

# Dose Reconstruction and Special Exposure Cohort Process Overview

**Brant Ulsh, PhD, CHP** 

Health Physicist

National Institute for Occupational Safety and Health Division of Compensation Analysis and Support

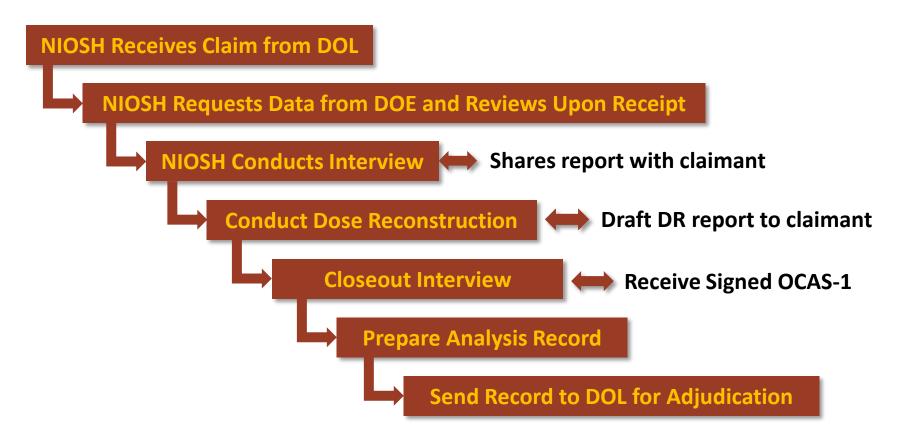
Naperville, IL July 2024

### NIOSH's Role Under EEOICPA

- Reconstructs Dose
- Develops methods to reconstruct dose
- Develops Probability of Causation methods
- Evaluates Special Exposure Cohort Petitions
- Supports the Advisory Board on Radiation and Worker Health (ABRWH)

### **Dose Reconstruction Process**

### **Dose Reconstruction Process**



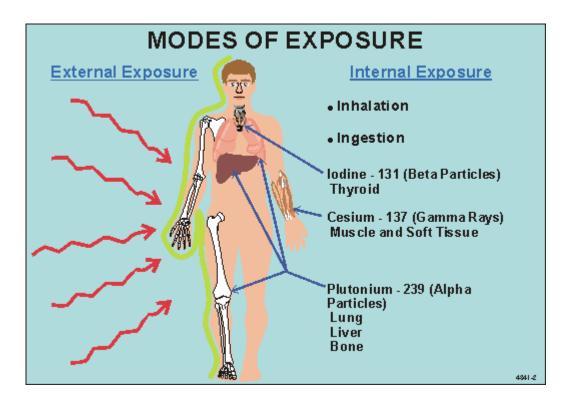
### **Claimant Interview**

- Voluntary interview to provide additional details
- All questions are mailed to the claimants prior to the scheduled meeting
- We confirm the employment dates and cancer diagnoses provided by DOL
- We ask about any additional details of the type of work the EE performed:
  - What was worked with, how often, overtime?
  - What PPE was used?
  - What monitoring was performed?
  - Any involvement in radiological incidents?
- We ask about any known co-workers
- Report is returned to interviewee to review for accuracy

### **Frequently Used Terms**

 External Dose: Dose received from radiation originating outside the body.

 Internal Dose: Dose received from radiation originating inside the body.



### Frequently Used Terms - continued

- Overestimate efficiency approach
- Best Estimate detailed dose analysis
- Underestimate efficiency approach
- Partial Estimate parts of dose reconstruction infeasible (SEC)

### **Claimant Favorable Approach**

When a choice must be made between different approaches and there is no information about which approach is most technically accurate, NIOSH chooses the approach resulting in the highest probability of causation

#### Examples:

- Conservative dose conversion factors
- Addition of potential missed dose
- Solubility class of radionuclide for internal dosimetry calculations
- Composition of radionuclide mix (plutonium)
- Upper 99<sup>th</sup> percentile credibility limit to determine POC

### **Basics of Dose Reconstruction – Data Hierarchy**

- Individual radiation monitoring data
- Co-exposure data if necessary (exposure of other workers with same work history)
- Workplace radiation monitoring data (area monitoring, surrogate data)
- Workplace knowledge of radiation sources and processes

