

Official Transcript of Proceedings
NUCLEAR REGULATORY COMMISSION

Title: IAEA Basic Safety Standards
Public Meeting

Docket Number: (n/a)

Location: Rockville, Maryland

Date: Friday, February 26, 2010

Work Order No.: NRC-084

Pages 1-17

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1 UNITED STATES OF AMERICA

2 NUCLEAR REGULATORY COMMISSION

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4 PUBLIC MEETING ON THE INTERNATIONAL ATOMIC ENERGY

5 AGENCY BASIC SAFETY STANDARDS

6 + + + + +

7 FRIDAY,

8 FEBRUARY 26, 2010

9 + + + + +

10 The meeting was convened in the Auditorium
11 of Two White Flint North, 11545 Rockville Pike,
12 Rockville, Maryland, at 9:30 a.m., Francis Cameron,
13 Facilitator, presiding.

14 PRESENT:

15 FRANCIS CAMERON, Facilitator

16 ELVA BOWDEN BERRY, Facilitator

17 DON COOL, PHD, Senior Advisor, NRC

18 ROB LEWIS, Director Division of Materials Safety and

19 State Agreements, NRC

20 TREVOR BOAL, PHD, IAEA

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

9:36 a.m.

1
2
3 MR. CAMERON: Well, good morning everyone
4 not only in the room but those of you who are on the
5 phones or watching the webcast of this meeting. I'm
6 going to be back -- my name is Chip Cameron and it's
7 my pleasure to facilitate for the meeting.

8 I'm going to be back in a few minutes to
9 go over some meeting process issues. But we're going
10 to start off with a welcome from Rob Lewis of the NRC
11 staff. And Rob is the Director of the Division of
12 Material Safety and State Agreements.

13 Rob, I'll just turn it over to you.

14 MR. LEWIS: Thank you, Chip. Good morning
15 everyone. Welcome to the NRCS headquarters building
16 in Rockville. Special welcome to those of you
17 traveling.

18 As Chip said, I'm Rob Lewis, I'm the
19 Director of Material Safety and State Agreements here
20 at the NRC and I'm also the U.S. representative to the
21 Radiation Safety Standards Committee at the
22 International Atomic Energy Agency.

23 That's the committee that has been giving
24 advice to the IAEA as they've developed the document
25 we're here to talk about.

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1 NRC is very happy to host the forum today
2 on the -- to host the interagency steering committee
3 on radiation standards forum today, to have a dialog
4 and exchange ideas on the IAEAs international basic
5 safety standard for protection against ionizing
6 radiation and the safety of radiation sources or BSS.

7 Hopefully that's the last time we have to
8 say the whole title. We'll talk about the BSS for the
9 rest of the day.

10 We appreciate everyone coming in on a
11 Friday, especially those who had to travel. We know
12 that for those of you that did travel, we might have
13 impacted your weekend, we apologize for that.

14 I want to give a special thanks to Mr.
15 Trevor Boal who has traveled, as far as I know, has
16 traveled the farthest, he traveled all the way from
17 Vienna, Austria, he works at the IAEA.

18 He's one of the principal authors of the
19 BSS and he places us in a very good position to have a
20 very fruitful discussion today just by being here.

21 The BSS was last revised by IAEA in 1996,
22 so it's been almost 15 years. The new updates reflect
23 many events as in radiation protection over those
24 years, including the recommendations of the
25 International Commission on Radiation Protection or

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1 ICRPs publication 103, which was published in 2008.

2 The BSS covers many activities regulated
3 by NRC within the United States, but it also covers
4 many other areas such as radon in homes, machine-
5 produced radiation such as x-rays and other issues
6 such as medical use of the radioactive material and
7 advice to physicians using such material.

8 The BSS is a foundational standard amongst
9 all the IAEA safety standards and guides. Those are
10 built from the BSS, so when it is revised, it's very
11 important.

12 Many countries will use the BSS as one of
13 their basis for their domestic radiation standards.

14 IAEA has issued the document in late
15 January to all the member states of the IAEA for 120
16 day comment period, and that's what we're in right
17 now.

18 Ultimately the United States is not
19 obligated to adopt the BSS into our domestic
20 regulations.

21 We have within the NRC begun the process
22 of looking at our radiation protection regulations,
23 which appear in 10-CRF Part 20, but we're several
24 years away from any final rule making or even proposed
25 rule making on that regulation.

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1 But we do expect that the BSS that IAEA is
2 producing this year, will be one of the key references
3 we look at as we change Part 20; however, any revision
4 to our domestic regulations will go through our formal
5 public comment and response requirements as dictated
6 by the Administrative Procedures Act.

7 So, we are very happy to host this forum
8 again. We think it's a very important forum because
9 we want to ensure that we give the most informed
10 comments as the United States to the IAEA for them to
11 consider as they move forward on this document.

12 We recognize that many in the U.S. that we
13 regulate and use radioactive materials or radiation
14 producing devices do more and more business
15 internationally.

16 And this is a key point in time for them
17 to comment on this document as they will have to use
18 the BSS for their international activities, if those
19 countries were to adopt into their regulations.

