

ACMUI Report on Dose Reconstruction

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Subcommittee Charge

- Independently review Region 3's dose evaluation
- Review the alternate dose reconstruction methodology
- Make recommendations regarding dose reconstruction

DRS SUBCOMMITTEE

- J. Williamson, PhD Chair
 - D. Eggli, MD
 - N. Hobson
 - L. Malmud, MD
 - O. Suleiman, PhD
 - S. Schwarz, RPh

St. Joseph's Hospital Incident

- 285 mCi I-131 orally administered
- Daughter's exposure
- Reg III: Daughter's exposure = 15 rem
- SNM: too conservative

ACMUI DRS SC Investigations

- Review Reg III calculations,
- Review/critique Marcus/Siegel article
- Interview relevant parties and review documents

Findings

- 15 rem: most conservative estimate possible that is not totally implausible
- Distance reconstruction
- DRS estimate: 9 rem for Reg III's dwell-time scenario

Findings: continued

- SJH disputes Reg III dwell-time scenario
- DRS: reduces DDE to 4-6 rem
- Inspection report improvement

Siegel/Marcus Critique

- Use more sophisticated DR tools, e.g., distance reconstruction
- Use EDE, not DDE, as regulatory endpoint
- DRS: overly simplistic approximations used

SNM vs. ACMUI DR

- Distance Reconstruction factor
- EDE vs. DDE factor
- Continuous decay factor
- Various other factors

ACMUI Recommendations to NRC Staff

- Doses near regulatory limit
- -Licensee disputes NRC DR
- Plausibility of findings is suspect
- -Usual approximations suspect

ACMUI Recommendations to NRC Staff

- Use EDE as DR regulatory endpoint for CFR 20 compliance
- Use EDE/DDE ranges and/or justify rejection of Licensee scenario
- Exempt caregivers