

October 13, 2006

10-23-06A11:28 RCVD

RE: SEC for Ames Lab Workers exposed to residual radiation from AEC activities
The following is the result of interviews with former Ames Lab Mechanical Services and Industrial Hygiene staff and the current Health and Safety staff of the Ames Laboratory:

Mr. _____ is a former maintenance worker from the Ames Laboratory on the Iowa State University Campus in Ames, Iowa. He was continuously employed at the Lab from 1960 through _____ 1999. His job titles included _____

He has filed for _____ through EEOICPA Part B and is pending a dose reconstruction. We are enclosing supportive information for a Special Exposure Cohort, SEC for _____ and his coworkers in the _____ shop.

He began work as an _____ Worker after the period currently covered in the Ames SEC, however his work history is very clear for unmonitored, unprotected, potentially or likely high dose exposure to various radiologic hazards including predominantly large masses of Thorium dust entrained in the exhaust duct work and structural materials including ceiling tiles of the Metallurgy Building, subsequently called Wilhelm Hall.

His primary responsibility from 1960 -1966 was to tear out and renovate all the ductwork, fume hoods and stacks from the Metallurgy Building, Wilhelm Hall. The basement of this building had become the predominant production area for Thorium processing and related activities since the move of metals processing from "Little Ankeny, the former Women's Gymnasium. Although _____ work began after the Thorium processing activities had ceased in 1954, he and his coworkers were exposed to the re-entrained particulates from all the processes performed in this facility. These workers removed the original Rotoclone exhaust system with it's blower on the roof, the welded ductwork including the supply duct from the roof to the basement, the supply and exhaust ductwork running the length of the basement including all the fume hoods. This workforce also tore out all the acoustic tile and much of the wall materials in the basement. The ceiling tile was porous acoustic tile which was glued to the concrete ceilings and removed with chisels. They also removed all the associated machinery and fume hoods, upgraded the facility to a cleaner operating laboratory and upon completion of renovations in the basement proceeded to replace all the original ventilation system in the entire building. The primary tear out work in this building and replacement of structural materials and replacement of the ductwork and ventilation system took all of six years, from 1960 - 1966. After 1966, several other major removal and renovation activities were performed in Wilhelm Hall that involved potential significant exposure to radiological contamination. One example, related by _____ was the addition of vitroliners to the fume hood exhaust stacks, which went on for several months and resulted in on-going exposure to radiologically contaminated



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dust. The majority and most significant of these activities appear to have been completed by the early 1970's. These workers maintained all the ventilation systems in the entire Ames Lab.

It appears that no systematic area monitoring, quantitative exposure assessment nor plan for worker protection was implemented. describes being completely covered with dust and 'looking like a coal miner' on many days during this period, especially after tearing out ceiling panels. He did not have any respiratory protection, ('not even a 3-M dust mask'), and no personal radiation exposure monitoring. Workers took their breaks at the worksite, smoked cigarettes and ate their lunches in the same area in which they were tearing out the aforementioned ductwork. The sole Ames Lab during that period, Mr. relates that he was concerned at that time regarding unprotected, unquantified exposure to thorium dusts. began his employment at the Ames Lab in 1963 but relates concern dating back to that date for the health and safety of these workers because he, as the Lab's and Health Physics staff were apparently not involved with oversight of worker monitoring and protection for these workers at that time.

There are several other workers who should be considered as a part of this SEC including (all of whom are deceased), and other workers as yet to be identified but who worked on the tear out work in the Metallurgy Building, Wilhelm Hall.

A review of industrial hygiene and health physics records from 1960's through the 1980's indicate that, before approximately 1970, facilities services workers were not consistently provided industrial hygiene and health physics oversight including respiratory protection from airborne contaminants. Also, according to the Laboratory's review of available records, these same workers were not provided external dosimetry monitoring or internal dosimetry services, except during work activities at the Ames Laboratory Research Reactor (ALRR).

