

UNITED STATES DEPARTMENT OF LABOR

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ADVISORY BOARD ON TOXIC SUBSTANCES
AND WORKER HEALTH

+ + + + +

SUBCOMMITTEE ON THE SITE EXPOSURE MATRICES
(AREA #1)

+ + + + +

MEETING

+ + + + +

TUESDAY,
JANUARY 16, 2018

+ + + + +

The Subcommittee met telephonically
at 1:00 p.m. Eastern Time, Laura S. Welch,
Chair, presiding.

MEMBERS

SCIENTIFIC COMMUNITY:

JOHN M. DEMENT
MARK GRIFFON

MEDICAL COMMUNITY:

LAURA S. WELCH, Chair

CLAIMANT COMMUNITY:

KIRK D. DOMINA
DURONDA M. POPE
GARRY M. WHITLEY

OTHER ADVISORY BOARD MEMBERS PRESENT:

FAYE VLIEGER

DESIGNATED FEDERAL OFFICIAL:

CARRIE RHOADS

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1 P-R-O-C-E-E-D-I-N-G-S

2 1:10 p.m.

3 MS. RHOADS: Hello, everybody. My
4 name is Carrie Rhoads. I'd like to welcome you
5 to today's teleconference meeting of the
6 Department of Labor's Advisory Board on Toxic
7 Substances and Worker Health, the Subcommittee
8 on the Site Exposure Matrices or SEM.

9 I am the Board's Designated Federal
10 Officer or DFO for today's meeting.

11 First, we'd like to let the Board
12 Members know that we appreciate their work in
13 preparing for this meeting and for all the work
14 they've been doing the whole time.

15 I'll introduce the Board Members and
16 we'll take a quick roll.

17 Dr. Laura Welch is the chair of this
18 group. Are you on the line?

19 CHAIR WELCH: Yes.

20 MS. RHOADS: And the other members
21 are Dr. John Dement --

22 MEMBER DEMENT: Here.

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1 MS. RHOADS: Mr. Garry Whitley.

2 MEMBER WHITLEY: Yes, here.

3 MS. RHOADS: Mr. Kirk Domina.

4 MEMBER DOMINA: Yes, I'm here.

5 MS. RHOADS: Mr. Mark Griffon. I'm
6 not sure if he's joined but we'll give him a
7 second.

8 MEMBER GRIFFON: Yes, I'm here. I
9 am here.

10 MS. RHOADS: Great, thank you.

11 And then we also have Ms. Duronda
12 Pope.

13 MEMBER POPE: Here.

14 MS. RHOADS: And Ms. Vlieger is also
15 on the line as well.

16 MEMBER VLIEGER: Yes.

17 MS. RHOADS: Okay, we're scheduled
18 to meet from 1:00 to 3:00 p.m. Eastern Time
19 today.

20 In the room with me is Kevin Bird
21 from SIDEM, our contractor.

22 In terms of timing, I wasn't

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1 planning on taking a break today but that can
2 be up to Dr. Welch, if she would like to take
3 one.

4 Copies of all meeting materials and
5 any written public comments are or will be
6 available on the Board's website under the
7 heading meetings and the listing there for this
8 subcommittee meeting.

9 The documents will also be up on the
10 WebEx screen so everyone can follow along with
11 the discussion.

12 The Board's website can be found at
13 [dol.gov/owcp/energy/regs/compliance/advisoryboa](http://dol.gov/owcp/energy/regs/compliance/advisoryboard.htm)
14 [rd.htm](http://dol.gov/owcp/energy/regs/compliance/advisoryboard.htm).

15 If you haven't visited the Board's
16 website, I encourage you to do so. After
17 clicking on today's meeting date you will see a
18 page dedicated entirely to today's meeting.
19 The page contains publically available
20 materials submitted to us in advance of the
21 meeting. We will publish any materials that
22 are provided to the subcommittee even after the

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1 meeting as well.

2 If you are participating remotely
3 and you are having a problem, please email us
4 at EnergyAdvisoryBoard@dol.gov. The sign-in
5 instructions are up on the web page.

6 If you are joining by WebEx, please
7 note that the session is for viewing only and
8 will not be interactive. The phones will also
9 be muted for non-Advisory Board Members.