20 So please be very active and participate
21 today, that's our appeal to you. We'll furiously be
22 taking notes in the back of the room. Your speaking
23 up will help ensure that we give the best possible set
24 of comments from the U.S. to the IAEA to consider as
25 they move forward on this key document.

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1 So thank you very much for attending,
2 again. Chip?

3 MR. CAMERON: Okay, thank you Rob. I just
4 want to go over a few points of meeting process before
5 we get started. I'd like to tell you about the
6 format, give you an agenda overview and talk about
7 some simple ground rules.

8 The format is pretty straight forward.
9 We're going to have two presentations basically and
10 we're going to be going out to you for questions and
11 comments on the presentations and the material in the
12 BSS.

13 And our agenda, we're going to start with
14 Dr. Donald Cool, who is the Senior Advisor for
15 Radiation Safety and International Liaison at the
16 Nuclear Regulatory Commission.

17 And Don is going to give you an overview
18 of how the BSS standards are formulated, but more
19 importantly perhaps because we're going to hear a lot
20 about that, what the relationship is between the BSS
21 and what's done in member countries such as the United
22 States.

23 And after Don's done, we'll go out to you
24 for clarifying questions on that process. We're then
25 going to go to Dr. Trevor Boal, who is with us from

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1 the IAEA and he's with the radiation protection unit
2 at the IAEA and he's been working on the BSS for the
3 last three or four years.

4 Trevor's going to give us an overview of
5 the BSS and talk about the various chapters, I guess
6 is the right way to call it, in the BSS. And we'll
7 take a break in the middle of Trevor's presentation
8 for some questions and then we'll have some questions
9 at the end of that.

10 The real discussion comment part starts
11 after lunch in the afternoon where we're going to go
12 through various exposure issues in the BSS and then
13 we'll go out to those of you in the audience for
14 comments or questions.

15 And we also have people on the phone and
16 we'll be going out to them for questions and comments
17 also.

18 In terms of ground rules, when I go out,
19 if anybody has anything in the audience question or
20 comment, just signal me and I'll bring you this
21 cordless microphone. And if you could just introduce
22 yourself to use and then either ask your question or
23 make your comment.

24 I would ask that only one person at a time
25 speak most importantly, so that we can give our full

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1 attention to whomever has the cordless mic at the
2 moment, but also so that we can get a clean
3 transcript.

4 Eric is our stenographer, court reporter
5 in the back of the room, and he's going to be taking a
6 transcript of everything that's said, not only in the
7 room, but those of you on the phones. And that will
8 be your public record of the meeting and also the NRCS
9 record of the meeting.

10 And I would just ask you, since we do have
11 a lot to cover, to just try to be as crisp and
12 economical as possible in your comments so that we can
13 make sure that we can hear from everybody and cover
14 all of the materials.

15 I'm going to go to the audience first when
16 we go to questions, discussions and then after that
17 I'm going to go to the people on the phones.

18 We do have an operator who is going to be
19 establishing the queue of people who want to talk on
20 the phones and we'll go out to the operator to help us
21 with that part of it.

22 OPERATOR: Thank you. To ask a question
23 on the phone, please press star one on your touch tone
24 phone and un-mute your name to record your name
25 clearly when prompted.

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1 MR. CAMERON: That wasn't planned, but
2 that was a great coincidence I guess. Anyway, that
3 was the directions for the people on the phone. Thank
4 you operator.

5 And there may be issues that come up that
6 don't fit squarely under the agenda item that we're on
7 at the moment and we'll put those over in the parking
8 lot over there to make sure we come back to them.

9 The last discussion period at the end of
10 the day is open discussion in the sense that if there
11 are issues that haven't been covered during the
12 previous agenda items, we'll look forward to hearing
13 from you on those particular issues.

14 And with that, I think just a couple of
15 housekeeping items. The restrooms, if you don't know,
16 they're right out at the back of the lobby. For
17 coffee during breaks or lunch, you don't need an
18 escort to go to the NRC cafeteria, which is up on the
19 main lobby level from here.

20 If you are going to go outside of the
21 building, however, you will have to turn your badge in
22 and sign back in before you come in.

23 We did receive some written comments
24 already on these issues and by we, I just want to
25 emphasize again I'm talking about ISCORS. These

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1 comments are for the benefit of ISCORS and we will try
2 to pass out anything that we've received already in
3 the form of a written comment.

4 And with that, I think I'll just go to Don
5 for his overview. At the end of Don's presentation,
6 we'll go out and see if there's any clarifying
7 questions. Thank you.

8 And one last thing, I'm going to be
9 assisted by Elva Bowen Berry, who's right here. Elva
10 is one of the NRC employees that is in the NRC
11 facilitation training program. And so we're trying to
12 groom a number of new facilitators, so Elva will be
13 helping me. Don?

14 DR. COOL: Thank you, Chip and good
15 morning to everyone. On behalf of the Interagency
16 Steering Committee on Radiation Standards, which I
17 pronounce as ISCORS, other people pronounce it other
18 ways, I'd like to welcome you to this forum and
19 opportunity to talk about the draft of the
20 international Basic Safety Standards.

