense to transfer it
- 22 to Finding 6, if such a thing is possible. I

1	know	you	can	transfer	issues	to	different

- procedures. I don't know if you can transfer
- 3 issues within a given procedure.
- 4 CHAIR MUNN: Ours currently says
- 5 that it was addressed in 05.
- DR. ANIGSTEIN: No. No, 05 is
- 7 totally separate. The insert that I made,
- 8 which should be presumably transferred to the
- 9 database on July 14th was -- today is July
- 10 14th. Oh, I think I have live Word problem in
- 11 that I have a volatile date in here, which is
- 12 whatever the date was then is continued.
- 13 Finding 04 and Finding 06 refer to
- 14 the same technical issue. That is the
- 15 response to Finding 04. And Finding 06 I
- 16 believe NIOSH is working on. So it should be
- in abeyance or in progress.
- 18 MR. KATZ: So let's just close
- issue 04 and put notate same as issue 06.
- 20 DR. ANIGSTEIN: No, not 05. We
- 21 are talking about issue 04 now.
- 22 MR. KATZ: Right. That's what I

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- DR. ANIGSTEIN: Oh, I'm sorry. I
- 3 thought I heard you say issue 05.
- 4 MR. KATZ: I just said I suggest
- 5 we just close issue 04 and notate it is the
- 6 same as issue 06. And then issue 06, once
- 7 that gets resolved, that takes care of it.
- DR. ANIGSTEIN: Sounds good.
- 9 CHAIR MUNN: Logical.
- 10 MR. STIVER: Okay, right now the
- 11 status of 06 is kind of an inverse. It says
- 12 addressed in finding. That probably means
- 13 finding 04. So that kind of refers to --
- 14 (Laughter.)
- MR. KATZ: That works.
- 16 MR. MARSCHKE: I think you are
- 17 right, John.
- DR. ULSH: Do you want to try
- 19 changing the status here and get ambitious?
- 20 MR. MARSCHKE: Well which one do
- 21 you want to change the status of? This
- 22 appears to be essentially a restatement of

1	this.	Т	am	reading	the	history	٥f	ร่ ธุรเเค	six
_	CHILD.		aııı	reauring	CIIC	TITECOLY	O_{T}	TDDUC	DIA.

- 2 It says NIOSH says this appears to be
- 3 essentially a restatement of Finding 04. So
- 4 see response to Finding 04. And then on July
- 5 26, 2010 meeting the Subcommittee instructed
- 6 SC&A to review the initial response and change
- 7 the progress to in progress.
- 8 MR. STIVER: So which one do you
- 9 want to go with?
- 10 MR. MARSCHKE: Basically I think
- 11 what we were going with, I think our intent
- 12 was to go with issue -- Let me see. If we go
- 13 back to 04 -
- 14 CHAIR MUNN: I think we were done
- 15 with 04.
- MR. MARSCHKE: Yes.
- 17 MR. KATZ: So we'll close six.
- 18 CHAIR MUNN: Well essentially it
- is closed. It says addressed in findings.
- 20 MR. MARSCHKE: Addressed in
- 21 findings.
- 22 MR. KATZ: Okay. So we actually

1	closed it. We don't have to close it.
2	MR. HINNEFELD: The idea behind
3	that addressed in findings status was that the
4	closure for this, if somebody is looking for
5	the closure for this finding, they would know
6	where to look. I mean, they should be able to
7	find it. I'm not sure what but I guess you
8	can pick it out of the text. You should be
9	able to go to 04 and see the closure. Whereas
10	if you marked it closed here, you would never
11	know, although you can cover that in the
12	comment as well. You can say the closure
13	action for number four will close this one as
14	well.
15	For closure action on this item,
16	see closure of item number 04. And then you
17	can close this. And that way, it is gone.
18	It is nice to show closed because
19	that means you don't have to go back and look
2.0	at it. It is up to the Subsemmittee. I am

CHAIR MUNN:

just saying something.

21

22

Well it seems to me

1	that	if	we	close	item	0.4	and	sav	in	а	part	of

- 2 our closure, this action also closes number
- 3 06, then we can leave number 06 as it is. It
- 4 says addressed in issue 04.
- 5 MR. HINNEFELD: That's okay with
- 6 me. So at the time, in the future when we
- 7 close 04. I don't care. Whatever.
- 8 And then theoretically when you
- 9 doing an account of statuses, if you see a
- 10 count of you have got six that are addressed
- in some other finding, you count them as
- 12 closed because they really don't matter.
- 13 CHAIR MUNN: Yes. For all intents
- and purposes, for our meetings here, number 06
- is already closed because we said it is
- 16 addressed in another finding.
- 17 MR. HINNEFELD: Right.
- 18 CHAIR MUNN: So that is closed to
- 19 us.
- MR. HINNEFELD: Right.
- 21 CHAIR MUNN: So Bob's current
- comments need to go under item 04.

1 MR.	KATZ:	Yes,	it	is	closed.
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- DR. ANIGSTEIN: But 06 is left
- 3 open.
- 4 MR. HINNEFELD: We are going to
- 5 keep one of them open.
- 6 MR. KATZ: Right, 04 is going to
- 7 stay open. We are closing 06.
- 8 MR. HINNEFELD: And we will answer
- 9 both in one place.
- 10 MR. KATZ: Right because they are
- 11 the same thing.
- MR. HINNEFELD: All the points
- made in both will be answered in one.
- DR. ANIGSTEIN: Actually based on
- what we said earlier, if I can, I think it was
- 16 in OTIB-0010, if I can restate a better
- 17 understanding of SC&A or at least for myself,
- 18 the finding 04 was that it does not provide
- 19 adequate guidance. Actually it does provide
- 20 adequate guidance, we just disagree with the
- 21 guidance. In other words, the technical issue
- remains but semantically perhaps 04 should not

1	be	an	issue	because	there	is	sufficient

- 2 guidance given. And there is sufficient
- 3 guidance given. We just don't agree with it.
- 4 MR. MARSCHKE: Well NIOSH,
- 5 basically if you go back and look at the
- 6 history of these two issues, SC&A made two
- 7 comments, issues 04 and 06.
- 8 DR. ANIGSTEIN: I know.
- 9 MR. MARSCHKE: NIOSH came back and
- 10 they responded to issue 04. Then they came
- 11 back and then when they got down, they worked
- their way down to issue 06, they said, this
- appears to be essentially a restatement of
- 14 Finding 04, see response to Finding 04.
- DR. ANIGSTEIN: Okay.
- 16 MR. MARSCHKE: So I mean, that is
- 17 kind of the way it evolved and that is why it
- 18 six says addressed in Finding 04. It has
- 19 nothing to do with the way SC&A initially made
- those findings.
- 21 DR. ANIGSTEIN: Okay. If I had to
- 22 do it all over again, there would not have

1	been an issue 04. It would have just been 06.
2	But the way it is now, so be it.
3	MR. MARSCHKE: So are we going to
4	do anything with them or are we going to leave
5	them the way they are?
6	CHAIR MUNN: Let us indicate that
7	what Bob has just told us at this meeting and
8	indicate that we are closing item 6 and
9	continuing to follow it under 04.
10	MEMBER ZIEMER: Wanda?
11	CHAIR MUNN: Yes.
12	MEMBER ZIEMER: I have a question
13	on item 04 though. I am reading back through
14	the initial response that NIOSH made. It
15	looks to me as if we talked about the fact
16	that this was an overarching issue. Now, was
17	that the right one?
18	MR. HINNEFELD: Which one are we
19	on now, 06?
20	MEMBER ZIEMER: Well this would be

is overarching, does it get transferred.

04, which is the same as 06. And then if it

21

1	Is only part of this overarching
2	or all of it?
3	CHAIR MUNN: Well this particular
4	finding, I think.
5	MR. HINNEFELD: Our interpretation
6	of it, if I recall I'm speaking from memory
7	and I'm not sure my memory is correct. I'm
8	not even sure my interpretation was correct.
9	The largest portion of the
LO	difference cited between X-10 analysis and
L1	ours was based on angular dependence of the
L2	badge and angular dependence factors that they
L3	had included in their analysis which we had
L4	left out of ours. Ours was strictly geometric
L5	and did not address angular dependence of the
L6	badge.
L7	If that is correct, I'm not sure
L8	it is correct, then I think the whole thing to
L9	be overarching issue of angular dependence of
20	the badge. Because that has come up a number
21	of times and how are we at the program going
22	to deal with angular dependence of a dosimetry

- Now Bob, if there is more to it,
- 3 then we will keep it open and we will treat
- 4 one part separately and the other part as an
- 5 overarching issue, the angular dependence
- 6 overarching issue.
- 7 DR. ANIGSTEIN: Can I respond to
- 8 this now?
- 9 CHAIR MUNN: Yes, please Bob, do.
- DR. ANIGSTEIN: We found a ratio
- of 7.6 between the lower torso and dosimeter
- inn contrast to a factor of 2.125 reported by
- 13 NIOSH. That 7.6 does not use angular
- 14 dependence. The 7.6 was the HP(10,0). The
- 15 zero -- ten refers to the ten millimeter deep
- 16 dose. The zero refers to the angle of
- incidence, which is normal here.
- 18 There is no angular. In both
- 19 cases we assume normal incidence.
- MR. HINNEFELD: Okay.
- 21 DR. ANIGSTEIN: And so the 7.6 is
- 22 not based on angular. If you throw an angular