10 Please also note that we do not have
11 a scheduled public comment session today. The
12 call-in information is posted so that the
13 public can listen in but not participate in
14 this subcommittee discussion.

15 The Advisory Board voted at its
16 April 2016 meeting that subcommittee meetings
17 should be open to the public and so we'll do a
18 transcript and minutes from today's meeting.

19 During the Board discussions, as we
20 are on a teleconference line, please make sure
21 to speak clearly enough for the transcriber to
22 understand. When you begin speaking,

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1 especially at the start of the meeting, please
2 state your name so we can get an accurate
3 record of the discussion. And also I would
4 like to ask our transcriber to let us know if
5 you are having an issue with hearing anyone or
6 with recording.

7 As the DFO, I see that the minutes
8 are prepared and ensure they are certified by
9 the chair. The minutes of today's meeting will
10 be available on the Board's website no later
11 than 90 calendar days from today per the FACA
12 regulations. If they are available sooner, we
13 will publish them sooner.

14 Also we will be publishing verbatim
15 transcripts. Those transcripts should be
16 available on the Board's website within 30
17 days.

18 I would like to remind Advisory
19 Board Members that there are some materials
20 that have been provided to you in your capacity
21 as Special Government Employees and Members of
22 the Board, which are not for public disclosure

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1 and cannot be shared or discussed publicly,
2 including in this meeting. Please be aware of
3 this, as we continue with the meeting today.

4 These materials can be discussed in
5 a general way, which does not include using any
6 personally identifiable information such as
7 names, addresses, specific facilities if a case
8 is being discussed, or doctors' names.

9 And with that, I convene this
10 meeting of the Advisory Board on Toxic
11 Substances and Worker Health SEM Subcommittee.
12 And I'm going to turn it over to Dr. Welch, who
13 is the chair.

14 CHAIR WELCH: Thank you, Carrie.

15 We have two documents to discuss
16 today. One is -- and these are both responses
17 to the comments we received from OWCP on our
18 prior recommendations.

19 So one is a response to the response
20 on our recommended revisions of the OHQ and the
21 other is the COPD presumption.

22 I thought we would take the OHQ one

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1 first. I thought first I'd see if you all --
2 hopefully, you have had a chance to read it
3 and, if you have any comments. And then if
4 not, I have some specific things I want to
5 point out just to be sure we're all in
6 agreement.

7 So to open it up, does anybody have
8 any comments on the Recommendation number 4,
9 Revisions of the OHQ?

10 Okay. Well, the way -- John Dement
11 put this one together, primarily. And what we
12 did was simply summarize why they didn't accept
13 the Board's recommendation and reiterate why we
14 think it's important that they should.

15 The Item 1 is about some things that
16 OWCP has already developed a revised OHQ and
17 Item 2 is specifically about vapors, gases,
18 dust, and fumes which we will discuss a little
19 bit more in the COPD one.

20 We had discussed many of these
21 points at the last meeting when we were all
22 together that we didn't particularly like the

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1 new draft OHQ because it includes free text,
2 which is one of our recommendations that really
3 doesn't structure the rest of the question that
4 would help people remember specific tasks and
5 exposures and that, you know I think all of our
6 experience is that they really need to
7 structure it to use tasks and materials, not
8 just ask people for a list of what they were
9 exposed to.

10 And we are reiterating the
11 importance of having tasks and materials, not
12 just asking them what were you exposed to.

13 Does anybody have any -- if you
14 agree with it, you don't have to speak up. I
15 just want to make sure that you got the gist of
16 that and that you are agreeing with it.

17 Really what we're doing today is
18 making sure that our committee is in agreement
19 so on January 30th, when we review for the
20 whole Board, we could tell them the
21 subcommittee discussed it agrees with its
22 response to comments.

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1 Are you all good with that concept
2 that we're going back and reiterating that they
3 really need to use tasks and memory triggers
4 around tasks and materials?

5 Okay. Is there anything that we
6 left out of this that you all think you know
7 when you remember our discussion about the OHQ,
8 anything you think we should reemphasize?

