

Anthony W. DeMaiori, President
United Steelworkers of America, Local 8031
4510 Indiana Street
Golden, CO 80403

February 15, 2005

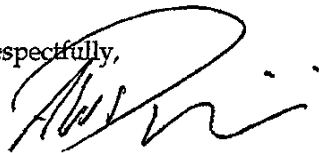
SEC Petition
Office of Compensation Analysis and Support
NIOSH
4676 Columbia Parkway, MS-C-47
Cincinnati, OH 45226

Dear NIOSH Office of Compensation Analysis and Support,

Enclosed please find our original and official Special Exposure Cohort Petition, Form B, and all relevant supporting documentation. This represents our official submittal under law and through the NIOSH Office of Compensation Analysis and Support as required.

Please call to confirm receipt of this document at 303-278-4557. If you have any questions or require additional information, please do not hesitate to contact me at the above number.

Respectfully,



Anthony W. DeMaiori
President

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:

United Steelworkers of America, Local 8031 (Rocky Flats)

Name of Organization

President

Position of Contact Person

D.2 Name of Petition Representative:

A

D.3 Address of Petition Representative:

Street

Apt #

P.O. Box

Golden

Colorado

80403

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):**

Denver Metal Trades Council, United Mineworkers of America, International Union of District 50

Go to Part E

Name or Social Security Number of First Petitioner: Anthony W. DeMaiori, USWA, 8031

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:** Rocky Flats (also Rocky Flats Plant, Rocky Flats Environmental Technology Site, Rocky Flats Closure Project)

E.2 **Locations at the Facility relevant to this petition:**
Facilities where plutonium operations occurred, focusing on but not limited to facilities with known high fired oxide processes or exposures.
Such as Buildings 371, 374, 559, 707, 771, 776, 777, 778, 779 and any others to be identified.

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:**

All - See Tab E.3 for additional information

E.4 **Employment Dates relevant to this petition:**

| | | | |
|--------|-------|-----|-------|
| St art | _____ | End | _____ |
| St art | _____ | End | _____ |
| St art | _____ | End | _____ |

E.5 **Is the petition based on one or more unmonitored, unrecorded, or inadequately monitored or recorded exposure incidents?:** Yes No **See Tab E.5 for additional details.**

If yes, provide the date(s) of the incident(s) and a complete description (attach additional pages as necessary):

This petition is based on multiple unmonitored, unrecorded or inadequately monitored or recorded exposures that are not related to a specific incident. It is our contention that throughout the history of the site it was common practice for incidents in the workplace to be handled at the floor or building level and not officially reported. Some exposure incidents were below the detection thresholds in place at the time which varied greatly over time. This is evidenced by the 2000/2001 Building 771 worker exposure incident in which several workers were found to have received doses that had gone undetected by workplace monitoring. Because there was no incident to tie the dose to, the dose estimates assigned are suspect. Most importantly, this incident provides proof that exposures routinely go undetected. Tab E.5 contains more information on this incident, a copy of the investigation report and details of additional incidents.

Go to Part F

Name or Social Security Number of First Petitioner: Anthony W. DeMaiori, USWA, 8031

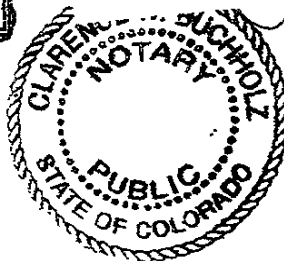
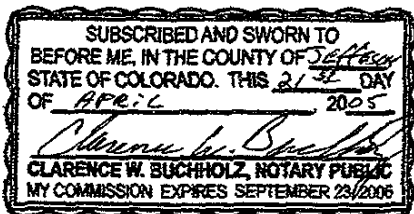
SEC 00030

October 16^{FIC} 2004

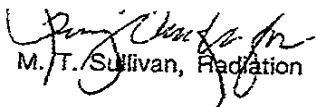
To Whom It May Concern:

The purpose of this letter is to convey facts relevant to the radiation exposure dosimeter program formerly in place at the Rocky Flats Nuclear Weapons Facility/

From _____, until sometime in the latter part of that same year, I was assigned to _____ in Building _____. During said time, my duties included the _____ where radiation dose rates of workers were assessed and recorded. During this period of time, the style of dosimeter badges resembled a "tray" with small compartments used to hold components of each workers badge in place. These trays were disassembled and reassembled on a regular basis and contained a small lithium chip that measured approximately 1/8 to 1/4 of an inch square. These chips were removed from the badges by dosimeter personnel for assessment in an instrument. Because the chips were so small, it required workers to use tweezers to remove the chips. This action often resulted in damage or complete loss of the chip because it would dislodge itself from the end of the tweezers and land in the room. Chips were also lost during the disassembly of badges as components would dislodge themselves and fall to the floor during this process as well. Most of the workers could not find these chips after they had fallen, so the actual dose rate associated with the badge being counted was completely lost. Each day, when I would _____ this room, the workers would sift through the dirt and remove these crystals. They would usually find between 6 and 12 crystals per day. If these crystals were still in good shape, they would be discharged and reused. These crystals were never evaluated for the dose they had been exposed to because they had no way of knowing which crystal belonged to which radiation worker. There were also several instances where as a crystal was being read, the foreman of the group would advise the dosimeter worker that the dose shown was too high to possibly be correct, and the worker was advised to change or delete the reading. Often times, for unknown reasons, chips were soaked in alcohol prior to being read.



INTEROFFICE CORRESPONDENCE

DATE: July 26, 1994
TO: _____
FROM: 
M. T. Sullivan, Radiation Protection, Bldg. 750, X6629
SUBJECT: LIFETIME DOSE LIMITATION AND NEUTRON DOSE RECONSTRUCTION -
MTS-193-94

It was recently determined that neutron doses may have been under-reported or possibly over-reported for certain individuals who were hired prior to _____. Process workers who were exposed to neutrons may not have been monitored for neutrons from _____ until about _____. In addition, the neutron film used to monitor employees in the late 1950's and early 1960's may not have been read properly, thereby either missing some neutron exposure or reporting more neutron exposure than was actually received. The issue appears to be limited to neutron exposures prior to _____.

As a result of these uncertainties, Radiological Health will need to perform dose reconstructions for process workers potentially exposed to neutrons prior to _____. At this time, the effort will be concentrated on those individuals who worked on the chemical process lines in Building _____ prior to _____ since the processes in that building resulted in the highest neutron doses.

You were identified as a candidate for a dose reconstruction because you were hired prior to _____, and you are believed to have worked in Building _____. As the first step in the dose reconstruction process, Radiological Health requires additional information regarding the type of work you performed prior to _____. Attachment 1 is a work history questionnaire. Please fill out the questionnaire in as much detail as possible, and mail it or deliver it to Radiological Health in Building 123.

Attachment 2 is a brief synopsis of this neutron issue, how it was discovered, and the actions Radiation Protection is taking so that your radiation exposure records reflect your exposure to neutrons as accurately as possible.

In addition to the dose reconstructions necessary to correct your exposure records, Radiation Protection has implemented a Lifetime Control Level, as specified in the Department of Energy Radiological Control Manual, Article 212. The Lifetime Control Level is N rem, where N is your age in years. For example, if you are 50 years old, your Lifetime Control Level would be 50 rem. When you become 51 years old, your Lifetime Control Level becomes 51 rem. If your dose is greater than your Lifetime Control Level, you will have an

July 26, 1994
MTS-193-94
Page 2

administrative control level of 100 mrem total effective dose equivalent (internal plus external) additional exposure per year, until your lifetime dose falls below your Lifetime Control Level. If your lifetime dose is below your Lifetime Control Level, you will be allowed to receive up to the EG&G Rocky Flats, Inc., Administrative Control Level (also called Administrative Dose Guideline), currently set at 750 mrem per year.

Your lifetime dose through the end of the Second Quarter is calculated to be rem. This dose includes all of the penetrating dose received at Rocky Flats plus the internal dose based on lung counts and urinalysis data. The additional "missing" neutron dose is estimated to be 15.868 rem. Your total lifetime dose, including the estimated neutron dose is rem. Your lifetime dose exceeds your Lifetime Control Level of rem, therefore, you are limited to mrem per year additional exposure.

If you have further questions, please contact M. R. Prochownik for assistance. Mike can be reached at Extension 5853.

SCB:cmk

Attachments:
As Stated

cc:
F. J. Furman
Health Physics File
Supervisor

August 18, 2003

United Steelworkers of America
AFL CIO CLC
Local Union 8031
P.O. Box 745370
Arvada, Colorado 80006-5370

Dear Steelworkers;

IN response to your letter of July 22, 2003 I can offer the following information:

I have never heard of cancer being caused from Radiological exposure. The Doctor that treated me at National Jewish Hospital never discussed these diseases with me.

In I was in an explosion that shattered the enclosure from the mixing tube which contained Plutonium Nitrate and 50% Hydrogen Peroxide. The explosion was caused by the refrigeration equipment not controlling the heat from the mixture.

I spent a week at the First Aid Station at Rocky Flats because my body was so contaminated. When I went home I carried sheets and pillow cases with me and returned them the next day. At this time all feces and urine were collected and tested.

John Mann an engineer at the first aid station worked around the clock to design a body counter, this being the first in the United States. I don't know what the readings were on the contamination of my body at this time.

In May of this year (2003) I had my latest body count and still show 12 body burdens in the chest area, consequently I take Colchicine twice daily and will need it the rest of my life. This is in replacement of the Prednisone I had taken previously until Dr. Newman of National Jewish Hospital said I shouldn't take any more of it.

The protective gear I wore at that time was white coveralls and safety glasses. The explosion was so great it blew the safety glasses off my face. I don't know what happened to the film badge.

The operation I was doing with Plutonium Nitrate and Peroxide was to precipitate the Plutonium from the liquid. This was in a dry box and never required any other protective equipment.

Yours. Truly.