1	dependence, which is not mentioned here but it
2	is mentioned elsewhere, the ratio is 10 point
3	something.
4	MR. HINNEFELD: Okay. So it would
5	appear then that this should, that that part
6	of our response should not be there. There
7	does not look to be an angular dependence.
8	DR. ANIGSTEIN: The reason, if I
9	can clarify, the reason for the difference is
10	that we calculated the dose to a point on the
11	body just opposite this uranium ingot as that
12	is the most sensitive organ, regardless of
13	which organ it is because we get different
14	organs depending on where this thing was
15	found. And then we calculated the dose at the
16	position of the dosimeter.
17	What the NIOSH did using Attila
18	was they got an average of the organ. They
19	got a whole bunch of organ doses or locations
20	in the chest, the upper torso, and then used
21	MCNP sampling using the Crystal Ball program
22	to get a distribution. But the point is, our

1	point is the claimant does not have a
2	distribution of cancer to the different
3	organs. He has a cancer to a particular
4	organ. And, therefore, it is inappropriate to
5	use a distribution of organs. You should take
6	the most limiting organ or, if they wish to
7	have a different correction factor for each
8	organ, then there would have to be a whole
9	table that is, you know, if it is a cancer of
10	the large intestines, this is the correction
11	factor you use. If it is a cancer of the
12	liver, this is the correction factor you use.
13	But barring that, it should be the
14	most claimant favorable. Which means the
15	organ that gets the most dose from the uranium
16	ingot and the ratio of that to the dosimeter
17	on the lapel. We didn't even put it on the
18	lapel. We put it in the center of the chest.
19	When you put it in the lapel, it is off to
20	one side. So again, there is still a slightly
21	increased distance, which is not very big.

That is our point in a nutshell.

1	We a	agree,	bas	sed	on o	ther	calc	ula	ations	s that	we
2	have	e done	in	the	pas	t, we	agr	ee	that	MCNP	and

- 3 Attila probably yield very similar results.
- 4 But it was the way the Attila results were
- 5 utilized that is our objection.
- 6 CHAIR MUNN: Yes, Paul?
- 7 MEMBER ZIEMER: It doesn't appear
- 8 to me that that showed up in the list of
- 9 exchanges here.
- 10 CHAIR MUNN: No, I'm not getting
- 11 that from this at all.
- MR. MARSCHKE: I was just going to
- make that point. I think, Bob, what we do if
- 14 we look at the database, we have the NIOSH
- initial response. And then the next thing we
- 16 have in here is instructions from the
- 17 Subcommittee for SC&A to review the NIOSH
- initial response. And then we just have the
- 19 small Word that you made the other day saying
- that 04 and 06 are together.
- 21 I think this is an SC&A action
- 22 item to respond to the NIOSH initial response

1	with	words	similar	to	what	you	iust	said.

- DR. ULSH: It might just be --
- 3 since the database was down.
- 4 MR. MARSCHKE: It might have been.
- 5 Yes, you might already have those words
- 6 someplace and we just couldn't get them into
- 7 the database. I think we might have had this
- 8 same discussion back in January.
- 9 CHAIR MUNN: It certainly sounds
- 10 familiar to me.
- 11 MR. MARSCHKE: A very similar
- 12 discussion back in January. But that would be
- 13 -- I mean, it looks like, looking at the
- history here is the ball is in SC&A's court.
- 15 MEMBER ZIEMER: Yes, there is
- 16 something missing here. We did, I think we
- 17 did discuss it and maybe you looked at Bob's
- 18 paper but it doesn't show up here.
- 19 MR. MARSCHKE: Right, it doesn't
- 20 show up.
- 21 MR. STIVER: From what it reads,
- 22 it never made it into the database.

1	MR. MARSCHKE: The first thing I
2	have to do, Bob when I get back to my office
3	tomorrow is look to see whether or not, or you
4	can also look to see whether or not you have
5	written a response to the NIOSH initial
6	response. And if so, then I have to enter
7	that into the database.
8	DR. ANIGSTEIN: When would that
9	have been?
10	DR. ULSH: I'm almost certain we
11	discussed it at the last meeting of this
12	Subcommittee, whenever that was. Was that
13	March?
14	CHAIR MUNN: March is the last
15	meeting of this Subcommittee. The one prior
16	to that, the one that I expected the field
17	discussion to have taken place would have been
18	the January meeting. Either January or March.
19	Both of them are posted.
20	MR. MARSCHKE: The instruction
21	from the Subcommittee to SC&A to review the
22	NIOSH initial response came to us in August of

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1	2010	_

- 2 CHAIR MUNN: Yes.
- 3 MR. MARSCHKE: So I mean, it may
- 4 have been, if you look in the August 13, 2010
- 5 minutes of meeting, that might have it. We
- 6 probably discussed something there.
- 7 CHAIR MUNN: All right. So the
- 8 action right now --
- 9 DR. ANIGSTEIN: I have a reply
- 10 from January where I basically what I just
- 11 said.
- MR. MARSCHKE: Okay, well we need
- 13 to get that into the database.
- 14 MR. HINNEFELD: I guess it would
- 15 help matters if you would just send that to
- 16 Steve. Would that be alright if he just
- 17 forwarded it to you?
- MR. MARSCHKE: Right.
- 19 MR. HINNEFELD: If you would, just
- 20 send that to Steve.
- DR. ANIGSTEIN: Well actually, it
- 22 is in the most current response also, the

1	reply.
2	MR. HINNEFELD: Okay.
3	CHAIR MUNN: As long as Steve has
4	that, then he can get it inserted into our
5	current information status and we will be able
6	to then ask NIOSH if there is some initial
7	response to that.
8	MR. MARSCHKE: We may be able to
9	When I put it into the database, I can send
10	an email to Brant and tell him that it is in
11	the database and whether NIOSH wants to You
12	know, so that we don't have to take one step
13	every meeting. Maybe we can take two steps
14	before the next meeting.
15	CHAIR MUNN: Thank you if you do
16	that. I appreciate that. We will expect that
17	to happen so that with any luck at all, the
18	next action item will actually be NIOSH,
19	hopefully.
20	MR. STIVER: Yes, I have Bob

Anigstein's reply right here. It should have

gone in there. It is even listed as a finding

21

	1	like	it	was	extracted	from	the	database,	which
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- is kind of strange. We will go ahead and get
- 3 that.
- 4 CHAIR MUNN: All right. Then you
- 5 can send that directly to Steve and he will
- 6 have it. And we will go on from there.
- 7 That brings us to response number
- 8 05, which is shown as Brant's action item.
- 9 MR. HINNEFELD: Yes, we really
- 10 haven't prepared a response on this. I would
- like to talk about this one just a little bit.
- 12 CHAIR MUNN: All right.
- 13 MR. HINNEFELD: This one has to do
- 14 with the first finding was it wasn't really
- 15 clear, you know dimensions of the person or
- 16 the glove box. Things like that weren't
- 17 really clear.
- So we revised the TIB and sort of
- 19 said additional things. We said the human
- 20 figure is six feet tall. That would be
- 21 average and so the correction factor would
- 22 actually be, it was essentially -- if the

1	person were shorter than six feet all, the
2	geometric adjustment would be smaller. And we
3	figured that since we were pretty tall, that
4	is sufficiently conservative.
5	And then SC&A's response to that
6	is not maybe sufficiently conservative. They
7	give some statistics about U.S. males between
8	18 and 74 gives the 90th percentile heights in
9	centimeters. So the 90th percentile is about
10	61.6 inches and then since heights are
11	normally distributed roughly, they estimate
12	that the height of a six foot person would
13	represent about the 80th percentile.
14	So from our standpoint, we are
15	making a general adjustment of somebody
16	working in the glove box. And we are being,
17	we feel like we are being sufficiently
18	conservative by saying, you know, 80 percent
19	of the people are this tall or smaller, that
20	is sufficient and there are other
21	conservatisms built into the dose
22	reconstruction approaches that we don't have

1	to use the 95th percentile of the population
2	at every state.
3	So we feel like we are okay where
4	we are. So, that is kind of my take on that
5	whole issue. You are talking about an
6	adjustment of some, I guess, two or three
7	inches. You would have to get above 90th
8	percent if you were going to go to 95th
9	percentile. So, it would be somewhere around,
LO	you would have to go from somewhere around six
L1	foot to six foot-two, maybe a little bit over
L2	six foot-two, apparently.
L3	And I just don't see how it gains
L 4	you that much in the context of what we are
L5	trying to accomplish here.
L6	MEMBER ZIEMER: How much does that
L7	change the actual calculated dose? You are
L8	talking about the difference from the chests.
L9	MR. HINNEFELD: Essentially from
20	their navel
21	MEMBER ZIEMER: Oh.
22	MR. HINNEFELD: to their chest.