9 MEMBER GRIFFON: Laurie, this is
10 Mark Griffon. Can you say a little bit more
11 about memory triggers because I totally agree
12 with the concept? I'm just wondering how it is
13 done and not in a site-specific questionnaire.

14 CHAIR WELCH: Let me see what we
15 had. I'll get up my --

16 MEMBER GRIFFON: Yes, I'm trying to
17 remember.

18 CHAIR WELCH: -- yes, what we had
19 recommended. I can find that in a second.

20 MEMBER GRIFFON: Okay.

21 MEMBER DEMENT: Mark, this is John.
22 I think one of the issues was we have a fairly

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1 respectable list of tasks for construction and
2 it's based on using it for a lot of years. We
3 don't have as good a list for production
4 workers.

5 And so this a two-prong attack. One
6 is to include the tasks we knew about and that
7 are fairly routine for construction and
8 maintenance workers but then also to provide --
9 and it is sort of the same context -- if a
10 worker lists an exposure, you again ask the
11 task that they did to result in that exposure.

12 The issue with memory triggers is we
13 found in the BT Medical exam that if we list
14 tasks and ask workers about them, they are more
15 likely to remember having done them than if we
16 simply give them a blank sheet of paper and ask
17 them to list the tasks that they did. And it's
18 just a simple jogging of the memory; yes, I did
19 that task.

20 CHAIR WELCH: I think that one of
21 the -- so the BTMed we have worked at a list
22 of tasks. And I think that the other programs

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1 didn't focus on tasks as much but it wouldn't
2 be extremely complicated to make some general
3 list of tasks that would be memory-triggered
4 for individuals who worked in production
5 facilities such as you know cleaning carts,
6 machine parts. We could sit down and make up
7 such a list. It probably wouldn't be complete
8 but it would be helpful.

9 And the same with materials. So in
10 our recommendations, we listed some agents that
11 should be on the list of hazards that then
12 would, if someone said yes, I was exposed to
13 acids and caustics, then the questionnaire
14 would ask them well what tasks would you do
15 that led to that kind of exposure. And that we
16 included in our original recommendation a list
17 of hazards.

18 And the original questionnaire that
19 DOL has used for a long time does have some
20 list of hazards. These are more categories,
21 which shorten, rather than extending it.

22 I guess in our recommendations, the

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1 first time around, we didn't really describe
2 memory triggers but we did talk about how a
3 worker may not know the names of all the
4 materials he or she used but will know the
5 tasks performed. The task alone, even without
6 the names of the associated hazards can give
7 the industrial hygienist a sense of what
8 exposure occurred and then additional questions
9 need to be asked.

10 And it is reported out in this
11 response that it's all linked together. So
12 then the industrial hygienist should be able to
13 go back and talk to the worker to get more
14 detail, which is the recommendation that
15 Department of Labor did accept.

16 MEMBER GRIFFON: Okay, thanks,
17 Laurie. That's a good clarification for me. I
18 was thinking we were -- I mean I remember the
19 expression on tasks. I was thinking of
20 different sort of memory triggers that you know
21 we have used things like group interviews and
22 things like that. I think it would be hard to

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1 put in a generic.

2 You know so I'm thinking like it
3 sounds like there are certain campaigns and if
4 we said you know we had a list of campaigns
5 that took place over the years, a lot of the
6 workers would remember oh, yes, I've worked on
7 that campaign, or that project, or you know and
8 that might trigger them to remember what sort
9 of exposures were involved, et cetera. But
10 that would be more site-specific and that would
11 be difficult to do.

12 CHAIR WELCH: Well, no, you know I
13 mean how many sites are there? Twenty-seven.
14 It's not like there are thousands of them. And
15 there's probably only campaigns that you know -
16 - a dozen. So it's really a good idea. It's
17 another way -- you know in the same way using
18 maps. If people are able to look at a map,
19 it's not asking for that task.

20 (Simultaneous speaking.)

21 MEMBER GRIFFON: I didn't think of
22 that.

1 CHAIR WELCH: Oh, yes, yes, I
2 remember working in that building and here's
3 what I did.

4 MEMBER GRIFFON: Right.

5 MEMBER POPE: This is Duronda Pope.
6 You could even put down those tasks and have
7 like a slash or something, or campaign, or
8 project that you might have worked on in that
9 building.