Worker Testimony Letters

We have included the following letters as relevant testimony from a just a handful of our workers who have either had their doses inaccurately reported, had unmonitored exposures or have contracted cancer after receiving plutonium exposure from Rocky Flats. These letters are included as part of our petition. The United Steelworkers of America, Local 8031 has received numerous letters and verbal statements from its membership in relation to their jobs, their work experiences, exposures they may have received, and their current health. Listed below is a summary of some of the letters we have received as well as a photocopy of the original letters.

- A chemical operator in _____ / was involved in an explosion resulting in an exposure to plutonium nitrate and 50 percent hydrogen peroxide. The only protective clothing he had on was white coveralls and safety glasses. He spent a week in medical and never knew the levels of contamination on his body. However his last body count in 2003 showed 12-body burdens.
- An _____ who worked in Buildings _____ and _____ X-rayed pits and other nuclear materials in high radiation areas. He wore a lead apron and gloves. The dosimetry badge was required to be worn under the lead apron. He now has cancer of the esophagus.
- A _____ who worked in Buildings _____ and _____ was exposed to high radiation areas and never wore respiratory protection when handling parts. In fact, they used to eat and drink in their work areas. He now has cancer in the nasal pharynx, which then went into the lymph nodes of his neck. These exposures were unmonitored and unrecorded.
- A handyman working in _____ was informed that the trailer he was in charge of became contaminated. He did not wear a dosimeter or any respiratory protection while working in this area. He was later asked to submit a fecal sample a year after the event. The sample was sent to an off site subcontractor laboratory and the results invalidated by Internal Dosimetry. This is another example of unmonitored exposure.
- _____ worker was exposed to very high radiation level packages of plutonium oxides, salts, americium, etc. and was often required to wear double lead aprons and 60 or even 90 mil leaded gloves, yet he still had numerous "No Current Data Available" dosimeter badge reports. So his exposure was going unrecorded. After being sent to a low-level exposure job at the solar ponds he was informed that he had received a positive inhalation and that it must have come from his days as a worker in _____
- An employee describes how certain contamination events would require the removal of clothing and how these events would not be recorded. He also describes that radiation was coming through a wall where he hung his dosimeter. He has been diagnosed with a _____ an exceedingly rare form. He also reports having met a former Rocky Flats guard who has the same form of tumor. Efforts are being made to track down the former guard to obtain information on his work history.

The USWA, Local 8031 reserves the right to provide additional information beyond that which is included in this petition and in support of our ability to obtain Special Exposure Cohort designation for the Rocky Flats class of workers.

- An employee describes his experiences with both the Building and _____ es. He also presents a list of people that he has worked with that has either died of cancer or has had cancer.
- A surviving spouse describes her husbands work activities and job titles. He left Rocky Flats in _____, and died of colon cancer or _____ She has records of unreported and unrecorded incidents her deceased husband was involved in.

The USWA, Local 8031 reserves the right to provide additional information beyond that which is included in this petition and in support of our ability to obtain Special Exposure Cohort designation for the Rocky Flats class of workers.

July 30, 2003

United Steelworkers of America, Local 8031
P.O. Box 745370
Arvada, CO 80006-5370
ATTN: Anthony W. DeMaiori

RE: Energy Employees Occupational Illness Compensation Program Act of 2000

Dear Tony:

In response to your letter dated July 22, 2003, I am retired from Rocky Flats after _____ years and have been diagnosed with cancer of the larynx (Esophagus).

Most of the time at Rocky Flats _____ I worked in _____. As an _____ Tech, I spent a large portion of my time x-raying pits and other nuclear materials in _____ and _____ buildings and shelf studies of pits in _____ building. When working with high-radiation producing items we were required to wear lead aprons and gloves. From approximately _____ while x-raying the product we were required to wear our dosimetry badges under the lead aprons and gloves. My cancer is in an area left unprotected by the aprons.

Also, it was a very common occurrence that my dosimetry (especially the film badge) readings did not match my job duties. Some exchange periods when I had no or very little exposure would read higher than times when I was exposed every day. I was aware of high exposure times because we were required to wear radiation detectors or alarms - we called them chirpers. The chirpers chirped faster when you were getting more exposure. Production was quite heavy at that time and I felt management played with the numbers to keep techs working in the higher radiation areas and not rotating in people that needed some training. Over the years, my film badge exchange area did not always match up with my assigned work area.

Also _____ and _____ buildings had a very high incidence of radon gas. We techs would frequently lose our protective clothing when leaving our work area. The Health Physics monitors would attribute it to radon gas. At this time, it was not easy to tell the difference between Pu contamination and radon gas. In _____ some radon readings were taken in _____ building (after some possible contamination problems) and it was found to have very high levels of radon.

If you need any more information or have more information for me, please contact me.

Very truly yours,

8/1/03

I worked at Rocky Flats from _____ until _____
Most of my time was spent in building _____ and _____. At no time
did we wear protective equipment other than white coveralls in
building _____

I worked as a _____ in the storage area where uranium
parts were stored. It was a high radiation area. The whole
building was considered "high radiation". We never wore a half
mask when storing or handling parts, or at any time.

We used to eat and drink in our work area.

Building _____ where I worked for several years, was also a high
radiation area. Again, the only protective equipment we wore
were white coveralls.

There were stacks of uranium ingots. Our work area was where
the ingots were received and stored.

We took precautions to not contaminate the trailers as we
loaded, but no precautions were taken to protect ourselves,
such as a half mask or in some cases a full face mask, were never
worn to protect against the oxidation dust and whatever else
was floating around. Incidentally, my TLD readings were always
the same (within the acceptable limits). I have copies if
needed.

As a result of my years in these two buildings, 1 year after I
retired I was diagnosed with cancer in the _____ which
went into the _____ in my neck.

I hope this will help. All the information on my cancer is
in my medical records. If more information is needed I will
be glad to furnish what I can.

Judy Yeater

RE: Paragraph explaining exposure incident

From [redacted] to [redacted], I worked in the [redacted] On [redacted]
I was informed that [redacted] had radioactive contamination throughout the trailer at
which time I filed a report with my supervisor. On [redacted] I had a request to
submit a fecal sample (one year after incident) and dosimetry sent my sample off site to a
subcontractor and the results dosimetry received back were refused.



INTEROFFICE CORRESPONDENCE

DATE: November 16, 1993

TO:

FROM: D. J. Walraven, ^{DJW} Internal Dosimetry, Bldg. 123, X6182

SUBJECT: USE OF SUBCONTRACTOR BIOASSAY DATA - DJW-031-93

This letter is to update you on the status of the bioassay samples that you submitted as a personal request on [redacted]. Due to extended down-time of the Analytical Laboratory located in Building 123, your fecal samples were sent to a subcontractor laboratory for analysis. The results from the subcontractor laboratory did not meet all of the acceptance criteria established by Radiological Health and therefore will not be used as valid data.

At this time, we do not have any valid data on which to evaluate your personal request case. Therefore, we would like to offer you the option of resubmitting fecal samples. Although your original request was made on [redacted] the fecal samples you submit today can still provide some useful information. The samples that you resubmit will either be analyzed onsite or at a different offsite laboratory.

Keep in mind that the decision to submit personal request bioassay samples is yours, and you may choose not to submit any additional samples. If you do not submit any additional fecal samples, then your personal request case will be closed and no further follow-up will be required.

Please let me know if you intend to resubmit fecal samples. We can prepare the bioassay kits and sample submission cards for you. If you have any questions about your case, please contact me at Extension 6182 or S. C. Baker, Manager of Internal Dosimetry, at Extension 7439.

djw

cc:
Health Physics File
Internal Dosimetry

SUPERVISOR'S ACCIDENT INVESTIGATION

EMPLOYEE INFORMATION

1. Name _____
2. Employee Number _____
3. Age _____ Sex M
4. Home Address _____
_____ Zip _____
5. Home Phone _____
6. Occupation _____
7. Length of Present Employment
 Under 3 months
 3-12 months Over 12 months
- Experience on this job/equipment
 Under 3 months
 3-12 months Over 12 months

GENERAL INFORMATION

1. Accident Type Injury/Illness Vehicle
 Property Damage Other
2. Department _____
3. Date of Occurrence UNDETERMINED Time (Military) _____ Shift _____
4. Accident Occurred Indoors Outdoors
5. On Employer's Premises Yes No
6. Specific Location _____

INCIDENT DESCRIPTION

IF ADDITIONAL SPACE IS NEEDED, PLEASE USE A SEPARATE SHEET AND REFER TO THE APPLICABLE SUBJECT MATTER.

1. Witnesses to Incident - Provide Name, Supervisor, and Extension _____

2. What was employee doing when injured? Be specific; if using tools or equipment, name them and tell how they were being used.

Employee States: EMPLOYEE WAS WORKING IN _____, AND SINCE THEY

HAVE FOUND CONTAMINATION IN THAT AREA. I WANTED TO GET THIS ON
RECORD THAT I WORKED IN THAT BUILDING DURING THAT TIME.

Witness Description: _____

3. Sequence of Events/How did the accident occur? Begin with initiating events and end with nature and extent of injury/damage, indicating part of body affected.
Employee States: _____

_____ WORKING IN _____
_____ AND _____ SINCE THEN CONTAMINATION HAS BEEN
FOUND. I JUST WANTED IT ON RECORD.

Witness Description: _____

4. Accident Causes

a. Conditions that existed at the time of the accident: _____ NORMAL _____

b. Actions on the part of the employee that contributed to the occurrence: _____ NONE _____

c. Factors influencing a or b: _____

5. Corrective Actions

a. Immediate actions taken to prevent reoccurrence: _____ T690K CLOSED _____

b. Permanent actions planned: _____

c. To be completed by: _____ Implementation Date _____

6. Accident Investigator: MARALANE BLAIR _____ Date: _____

Job Title: FOREMAN _____ Extension: 5888 P.1222

7. Supervisor responsible for corrective action: _____

Date: _____ Extension: _____

PERSONAL/PRIVILEGED INFORMATION

NAME: _____ JOB TITLE: _____ COMPANY: _____
BUILDING: _____ EXTENSION: _____ EMPLOYEE/SS # _____

INJURY DATE: Undetermined DAY: _____ TIME: _____ (military) TIME ON PLANTSITE: _____ M _____ W

REPORTED DATE: _____ DAY: Thurs TIME: 1540 (military) TIME ON JOB: LY M _____ W

LOCATION OF ACCIDENT: _____ SUPERVISOR / FOREMAN: See Judson EXT: 5888
Woods Bl. M Blau

PATIENT'S DESCRIPTION OF ACCIDENT: we were working in _____ and since then they have found contamination in that area. And I wanted to get this on record that I worked in that building during that time. OBJECT/SUBSTANCE DIRECTLY INVOLVED: _____

DESCRIPTION OF INJURY: - no S/s but wanted this incident on his record.