1 F	'or	someone	who	is	six	feet	tall	versus	maybe
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- 2 six-three, six-two or six-three.
- DR. ANIGSTEIN: Excuse me. It
- 4 would be the difference from the navel to the
- 5 dosimeter on the lapel.
- 6 MR. HINNEFELD: The lapel, yes.
- 7 So the navel to the lapel.
- 8 MEMBER ZIEMER: Let me just make a
- 9 comment. If you look at heights of people,
- they don't necessarily relate to the torso.
- MR. HINNEFELD: Well that is true.
- 12 MEMBER ZIEMER: A lot of it is in
- 13 legs. And it turns out and you can see this
- in seating, that the difference in height
- amongst people who are seated is very much
- 16 less than the difference of their actual
- 17 heights.
- 18 DR. ANIGSTEIN: But aren't the
- 19 glove box workers standing rather than
- 20 sitting?
- 21 DR. ULSH: Yes, but the difference
- 22 we are talking about --

1	MR.	STIVER:	Yes,	we	are	talking

- 2 about the torso length.
- DR. ANIGSTEIN: Yes, I know. But
- 4 the torso, it is the elevation of the lapel
- 5 dosimeter above the level of the glove box
- 6 working area.
- 7 MR. MARSCHKE: We're not really
- 8 talking about navel to lapel. We are talking
- 9 about table top to lapel.
- 10 DR. ANIGSTEIN: Right. And the
- 11 table top, they are standing. So the table
- may sit lower on the body.
- 13 MR. MARSCHKE: If you had longer
- legs, the table top would be further away.
- 15 The organs that we are calculating dose to
- 16 would be higher as well.
- 17 DR. ANIGSTEIN: But there could
- 18 still be sensitive organs right opposite the
- 19 table.
- 20 MR. HINNEFELD: My position is
- 21 still that you are jousting. You are using
- that hammer to hit and smash flies here. I

Τ	mean, what do you really expect out of this?
2	How fine of a number do you want on this
3	adjustment?
4	DR. ANIGSTEIN: I agree. I don't
5	maintain it is a major issue. I just look
6	very carefully at our charger, which is to see
7	that the findings, the documents that you
8	review are scientifically accurate.
9	And you know, the six foot was
10	chosen arbitrarily. There was no statistic,
11	you know. I found the statistics on the
12	distribution. NIOSH did not supply the
13	statistics. So it is not a show stopper but
14	still it seems it should be I would still
15	say the comments should be taken into account.
16	If it there is text to be added to
17	the TIB to explain why this was, and if the
18	Board or the Subcommittee agrees that that is
19	adequate, that that is a possibility.
20	Right now, the six foot is just
21	thrown in as a given, with no explanation.
22	And the revised TIB still did not include any

1	discussion of it.
2	MEMBER ZIEMER: Has anyone done a
3	calculation to show how much difference you
4	would get for actual organ doses?
5	DR. ULSH: No, we haven't. And if
6	the Subcommittee decides that they want a
7	NIOSH response, that is probably what it will
8	contain.
9	MEMBER ZIEMER: Okay. I am just
10	trying to get a feel whether we are talking
11	about a couple percent which would but then
12	what we are trying to do here is sort of
13	trivial.
14	I mean, if we are talking about
15	factors of two or three in dose, that is one
16	thing. If we are talking about a few percent
17	change in the dose because we have a little
18	percent change in height, which is not great,
19	which I don't have a feel for that. I just
20	wondered if anyone had
21	MR. STIVER: Actually, with the

atomic veterans are going to have to do this

1	very same exercise, looking at different
2	heights, different proportions,
3	proportionality. And actually, the Air Force
4	has published some studies on that they used
5	for developing cockpit sizes and placement of
6	various instruments.
7	And we used it to calculate beta
8	dose to organs for people at various heights,
9	which you know is going to drop off
LO	considerably, more so than gamma ratios. And
11	as you recall, the beta-gamma ratios, gamma
L2	doses that we modeled didn't change much at
L3	all over a few centimeters. It is very
L4	trivial.
L5	Now I don't know how this would
L6	translate to this particular problem here.
L7	MEMBER ZIEMER: Well I think that
L8	glove box you are talking about pretty much
L9	penetrating stuff as opposed to beta dose. I
20	mean, the beta dose at your glove box should
21	be zip.
22	My intuitive feeling is it is

Τ	small but I just wondered II anybody had
2	actually quantified it.
3	MR. HINNEFELD: Oh, this isn't
4	glove box? This is the uranium ingot?
5	DR. ANIGSTEIN: Okay, well I just
6	
7	MR. HINNEFELD: Well it still
8	going to be lathe height. I mean, it is still
9	going to be the same issue. The height of the
10	lathe.
11	MR. STIVER: Basically the change

MR. MARSCHKE: Bob, do you have

in dose rate is height from the --

14 any idea how much?

- DR. ANIGSTEIN: If I could break
- in, I just did a quick calculation. And I
- 17 agree, the change, if you just, you know let's
- 18 use the inverse square law and assume that the
- 19 lapel moves proportional to the height, which
- 20 is not quite accurate. I agree. We are
- 21 talking about changes of probably less than
- 22 ten percent.

I concede that it is not a
2 MEMBER ZIEMER: I think in term
of what we are I mean, these are broad
4 estimates in the absence of detailed data and
we are talking about groups of people for who
6 we don't know the height. And the question
7 does it make a difference if we use six foot
8 two, rather than six foot?
9 MR. STIVER: You are trying t
10 kind of scale it to the height of th
claimant. I think that we have a tendency t
introduce more detail and precision than i
really warranted by the source.
MEMBER ZIEMER: Well I think 8
percent you could argue that that is prett
conservative. I don't think legally you ar
required to like the 95th or 99th like yo
would in the final.
CHAIR MUNN: I wouldn't think so.
MR. HINNEFELD: The only tim
anything is specified is the actual
CHAIR MUNN: It is the opinion o

1	the Chair that the information that has been
2	provided is adequate and that there is no
3	reason to pursue this particular technical
4	issue further. The process that has been
5	explained by NIOSH is acceptable to me. And I
6	would like to see us close this.
7	MEMBER ZIEMER: It is acceptable
8	to me. Can we close it with two people?
9	CHAIR MUNN: Do we have any major
10	Do I hear any comments to the contrary?
11	If not, please indicate, Steve,
12	that the committee accepts the NIOSH position
13	with respect to the adequacy of their approach
14	and we have closed the item.
15	MR. MARSCHKE: Okay.
16	CHAIR MUNN: Fine. I have one
17	last question before we leave this particular
18	set of issues and that is with respect to the
19	nomenclature of the title, since I personally
20	had so much trouble finding this where it is
21	supposed to be and I now know that there are
22	three different items on our list of

2	somewhere in the title. Shall we make an
3	attempt to remove one of these zeros so that
4	we won't continue to do that or not?
5	MR. MARSCHKE: That is an action
6	item that has been, at least to get rid of
7	OCAS-TIB. So there is only one OCAS-TIB-13 in
8	the system. Now I don't know about the DCAS-
9	TIB; DCAS-TIB and OCAS-TIB how they all
10	interface with each other.
11	DR. ULSH: NIOSH is taking this as
12	an action item to go through the information
13	that is currently in the database and remove
14	any duplicate entries, making sure that we
15	don't lose anything when we do that. We will
16	take care of that.
17	MR. MARSCHKE: Also there seems to
18	be there was OCAS-TIB-10 was not in the
19	database, either as OCAS-TIB-010 or as OCAS-
20	TIB-0010 that I could find.
21	DR. ANIGSTEIN: Steve, if I can
22	submit a point of information. These

procedures in the system with a TIB-13

1	according	to	the	NIOSH	or	the	DCAS	website,
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- 2 you have for each number there is a TIB, which
- is a DCAS or originally OCAS and there is an
- 4 OTIB -- I'm sorry. Forget what I just said.
- 5 I was thinking of ORAU. Cancel my comment.
- 6 DR. ULSH: So that's just a
- 7 cleanup the data in the database issue. That
- 8 is our responsibility to do that.
- 9 CHAIR MUNN: Okay. We will ask
- 10 about that come next meeting.
- DR. ULSH: I have no doubt you
- 12 will. We will get right on it.
- 13 CHAIR MUNN: Excellent.
- 14 The next items to be addressed is
- OTIB-0052, Rev. 1 Report. It is an SC&A item.
- 16 And where should we be looking?
- 17 MR. MARSCHKE: Nancy Johnson sent
- an email to everybody a couple of days ago on
- 19 the 11th. Monday, 7/11 Nancy Johnson sent an
- 20 email to I quess it was to the Board
- 21 transmitting a report that SC&A had put
- together reviewing Revision 1 to OTIB-0052.