Sincerely,



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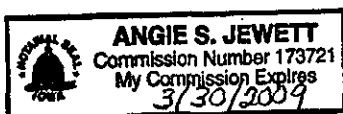
October 20, 2006

Mr. _____, former _____ worker at Ames Laboratory and Mr. _____
former _____ at Ames Laboratory concur with
letter dated Oct. 13, 2006 addressing the subject of a Special Exposure Cohort for Mr.
and other coworkers from Jan. 1, 1955 to Dec. 31, 1970. This letter shall become an
attachment to said letter.

Signed:

Signed:

The above named individuals, _____ and
appeared before me this date, October 20, 2006.



Angie S. Jewett
Story County Iowa

Special Exposure Cohort Petition — Form B

Use of this form and disclosure of Social Security Number are voluntary. All information provided on this form is confidential. This number will be used to determine any right, benefit, or privilege to which you may be entitled.

General Instructions on Completing this Form (complete instructions are available in a separate packet):

Except for signatures, please **PRINT** all information clearly and neatly on the form.

Please read each of Parts A — G in this form and complete the parts appropriate to you. If there is more than one petitioner, then each petitioner should complete those sections of parts A — C of the form that apply to them. Additional copies of the first two pages of this form are provided at the end of the form for this purpose. A maximum of three petitioners is allowed.

If you need more space to provide additional information, use the continuation page provided at the end of the form and attach the completed continuation page(s) to Form B.

If you have questions about the use of this form, please call the following NIOSH toll-free phone number and request to speak to someone in the Office of Compensation Analysis and Support about an SEC petition:
1-800-356-4674.

If you are:	<input type="checkbox"/> A Labor Organization,	Start at D	on Page 3
	<input checked="" type="checkbox"/> An Energy Employee (current or former),	Start at C	on Page 2
	<input type="checkbox"/> A Survivor (of a former Energy Employee),	Start at B	on Page 2
	<input type="checkbox"/> A Representative (of a current or former Energy Employee),	Start at A	on Page 1

A Representative Information — Complete Section A if you are authorized by an Employee or Survivor(s) to petition on behalf of a class.

A.1 Are you a contact person for an organization? Yes (Go to A.2) No (Go to A.3)

A.2 Organization Information:

Name of Organization _____

Position of Contact Person _____

A.3 Name of Petition Representative:

Mr./Mrs./Ms. First Name _____

Middle Initial _____

Last Name _____

A.4 Address:

Street _____

Apt # _____

P.O. Box _____

City _____

State _____

Zip Code _____

A.5 Telephone Number: (____) _____

A.6 Email Address: _____

A.7 Check the box at left to indicate you have attached to the back of this form written authorization to petition by the survivor(s) or employee(s) indicated in Parts B or C of this form. An authorization

If you are representing a Survivor, go to Part B; if you are representing an Employee, go to Part C...

Name or Social Security Number of First Petitioner: _____

Special Exposure Cohort Petition — Form B

B Survivor Information — Complete Section B if you are a Survivor or representing a Survivor.

B.1 Name of Survivor:

Mr./Mrs./Ms. First Name Middle Initial Last Name

B.2 Social Security Number of Survivor:

B.3 Address of Survivor:

Street Apt # P.O. Box

City State Zip Code

B.4 Telephone Number of Survivor: () -

B.5 Email Address of Survivor:

B.6 Relationship to Employee: Spouse Son/Daughter Parent
 Grandparent Grandchild

Go to Part C

C Employee Information — Complete Section C UNLESS you are a labor organization.

C.1 Name of Employee:

MR. Middle Initial Last Name

C.2 Former Name of Employee (e.g., maiden name/legal name change/other):

Mr./Mrs./Ms. First Name Middle Initial Last Name

C.3 Social Security Number of Employee:

C.4 Address of Employee (if living):

Apt # P.O. Box

C.5 Telephone Number of Employee:

C.6 Email Address of Employee:

C.7 Employment Information Related to Petition:

C.7a Employee Number (if known):

C.7b Dates of Employment: Start JULY 1, 1960 End MAY 31, 1999

C.7c Employer Name: AMES LAB

C.7d Work Site Location:

C.7e Supervisor's Name:

Go to Part E.

Name or Social Security Number of First Petitioner:

Special Exposure Cohort Petition — Form B

D Labor Organization Information — Complete Section D ONLY if you are a labor organization.