WEIGHT (LBS): _____
SAFETY EQUIPMENT USED: Y N
GLASSES GLOVES SHOES
OTHER: _____
LOSS OF CONSCIOUSNESS: Y N
WORK RELATED: Y P
X-RAY TAKEN: Y N
X-RAY RESULT: POS NEG

ASSESSMENT/DIAGNOSIS: _____

RADIA/CONTAM INVOLVED: _____ Y N P
TYPE: _____
INITIAL COUNT: _____ nCi or BKG
FINAL COUNT: _____ nCi or BKG
WOUND COUNT BY: _____

LAB DATA SUMMARY

INVALID DATA

Name:
Employee#:

| Sample Type | Lab Sample Number | Date Submitted | Result ^{dpm} | Error | Lc (dpm) | %Chemical Recovery |
|-------------|-------------------|----------------|-----------------------|-------|----------|--------------------|
| Fecal Pu | 5635 | | | | | |
| Fecal Am | 5635 | | .604 | .039 | .012 | N/A |
| Fecal Pu | 5634 | | .063 | .009 | .030 | N/A |
| Fecal Am | 5634 | | .122 | .023 | .061 | N/A |
| Fecal Pu | 5372 | | -.019 | .006 | .094 | N/A |
| Fecal Am | 5372 | | .535 | .158 | .599 | |
| | | | 0.000 | 0.000 | | |

SAMPLE NUMBER: 9200117
 SAMPLE NUMBER: 5635
 NUMBER: 174
 SAMPLE TYPE: FECAL

INVALID DATA

Rev. 8-18-93
 SEC 00030

| ISOTOPE | ANALYSIS DATE | OBSERVED ACTIVITY | UNITS | ERROR (STD. DEV.) | DECISION LEVEL | RECOVERY (%) | VALIDITY CODE |
|---------|---------------|-------------------|----------|-------------------|----------------|--------------|---------------|
| I-243 | | 0.0000 | DPM/SAMP | 0.0000 | | 104.99 | VALID |
| I-241 | | 0.0627 | DPM/SAMP | 0.0091 | 0.02986 | N/A | VALID |
| I-242 | | 0.0000 | DPM/SAMP | 0.0000 | | 83.11 | VALID |
| I-239 | | 0.6040 | DPM/SAMP | 0.0386 | 0.01248 | N/A | VALID |

SB SAMPLE NUMBER: 9200338
 PARENT SAMPLE NUMBER: 8500
 TECH NUMBER: 174
 SAMPLE TYPE: FECAL

| ISOTOPE | ANALYSIS DATE | OBSERVED ACTIVITY | UNITS | ERROR (STD. DEV.) | DECISION LEVEL | RECOVERY (%) | VALIDITY CODE |
|---------|---------------|-------------------|----------|-------------------|----------------|--------------|---------------|
| I-243 | | 0.0000 | DPM/SAMP | 0.0000 | | 59.27 | VALID |
| I-241 | | 1.3944 | DPM/SAMP | 0.0638 | 0.04014 | N/A | VALID |
| I-242 | | 0.0000 | DPM/SAMP | 0.0000 | | 80.11 | VALID |
| I-239 | | 9.4820 | DPM/SAMP | 0.2313 | 0.01298 | N/A | VALID |

SB SAMPLE NUMBER: 9200339
 PARENT SAMPLE NUMBER: 5527
 TECH NUMBER: 174
 SAMPLE TYPE: FECAL

| ISOTOPE | ANALYSIS DATE | OBSERVED ACTIVITY | UNITS | ERROR (STD. DEV.) | DECISION LEVEL | RECOVERY (%) | VALIDITY CODE |
|---------|---------------|-------------------|----------|-------------------|----------------|--------------|---------------|
| I-243 | | 0.0000 | DPM/SAMP | 0.0000 | | 78.84 | VALID |
| I-241 | | 0.0364 | DPM/SAMP | 0.0082 | 0.03429 | N/A | VALID |
| I-242 | | 0.0000 | DPM/SAMP | 0.0000 | | 80.38 | VALID |
| I-239 | | 0.1022 | DPM/SAMP | 0.0190 | 0.01302 | N/A | VALID |

PACKED BY: Raven Rausch

DATE: 1/20/93

SAMPLE NUMBER:9200347
 T SAMPLE NUMBER:8411
 NUMBER: 175
 PE :FECAL

INVALID DATA

| DATE | ANALYSIS DATE | OBSERVED ACTIVITY | UNITS | ERROR (STD. DEV.) | DECISION LEVEL | RECOVERY (%) | VALIDITY CODE |
|------|---------------|-------------------|----------|-------------------|----------------|--------------|---------------|
| 13 | | 0.0000 | DPM/SAMP | 0.0000 | | 55.89 | VALID |
| 1 | | 9.0000 | DPM/SAMP | 0.2485 | 0.09361 | N/A | VALID |
| 2 | | 0.0000 | DPM/SAMP | 0.0000 | | 69.48 | VALID |
| 9 | | 84.9000 | DPM/SAMP | 1.7557 | 0.05629 | N/A | VALID |

SAMPLE NUMBER:9200348
 T SAMPLE NUMBER:5594
 NUMBER: 175
 E TYPE :FECAL

| DATE | ANALYSIS DATE | OBSERVED ACTIVITY | UNITS | ERROR (STD. DEV.) | DECISION LEVEL | RECOVERY (%) | VALIDITY CODE |
|------|---------------|-------------------|----------|-------------------|----------------|--------------|---------------|
| 3 | | 0.0000 | DPM/SAMP | 0.0000 | | N/A | LOST |
| 1 | | 0.0000 | DPM/SAMP | 0.0000 | 0.00000 | N/A | LOST |
| 2 | | 0.0000 | DPM/SAMP | 0.0000 | | N/A | LOST |
| 9 | | 0.0000 | DPM/SAMP | 0.0000 | 0.00000 | N/A | LOST |

SAMPLE NUMBER:9200349
 T SAMPLE NUMBER:5634
 NUMBER: 175
 E TYPE :FECAL

| DATE | ANALYSIS DATE | OBSERVED ACTIVITY | UNITS | ERROR (STD. DEV.) | DECISION LEVEL | RECOVERY (%) | VALIDITY CODE |
|------|---------------|-------------------|----------|-------------------|----------------|--------------|---------------|
| 3 | | 0.0000 | DPM/SAMP | 0.0000 | | 78.72 | VALID |
| 1 | | -0.0192 | DPM/SAMP | -0.0059 | 0.09351 | N/A | VALID |
| 2 | | 0.0000 | DPM/SAMP | 0.0000 | | 62.41 | VALID |
| 9 | | 0.1218 | DPM/SAMP | 0.0226 | 0.06103 | N/A | VALID |

ED BY: Brown Bergelt

DATE: 1/20/93

AEB SAMPLE NUMBER: 9200303
 CLIENT SAMPLE NUMBER: 5558/
 BATCH NUMBER: 170
 SAMPLE TYPE : FECAL

INVALID DATA

| ANALYTE | ANALYSIS DATE | OBSERVED ACTIVITY | UNITS | ERROR (STD. DEV.) | DECISION LEVEL | RECOVERY (%) | VALIDITY CODE |
|---------|---------------|-------------------|----------|-------------------|----------------|--------------|---------------|
| AM-243 | | 0.0000 | DPM/SAMP | 0.0000 | | . | VALID |
| AM-241 | | 7.0756 | DPM/SAMP | 0.1332 | | . | VALID |
| PU-242 | | 0.0000 | DPM/SAMP | 0.0000 | 0 | 48.8 | VALID |
| PU-239 | | 0.1406 | DPM/SAMP | 0.0382 | 0.12581 | . | VALID |

AEB SAMPLE NUMBER: 9200304
 CLIENT SAMPLE NUMBER: 5468/
 BATCH NUMBER: 170
 SAMPLE TYPE : FECAL

| ANALYTE | ANALYSIS DATE | OBSERVED ACTIVITY | UNITS | ERROR (STD. DEV.) | DECISION LEVEL | RECOVERY (%) | VALIDITY CODE |
|---------|---------------|-------------------|----------|-------------------|----------------|--------------|---------------|
| AM-243 | | 0.0000 | DPM/SAMP | 0.0000 | | . | VALID |
| 41 | | 0.0000 | DPM/SAMP | 0.0000 | | . | VAI |
| PU-242 | | 0.0000 | DPM/SAMP | 0.0000 | 0 | 41.70 | VALID |
| PU-239 | | 0.0881 | DPM/SAMP | 0.0497 | 0.14412 | . | VALID |

AEB SAMPLE NUMBER: 9200305
 CLIENT SAMPLE NUMBER: 5372/
 BATCH NUMBER: 170
 SAMPLE TYPE : FECAL

| ANALYTE | ANALYSIS DATE | OBSERVED ACTIVITY | UNITS | ERROR (STD. DEV.) | DECISION LEVEL | RECOVERY (%) | VALIDITY CODE |
|---------|---------------|-------------------|----------|-------------------|----------------|--------------|---------------|
| AM-243 | | 0.0000 | DPM/SAMP | 0.0000 | | . | VALID |
| AM-241 | | 0.0000 | DPM/SAMP | 0.0000 | | . | VALID |
| PU-242 | | 0.0000 | DPM/SAMP | 0.0000 | 0 | 45.0 | INVAL |
| PU-239 | | 0.5352 | DPM/SAMP | 0.1576 | 0.59876 | | INVAL |

ANALYZED BY: Robert R. ...