1	And	OTIB-0052	is	the	construction	worker	dose
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- 2 OTIB.
- 3 MR. STIVER: It's on the 11th?
- DR. ULSH: I don't see that you
- 5 got it, John.
- 6 MR. STIVER: I got it.
- 7 MR. MARSCHKE: I sent it to John.
- 8 I know John got it.
- 9 MR. STIVER: Okay, I got it.
- 10 MR. KATZ: Who is presenting this
- 11 one?
- MR. MARSCHKE: I am.
- 13 MR. STIVER: Okay, I have got my
- 14 copy pulled up now.
- 15 MR. MARSCHKE: I don't know how
- 16 much detail everybody wants to get into on
- 17 this. I prefer to speak. I wrote the report.
- 18 I did the initial review of OTIB-0052. So I
- 19 am familiar with this. I don't know if NIOSH,
- 20 how much they want us to get into it. I don't
- 21 know if they have looked into our report here
- 22 from Monday.

1	CHAIR MUNN: Has NIOSH had an
2	opportunity to even look at it?
3	MR. HINNEFELD: Well not in any
4	detail. It came in Monday.
5	MR. MARSCHKE: It came in on
6	Monday probably with a whole bunch of other
7	emails that were at the various
8	CHAIR MUNN: Have you read enough
9	
10	MR. KATZ: Why don't we have Steve
11	give a summary of it?
12	MR. HINNEFELD: There is a summary
13	table of what they found.
14	MR. KATZ: And then if that raises
15	any questions that need clarification and that
16	will be helpful for DCAS to respond.
17	MR. STIVER: Sort of just the
18	important issues.
19	CHAIR MUNN: Please if you would,
20	Steve, just give us a
21	MR. MARSCHKE: What I show on the
22	

1	MEMBER ZIEMER: What's the name of
2	the document?
3	MR. HINNEFELD: It's construction.
4	CHAIR MUNN: It's one of those
5	data pages that shows the whole activity up to
6	this point.
7	MR. HINNEFELD: OTIB-0052 Rev. 1,
8	Parameters to Consider When Processing Claims
9	for Construction Trade Workers.
LO	MEMBER ZIEMER: Nancy distributed
11	it on Monday?
L2	MR. HINNEFELD: Yes, on Monday.
L3	It is a
L4	MEMBER ZIEMER: We got two or
L5	Monday. One is for Linde and one is for
L6	Hanford.
L7	MR. STIVER: I have it here. I
L8	can send it to you.
L9	DR. ULSH: Yes, you're on the
20	list. It is from Nancy Johnson.
21	MEMBER ZIEMER: Yes.

CHAIR MUNN: It's way back.

1 MEMBER ZIEMER: She may h	have just
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- 2 sent it to my -- although, she usually sends
- 3 it to --
- 4 MR. MARSCHKE: Paul Ziemer, it's
- on your CDC. It should be on your CDC email.
- 6 MEMBER ZIEMER: That's where I'm
- 7 looking right now. Let's see if I moved it
- 8 into this.
- 9 MR. MARSCHKE: The name of the
- 10 document or subject is Transmittal of Draft
- 11 Document SCATR2011-0004.
- 12 CHAIR MUNN: Entry items.
- 13 MR. STIVER: Okay, Paul, I'm
- 14 sending it to your address.
- 15 MEMBER ZIEMER: Yes. Actually, I
- 16 think I moved it into the Procedures Review
- 17 file already is probably what I did.
- 18 MR. STIVER: You'll have an extra
- 19 copy here in about a minute.
- 20 MEMBER ZIEMER: No, I'm not sure
- 21 it is in there. Oh, here it is. I got it.
- 22 Here it is. I got it anyway. Thanks.

1	Sorry for the delay. I've got it.
2	CHAIR MUNN: No. There's no
3	problem.
4	MR. MARSCHKE: Okay?
5	CHAIR MUNN: Go ahead, Steve.
6	MR. MARSCHKE: Well in the
7	Executive Summary, it is page five of the PDF
8	file, page five of the report as well. There
9	is a table, an unnumbered table that shows the
LO	findings associated with OTIB-0052, there were
11	16 of them, and what their status was prior to
L2	Revision 1 and what their status is after
L3	Revision 1.
L4	I guess I should also mention that
L5	Revision 1 was issued by NIOSH on February
L6	17th of this year. SC&A became aware of it
L7	and we took it upon ourselves to examine it,
L8	review it to see whether or not it addressed
L9	some of the outstanding issues that were
20	remaining with OTIB-0052.
21	So you can go down here and you
22	can see a number of the issues that were in

1	progress. We are recommending that they be
2	closed as a result of Revision 1. A few of
3	them, a couple of them were transferred to
4	OTIB-0020. This has mostly to do with the
5	fact that there could be some construction
6	workers working in some facilities at some
7	times that we see doses higher than your
8	average individual.
9	And we want OTIB-0020 already
10	has a caution, a general caution for workers
11	that the standard procedures may not be
12	applicable under certain conditions. We
13	wanted to change that standard recommendation
14	and we had discussed this previously the last
15	time we talked about the OTIB-0052. And if
16	you look in here, there was a recommended
17	wording changes to OTIB-0020 that would
18	address that.
19	Since OTIB-0020 The changes
20	have not been made to OTIB-0020. So those
21	three OTIB-0052 issues that were transferred
22	to OTIB-0020 remain open and still active, I

1	quess.
	guess.

- There were a couple of issues 12,
- 3 13, and 14 really are probably the three that
- 4 we want to focus on because those are the ones
- 5 that we are recommending be in progress at
- 6 this point. So if we can skip back to the
- 7 discussion of those, basically it begins on
- 8 page 16.
- 9 CHAIR MUNN: 52-13?
- 10 MR. MARSCHKE: 52-12. Fifteen.
- 11 I'm sorry. Page 15.
- 12 It had to do with the initial
- finding from SC&A was that the REX database at
- 14 Hanford was not used. Needs to evaluate
- 15 results based upon the REX database.
- 16 The initial response that we
- 17 received from NIOSH and this was a long time
- 18 ago, maybe in 2008, was as you see there, it
- 19 says basically the data used in the Hanford
- 20 analysis was extracted by the site expert from
- 21 the REX database and provided in the OTIB --
- 22 and provided to the OTIB-0052 team as

1	spreadsheet	files.	The	identity	of	the	source

- 2 data was not communicated in the text of OTIB-
- 3 0052. Any subsequent revision will correct
- 4 this oversight.
- 5 Unfortunately, the change to the
- 6 OTIB did not include the fact that REX was
- 7 used. They went back to -- if you look on the
- 8 appendix on page 22, that shows the revision
- 9 that was made to Section 6.1 in response to
- 10 Finding 52-12. You can see basically that
- 11 they state somewhere towards the end of that
- 12 finding, the very last line, it says that the
- 13 use of data from the REX database was
- 14 considered and rejected. The site expert
- 15 cautioned that prior to 1965 the database
- 16 contains no information that would
- 17 differentiate construction trade workers from
- 18 General Electric employees. So that kind of
- 19 contradicts what the initial response said.
- 20 And so we really would like to see -- we
- 21 prefer the initial response where they used
- 22 REX and particularly after 1965. I mean, this

1	could be a reason for not using REX prior to
2	1965 but why didn't they use REX after 1965?
3	So basically previously we had
4	said when we were under the impression that
5	NIOSH was going to indicate that they did use
6	REX or they had consulted REX and the document
7	was in error, then we agreed with them and we
8	had classified the issue as being in abeyance.
9	Now when they are basically
LO	backing off from that statement about the use
11	of REX, we are going to basically recommend
L2	that the status be changed from in abeyance
L3	back to in progress.
L4	So that is it.
L5	CHAIR MUNN: In light of the fact
L6	that NIOSH hasn't had an opportunity to see
L7	your comments and respond to them, it would
L8	seem reasonable to return it to in progress
L9	until that item and any others that you have
20	can be addressed. We need to have a NIOSE
21	response to your concerns.
22	MR. MARSCHKE: Do vou want to make

1	changes	to	the	database	status	now	as	we	are
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- 2 going along, Wanda?
- 3 CHAIR MUNN: I think that would be
- 4 wise. Yes, we should. I'm not sure how much
- 5 detail about your concerns needs to be
- 6 included but --
- 7 MEMBER ZIEMER: This is still,
- 8 this is Rev. 1 that we are making the change
- 9 on. Right?
- 10 CHAIR MUNN: Yes, that is correct.
- 11 MEMBER ZIEMER: So you are going
- 12 to indicate that your change of status is
- based on what you have seen in Rev. 2, though.
- 14 MR. STIVER: It says Rev. 0 here.
- MR. MARSCHKE: Well the original
- 16 findings were made on Rev. 0.
- 17 MEMBER ZIEMER: And that is what
- 18 -- This is a Rev. 0 finding.
- 19 MR. MARSCHKE: This is a Rev. 0
- 20 finding and we were saying that based on the
- 21 review of Revision 1.
- 22 MEMBER ZIEMER: Okay. Yes, that's