10 CHAIR WELCH: Do you think we should
11 add that, the idea of campaigns added as an
12 example here that that would be another way in
13 addition to a list of tasks to see if specific
14 campaigns would help workers remember?

15 MEMBER POPE: I think that would be
16 a good idea.

17 CHAIR WELCH: Okay.

18 MEMBER DOMINA: Hey, this is Kirk.
19 I've got a question.

20 On that campaign type of thing --
21 and Mark might know the answer to this, I would
22 think with all the data that NIOSH has gone

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1 through over the years, because they look at
2 specific things at specific sites when they
3 know things come up through their interviews or
4 group interviews, that that would identify not
5 just the rad site but the chemical, any other
6 type of occupational exposure because it goes
7 hand in hand with any of these campaigns that
8 we've done.

9 MEMBER GRIFFON: Yes, I mean they
10 have the Site Profile documents that NIOSH has
11 developed for the large Site Survey, usually in
12 multiple parts because of the bigger sites,
13 anyway. But there is also -- they also realize
14 that they are sort of ever-changing. I mean
15 they try to get as much information as they can
16 but often they're missing quite a bit of
17 information on the first revision and then they
18 modify it as they get more information. Over
19 the last 15 years, they have certainly modified
20 many times.

21 So they're not perfect but they have
22 a pretty good history of, and like you said,

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1 it's not only radiation work, it's you know all
2 these plants, or chemical plants, really, you
3 know with radiation exposures as well. So they
4 list the history of projects, too.

5 So yes, and I don't know how much --
6 you know the other thing I would envision is
7 if, and Kirk, I don't know how they do the
8 questionnaires but, oftentimes, if you're going
9 to have the intake person working with them on
10 the questionnaire, I think this would be where
11 the intake person could say, if they have
12 knowledge of the site, they could have that
13 sort of information to trigger, to help them
14 answer some of these questions.

15 So I don't know exactly how they
16 conduct these questionnaires, if they're just
17 sent out and then someone goes over it with
18 them on the phone, or how they do that.

19 CHAIR WELCH: I think they do them
20 in person and they --

21 MEMBER GRIFFON: Oh, they do them in
22 person?

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1 CHAIR WELCH: Yes, they do them at -
2 - I forget the name -- the centers that they
3 have.

4 MEMBER GRIFFON: At the centers,
5 right.

6 MEMBER VLIEGER: This is Faye. Some
7 are done in person and some are not?

8 CHAIR WELCH: Okay.

9 MEMBER GRIFFON: Yes.

10 CHAIR WELCH: But Faye if it was,
11 say it was a Hanford worker, if it was done
12 over the phone, would it be someone from the
13 Hanford Resource Center that calls them?

14 MEMBER VLIEGER: Yes, they do phone
15 interviews but some of are just done on paper.
16 But people don't remember these things and so
17 the Resource Center workers have some
18 experience but they really don't understand the
19 chemical processes so they can't fill it in for
20 them and the people don't know the names of the
21 chemicals.

22 So this use of specific chemicals is

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1 just daunting.

2 CHAIR WELCH: Yes. Well what I was
3 thinking too, though, is if there you know this
4 idea of either things that come out of the
5 NIOSH Site Profiles for these campaigns, if
6 there are people at Hanford who are doing the
7 questionnaire for Hanford workers, there is
8 even fewer -- they could become a little more
9 expert in the kind of exposures that people
10 have or what was done at the facility using
11 these resources.

12 MEMBER VLIEGER: This is Faye. It
13 is interesting that on the Site Exposure
14 Matrix, and I'm looking at Hanford, they have
15 work processes already but I don't know that
16 the CEs ever look at this or if the chemicals
17 listed in these have been vetted to be accurate
18 and then used for the claimants.

19 CHAIR WELCH: Well DOL recently
20 added this directory to these linked work
21 process and it's a pretty narrow, very specific
22 -- it's a short list of processes and they are

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1 very specific and some of them probably didn't
2 occur in the DOE facilities. I think it's a
3 list of work processes that comes out of HAZ-
4 MAP.