### **Basics of Dose Reconstruction - Methods**

Evaluate all doses of record for data quality shortcomings

 Evaluate potential for undetected dose (missed dose, unmonitored dose)

Use recommendations established by national and international organizations

### **Basics of Dose Reconstruction - IREP**

- Annual organ doses computed from date of first employment (as verified by DOL) to date of diagnosis
- Estimate of uncertainty if possible
- Dose output compatible with IREP (Interactive RadioEpidemiological Program) - probability of causation software
- DOL uses IREP in adjudicating claims under EEOICPA

### **Basics of Dose Reconstruction – Probability of Causation**

- The Act set the guidelines for determining probability of causation (PC or PoC)
- Congress directed use of 1985 NIH cancer risk tables in judging radiation cancer claims
- 34 different cancer risk models in use
- Based on radiation cancer studies from epidemiologic research (A-bomb survivors and others)

### **Basics of Dose Reconstruction – Probability of Causation – cont.**

- Calculated based on each claimant's unique situation
- Claim is compensable when POC is greater or equal to 50 %

## **SEC Petition Process**

### **Overview**

- A Special Exposure Cohort (SEC) is a designation given to a class of employees for whom sufficiently accurate dose reconstructions are not possible
  - Claims compensated under the SEC do not have to go through the dose reconstruction process
- Eligible members of the class include individuals who
  - Meet the class definition
  - Typically require 250 aggregate days at an SEC facility
  - Have one of the 22 specified cancers

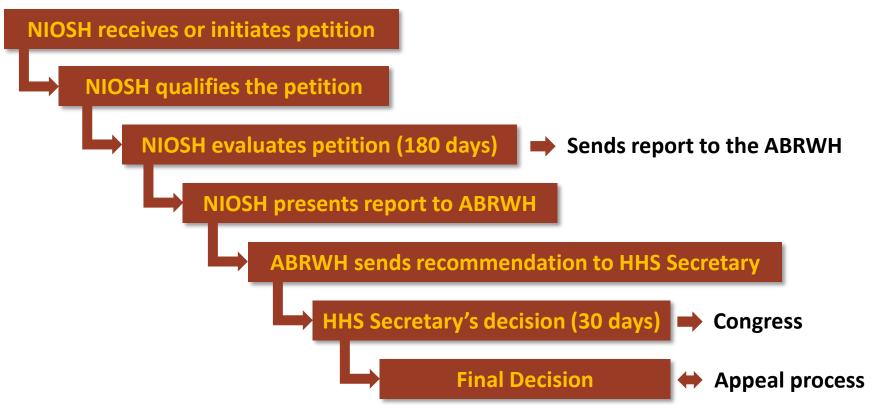
### SEC petition process – Who can file a petition?

- Former or current worker
- Survivor of a former worker
- Labor organization representing a worker or class
- Anyone authorized to represent any of the above

### **SEC** petition process – Petition Basis

- Description/Evidence/Affidavit of the basis that records are unavailable or inadequate to estimate radiation dose with sufficient accuracy.
- Based on:
  - Lack of monitoring
  - Destruction, falsification, or loss of records
  - Scientific or technical reports

### **Special Exposure Cohort Petitioning Process (42 CFR 83)**



### **Cancers Covered by the SEC**

#### Anytime

Bone cancer

Kidney cancer

Lung cancer (other than in-situ cancer that is discovered during or after a post-mortem exam)

# Onset 2 Years after First Exposure

Leukemia (other than chronic lymphocytic leukemia)

#### **Onset 5 Years after First Exposure**

Multiple myeloma

Lymphomas (other than Hodgkin's disease)

#### Primary cancer of the:

- Bile ducts
- Brain
- Breast (female)
- Breast (male)
- Colon
- Esophagus
- Gall bladder
- Liver (except if cirrhosis or hepatitis B is indicated)

- Ovary
- Pancreas
- Pharynx
- Salivary gland
- Small intestine
- Stomach
- Thyroid
- Urinary bladder

### **General Information**

513-533-6825 dcas@cdc.gov

Josh Kinman SEC Petition Counselor Phone 513-533-6831

jkinman@cdc.gov

Denise Brock NIOSH Ombudsman 636-856-0487 or 636-236-0932

CKO7@cdc.gov

**DCAS** Website

www.cdc.gov/niosh/ocas

# **Questions?**

For more information, contact CDC 1-800-CDC-INFO (232-4636) TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