1	good.	That	is	what	I	wanted	to	clarify.
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- Okay, it is Rev. 1.
- 3 CHAIR MUNN: If the only errors we
- 4 get are spelling errors, we are happy campers.
- 5 MR. MARSCHKE: Okay. Maybe if we
- 6 change course here a little bit. We are
- 7 changing statuses. Then maybe we want to go
- 8 and look at some of these ones that we are
- 9 recommending be closed.
- 10 CHAIR MUNN: Well, I would hope
- 11 that that would be something that we could
- 12 agree could be done away from the table.
- 13 Those that you have suggested be closed based
- on this Rev. 1, if NIOSH agrees that they
- should be closed, then we can certainly close
- 16 out those six.
- 17 MR. MARSCHKE: We usually need the
- 18 Subcommittee's direction before we can close
- 19 them out.
- 20 CHAIR MUNN: That is why I am
- 21 saying now if NIOSH, even given their lack of
- 22 time to review this, if they agree with your

1	agreement of closed status, I can see no
2	reason why those shouldn't be closed now.
3	Yes, Paul?
4	MEMBER ZIEMER: Do we know that in
5	all cases the closure is based on these are
6	items that the Subcommittee has previously
7	asked to be done and they have been done or
8	have been agreed to by NIOSH?
9	CHAIR MUNN: We can run through
10	them quickly. They should be right here on
11	our database.
12	MR. MARSCHKE: Item 5, issue 5
13	MR. STIVER: Five was the issue of
14	plutonium and uranium.
15	CHAIR MUNN: That is still in
16	progress.
17	MR. STIVER: We were concerned
18	about possibly other nuclides that could have
19	been involved.
20	MR. MARSCHKE: Yes. Issue 5 was
21	plutonium. The issue was plutonium and/or
22	uranium are used to compare internal

1	construction workers and all monitored worker
2	doses. What about other radionuclides?
3	And what NIOSH has done and we
4	have talked about this in the past. If you
5	have been looking at documents, there have
6	been numerous Subcommittee meetings on OTIB-
7	0052, including teleconferences. And again,
8	the change that NIOSH made was to add a
9	paragraph to the document, limitations and
10	exceptions.
11	And in that they said in response
12	to five, specifically they say, "Analysis and
13	recommendations in this document are based
14	upon data that were readily available, and
15	abundant enough to enable statistically
16	significant comparisons. Consequently, there
17	may be unusual cases in which the
18	recommendations of this document do not apply.
19	Intakes of less common radionuclides, those
20	other than uranium or plutonium, are not
21	assessed. Refer to the site Technical Basis
22	Document for information regarding less common

1	radionuclides."
2	So with that paragraph inserted
3	into OTIB-0052, we believe that it addressed
4	our concern and we are ready to sign off on
5	it.
6	CHAIR MUNN: Is there any
7	objection to doing so?
8	(Pause.)
9	CHAIR MUNN: Taken without
10	exception that we may now close this item.
11	MR. KATZ: They haven't included a
12	spell checking function on this yet?
13	MR. MARSCHKE: Maybe they have. I
14	haven't figured it out yet.
15	CHAIR MUNN: Very good.
16	MR. MARSCHKE: The next one we are
17	recommending is 9.
18	CHAIR MUNN: Did the status get
19	changed to closed?
20	MR. MARSCHKE: It was five?
21	CHAIR MUNN: Five, correct.
22	MR. MARSCHKE: Closed.

1	CHAIR MUNN: Closed. Very good.
2	MR. KATZ: This also processes
3	much more quickly than
4	MR. MARSCHKE: Yes.
5	MR. STIVER: This thing should be
6	a little bit more streamlined.
7	MR. MARSCHKE: There's one thing I
8	should, I guess, while we are talking about
9	issue 5 and NIOSH will see this when they read
10	it, because the Revision 1 is now basically
11	limiting the internal exposures to uranium and
12	plutonium only, we are hoping to see a PER
13	that would go back and look to see if there
14	have been cases where OTIB-0052 had been used
15	to calculate internal doses for radionuclides
16	other than uranium and plutonium.
17	And one of the things that I know
18	comes into my mind, based upon some of the
19	experience I have had, is that the Evaluation
20	Report to Savannah River SEC referred to OTIB-
21	0052 methodology and their critical nuclide
22	was, of course, tritium. So there may be some

1	kind of And I don't know if that would
2	actually fit under a PER or some kind of a PER
3	type of thing has to go back and look to see
4	where OTIB-0052 or if OTIB-0052 internal dose
5	methodology has been used for other
6	radionuclides in other documents in other dose
7	reconstructions.
8	DR. ULSH: I kind of hate to say
9	this, but shouldn't item 5 be closed?
10	MR. MARSCHKE: Item 5, as far as
11	the comments itself, I think is closed. I
12	mean, I think now basically what you have done
13	in SC&A's mind and in my mind is you have
14	limited OTIB-0052 to only, the internal
15	portion of it, to only uranium and plutonium.
16	DR. ULSH: Well right. But how
17	are we going to track this?
18	MR. MARSCHKE: Just the same way
19	you make any I mean, PERs is the way you
20	It is my understanding that when
21	you change a procedure, you use the PER
22	process to

1	DR. ULSH: I am accepting on the
2	face of it your argument that a PER, we at
3	least need to look and see if a PER is
4	necessary. How is that actually going to be
5	tracked then, if we close item number 5? We
6	don't need to?
7	MR. KATZ: I mean, that is part of
8	your internal procedures to deal with PERs
9	when you need them.
10	MR. HINNEFELD: The revision to
11	OTIB-0052 in and of itself should prompt a
12	look back to see if we look at any cases
13	because of it, regardless of whether it was
14	ever viewed in this group.
15	DR. ULSH: Okay.
16	MR. KATZ: One thought. Just a
17	thought about this database. Another
18	functionality issue that just popped in my
19	head as we are going through this. It might
20	be nice if you could also generate from the
21	database action items like this. I think that
22	would be really handy if you could prevent

Τ	DCAS action Items of SC&A action Items. II
2	you could just have this thing generate those
3	lists, send a search for them or whatever, it
4	will be very handy. Don't you think?
5	DR. ULSH: Yes, I do. But I am
6	trying to think of the most efficient way to
7	do that. I am wondering if yes. I guess I
8	mean if we got the function where we could
9	sort out all of the in progress items, that
10	gets you halfway there. But then you would
11	have to go into thread to look for the action.
12	MR. KATZ: Then you have to go in
13	and go through all those.
14	It would be nice to have a roster
15	for the current DCAS action items here, the
16	current SC&A action items.
17	DR. ULSH: I agree with you that
18	would be nice. I can't commit to it without
19	talking to Yemi.
20	MR. KATZ: No, I'm not saying. I
21	just think it is something worth looking into
22	because it would help all of us from meeting

- 2 CHAIR MUNN: It will be simpler to
- do once the function is in that will allow us
- 4 to sort by status. Then we can status
- 5 specific items and at least it will reduce the
- 6 bulk of material you have to look at.
- 7 MR. STIVER: You can filter it
- 8 down just to those few issues that are still
- 9 open. And then we could have a flag of some
- 10 sort that would indicate action items being
- 11 pursued.
- 12 CHAIR MUNN: Right.
- MR. KATZ: Well anyway, it is just
- 14 a thought.
- 15 MEMBER ZIEMER: It is really built
- into this sort of a matrix that is there. It
- 17 is what we used to do. You had your chart, --
- 18 CHAIR MUNN: Yes.
- 19 MEMBER ZIEMER: -- the number of
- 20 issues, number of each one that is closed.
- 21 And that is in the system.
- 22 CHAIR MUNN: Once we have the

1	atatua	filter.
1	Status	TITLEI.

- 2 MEMBER ZIEMER: How about what
- 3 each of those colored dots. Red dot, orange
- 4 dot -- color coded.
- 5 MR. MARSCHKE: We had something or
- 6 we tried to use something similar to that way
- 7 back when we had the Access database. It
- 8 never really became functional. I think it
- 9 was just too --
- 10 MEMBER ZIEMER: We had to do it
- 11 mechanically.
- MR. MARSCHKE: Yes. Wanda has
- been doing an excellent job of keeping track
- of, of keeping everybody honest here with her
- 15 carry-over items list and so on and so forth.
- 16 CHAIR MUNN: We have had things
- 17 drop.
- 18 MR. KATZ: Yes. Balls fall in the
- 19 cracks though quite a bit over the past few
- 20 years on all sides. And this would just be a
- 21 nice way to --
- 22 CHAIR MUNN: Yes.