D.1 Labor Organization Information:

Name of Organization

Position of Contact Person

D.2 Name of Petition Representative:

D.3 Address of Petition Representative:

Street

Apt #

P.O. Box

City

State

Zip Code

D.4 Telephone Number of Petition Representative: () _____

D.5 Email Address of Petition Representative: _____

D.6 Period during which labor organization represented employees covered by this petition
(please attach documentation): Start _____ End _____

D.7 Identity of other labor organizations that may represent or have represented this class of
employees (if known):

Go to Part E

Name or Social Security Number of First Petitioner:

Special Exposure Cohort Petition — Form B

E Proposed Definition of Employee Class Covered by Petition — Complete Section E.

E.1 Name of DOE or AWE Facility: Ames Laboratory, Iowa State University

E.2 Locations at the Facility relevant to this petition:

Wilhelm Hall for the Metallurgy Building or Old Metallurgy Building, Ames Laboratory campus resultant from exposures to dust in ductwork and building materials such as ceiling panels in tear out, maintenance, repair and replacement.

E.3 List job titles and/or job duties of employees included in the class. In addition, you can list by name any individuals other than petitioners identified on this form who you believe should be included in this class:

Sheet metal workers, physical plant maintenance, and associated support and supervisory staff who may have been exposed to the maintenance and renovation activities of the Thorium production areas in Wilhelm Hall.

E.4 Employment Dates relevant to this petition:

Start	<u>January 1, 1955</u>	End	<u>December 31, 1970, for residual radiation exposure from dust remaining in ducts, interstitial spaces and building materials from Thorium processing exposures</u>
Start	_____	End	_____
Start	_____	End	_____

Please see the appended letter summarizing worker and current Ames Laboratory health and safety staff recollections and impressions. The work on Thorium production and related research in the Metallurgy Building or Wilhelm Hall at Ames Lab generated unmeasured dust, and some much of which would likely have settled along exhaust duct work designed to entrain such effluvia as well as above suspended ceilings. Workers working on and around the maintenance, repair and probably especially replacement of such building components would likely have experienced radiologically significant and reportedly unmonitored and unprotected exposures to Thorium and other substances which had settled on ductwork and other surfaces.

Go to Part F.

Name or Social Security Number of First Petitioner: _____

Special Exposure Cohort Petition — Form B

F Basis for Proposing that Records and Information are Inadequate for Individual Dose —
Complete Section F.

Complete at least one of the following entries in this section by checking the appropriate box and providing the required information related to the selection. You are not required to complete more than one entry.

- F.1 I/We have attached either documents or statements provided by affidavit that indicate that radiation exposures and radiation doses potentially incurred by members of the proposed class, that relate to this petition, were not monitored, either through personal monitoring or through area monitoring.

(Attach documents and/or affidavits to the back of the petition form.)

Describe as completely as possible, to the extent it might be unclear, how the attached documentation and/or affidavit(s) indicate that potential radiation exposures were not monitored.

Attached is a summary of the unmonitored Thorium dust exposure concerns relevant to and the cohort of similarly exposed coworkers.

- F.2 I/ We have attached either documents or statements provided by affidavit that indicate that radiation monitoring records for members of the proposed class have been lost, falsified, or destroyed; or that there is no information regarding monitoring, source, source term, or process from the site where the employees worked.

(Attach documents and/or affidavits to the back of the petition form.)

Describe as completely as possible, to the extent it might be unclear, how the attached documentation and/or affidavit(s) indicate that radiation monitoring records for members of the proposed class have been lost, altered illegally, or destroyed.

Part F is continued on the following page.

Name or Social Security Number of First Petitioner:

Special Exposure Cohort Petition — Form B

F.3 I/We have attached a report from a health physicist or other individual with expertise in radiation dose reconstruction documenting the limitations of existing DOE or AWE records on radiation exposures at the facility, as relevant to the petition. The report specifies the basis for believing these documented limitations might prevent the completion of dose reconstructions for members of the class under 42 CFR Part 82 and related NIOSH technical implementation guidelines.

(Attach report to the back of the petition form.)