DATE: 5-17-97



A Jacobs Engineering Group Company

MEMORANDUM

DATE: 8/31/03

TO: United Steel Workers of America, Local 8031

FROM:

SUBJECT: Special Cohort Status

I was hired on [redacted] as a [redacted] I had numerous "No Current Data Available" badge reports from my older style [redacted] (with the badge attached) while working in the production side of the building, as well as NDA. I worked in [redacted] from [redacted] to about [redacted] and then was assigned to [redacted] when I transferred to the Solar Pond Clean out in the Chemical Operator Treatment group. As a worker in [redacted] I worked in the [redacted] and most of my work was for production staging of Pu oxides, salts, Am, etc. for all the production lines in the building. I also transferred material to molten salts in [redacted] movement of material to security vaults in [redacted] and [redacted] and packaged material for shipment around plant site in the 10 gallon drums. This job had a very high rad dose for my TLD and came back often as No Current Data Available on my report. When this happened management moved me for a week or two to a lower rad area (ie. [redacted] then back out to the staging job. Before I transferred out of the job to a lower rad job, Management required me to wear double lead aprons and 60 or even 90 mil lead gloves to stage and transport material to the areas. My TLD's, at times, still came back as No Current Data Available.

I started work at the [redacted] and involved running equipment to fill tri-wall boxes with cement and sludge from the solar ponds. The ponds had a variety of chemicals and low level radioactive waste that had accumulated in them since the [redacted] Our PPE consisted of the white cotton coveralls and leather or rubber gloves. Half mask respirators were not required to be worn but were available if the worker chose to wear them. The process created dust as the Pond Crete dried and had "normal" dust associated from being outside. Workers routinely washed small spills of Pond Crete and sludge out of the building and process area back into pond 207A. I received a lung burden while at the ponds and after investigation, management said I received it in [redacted] I have always thought it strange why my lung count was clean from [redacted] production days and then suddenly had a lung burden in a low level area and why it took so long to show up if indeed I did get an inhalation in [redacted] Years later chronic beryllium disease has been associated with workers at the ponds and in later years of production at the Solar Ponds, much more administrative and engineered contamination control were used than when I worked there until [redacted]

In [redacted] moved to [redacted] to help with the liquid waste shipments from all the production buildings on plant site. Each day involved pumping liquids from various buildings to 374 building processes. Most of my TLD reports had actual readings associated with them and were with the newer type TLD.

In [redacted] I moved to [redacted] waste water plant and have been here since. No TLD's have been required since I have been here. I still think that tests should be done on our dried sludge for rad, beryllium, asbestos etc. in that most of the production buildings did have restrooms in the production areas.

Sincerely:

United Steelworkers of America
Local 8031
PO Box 745370
Arvada, CO 80006-5370

August 10, 2003

RE: Energy Employees Occupational Illness Compensation Act of 2000
Special Exposure Cohort

The dose reconstruction study at Rocky Flats will not provide all the exposure due to problems of not collecting all the data. While in Building [redacted] had my anti-contamination clothing removed due to contamination. Contamination that was washed off your body was not always reported and didn't show up on all radiation monitors.

Respirators were worn when working in contamination areas. Clothing was removed as you left the room or if an alarm went off. Health Protection people would then monitor you. This was not recorded and wouldn't show up on a TLD.

For Building [redacted] the TLDs were not worn all day, but posted on the wall until you were going to enter the inner facility. There was radiation found coming through the walls of several of the office spaces a few times that was not captured for dose.

I have a [redacted] a high-grade (Grade IV) tumor that is very aggressive; in fact, it is the most fatal form of that exists. The average life expectancy with glioblastoma multiforme is approximately 54 to 65 weeks.

Sincerely,

To Whom It May Concern:

Working at Rocky Flats for _____ years and working in _____ and _____ uilding where they processed plutonium you could expect to get some internal contamination. I worked in _____ building and the foreman _____ all got cancer and died. I met _____ at Dr. Schafer's office while he and I were taking chemotherapy for cancer and I know it was from working at Rocky Flats.

If you don't believe that, go to any Nuclear Weapons plant and walk around while the alarms go off and not know what amount of radiation you absorbed either internally or externally. If the alarms went off, you could be exposed if the contamination went from you to the alarm. We were guinea pigs. Working with a respirator on for hours you could dump the liquid out of the respirator. Does it seal as good? Who knows? You could bump your respirator while cleaning pipes overhead for an hour and breathe some plutonium.

I am also giving you some of the records of my contamination. These are the contaminations that needed to be decontaminated at medical. Many other times contamination was washed off in the building and you weren't sent to medical. A lot of people exposed to plutonium got cancer.

We were also exposed to Carbon Tetrachloride, Perchlorethylene, Trichlorethylene, and many other chemicals and metals.

Next, take a look at what my cancer looks like. I also had _____ out of _____ that were cancerous.

HEALTH PHYSICS RECORD OF INVOLVEMENT

Name _____

Man Number _____

| Date | Time | Description | Gamma Spec. Results (ug) | | Air Sample Results (d/m/M ³) + Volume | Health Physic: Super. |
|------|------|--|--------------------------|-------|--|-----------------------|
| | | | Initial | Final | | |
| | 0900 | Broke the skin without puncturing the surgeons glove on the medial area, posterior surface, 2nd finger, right hand while working at the trough dissolver in room 149. No surface contamination noted. Sent to Medical for treatment. | None | None | Routine less than 2.25 24.42 M ³ | <i>JSD</i> |
| | 1310 | Contaminated right wrist to 2,000 c/m from decontamination of spill at tank #315. Sent to Medical for decontamination. | None | None | Special 67.81 27.17 M ³ | <i>JSD</i> |

with Bod.

HEALTH PHYSICS RECORD OF INVOLVEMENT

Name _____

Man Number _____

| Date | Time | Description | Gamma Spec. Results (ug) | | Air Sample Results (d/m/M ³) + Volume | Health Physics Super. |
|------|------|---|--------------------------|-------|---|-----------------------|
| | | | Initial | Final | | |
| | | <i>metal Prod.</i> | | | | |
| | 1055 | Laceration on second knuckle, anterior surface, second finger of his left hand. No surface contamination noted. Sent to Medical for treatment. | None | None | Routine 7.47 81.50 M ³ | <i>JH</i> |
| | 1115 | Contamination of face, hands, and neck to 100,000 c/m. Nose smear was taken showing 60-90 dpm. Sent to the showers for decontamination which was completed in the building. Took urine samples home to be returned on | None | None | Routine 1618.62 27.17 M ³ | <i>JH</i> |

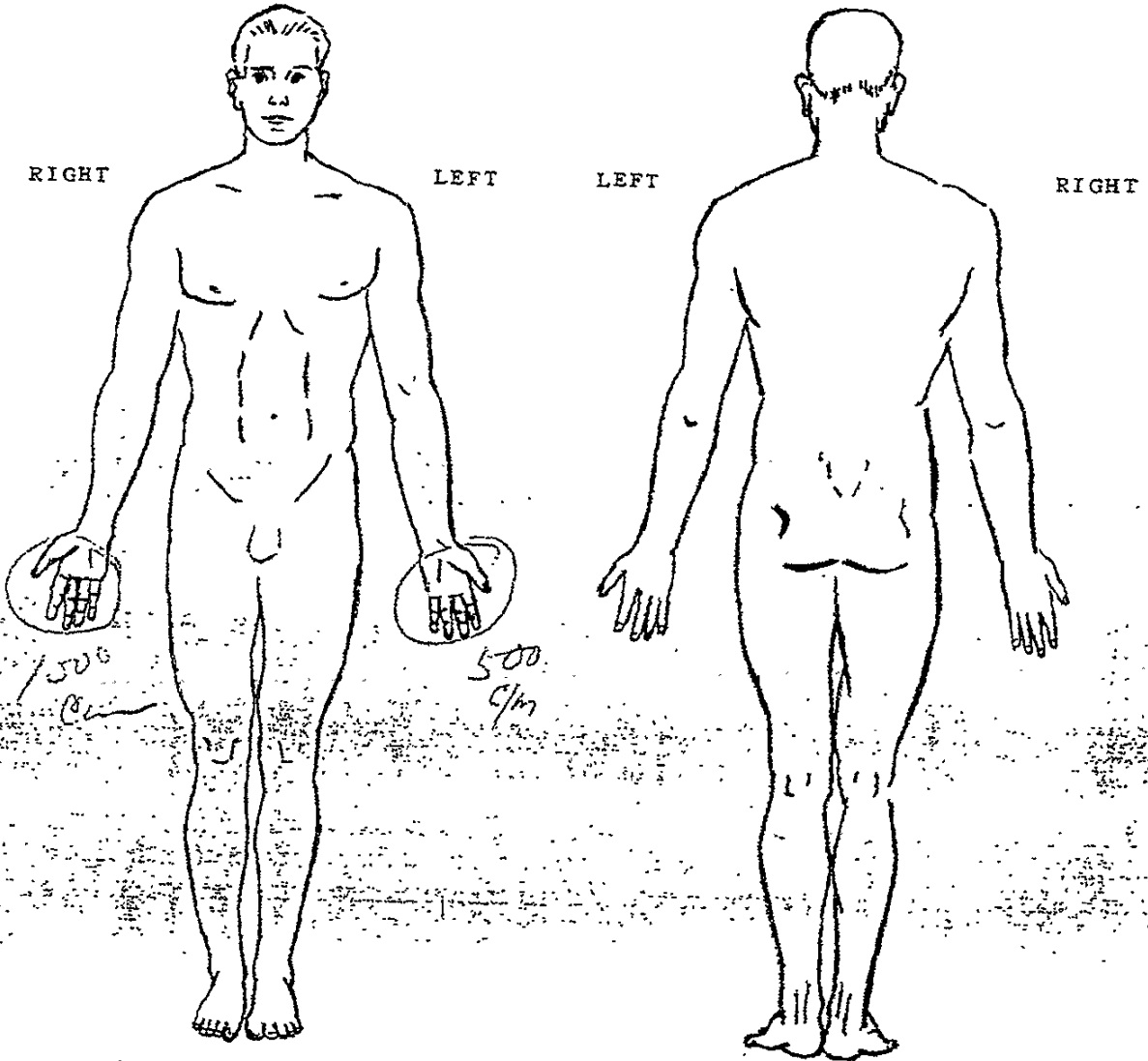
RADIO-ACTIVE SKIN CONTAMINATION REPORT
Medical Department