5 I was very excited when they first
6 started this process. I thought it was very
7 helpful but I don't know that they've got a way
8 to add work processes to the list. I don't
9 think they have a system. That's something
10 that the Board can continue to look at down the
11 road.

12 Because the work processes would be
13 very helpful. It's a much easier way to do a
14 claim.

15 MEMBER VLIEGER: I just looked at
16 one of the work processes at the Hanford Site
17 Exposure Matrix for coal handler and they list
18 diesel exhaust, gasoline, gasoline exhaust,
19 kerosene, kerosene and petroleum mid-distillate
20 but they don't list coal dust.

21 So I don't know that this is going
22 to help us either.

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1 CHAIR WELCH: I'm not sure. That
2 probably doesn't exist there, does it, coal?

3 MEMBER VLIENER: Yes, it did.
4 Hanford had a coal-fired power plant for many,
5 many years.

6 CHAIR WELCH: Oh, okay. Yes, I mean
7 it's a great idea. It's a very complicated
8 process but some of them are useful, you know
9 like if you're a welder, you are exposed to
10 welding fumes. It helps presume some
11 exposures, anyway, but making the list longer
12 would be good. And some of them -- I mean you
13 look at the list because you can go into SEM
14 and get a list of all the processes. You don't
15 even have to do it site by site. I think they
16 may have about 30 of them in there, quite
17 specific.

18 So I'll add to this document that we
19 recommend they add a list of campaigns at each
20 site as a memory trigger. And then they may or
21 may not know even what we're talking about but
22 we need to get it in the recommendation.

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1 What do you think we could do with
2 the NIOSH Site Profiles? Should we recommend -
3 -

4 MEMBER GRIFFON: Well, I don't know
5 if that -- I mean I would hope that people that
6 are working on the SEMs and updating the SEM
7 are consulting with those documents as well.
8 So I don't know.

9 But I certainly think --

10 CHAIR WELCH: I think those do get
11 incorporated into the SEM. It's not --

12 MEMBER GRIFFON: Right.

13 CHAIR WELCH: It may be more useful
14 like a narrative for people as training.
15 Because once it goes into the SEM, it becomes
16 this specific agent at a specific building and
17 that's maybe not quite as -- you can't just
18 read it.

19 MEMBER GRIFFON: Right.

20 CHAIR WELCH: Well, I'll put a note
21 in here that the Site Profiles prepared by
22 NIOSH could be helpful as background

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1 documentation for the interviewers.

2 MEMBER GRIFFON: For the
3 interviewers. Yes, that's good.

4 And I would say campaigns or
5 projects maybe. I mean campaigns I think tends
6 to be a specific term for like -- I'm not sure
7 but I think it's more specific to like Nevada
8 Test Site; whereas, projects might be a broader
9 term.

10 CHAIR WELCH: And a project would be
11 like making a particular like you know -- that
12 they were machining something for a short
13 period of time on-site or --

14 MEMBER GRIFFON: Yes, if there was a
15 project during which they were working on a
16 certain part or a certain -- you know.

17 And some of them even had classified
18 names. So it might have been like Project X or
19 something you know.

20 CHAIR WELCH: And are there lists of
21 projects?

22 MEMBER GRIFFON: I'm not sure there

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1 is a master list anywhere but I know that we
2 ran across that kind of information when we
3 were putting together the medical surveillance
4 needs assessment stuff. And I'm pretty sure
5 NIOSH also did when making their Site Profiles.

6 CHAIR WELCH: Okay.

7 MEMBER POPE: Duronda Pope. I know
8 at Rocky Flats we had several projects from
9 time to time that we started and completed. So
10 projects -- Mark is right, projects might be a
11 better term than campaign, now that I think
12 about it.

13 CHAIR WELCH: Okay.

14 So we could add that they should
15 add, in addition to tasks, they should add
16 projects to OHQ and then, ideally, have a list
17 of projects to each site that could be used as
18 memory triggers for the workers and see how
19 that goes.

20 That's good, though.

21 MEMBER WHITLEY: Garry Whitley here.
22 If you go in and file a claim in OHQ and then

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1 at a later date you go back and file a
2 different claim for like the first one might be
3 hearing and the next one might be lung cancer,
4 do you automatically get to update your OHQ or
5 do you have to request it?