1	MR. STIVER: We would have to have
2	a way to close the matters, once they were
3	accomplished as well. So you would have a
4	separate tracking process.
5	MR. KATZ: Well the action items.
6	I mean, when you update each time, they go
7	away. You wouldn't have that.
8	CHAIR MUNN: Right. All right.
9	Anything else on, where are we, on OTIB-0052
LO	now?
L1	MR. MARSCHKE: OTIB-0052, we had
L2	three more actually that were closed, we were
L3	recommending that be closed. If you look at
L4	the screen here, these are the changes that
L5	NIOSH made in response to a comments 9, 10,
L6	and 11. The first paragraph takes care of
L7	both 9 and 10. And the second paragraph up
L8	there takes care of issue 11.
L9	And based upon these revisions to
20	OTIB-0052, SC&A recommends that the findings
21	be closed. All these findings, these three
22	findings had to do with there was a NIOSH

1	report. That wasn't an OCAS or a DCAS NIOSH
2	report. It was a NIOSH report that was
3	prepared for INL but it did not and we got
4	our hands on it and we looked at it. And it
5	had doses to what we felt were construction
6	workers and others.
7	It was pointed out to us we should
8	not have used that report. We should not have
9	looked at that report because they were doing
10	things which are definitely just on a view
11	with the Act here because it has, for example,
12	naval reactor facilities.
13	So when this was pointed out to
14	us, we agreed with NIOSH's response and we are
15	ready to see those three findings be closed.
16	It is indicated in the a new paragraph has
17	been added that explains that while they used
18	a MUD database was not used and they explained
19	why the MUD database was not used. And we
20	agree with that explanation.
21	Finding 10 again, it was an INL
22	epidemiological study. And it explains that

2	service workers are grouped with construction
3	trade workers, a practice that is inconsistent
4	with the approach taken at OTIB-0052. And we
5	agree with that explanation and close the
6	recommend that issue 10 be closed.
7	Claimant favorability issue. Was
8	claimant favorability of OTIB-0052 approach
9	for an INL early period internal dose cannot
10	be determined. As indicated in the proposed
11	changes, the second paragraph was modified.
12	Much of the basis for finding 52 was data
13	obtained in the NISOH 2005 epidemiological
14	study. And as indicated in response, that
15	study contained service worker data, as well
16	as construction trade worker data, and it was
17	therefore inconsistent with the approach taken
18	in OTIB-0052.
19	So we agreed with NIOSH that the
20	2005 epidemiological study should not be the
21	basis for the calculations.
22	CHAIR MUNN: Is there any

the NIOSH 2005 data was not used because of

1	objection to closing Findings 9, 10 and 11?
2	(Pause.)
3	CHAIR MUNN: If not, let us please
4	make that entry on the database in almost the
5	same wording as the last one, wasn't it?
6	Almost. Yes, very good. Excellent.
7	This is most satisfying.
8	MR. MARSCHKE: It's the little
9	things.
10	CHAIR MUNN: Yes, it is.
11	MR. MARSCHKE: Okay, so those are
12	
13	CHAIR MUNN: We now have 9, 10,
14	and 11 closed.
15	MR. MARSCHKE: Nine has been
16	changed. And 9, 10, and 11.
17	CHAIR MUNN: Changed and closed.
18	Excellent.
19	And due to the fact that the few
20	things that we have remaining on our agenda
21	are essentially administrative, I think that
22	wraps up most of our technical issues that we

1 have to address right now.
I suggest we take a very short te
3 minute comfort break and then we will wrap u
4 our administrative activities and let you al
5 get out of here. Okay? We will be back a
five minutes to 3:00 Eastern Time.
7 (Whereupon, the above-entitled matter went of
8 the record at 2:45 p.m. and wen
back on the record at 2:56 p.m.)
MR. KATZ: Go ahead. We're on.
11 CHAIR MUNN: Very good. We ar
back. Anybody on the phone?
DR. MAURO: Yes, this is John
14 I've been here for about 45 minutes.
15 CHAIR MUNN: Good. That's great.
DR. MAURO: In fact, I will le
17 you finish up with the introductions but I d
have something I would like to bring up.
19 CHAIR MUNN: Yes, please do. Thi
20 is a good time to do it.
DR. MAURO: When I came on th

phone oh, a half hour, 45 minutes ago, there

1	was a conversation going on regarding OTIB-
2	0052 and Steve was talking about PERs.
3	CHAIR MUNN: Yes.
4	DR. MAURO: With the idea being
5	that the outcome, perhaps, of many of this
6	procedure review process could end up
7	triggering a PER.
8	CHAIR MUNN: Yes.
9	DR. MAURO: And I had a thought to
10	leave with you all. You know, with these two-
11	pagers that I also understand are all
12	undergoing review by the Subcommittee and
13	eventually, I guess, the Board -
14	CHAIR MUNN: Yes.
15	DR. MAURO: one of the things
16	that we don't do at the end of these two-
17	pagers is that after we have identified how
18	the issues are resolved in general terms, we
19	never really say anything about whether or not
20	there might be some action taken related to
21	revising any dose reconstructions.
22	Is this something that might be

1	worth talking about for inclusion in these
2	two-pagers?
3	CHAIR MUNN: My knee jerk reaction
4	to that would be no.
5	DR. MAURO: Okay.
6	CHAIR MUNN: And the reason for
7	that is that I would be very hesitant to
8	encourage any expectation of a casual reader
9	that something might occur, the operative word
10	being might.
11	It is very easy, my observation is
12	that in this program, particularly, it is very
13	easy to raise expectation in the potential
14	claimant group that are not realistic in their
15	concepts and may never come to fruition. I
16	would hate to do anything that might encourage
17	that.
18	DR. MAURO: I understand.
19	CHAIR MUNN: Paul has something to
20	say.
21	MEMBER ZIEMER: Well a separate
22	comment. All we are doing with these two-

1	pagers is reporting in a condensed way for
2	public what is in the main document. The main
3	document, unless it is arguing about doing
4	that or discussing that, it is not part of
5	that document anyway. And it would seem to me
6	that we shouldn't be discussing doing Program
7	Evaluation Reports outside the context of the
8	document itself and putting it in the summary.
9	If I understand what you are
10	suggesting, I mean
11	DR. MAURO: No, it was a thought
12	MEMBER ZIEMER: what you
13	suggest may very well occur but it seems to me
14	it is a separate conversation in a sense.
15	MR. KATZ: John, what we had
16	discussed when we were talking about this
17	earlier was, I mean, that is an automatic
18	internal process of DCAS when they change a
19	procedure to look at the need for a PER. That
20	operates on its own independently as a result
21	of changes to dose reconstruction procedures.
22	MEMBER ZIEMER: But what I am

1	saying is we don't include that conversation
2	as part of your document that we are reviewing
3	or resolving. So I don't think I would want
4	to include it.
5	DR. MAURO: I understand and I
6	agree. And when you were thinking about it
7	within that context, I think that it would be
8	premature to even attempt to do that as part
9	of this process that we are in. I understand
10	what you are saying.
11	CHAIR MUNN: Any other comments in
12	that regard? If not, then we will go to the
13	first item that I placed on here because I
14	think it seems to be something that we haven't
15	come to any real conclusion on as to whether
16	or not it is actually within our purview. And
17	that is the question of tracking overarching
18	issues.
19	I know that Jim has been keeping,
20	Jim Neton has been keeping track of what those
21	few items are. I believe there are seven,
22	possibly eight of them. But we have never

1	undertaken any tracking method to identify
2	whether anything is going on with those items
3	and if so, whether we should or even could be
4	involved in them in any way.
5	If there is any feeling in the
6	group here with regard to whether or not we
7	need to give some thought to that or whether
8	we should, very frankly, just stay out of that
9	particular venue, I would be pleased to have
10	any comments anyone has.
11	Any thoughts? Am I incorrect in
12	being a little concerned about our lack of
13	tracking? So many of our items are closed
14	based on the issues that they are going to be
15	tracked in overarching issues.
16	MR. STIVER: At the last workgroup
17	meeting there was a lot of talk and Steve
18	brought up the idea of putting up some kind of
19	a dummy procedure that would capture all these
20	things. It sounds like Jim has kind of got
21	something like that going now for the DCAS
22	side.

1	But some of these things, you
2	know, I have seen a couple of the examples
3	that would come up just in relation to the SEC
4	petition that I have been working on, we have
5	by virtue of doing the research, you come up
6	with some major changes to an overarching
7	process that applies to other sites as well.
8	CHAIR MUNN: Yes.
9	MR. STIVER: But there is really
10	no mechanism to get that into another setting-
11	related document for that other side, unless
12	that other group happens to know about what is
13	going on in the previous group.
14	So this idea of being able to
15	track those issues and make sure that they are
16	applied where necessary, you know,
17	acknowledges, discover new methods that are
18	proposed, I think would be a good idea.
19	CHAIR MUNN: Well, I want to state
20	publicly that it neither my desire to broaden
21	the scope of what we are already looking at
22	nor is it my desire to question whether Dr.