NAME: _____ MAN NO: _____ DATE: _____

TIME REPORTED: 2:05PM TIME RELEASED: 2:10PM OCCUPATION: Monitor

Bldg. Injured: _____ Supt. of Employee: _____ Bldg: _____

EXTENT AND AREAS OF SKIN CONTAMINATION AND INITIAL COUNT



SHOW ANY REMAINING ALPHA COUNT IN RED

ALPHA COUNT Background

MONITOR M. Castro

MEDICAL Mary Braswell, RN

Authorized Signature

DISTRIBUTION: WHITE Doctor's File
GREEN Supervisor

PINK Patient's File
YELLOW Health Physics

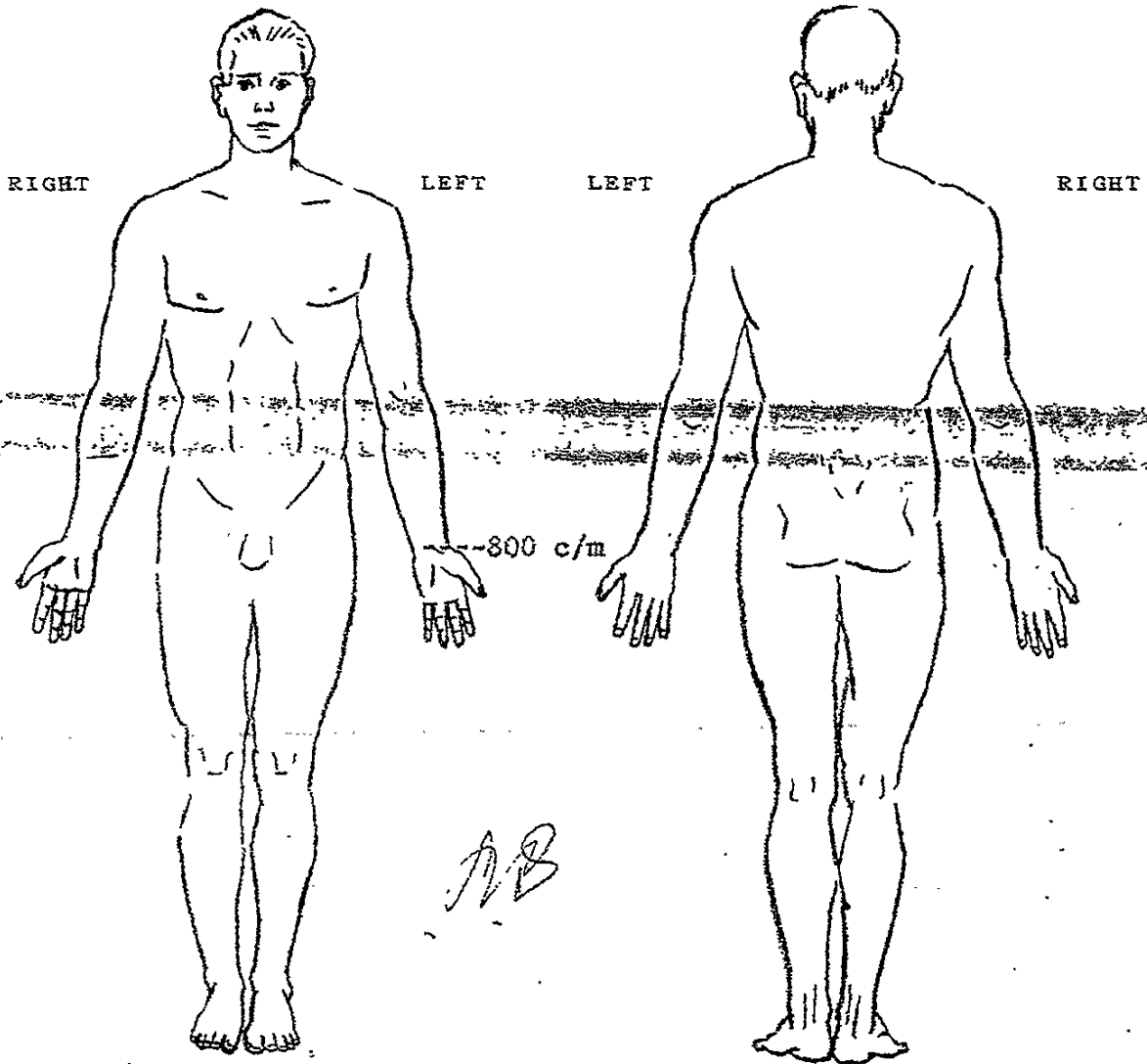
RADIO-ACTIVE SKIN CONTAMINATION REPORT
Medical Department

NAME: _____ MAN NO: _____ DATE: _____

TIME REPORTED: 2:05pm TIME RELEASED: 2:15pm OCCUPATION: Monitor

Injured: _____ Supt. of Employee: _____ Bldg: 3

EXTENT AND AREAS OF SKIN CONTAMINATION AND INITIAL COUNT



SHOW ANY REMAINING ALPHA COUNT IN RED

ALPHA COUNT Background

MONITOR _____

MEDICAL Margaret Walker, RN
Authorized Signature

DISTRIBUTION: WHITE Doctor's File
GREEN Supervisor

PINK Patient's File
YELLOW Health Physics

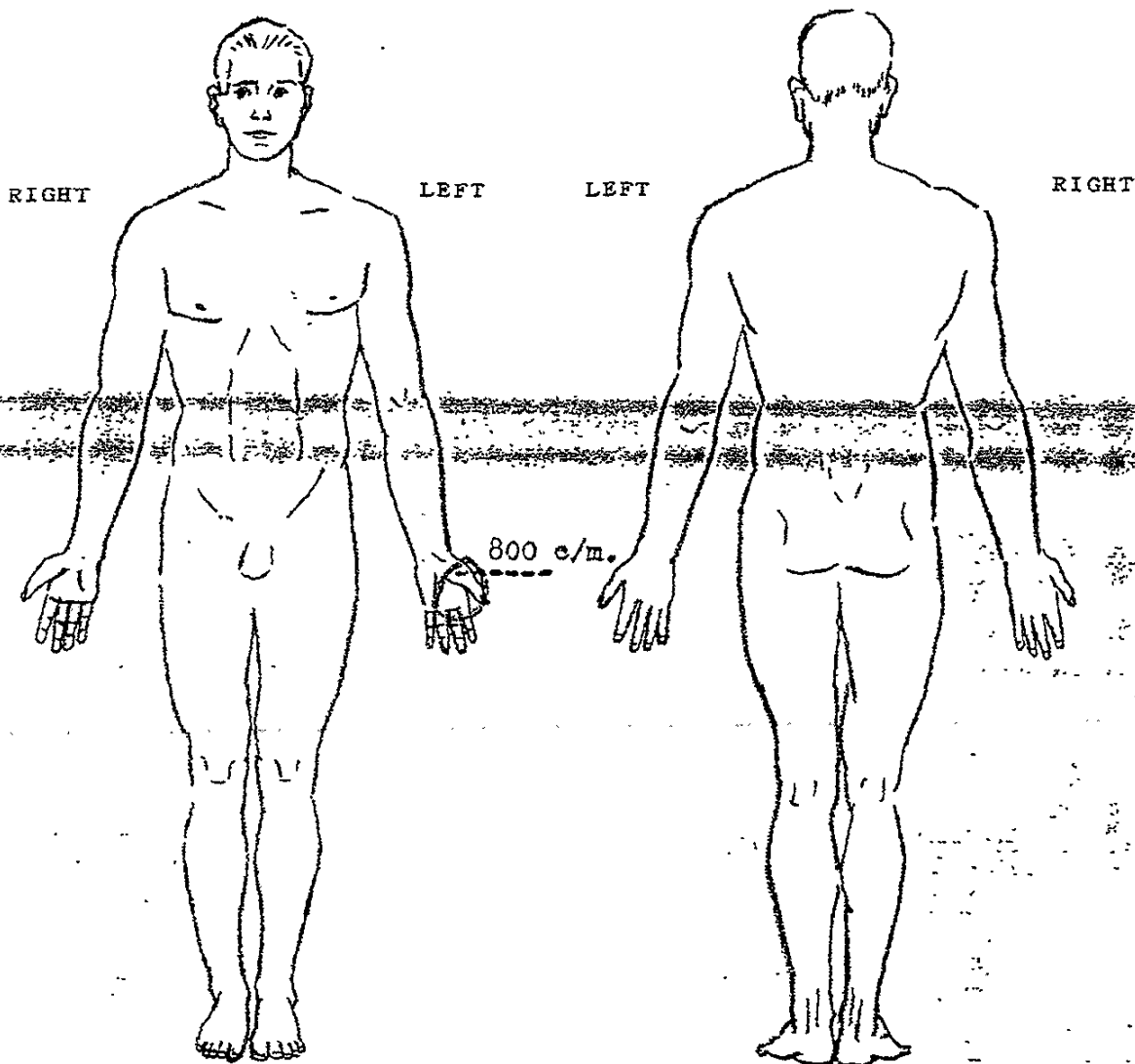
RADIO-ACTIVE SKIN CONTAMINATION REPORT
Medical Department

M. _____ MAN NO: _____ DATE: _____

E REPORTED: 12/14. TIME RELEASED: 12:10 A.M. OCCUPATION: Monitor

g. Injured: _____ Supt. of Employee: _____ Bldg: 71

EXTENT AND AREAS OF SKIN CONTAMINATION AND INITIAL COUNT



SHOW ANY REMAINING ALPHA COUNT IN RED

ALPHA COUNT _____

MEDICAL _____

MONITOR _____

Authorized Signature
awk

DISTRIBUTION: WHITE Doctor's File
GREEN Supervisor

PINK Patient's File
YELLOW Health Physics

HEALTH PHYSICS REPORT OF ACCIDENT OR POSSIBLE EXPOSURE

(Print with blue ballpoint pen, use "x"
where applicable, use military time)