F.4 I/We have attached a scientific or technical report, issued by a government agency of the Executive Branch of Government or the General Accounting Office, the Nuclear Regulatory Commission, or the Defense Nuclear Facilities Safety Board, or published in a peer-reviewed journal, that identifies dosimetry and related information that are unavailable (due to either a lack of monitoring or the destruction or loss of records) for estimating the radiation doses of employees covered by the petition.

(Attach report to the back of the petition form.)

Go to Page

G Signature of Person(s) Submitting this Petition — Complete Section G.

All Petitioners should sign and date the petition. A maximum of three persons may sign the petition.

_____	_____	<u>10-13-2006</u>
		Date
_____	_____	<u>10-20-2006</u>
		Date
_____	_____	<u>10-20-2006</u>
Signature		Date

Notice: Any person who knowingly makes any false statement, misrepresentation, concealment of fact or any other act of fraud to obtain compensation as provided under EEOICPA or who knowingly accepts compensation to which that person is not entitled is subject to civil or administrative remedies as well as felony criminal prosecution and may, under appropriate criminal provisions, be punished by a fine or imprisonment or both. I affirm that the information provided on this form is accurate and true.

Send this form to: SEC Petition
Office of Compensation Analysis and Support
NIOSH
4676 Columbia Parkway, MS-C-47
Cincinnati, OH 45226

If there are additional petitioners, they must complete the Appendix Forms for additional petitioners. The Appendix forms are located at the end of this document.

and
date, October 20, 2006.

appeared before me this



Angie S. Jewett
Story County Iowa

Name or Social Security Number of First Petitioner: _____

Public Burden Statement

Public reporting burden for this collection of information is estimated to average 300 minutes per response, including time for reviewing instructions, gathering the information needed, and completing the form. If you have any comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, send them to CDC Reports Clearance Officer, 1600 Clifton Road, MS-E-11, Atlanta GA, 30333; ATTN:PRA 0920-0639. Do not send the completed petition form to this address. Completed petitions are to be submitted to NIOSH at the address provided in these instructions. Persons are not required to respond to the information collected on this form unless it displays a currently valid OMB number.

Privacy Act Advisement

In accordance with the Privacy Act of 1974, as amended (5 U.S.C. § 552a), you are hereby notified of the following:

The Energy Employees Occupational Illness Compensation Program Act (42 U.S.C. §§ 7384-7385) (EEOICPA) authorizes the President to designate additional classes of employees to be included in the Special Exposure Cohort (SEC). EEOICPA authorizes HHS to implement its responsibilities with the assistance of the National Institute for Occupational Safety (NIOSH), an Institute of the Centers for Disease Control and Prevention. Information obtained by NIOSH in connection with petitions for including additional classes of employees in the SEC will be used to evaluate the petition and report findings to the Advisory Board on Radiation and Worker Health and HHS.

Records containing identifiable information become part of an existing NIOSH system of records under the Privacy Act, 09-20-147 "Occupational Health Epidemiological Studies and EEOICPA Program Records. HHS/CDC/NIOSH." These records are treated in a confidential manner, unless otherwise compelled by law. Disclosures that NIOSH may need to make for the processing of your petition or other purposes are listed below.

NIOSH may need to disclose personal identifying information to: (a) the Department of Energy, other federal agencies, other government or private entities and to private sector employers to permit these entities to retrieve records required by NIOSH; (b) identified witnesses as designated by NIOSH so that these individuals can provide information to assist with the evaluation of SEC petitions; (c) contractors assisting NIOSH; (d) collaborating researchers, under certain limited circumstances to conduct further investigations; (e) Federal, state and local agencies for law enforcement purposes; and (f) a Member of Congress or a Congressional staff member in response to a verified inquiry.

This notice applies to all forms and informational requests that you may receive from NIOSH in connection with the evaluation of an SEC petition.

Use of the NIOSH petition forms (A and B) is voluntary but your provision of information required by these forms is mandatory for the consideration of a petition, as specified under 42 CFR Part 83. Petitions that fail to provide required information may not be considered by HHS.

Name or Social Security Number of First Petitioner: _____