1	Neton is going to be tracking these
2	appropriately.
3	I think in both cases, none of us
4	need any more work to do; and two, Jim is
5	certainly more than capable of keeping very
6	close tabs on where these things are going.
7	But there are so many tentacles that fall out
8	from these overarching issues that it just
9	seems to be a question that may need a little
10	brainstorming to actually respond to properly.
11	MEMBER ZIEMER: Wanda, it occurs
12	to me that at least we are doing it
13	informally. Maybe it needs to be structurally
14	modified. But for example on resuspension,
15	after that issue had occurred in several
16	different venues, different sites and so on,
17	people said you know, this is sort of a
18	reoccurring overarching thing but we need a
19	document to deal with that.
20	And that has occurred in a lot of
21	cases. Construction workers in an overarching
22	example. And we have a number of them that

1	almost by their title you can tell that they
2	are not site-specific. They apply just
3	broadly how you do internal dose
4	reconstruction, broadly.
5	And so, we have a whole number
6	that we already know are overarching we are
7	tracking. I think other than that, it simply
8	requires that people recognize that we have
9	something reoccurring that is not site-
10	specific.
11	It seems to me it has worked so
12	far. What would be falling through the
13	cracks? There are cases. In fact, we have
14	gone back to see if we have been consistent in
15	how we are doing things. And one of the
16	consistency issues that is for example do we
17	do resuspension the same for, I don't know,
18	General Steel Industries as Savannah River or
19	something like that.
20	So we want to have some
21	consistency. So there is an effort to do that
22	and it is true we are relying on the players

1	to recognize when we are having the sort of
2	reoccurring themes. But beyond that, what
3	would one do to formalize it?
4	CHAIR MUNN: I can't imagine,
5	other than make a list and identify what
6	actions are being taken under the specific
7	items.
8	MEMBER ZIEMER: It just occurred
9	to me that almost every time we have had this,
10	this occurred there, there and there. And we
11	need to be
12	CHAIR MUNN: We need to coordinate
13	it somewhere.
14	MEMBER ZIEMER: It has resulted in
15	a number of these.
16	MR. STIVER: So you don't really
17	see a need for the Board to track these
18	independently.
19	MEMBER ZIEMER: Well each of these
20	issues is being tracked on its own merit
21	already.
22	CHAIR MUNN: Yes, and Jim

1	certainly is taking a close enough look at it.
2	MR. MARSCHKE: I just wanted to
3	point out that we have a number of issues
4	which we have, I think, status as being
5	addressed in some generic issue. And so we
6	have to kind of keep an eye on what Jim is
7	doing in order so that when he comes to a
8	resolution of that generic issue that these
9	are supposedly addressed in, that we can then
LO	go back and hopefully close out those handful
11	or however many those issues there are that we
L2	have already put into that category.
L3	MEMBER ZIEMER: I think almost all
L4	the ones that are in the category either have
L5	been reviewed or are in process. I mean
L6	construction workers is an example in OTIB-
L7	0070 is an example.
L8	MR. MARSCHKE: Those are existing
L9	TIBs and so those are in the document. These
20	overarching issues, I think are more like
21	inhalation rates.
22	DR. ULSH: Ingestion, angular.

22

1	MEMBER ZIEMER: Where we don't
2	currently have one.
3	MR. MARSCHKE: We don't currently
4	have a TIB, or an OTIB, or a document.
5	MEMBER ZIEMER: How do we know
6	something has come out?
7	MR. MARSCHKE: How do we know that
8	something has come out and there is a position
9	on this? And even if something does come out,
10	how do we know that it relates back to these
11	particular issues that we have said, well this
12	is a generic issue addressing such and such
13	generic issue.
14	I can't give an example right off
15	the top of my head where this occurs. But it
16	seems to have been some of the issues
17	associated with maybe the initial batch of
18	procedures that were reviewed I think had a
19	number of ones that we said, we resolved them
20	by saying that they were addressed in the
21	generic issue.
22	And we know that there is a

1	generic	issue	addressing	that	subject.	W∈
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- don't know where it stands. We don't know
- 3 whether it is resolved.
- 4 CHAIR MUNN: But the silver lining
- 5 is that with our new capabilities with this
- 6 new database, we can at least search by term.
- 7 So that --
- 8 MR. MARSCHKE: I can't find it.
- 9 CHAIR MUNN: You can't find them?
- 10 MR. MARSCHKE: I can't find
- 11 addressed in.
- DR. ULSH: Oh, you mean search by
- 13 status.
- 14 MR. MARSCHKE: I was looking to
- 15 search by status here. I can't find addressed
- in. And there is no --
- DR. ULSH: Well right. We don't
- 18 have that capability.
- 19 MR. KATZ: Well you can search by
- 20 overarching issue or whatever if you use that
- 21 terminology. And then you will be --
- 22 CHAIR MUNN: Yes, if we do.

1	MR. MARSCHKE: If we do? If we
2	did.
3	DR. ULSH: Hold on. Hold on. I
4	have been hoping that you guys would talk
5	yourself out of this. But since you don't
6	seem to be,
7	CHAIR MUNN: We're trying.
8	DR. ULSH: Does it seem like each
9	of the overarching issues originates in some
10	document review setting?
11	CHAIR MUNN: Some group of
12	document review settings.
13	DR. ULSH: Maybe it is a TBD,
14	maybe it is a TIB or whatever.
15	MR. STIVER: A White Paper.
16	DR. ULSH: So what happens then
17	is, I mean here is an idea for you to
18	consider. In the database a particular
19	overarching issue originates in a document but
20	then it is transferred. We can make a
21	category transferred to overarching. And that

way when we search on status and we look for

22

	1	transferred	to	overarching,	all	those	issues
--	---	-------------	----	--------------	-----	-------	--------

- 2 will pop up.
- Now of course administratively,
- 4 you are going to have to decide who is in
- 5 charge of the care and feeding of those
- 6 issues. But that would at least put them in a
- 7 place that --
- 8 MR. KATZ: I don't even recall
- 9 what we have actually transferred. Do you?
- 10 Do you have examples where we have actually
- 11 transferred something? I don't think so.
- 12 CHAIR MUNN: I don't know that we
- 13 have transferred them. I think we have closed
- 14 them, though.
- 15 MEMBER ZIEMER: Well we
- transferred in TBD-6000, we have transferred
- the item on resuspension to this document.
- 18 MR. KATZ: Yes. Well there is a
- 19 procedure for it. Right.
- 20 MEMBER ZIEMER: Yes, there is a
- 21 procedure for it.
- 22 MR. KATZ: That's taken care of.

1	MEMBER ZIEMER: Now on the others,
2	have we done any where we have said well, it
3	is an overarching issue so it will be solved
4	somehow separately but no one is looking at
5	it?
6	DR. ULSH: Currently, these things
7	are being tracked by Jim. He has got a list
8	of them. They are on a PowerPoint slide.
9	That is how they are tracked right now.
10	CHAIR MUNN: Yes, that is how we
11	have got them. That is how we see them.
12	MR. STIVER: Could I say something
13	for a second? At first it was another
14	category really. There are two examples that
15	come to mind. One being how the weighted air
16	sampling data that are applied, another being
17	recycled uranium. Now these have not gotten
18	to a level of being in a procedure but they
19	are emerging in White Papers that come out
20	related to specific sites but yet, they have
21	implications for a lot of other sites. There
22	is no way that is going to be captured in this

database.

- 2 There could be some profound
- 3 implications for consistency and quality
- 4 across different sites.
- 5 MEMBER ZIEMER: Right now they are
- 6 a site-specific finding.
- 7 MR. STIVER: Yes.
- 8 MEMBER ZIEMER: So they are in the
- 9 system.
- 10 MR. KATZ: But it seems like
- 11 historically how this happens is when you do
- have these issues and you have a major change
- or whatever, a resolution of one of those
- issues associated with a site, that then gets
- integrated by DCAS into other procedures,
- other sites where it is applicable.
- DR. ULSH: Well, one would hope
- 18 that that is the way it goes.
- 19 MR. STIVER: Well eventually, it
- 20 might just kind of happen, unless the two
- issues are being investigated simultaneously.
- 22 DR. ULSH: Say an issue pops up at

1	Blockson and the Blockson group decides, you
2	know this is really an overarching issue. We
3	are not going to address it necessarily here
4	in Blockson. Let's put it on the overarching
5	issues list. And then later on we do a review
6	at, I don't know, Savannah River, some other
7	site, and that same issues pops up. At that
8	point, it should be attached not only to
9	Blockson but also to Savannah River, so that
10	when that overarching issue is addressed on
11	that happy day, then that filters back down,
12	it cascades down to all the affected sites.
13	CHAIR MUNN: Well it doesn't sound
14	as though we are any closer to an answer to
15	the question than when we first started
16	talking about it. But I certainly don't think
17	we are in a position to make a decision one
18	way or another. It seems to me it is just an
19	item that all of us need to sort of keep in
20	the back of our heads as the potential that
21	this Procedures Subcommittee may need to
22	address.