Name _____

Man No. _____

Date _____

Building _____

cc to: C.R. Johnson

RADIATION MONITOR'S REPORT:

Individual was sent to Medical at 1315 hrs. for: Treatment of wound _____
Further decontamination , Other reasons (describe): _____

Description of wound:

Abrasion _____ Puncture _____
Laceration _____ Burn _____

For Hand, "X" Diagram

Right Hand _____ Left Hand
Front of Hand Back of Hand _____

Other body locations affected (describe): _____

Contamination level(s): 1000 c/m

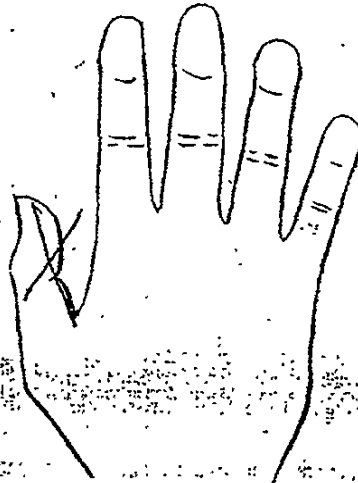
Gamma spectrometer count requested: _____

Yes _____ No

Area of occurrence (Room, box no.): _____

114 Line 2

Radiation Monitor's Signature: _____



HEALTH PHYSICS FOREMAN'S REPORT

(Record additional injury information or other
condition of unusual personnel exposure)

Gamma spectrometer results: Initial _____ μ g; Final _____ μ g

Other comments on injury: _____

Unusual Personnel Exposure: _____

Area of occurrence (Room, box, etc.): _____

Description of condition and cause: _____

Welding leaks in Exhaust Line

Urine sample requested for: U _____, Pu _____, Am _____

Pertinent contamination levels (designate): _____

Foreman's Signature: J.D. Hough

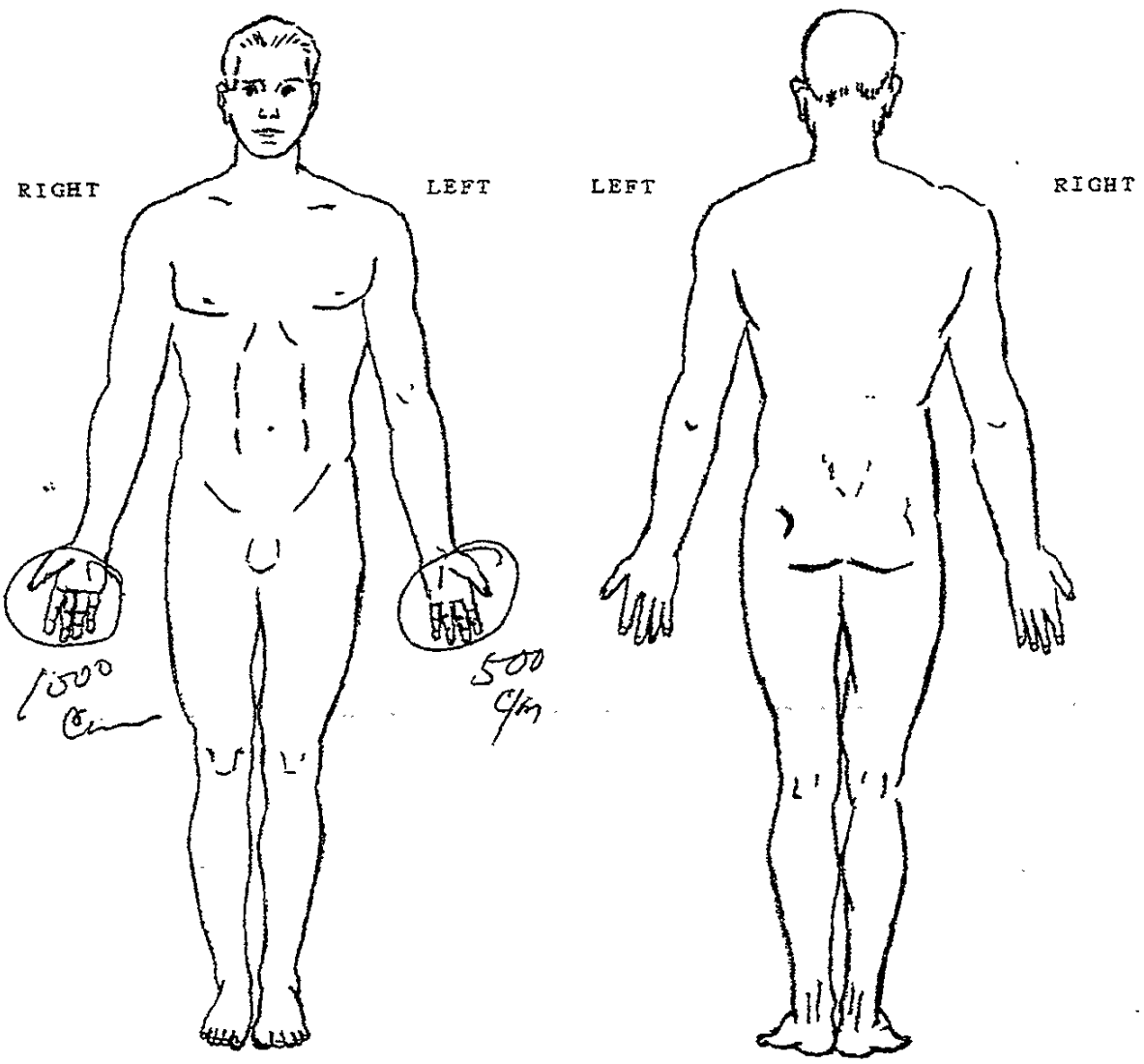
RADIO-ACTIVE SKIN CONTAMINATION REPORT
Medical Department

NAME _____ MAN NO: _____ DATE: _____

REPORTED: 2:05PM TIME RELEASED: 2:10PM OCCUPATION: Monitor

Injured: _____ Supt. of Employee: Ed. Childers Bldg: 776

EXTENT AND AREAS OF SKIN CONTAMINATION AND INITIAL COUNT



HOW MANY REMAINING ALPHA COUNT IN RED

IN _____ COUNT _____ Background _____

MONITOR M. Castro

MEDICAL Max Bisswell, RN
Authorized Signature

DISTRIBUTION: WHITE Doctor's File
GREEN Supervisor

PINK Patient's File
YELLOW Health Physics

Claims Processing File Number: Office of Worker Advocacy (EH-8)

United Steelworkers of America
Local 8031
P.O. Box 745370
Arvada, CO 80006-5370

This is a letter I wrote to: Office of Worker Advocacy (EH-8)
Office of Environment, Safety and Health
U.S. Department of Energy
Room IG080
1000 Independence Ave., SW
Washington, DC 20585

I want to give you some of my background working at Rocky Flats, Colorado.

I started employment in _____ and was immediately involved in radiation. I had to move drums from _____ building to what was old _____ building but it has a new number now. In moving these drums back and forth I was exposed to a lot of radiation, in fact health physics told me not to go in _____ building anymore. They thought it was necessary for me to return to _____ building even though my film badge was over the limit for exposure. The radiation involved was gamma and neutrons. I was involved in a fire in _____ building where 50 mil gloves burned and fell off on the floor from a highly plutonium contaminated box. We had to clean everything in the room from ceiling to floor. Using a half-mask respirator while working we couldn't spit or even remove our respirators even if they had a lot of liquid in them. If we coughed we had to swallow what we coughed up from our lungs. I went to a room that was called the snake pit that was the most contaminated place on earth. They had Nash Pumps that leaked plutonium contaminated liquid on the floor and then it would dry and could be airborne. Try wearing a half-mask respirator for a couple of hours at a time.

I became a _____ and was involved in the most serious plutonium contamination at Rocky Flats; it was the _____ fire in _____ building that was the most expensive fire in the U.S.A. I was one of the first monitors to arrive at the Flats. It was Mothers day and I had to quit my dinner so I could go out to help. I was one of the first persons to come out and the first one to check out _____ and the laundry to see if contamination got that far. We sent firemen in the highly contaminated rooms to put out the fire. The firemen went in with survive air packs that constantly needed to be changed. It was our job to make sure that the contaminated firemen wouldn't be exposed to internal plutonium contamination and we did our job wearing a half-mask respirator.

I worked in _____ building many times, and they had an entry where you had to undress the workers who were in supplied air. It was like a dry box highly contaminated with plutonium. In the entry, they stored clothing but it became

year. I now have heart failure and attribute this from the stress involved in the Cancer I had.

If you need more information let me know

Employee #

D.O.B.

SS#

Employment at Rocky flats plant.
To

Surviving Spouse _____ Address

Employed by:

Worked in bldgs.

And " in the _____ and pu chemical - Bldg

Exp. oper Spec. Recovery - Bldg
Hydride operations. Bldg

Final assignment Exp. oper & review leader
in physical Metallurgy. Bldg 774

Location

Which there is no record of. His _____ was
immediately impaired.
Have all medical records and incidents not documented.

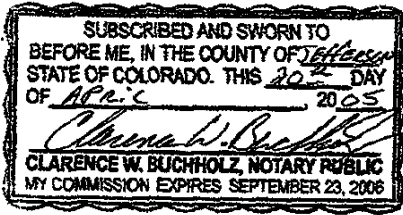
SEL 00030

I.

being duly sworn,

Confirms the statement on page one is true.

April 20, '05



Internal Letter



Rockwell International

August 19, 1981

TO
Address

FROM: Roger B. Falk
Health Physics

SUBJECT: POSITIVE BODY COUNT

Your body counts on _____ and _____ indicated a positive count for americium in the lungs. The amount of americium, based on these counts, is 0.13 to 0.15 nanocuries (nCi). This value is 1% of the maximum permissible lung burden of americium of 14.7 nCi.