6 MEMBER VLIEGER: No but you can file
7 a supplemental.

8 MEMBER WHITLEY: So they don't --
9 you have to request to do that, though, don't
10 you?

11 MEMBER VLIEGER: You just -- you can
12 just fill out the form or request to do it at
13 the Resource Center, yes.

14 MEMBER WHITLEY: Okay.

15 CHAIR WELCH: Do you think you're
16 done with this one? It's more of the
17 conversation might spark other ideas. Like I
18 just don't want to close it out.

19 But we can move to the other one if
20 people feel we got that one done.

21 MEMBER VLIEGER: Ultimately, what I
22 would like to see is an interactive form that

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1 actually looks at these databases because the
2 Resource Center workers are only as good as
3 their memories.

4 CHAIR WELCH: Yes, now that would be
5 good. I know many people in that position that
6 over the years have talked about developing
7 that computer-based Occupational History
8 Questionnaire that could be fairly general,
9 that would start out with general categories of
10 work and then ask questions within that that
11 then become even more specific based on an
12 algorithm but it has never happened. But it
13 would be a good idea.

14 Okay, let's go to the COPD one.
15 This one, I put together -- I took the old
16 recommendations that we've made but added in
17 some -- changed it a little bit in trying to
18 respond to OWCP's comments. Remember we had
19 the discussion that they said well, vaporous
20 gas, dust, and fumes isn't the toxic stuff so
21 it has to be -- the language says the covered
22 illness has to be at least as likely as not

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1 exposure to a specific toxic substance was
2 related to employment and the program has a
3 definition they use for toxic substance. Plus
4 they thought that VGDF was way too broad.

5 So the response I put together was
6 basically that the language -- the enabling
7 language doesn't need to be in specifics. And
8 that they have -- there's many examples where
9 OWCP has been using complex mixtures and
10 accepting claims from those.

11 We had at the meeting or I had said
12 I would try to put together a list of -- a more
13 specific list of agents. But as I thought
14 about it and talked with John and Mark, we
15 realized it really wasn't possible to have a
16 list. There could be a list but then there had
17 to be ways for other people to get their claims
18 in.

19 So what we ended up with was that
20 the presumption may be someone has to have a
21 presumption of significant exposure to chronic
22 substance use would occur if they had five

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1 years of work in a DOE site with the shorter
2 list of agents; five years of work in any one
3 of the job titles at a DOE site encompassed by
4 these major categories of construction,
5 installation, maintenance and repair and the
6 claimant's job title is linked to a toxic
7 substance in the SEM; or five years exposure to
8 VGDF as recorded in the revised OWCP that
9 included something that is in one of these
10 categories of agents.

11 So instead of it just being any dust
12 or any vapor, we narrowed it but not really
13 narrowed it that much. It's just I think it's
14 more understandable to say that we presume if
15 people were in these job titles, they would
16 have had an exposure. Or if they weren't in
17 one of those job titles, if they report
18 exposures in these categories or the SEM links
19 their job title to HED categories.

20 And within the SEM for any agent it
21 tells what category it belongs to. So it's
22 possible for the claims examiner to do this, to

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1 say that the worker said they had exposure to
2 you know trichloroethylene and they can see
3 that it's in the group of solvents.

4 So my hope was it's a little more --
5 it's more responsive to what their criticisms
6 were but we're still hanging on to the concept
7 of VGDF has been an important causative agent
8 for COPD.

9 So with that intro, any comments, or
10 thoughts, or additions, or suggestions? Or I
11 didn't -- I don't think I included here the job
12 list, those categories of -- Category 47
13 Construction, and 49, Installation, Maintenance
14 and Repair.

15 Steve Markowitz has produced some
16 expanded version of that for the accepted
17 presumptions. So we would be using the same
18 list. And he's got very specific job titles
19 within that community of 30 or 40 job titles
20 that fall under those categories.