1	It is a mistake for us to have
2	even begun to address it, I think, in Jim's
3	absence. He really and truly should be here.
4	MEMBER ZIEMER: Looking at what is
5	on the screen at the moment, is that a term
6	that we are currently using, global issues?
7	MR. MARSCHKE: No, I don't know if
8	we are currently using it. This is a term
9	that we had.
LO	This is a printout of the old
L1	Access database. So I can do a search for, in
L2	this case, global issues. And I believe that
L3	in 2006 may be what we were calling
L4	overarching issues at that point in time.
L5	MEMBER ZIEMER: Whatever the term
L6	is, it seems to me that you could at least bin
L7	them the way that Brant has described. What
L8	you did with them later is a separate issue.
L9	But there could be a sort category.
20	DR. ULSH: Well there could be. I
21	mean, that would put them all in one place.
22	Right now, this database or web-based

1	application,
2	CHAIR MUNN: It is a database.
3	DR. ULSH: is only used by the
4	Subcommittee. We all know that eventually we
5	want to roll it out broader but right now it
6	is here.
7	So if we decide that the place
8	these things are going to be tracked is in
9	this database, kind of by default you guys are
10	in charge of it.
11	CHAIR MUNN: Well, I am not prone
12	to just any action now. If someone else is,
13	please do let me know. I certainly appreciate
14	your thoughts, Brant, about establishing a
15	category. That would certainly resolve a lot
16	of my concerns about it.
17	I shouldn't think it would
18	complicate anything for Jim. I would think it

MR. MARSCHKE: I think what we can

DR. ULSH:

might be even easier for him.

learn to use the database.

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19

20

21

He would just have to

	1	do,	actually	we	may	be	able	to	do	that	no
--	---	-----	----------	----	-----	----	------	----	----	------	----

- Now that I know what they are called, we may
- 3 be able to come up here and look for global
- 4 issues.
- 5 This is global. This is not going
- 6 to be much help. This is global. And no. Or
- 7 did I spell it wrong?
- 8 DR. ULSH: No, no. You didn't
- 9 spell it wrong but you might want to click on
- 10 -
- 11 MR. MARSCHKE: Oh, maybe. There
- 12 it is.
- DR. ULSH: Yes, there you go.
- 14 MR. MARSCHKE: There is a couple
- of them there. I don't know. It seems like
- 16 there should be more. But there is an issue
- 17 OTIB-04-012 and OTIB-04-013.
- DR. ULSH: They both look like
- 19 they are what we are looking for, overarching
- 20 type issues. Right?
- 21 MR. MARSCHKE: So there is a way.
- 22 You can use this search capability if you

1	make sure that you have embedded somewhere in
2	the discussion either overarching or global or
3	some key word that we all agree to.
4	DR. ULSH: Well, if you want to
5	chew on those ideas and pick it up.
6	CHAIR MUNN: We may pick it up at
7	a later date. I will certainly make a note of
8	it and we will not let it drop completely off
9	the table.
10	The next one is very short, the
11	status of the 14 two-pagers which at our last
12	meeting we took a look at. We went through
13	all of them. There were a half dozen or so
14	where they needed to be expanded and the
15	wording needed to be cleaned up. And I
16	volunteered to do that and to get it back to
17	you so you could all see it again and approve
18	or disprove my comments.
19	And you will be happy to know that
20	you do not have those in front of you and they
21	will not be forthcoming for another week. So
22	we need not worry about that. But it will be

1	coming	tο	VOII
_	COMITING	LU	you.

- 2 And I had hoped to have in front
- of you the remaining 15 new two-pagers that
- 4 SC&A has done but has not yet released to us.
- 5 And I was told in a very gentle way that it
- 6 would be nice if we addressed the ones that we
- 7 had before they send us the new batch. So
- 8 there is some merit to that position.
- 9 MEMBER ZIEMER: I think I just got
- 10 15 a day or two ago.
- 11 CHAIR MUNN: Oh, no. I think what
- 12 you got a day or two ago was duplicates of the
- 13 original information that was sent out from
- 14 SC&A, the ones that we were already working
- 15 on.
- 16 They had sent them out originally
- 17 as a PDF file. And I had pointed out -- it
- 18 was my problem. My system does not deal with
- 19 PDF files that I want to change. And I do not
- 20 have the -- you have got to pay for this
- 21 capability. And that is what I had asked for.
- 22 So that is the same material in Word that you

	alleady have in PDF life.
2	MEMBER ZIEMER: But there were 15
3	not
4	CHAIR MUNN: In total that we have
5	already got and there are 15 more coming. But
6	the ones that have already been documented, we
7	are complete on six, I believe, plus the
8	introduction. And then there are another 12
9	that Nancy just sent out again.
10	MEMBER ZIEMER: So these ones here
11	that she just sent out again are
12	CHAIR MUNN: Replicates of the PDF
13	file.
14	MEMBER ZIEMER: replicates of
15	the 14 that you were talking about originally.
16	CHAIR MUNN: Yes, that you already
17	have and that we have already looked at.
18	MEMBER ZIEMER: And you were going
19	to send out final forms of those?
20	CHAIR MUNN: I will send out clean
21	final forms without all of the tracking
22	information but including some of my

1	additional	verbiage	on	the	last	few	that	we

- 2 had agreed I would clean up and send to you.
- 3 So those will be coming.
- 4 MEMBER ZIEMER: I suppose every
- 5 time I look at them, I have different things
- 6 because I had the markups on these.
- 7 CHAIR MUNN: Well yes, that is
- 8 because some of them were probably the same
- 9 markups that we took care of last time we met
- and because we had them in a PDF file.
- 11 MEMBER ZIEMER: Oh, and the
- 12 changes hadn't been made.
- 13 CHAIR MUNN: Had not been made, so
- 14 far as I know.
- 15 MEMBER ZIEMER: Oh, I got you. I
- 16 got you.
- 17 CHAIR MUNN: As I understand it,
- 18 they have not.
- 19 MEMBER ZIEMER: Okay. All right.
- 20 I don't have to go back and make the same
- 21 markups as I did before. All those two-pagers
- 22 start to look alike.

1	CHAIR MUNN: Yes, I know. They do
2	after a while, don't they? I will try to get
3	them in such an order that it will be clear to
4	you what we have done about that.
5	We need to look at our calendars
6	to see when we are going to meet again.
7	MR. KATZ: We are missing two
8	Members for that, really three.
9	CHAIR MUNN: We are. But we know
LO	some of the things we can't do. I was hoping
l1	that we could be looking sometime in September
L2	for our next meeting. Is that going to be
L3	Does that sound like it is a reasonable thing
L4	for us to be looking towards I don't want
15	us to be in the position of meeting without
L6	having made progress on our action items, that
L7	we have quite a few that don't appear to have
L8	a great deal of time attached to them.
L9	So is September a reasonable time
20	to be looking at things for those of us who
21	are here?
22	DR III.SH: Even though a lot of

1	the	action	items	like	you	said	are	sort	of

- 2 administrative and won't take a lot of time, I
- 3 think, --
- 4 CHAIR MUNN: Yes.
- 5 DR. ULSH: -- a short turnaround
- 6 between this meeting and the next is
- 7 appropriate because we can just clean those
- 8 off.
- 9 CHAIR MUNN: I would certainly like
- 10 to do that, if we possibly could. How does --
- 11 Let's stay away from the starting of school
- 12 and all that sort of thing.
- 13 DR. ULSH: When is the Board
- meeting? Is it August 29th?
- MR. KATZ: The 23rd.
- 16 CHAIR MUNN: The Board meeting is
- the 23rd through the 25th of August. So would
- a month after that be appropriate? September
- 19 the 20th? That's a Tuesday.
- 20 Let's tentatively -- what about
- 21 you, Paul? Are you okay? Let's tentatively
- choose September the 20th as our next meeting.

1	MEMBER ZIEMER: What dates are the
2	possible ones for GSI?
3	MR. KATZ: GSI, the 20th was the
4	last date actually of the dates that we gave
5	that. So we shouldn't include the 20th. That
6	would take the day away from GSI.
7	CHAIR MUNN: What about 21?
8	MR. KATZ: Yes, so 21 is okay.
9	CHAIR MUNN: Would that work well,
10	Wednesday the 21?
11	MR. KATZ: It's fine for me.
12	CHAIR MUNN: Unless we have too
13	many people who just absolutely can't make
14	that, let's try to get it on the calendar.
15	MR. KATZ: Right. We will have to
16	ask our other Board Members.
17	CHAIR MUNN: Yes.
18	MR. KATZ: I will send them an
19	email.
20	CHAIR MUNN: Oh, thank you. If
21	you will ask all three of them if they are
22	available, it would be helpful.

1		Any	other	th	ought	s,	comme	nts,
2	actions,	una	ddressed	l p	roble	ems,	die	tary
3	restrictio	ns?	If not	, we	are	adjo	urned	for
4	the day.	Tha	ınk you	all	for	you	time	and
5	efforts.							
6		(Whe	ereupon,	at	3:2	4 p	.m.,	the
7		abov	ve-entit	led	m	atteı	2	was
8		adjo	ourned.)					
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