We use the measurement of americium as a tracer for plutonium. When the fraction of the americium in the plutonium mixture is not known, which is the situation in your case, we calculate an upper limit value for plutonium based on an assumption of a fraction of the americium equal to 1000 parts per million at the time of the first positive body count. When this calculation is done for your counts, the estimated amount of plutonium is 1.5 to 1.6 nCi, or 10% of the maximum permissible lung burden (16nCi of plutonium).

* You will be placed on a quarterly recount schedule so we can update this evaluation quarterly. If you have any questions or would like to see your health physics records, please do not hesitate to contact me (x4212) or Clayton Lagerquist (x2452).

Roger B. Falk

Roger B. Falk
Internal Dosimetry Program Administrator
Health Physics

RBF:kmh

As a monitor for years you were always in the most contaminated areas to make sure the contamination was under control. If the contamination wasn't under control you were still in that area. Monitors wore respirators more than any other craft.

If you have 250 counts per minute of plutonium in your system, an undetectable amount, the results after a year would be 131,400,000 counts. Counts meaning alpha particles and an alpha particle has two neutrons and two protons and does not have any electrons, therefore it is an ion. In the body an ion grabs two electrons from a body cell and kills the cell. If enough of the cells are killed or mutated it can cause cancer. Here is how I came up with the 131,400,000 counts. 250 counts times 60 minutes would be 15,000 counts per hour times 24 hours is 360,000 counts per day times 365 days would be 131,400,000 counts per year. The half-life of plutonium is 24,000 years

Notary Public
State of Colorado
County of Jefferson
Karen K Bartleson
9-15-07

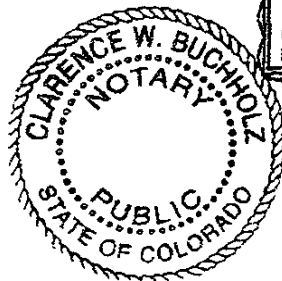


SEC 00030

May 12, 2005

In early _____, I was assigned to _____ due to _____
During my several month stay there, my work duties included breaking
down dosimeters to be read and re-assemble once they were counted. Often
times when the Thermo Luminescent Dosimeter was being read (which was
done by a high heating process) the instrument failed and no readings were
available. Once these TLDs were heated to a certain temperature, they came
out zeroed, so essentially no dose could accurately be reconstructed. When I
asked _____ how he handled that, he told me that he applied a "Fudge
Factor" to assess dose. Another of my duties was to disassemble wrist
dosimeters and count the Lithium crystals inside for neutron dose. The
process involved removing the crystals under florescent lights, using
tweezers, then dipping the crystals in Ethel Alcohol before placing them in
the counters to be counted. Often times the crystals were dropped on the
floor and broken, so that only a small piece of the crystal was counted. My
_____ from the Rocky Flats Occupational Medical Department
clearly restricted me from being around Ethel Alcohol, which the company
ignored, when they assigned me to Dosimetry.

SUBSCRIBED AND SWORN TO
BEFORE ME, IN THE COUNTY OF Jefferson
STATE OF COLORADO. THIS 12th DAY
OF MAY, 2005
Clarence W. Buchholz
CLARENCE W. BUCHHOLZ, NOTARY PUBLIC
MY COMMISSION EXPIRES SEPTEMBER 23, 2006



Item 7 - Tab F.2

To Whom It May Concern:

The purpose of this letter is to convey facts relevant to the radiation exposure dosimeter program formerly in place at the Rocky Flats Nuclear Weapons Facility/

From . until sometime in the latter part of that same year, I was assigned to janitorial duties in Building 123. During said time, my duties included the cleaning of the room where radiation dose rates of workers were assessed and recorded. During this period of time, the style of dosimeter badges resembled a "tray" with small compartments used to hold components of each workers badge in place. These trays were disassembled and reassembled on a regular basis and contained a small lithium chip that measured approximately 1/8 to 1/4 of an inch square. These chips were removed from the badges by dosimeter personnel for assessment in an instrument. Because the chips were so small, it required workers to use tweezers to remove the chips. This action often resulted in damage or complete loss of the chip because it would dislodge itself from the end of the tweezers and land in the room. Chips were also lost during the disassembly of badges as components would dislodge themselves and fall to the floor during this process as well. Most of the workers could not find these chips after they had fallen, so the actual dose rate associated with the badge being counted was completely lost. Each day, when I would sweep the floor in this room, the workers would sift through the dirt and remove these crystals. They would usually find between 6 and 12 crystals per day. If these crystals were still in good shape, they would be discharged and reused. These crystals were never evaluated for the dose they had been exposed to because they had no way of knowing which crystal belonged to which radiation worker. There were also several instances where as a crystal was being read, the foreman of the group would advise the dosimeter worker that the dose shown was too high to possibly be correct, and the worker was advised to change or delete the reading. Often times, for unknown reasons, chips were soaked in alcohol prior to being read.

Internal Letter



Rockwell International

August 19, 1981

TO
Address

FROM Roger B. Falk
Health Physics

Subject POSITIVE BODY COUNT

Your body counts on _____ and _____ indicated a positive count for americium in the lungs. The amount of americium, based on these counts, is 0.13 to 0.15 nanocuries (nCi). This value is 1% of the maximum permissible lung burden of americium of 14.7 nCi.

We use the measurement of americium as a tracer for plutonium. When the fraction of the americium in the plutonium mixture is not known, which is the situation in your case, we calculate an upper limit value for plutonium based on an assumption of a fraction of the americium equal to 1000 parts per million at the time of the first positive body count. When this calculation is done for your counts, the estimated amount of plutonium is 1.5 to 1.6 nCi, or 10% of the maximum permissible lung burden (16nCi of plutonium).

* You will be placed on a quarterly recount schedule so we can update this evaluation quarterly. If you have any questions or would like to see your health physics records, please do not hesitate to contact me (x4212) or Clayton Lagerquist (x2452).

Roger B. Falk

Roger B. Falk
Internal Dosimetry Program Administrator
Health Physics

RBF:kmh



SEC 00030

United Steelworkers of America
Local 8031
PO Box 745370
Arvada, CO 80006-5370

August 10, 2003

RE: Energy Employees Occupational Illness Compensation Act of 2000
Special Exposure Cohort

The dose reconstruction study at Rocky Flats will not provide all the exposure due to problems of not collecting all the data. While in Building 771 I had my anti-contamination clothing removed due to contamination. Contamination that was washed off your body was not always reported and didn't show up on all radiation monitors.

Respirators were worn when working in contamination areas. Clothing was removed as you left the room or if an alarm went off. Health Protection people would then monitor you. This was not recorded and wouldn't show up on a TLD.

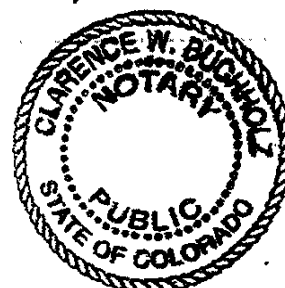
For Building 771 the TLDs were not worn all day, but posted on the wall until you were going to enter the inner facility. There was radiation found coming through the walls of several of the office spaces a few times that was not captured for dose.

I have a glioblastoma multiforme brain tumor. Glioblastoma multiforme is a high-grade (Grade IV) tumor that is very aggressive; in fact, it is the most fatal form of brain tumor that exists. The average life expectancy with glioblastoma multiforme is approximately 54 to 65 weeks

Sincerely,

4/21/05

SUBSCRIBED AND SWORN TO
BEFORE ME, IN THE COUNTY OF Jefferson
STATE OF COLORADO, THIS 21st DAY
OF April 2005
Clarence W. Buchholz
CLARENCE W. BUCHHOLZ, NOTARY PUBLIC
MY COMMISSION EXPIRES SEPTEMBER 23, 2006



I worked AT Rocky Flats FROM [redacted] To [redacted]
 of [redacted] MOST of my Time There I spent
 IN Building [redacted] AT No Time did we wear
 PROTECTIVE EQUIPMENT OTHER THAN WHITE COVERALLS,
 IN Building. I worked AS A
 THE STORAGE AREA WHERE URANIUM PARTS WAS
 STORED WAS A HIGH RADIATION AREA, THE WHOLE
 BUILDING WAS CONSIDERED A HIGH RADIATION AREA.
 WE NEVER WORE A HALF MASK WHEN [redacted] OR
 OR AT ANY TIME. We used TO EAT &
 DRINK IN OUR WORK AREAS, IN Building [redacted] WHEN
 I worked FOR SEVERAL years WAS ANOTHER
 HIGH RADIATION AREA AGAIN THE ONLY PROTECTIVE
 EQUIPMENT WE WORE WAS WHITE COVERALLS, THERE
 WAS STACKS OF URANIUM INGOTS BECAUSE
 IS WHERE THE INGOTS WERE RECEIVED.
 WE TOOK PRECAUTIONS AS TO NOT CONTAMINATE
 THE TRAILERS WE LOADED BUT WE TOOK NO
 PRECAUTIONS TO PROTECT OURSELVES SUCH AS
 HALF MASKS AND IN SOME CASES FULL FACE MASKS,
 AND WHATEVER ELSE WAS FLOATING AROUND. AS
 A RESULT OF MY years IN THESE 2 BUILDINGS
 AFTER RETIREMENT I WAS DIAGNOSED WITH
 CANCER IN MY [redacted] WHICH WENT INTO
 THE [redacted] I HOPE THIS WILL
 HELP. ALL THE INFORMATION ON MY CANCER IS IN

Next

My Medical Records, if More INFORMATION IS
Needed I will Be GLAD To FURNISH WHAT
I CAN. INCIDENTLY My TLD Readings
were Always WITHIN THE LIMITS THAT
were ACCEPTABLE.