21 All right, somebody was going to say
22 something.

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1 MEMBER DOMINA: Yes, this is Kirk.
2 We need to stay with the VDFG just because I
3 think I brought up at the meeting in Santa Fe
4 about our tank farm workers are a prime example
5 because you have all of this mixed into one or
6 some of the different other processes that we
7 did, based on lack of ventilation in these
8 different buildings. And I think that
9 kind of showed a little bit, too, when we went
10 into the machine shop at Los Alamos, where you
11 have the building built in 1953 and all these
12 different things that has gone on there for
13 years and years, and all these different
14 processes, that it is a very real lexicon or
15 whatever they want to call it.

16 It needs to be included because I
17 think some of these people that are making the
18 decisions don't understand the complexity and
19 all these things are rolled into one every day
20 when we were working it.

21 MEMBER DEMENT: This is John. I
22 think the other thing, based on the discussion

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1 that Laura, and Steve, and I had with the
2 literature on COPD clearly supports this VGDF
3 exposure metric and its relationship to COPD
4 risk.

5 And so I think scientifically it's
6 valid, it's defensible, it's supported by the
7 literature. And as Laura said, there are ample
8 examples in the SEM itself where complex
9 mixtures are already considered collectively
10 together in their relationship with disease.

11 So I think we should stick with our
12 guns on VGDF.

13 MEMBER GRIFFON: This is Mark
14 Griffon. I wholeheartedly agree with John on
15 that.

16 I just had one question on the -- I
17 think it's at the bottom of the second page,
18 number 4, Laurie, where it talks about duration
19 of exposure.

20 CHAIR WELCH: Oh, yes, I'm looking
21 at that. Yes.

22 MEMBER GRIFFON: The five years can

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1 be accumulated by a combination of DOE
2 employment and employment outside of the DOE.
3 Have we talked --

4 CHAIR WELCH: Yes, I must have
5 edited that. We decided to take that out.

6 MEMBER GRIFFON: Oh, okay. Yes, I
7 thought so.

8 CHAIR WELCH: And I'm sorry. I must
9 have been working from an old document because
10 at the meeting I understood that the DOL can't
11 take into account exposure.

12 MEMBER GRIFFON: That's what I
13 thought, yes. That's the only thing I caught.

14 CHAIR WELCH: Yes, thanks for that.

15 MEMBER GRIFFON: Yes, that needs to
16 come out.

17 CHAIR WELCH: Yes, I just took it
18 out of my version and I'm creating a new
19 version here.

20 I mean I think by combining -- by
21 using these broad categories of agents, which
22 are then complex mixtures but dust and fibers,

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1 I think they really accept that as a complex
2 mixture. And then the acids and caustics -- I
3 think this makes it more understandable for
4 people who are not really versed in the
5 technicalities of the research and it makes it
6 more -- I think it's not really changing that
7 much but I think it's making it more manageable
8 for a claims examiner. So hopefully, this will
9 be acceptable.

10 MEMBER POPE: This is Duronda. I am
11 in agreement with Kirk in regards to do we have
12 to, do we need to spell it out in terms of the
13 tank farm. Do we have to spell that out in
14 order for them to accept them being included?

15 CHAIR WELCH: I don't think so.

16 MEMBER POPE: Okay.

17 CHAIR WELCH: I mean the tank farms
18 clearly are a complex mixture, probably vapors
19 and solvents. The only problem would be that
20 the workers at the tank farm, they can't
21 describe any specific exposures. Because they
22 wouldn't be able to say they were exposed to an

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1 acid, or a caustic, or a dust, or a solvent.

2 MEMBER DEMENT: But if they filled
3 out - this is John -- their OHQ, they clearly
4 could state they were exposed to VGDF and they
5 could then state where they got it -- from the
6 tank farm.

7 CHAIR WELCH: Oh, okay.

8 MEMBER DEMENT: I think that is --
9 so if you take the Occupational History
10 Questionnaire and this presumption collectively
11 together, I think we're covered there.

12 CHAIR WELCH: That's what I'm
13 looking at right now. They'd have to be in the
14 category of this number C, the five years of
15 exposure to VGDF during DOE employment as
16 reported in the revised OHQ that assesses VGDF
17 exposures. But then we say and the SEM shows
18 this job title or tasks are linked to agents in
19 one or more of the following toxic substance
20 groups.

21 So if the SEM hasn't incorporated
22 tank farms, then this isn't really going to

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1 help them.

2 But in a way, this is a presumption,
3 right? So if there are people whose job
4 doesn't fit, then they put together industrial
5 hygiene assessments.

6 You know I think what I should do,
7 based on that -- what we had before was claims
8 examiners shouldn't deny claims for COPD if the
9 worker had fewer than five years of exposure.
10 But I think what we need to add and they
11 shouldn't be denied. They should go to full
12 review if they report VGDF for five years, even
13 if it's not identified in the SEM or something
14 like that.

15 Does that make sense? Because I
16 think -- I don't know that tank farm people
17 would be covered.

18 MEMBER POPE: Right. So I just
19 wanted to make sure that you know if we didn't
20 have to -- if they have to have it spelled out
21 so they're not excluded from being on that
22 list, per se.

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1 CHAIR WELCH: So they would need an
2 IH review. But we still need the -- we need
3 the questionnaire to have the VGDF questions
4 and I'm presuming that's true based on the way
5 this is written.

6 MEMBER DEMENT: The other way they
7 could possibly get in as a tank farm worker is
8 a job title. I'm not sure exactly -- you know
9 there are many different job titles that work
10 on the tank farms.

11 MEMBER POPE: As a production
12 worker, like I was, operator, tank farm workers
13 wasn't, per se, part of the job but it was a
14 part of the operator job.

15 MEMBER DEMENT: Okay.

16 MEMBER POPE: As an operator, you
17 would operate a section of tank farms.

18 CHAIR WELCH: So it wouldn't fall
19 under installation, maintenance, and repair?

20 MEMBER POPE: No.

21 CHAIR WELCH: It would be an
22 operator job.

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1 MEMBER POPE: Yes.

2 CHAIR WELCH: Because then it
3 wouldn't be covered under our presumptive job
4 title.

5 So we have to still put in that
6 someone who has -- the VGDF question has to be
7 on the questionnaire. And if people report
8 that and they are not -- the presumption
9 doesn't really fit, then we need a detailed IH
10 review.

11 And that's because there are going
12 to be other people, too, who their job title or
13 task may not even be in the SEM so it can't be
14 linked to toxic substances groups if it's not
15 even in the SEM or the exposures they had are
16 not characterized for that job.

17 So I will do that.

18 MEMBER DEMENT: Here's another
19 question. In our response to the comments on
20 the OHQ, we didn't specifically say that we
21 still recommended this VGDF exposure questions
22 be added to the questionnaire.

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1 I mean we've said it in the original
2 recommendation but in our response, you know
3 they came back. I think we should probably, in
4 that response --

5 CHAIR WELCH: Yes.

6 MEMBER DEMENT: -- state that those
7 questions need to be retained.

8 CHAIR WELCH: Yes, because what we
9 did say was it would be addressed --

10 MEMBER DEMENT: Right.

11 CHAIR WELCH: -- in the response so
12 they could do the recommended presumptions. I
13 can say they will be addressed in more detail
14 but it has to be retained.

15 MEMBER DEMENT: Yes, they were
16 linked together.

17 CHAIR WELCH: Okay. I'm making
18 notes but I'll make it sound a little bit
19 better and then I can send it to everybody just
20 to see if you like the way I have expressed it.

21 Well, I think we're okay. We're
22 going to get a chance to talk about this again

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1 on our January 30th call. But I will send this
2 around again with these edits and then mark the
3 edits and you can make sure they're okay with
4 you.

5 And if anything else comes up, let
6 me know and I can -- or we can all respond to
7 each other, I think as long as respond okay and
8 see if there is any final edits we want to make
9 before the 30th.

10 Does that sound okay?

11 Anybody have anything else they want
12 to add now? Any other comments now? I figured
13 it would be quick today.

14 Okay, Carrie, I think we're done.

15 MS. RHOADS: Great. Like you said,
16 if you're sending drafts around, make sure to
17 copy the Board's inbox as well.

18 And then I think if nobody has
19 anything else, then we will hear from everybody
20 on the 30th at our next meeting.

21 (Whereupon, the above-entitled
22 matter went off the record at 1:53 p.m.)

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