State of Colorado County of Boulder

Submitted and Sworn this 5th Day of

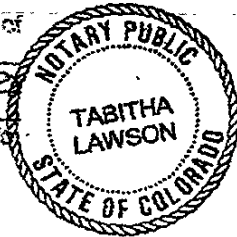
April 2005

My Commission Expires 11-1-2008

Tabitha Lawson

Notary Public

In and for the State of Colorado



My Comm. Exp. 11-1-08

See 0030

8/1/03

SECU330

I worked at Rocky Flats from _____ until _____
Most of my time was spent in building _____ and _____. At no time
did we wear protective equipment other than white coveralls in
building _____.

I worked as a _____ in the _____ here uranium
parts were stored. It was a high radiation area. The whole
building was considered "high radiation". We never wore a half
mask when _____ or _____ or at any time.

We used to eat and drink in our work area.

Building _____ where I worked for several years, was also a high
radiation area. Again, the only protective equipment we wore
were white coveralls.

There were stacks of uranium ingots. Our _____ where
the ingots were received and stored.

We took precautions to not contaminate the trailers as we
loaded, but no precautions were taken to protect ourselves,
such as a half mask or in some cases a full face mask, were never
worn to protect against the oxidation dust and whatever else
was floating around. Incidentally, my TLD readings were always
the same (within the acceptable limits). I have copies if
needed.

As a result of my years in these two buildings, _____ after I
retired I was diagnosed with _____ which
went into the _____

I hope this will help. All the information on my cancer is
in my medical records. If more information is needed I will
be glad to furnish what I can.

NEVADA SHORT-FORM INDIVIDUAL ACKNOWLEDGMENT N.R.S. 240.106

SEC 00030

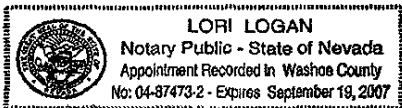
State of Nevada

County of Washoe } ss.

This instrument was acknowledged before me on this the 20th day of April, 2005, by

(1) Gary Burbank
Name of Signer

(2) and n/a
Name of Signer



Lori Logan
Signature of Notary Public

OPTIONAL

Though the information in this section is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: LTR - United Steelworkers

Document Date: 7/30/2003 Number of Pages: 1

Signer(s) Other Than Named Above: None

RIGHT THUMBPRINT OF SIGNER #1
Top of thumb here

RIGHT THUMBPRINT OF SIGNER #2
Top of thumb here



Sources of Information
Acronyms



SOURCES OF INFORMATION

- Defense Nuclear Facilities Safety Board, *Report on Radiation Protection Review at the Rocky Flats Plant*, December 1, 1993.
- Foster, P.P. 1991. "Study of plutonium oxide fuel inhalation case." *Radiation Protection Dosimetry* 38 (1-3): 141-146.
- Investigation Team Report: Investigating the source of potential internal radiological exposures involving eleven personnel in Building 771*, Rocky Flats Environmental Technology Site, March 15, 2001.
- Newman, Lee; Mroz, Margaret; Ruttenber, James, *Lung Fibrosis in Plutonium Workers*, May 31, 2002.
- Office of Enforcement and Investigation, U.S. DOE, Consent Order, April 14, 1998.
- PNNL-MA-860, Chapter 8.0: 8.13, Jan. 31, 2003.
- Potential Health Problems from Exposure to Selected Radionuclides*, Hanford Health Information Network, May 2000.
- Preliminary Notice of Violation and Proposed Imposition of Civil Penalty, Office of Price Anderson Enforcement, July 17, 2001.
- Roth, Herrick S. 1989. *Local 8031: Its Struggles and Its Victories*. A.B Hirschfield Press, Denver, CO.
- Sullivan, M.T. *Lifetime Dose Limitation and Neutron Dose Reconstruction*, Letter, July 26, 1994.
- Tontodonato, R.E., *Trip to Review Feed Characterization for RFP Building 707 Thermal Stabilization Process*, Jan. 20, 1994, Letter, February 8, 1994.
- Toxicological Profile for Plutonium*, Agency for Toxic Substances and Disease Registry, TP-90-21, December 1990.
- Voelz, George, "Health Considerations for Workers Exposed to Plutonium," *Occupational Medicine: State of the Art Reviews*. October-December 1991, pp. 694.
- Wilkinson, Gregg, "Mortality Among Plutonium and Other Radiation Workers at a Plutonium Weapons Facility," *American Journal of Epidemiology*, 1987, pp. 231-250.
- Worker Testimony included as additional response to SEC Section F: Cindy Schubert, Leonard Homan, Gary Burbach, William Jordan, Don Williams, Howard Long, Harry Charles Wolf, Robert Carlson.

ACRONYMS AND ABBREVIATIONS

AMAD - Activity Median Aerodynamic Diameter
CEDE - Cumulative Effective Dose Equivalent
DAC - Derived Air Concentration
D&D - Deactivation and Decommissioning
DNFSB - Defense Nuclear Facility Safety Board
DOE - Department of Energy
EEOICPA - Energy Employees Occupational Illnesses Compensation Program Act
Ge - Germanium
ICRP - International Commission on Radiological Protection
NIOSH - National Institute of Occupational Safety and Health
NDT - Nondestructive Testing
NTA - Nuclear Track Emulsion Type A films
Pu - Plutonium
PUSPS - Plutonium Stabilization and Packaging System
RadCon - Radiation Control Manual
RFETS - Rocky Flats Environmental Technology Site
RV - Reaction vessel
SAAM - Selective Alpha Air Monitor
SEC - Special Exposure Cohort
SS&C - Sand, slag and crucible
TLD - Thermoluminescent dosimeter
TBD - Technical Basis Document
USWA - United Steelworkers of America

The USWA, Local 8031 reserves the right to provide additional information beyond that which is included in this petition and in support of our ability to obtain Special Exposure Cohort designation for the Rocky Flats class of workers.



Anthony W. DeMaiori, President
United Steelworkers of America, Local 8031
4510 Indiana Street
Golden, CO 80403

February 15, 2005

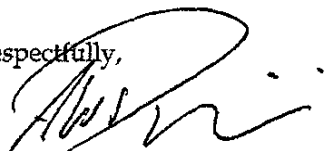
SEC Petition
Office of Compensation Analysis and Support
NIOSH
4676 Columbia Parkway, MS-C-47
Cincinnati, OH 45226

Dear NIOSH Office of Compensation Analysis and Support,

Enclosed please find our original and official Special Exposure Cohort Petition, Form B, and all relevant supporting documentation. This represents our official submittal under law and through the NIOSH Office of Compensation Analysis and Support as required.

Please call to confirm receipt of this document at 303-278-4557. If you have any questions or require additional information, please do not hesitate to contact me at the above number.

Respectfully,



Anthony W. DeMaiori
President



ROCKY FLATS UNITED STEELWORKERS OF AMERICA, LOCAL 8031
SPECIAL EXPOSURE COHORT PETITION

SUBMITTED TO:

**SPECIAL EXPOSURE COHORT PETITION
OFFICE OF COMPENSATION ANALYSIS AND SUPPORT
NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH**

SUBMITTED BY:

**UNITED STEELWORKERS OF AMERICA, LOCAL 8031
ON BEHALF OF OUR DEDICATED MEMBERSHIP**



FEBRUARY 15, 2005

CLARENCE BUCHHOLZ
FINANCIAL SECRETARY

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RECORDING SECRETARY

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February 15, 2005

U.S. Secretary of Health & Human Services &
Office of Compensation Analysis and Support
National Institute of Occupational Safety and Health
4676 Columbia Parkway, MS-C-47
Cincinnati, OH 45226

Dear Secretary of Health and Human Services and Office of Compensation Analysis and Support,

The United Steelworkers of America (USWA), Local 8031, in good faith submit the accompanying Special Exposure Cohort Petition, Form B, and relevant supporting documentation and attachments in full accordance with 42 CFR Part 83, Procedures for Designating Classes of Employees as Members of the Special Exposure Cohort under Energy Employees Occupational Illness Compensation Program Act of 2000, Final Rule. This petition is submitted on behalf of the dedicated members of USWA, Local 8031, through our right of representation.

Our petition defines a special class of Rocky Flats workers for whom it is not feasible to accurately estimate the radiation dose they received and who have had their health endangered by their exposure to radiation while employed at the U.S. Department of Energy's Rocky Flats site. This Rocky Flats class of workers meets all specifications and requirements for inclusion in the Special Exposure Cohort.

Several factors make an accurate estimation of dose for the Rocky Flats class of workers impossible. Factors, include, but are not limited to, exposure to a unique form of plutonium referred to as high fired oxides or super class Y materials which due to small particle size, insolubility, self-shielding properties, and differences in the way the particles are metabolized by the body make it impossible to accurately assess dose.

In addition, lack of lung counting in the site's early days, failures to measure neutron dose initially and subsequent failures in reading neutron dose films, lack of workplace monitoring and inconsistent procedures for monitoring and dose assessment have also created a situation in which dose can not be accurately reconstructed.

February 15, 2005

U.S. Secretary of Health & Human Services & Office of
Compensation Analysis and Support

Page 2

Finally, as an accelerated closure site, Rocky Flats and all its infrastructure and subject matter experts will be gone as early as October 2005. The closure of Rocky Flats means that personnel engaged in future dose reconstruction will not have access to the institutional knowledge necessary for dose reconstruction and the workers will be left without ongoing recall programs that are instrumental in detecting previously undetected exposures and refining the models used for dose reconstruction.

The people of Rocky Flats have dedicatedly and unselfishly toiled on behalf of the federal government and the citizens of this great land to first make the world safe for democracy through the production of nuclear weapons for the defense of our country and then later make the environment safe for our children through accelerated cleanup and closure. It is only right that now these same people should, if they become ill, be provided medical coverage and compensation as part of the Special Exposure Cohort. We greatly appreciate the opportunity to petition for Special Exposure Cohort on behalf of our members and will be extremely appreciative of your timely designation of our Rocky Flats worker class for Special Exposure Cohort particularly in light of our rapidly approaching closure.

Respectfully,



Anthony W. DeMaiori
President

AWD:lb
opeiu #5
afi/cio

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A special thanks to Steve Trujillo and Judy Yeater for their hard work in the preparation of this petition.