21 I'm Donald Cool, I serve as one of the co-
22 chairs for the ISCORS committee and Mike Boyd of the
23 Environmental Protection Agency, also co-chair the
24 Federal Guidance Subcommittee of that organization,
25 which is taking the lead in actually doing the

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1 coordination amongst the federal agencies in
2 developing the U.S. comments.

3 I really do appreciate each of you taking
4 the time and effort to come down here today. If
5 anybody was coming down the northeast corridor I know
6 that you've enjoyed the latest round of snow and wind
7 and other things making it interesting to travel
8 around.

9 Also welcome those who are on the phone
10 lines, and we will try to make sure that we remember
11 to give you opportunities to provide your views and
12 welcome all of those who may be watching on the
13 internet on our webstreaming.

14 The webstreaming is not a two-way flow of
15 communication, so if you wanted to be making a
16 comment, then you would need to join the telephone
17 bridge in order for us to be able to actually hear
18 you. So, if we could go to the next slide.

19 What I wanted to do this morning before we
20 have Trevor provide a detailed review of the draft of
21 the Basic Safety Standards was to give you a little
22 bit of the context, there's already been a couple of
23 questions.

24 So what are the IAEA safety standards, how
25 exactly are they developed and exactly who is ISCORS,

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1 this magically lovely long acronym and what is the
2 purpose of today's meetings.

3 So I'm going to try and touch on some of
4 those points fairly briefly and see if we can deal
5 with some of those, make sure all of your questions
6 are answered in that regard before we get into the
7 actual technical details of the document.

8 So, let's begin by looking at what the
9 IAEA safety standards are. Let's go ahead and go to
10 the next slide.

11 First, the bit of context on this.
12 International standards, like anything else, are
13 developed within a larger context of information,
14 scientific information, practical experience that goes
15 into developing what becomes part of the safety
16 standard series.

17 So those of you who are watching will be
18 able to see this, those of you who are on the phone
19 and not able to see it are perhaps at a slight
20 disadvantage.

21 There are several pieces of things which
22 contribute to this. There are some technical basis
23 materials developed by groups such as the United
24 Nations Scientific Committee on the Effects of Atomic
25 Radiation, known as UNSCEAR that look at the radiation

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1 risks, the radiation doses that are seen in different
2 places.

3 They produce documents and review in a lot
4 of the underlying technical basis. Some of the same
5 types of information here in the United States are
6 developed and published by the National Academies
7 Biological Effects of Ionizing Radiation Report
8 series, which you may also be familiar with.

9 They provide input to some organizations
10 that do recommendations. That's principally
11 internationally the International Commission on
12 Radiological Protection or ICRP.

13 One of the drivers to the current
14 discussions is an update that the ICRP did of their
15 basic recommendations for radiation protection, which
16 were published in late 2007, ICRP Publication 103.

17 All of those materials, plus information
18 that's developed through experience of various
19 countries in regulating radiation, radiation
20 protections, that's the experience globe up here.

21 Lots and lots of things that we learn;
22 operating experience, what have happened in events,
23 what's going on in various places all comes together
24 to help inform the kinds of things that might actually
25 become the safety standards.

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1 And the IAEA, the International Atomic
2 Energy Agency standards are actually a set of
3 documents in three levels. The top most level is a
4 document which is referred to as the fundamentals. It
5 gives a fundamental safety objective to provide
6 adequate protection.

7 And then a series of principals, a
8 responsibility for safety, the role of government
9 management, justification of exposures, optimizing
10 exposures, limiting exposures, protecting future
11 generation, preventing accidents, emergency
12 preparedness.

13 I haven't tried to cover all of them, but
14 that gives you a flavor of the topics that are covered
15 in the fundamentals. All very nice as large
16 principals, those get translated into the what's
17 really necessary to accomplish that in a well-running
18 program in a series of documents, which are called the
19 safety requirements.

20 Those documents are formulated in a form
21 of shall-type statements similar to the way that you
22 would see regulations in a country. We will talk a
23 little bit more about those as it relates to the
24 international Basic Safety Standards.

25 The Basic Safety Standards are one of the

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1 requirements documents, but not the only one. There
2 are requirements related to transportation, there are
3 requirements related to nuclear safety, there are
4 requirements related to waste safety.

5 So there are a series of requirements
6 documents at that level, sort of international set of
7 shalls, the things necessary in order to achieve the
8 outcome of the fundamentals.

9 And below that are another series of
10 documents, which are the safety guides, for those
11 familiar with the U.S. Nuclear Regulatory Commission
12 system, this is somewhat similar to the regulatory
13 guides.

14 They are should statements. There's some
15 good practices, some best practices in various
16 countries on how to try and accomplish what are
17 required in the requirements level documents. So, if
18 we can go ahead to the next slide.

19 So, who do these apply to? As Rob Lewis
20 pointed out in his introduction, the IAEA safety
21 standards are not binding on member states, but they
22 may be adopted by them.

23 Now, with that general statement, there
24 are of course some certain specific things. The IAEA
25 safety requirements are binding on things that the

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1 International Atomic Energy Agency does when they're
2 providing technical assistance or otherwise. Perhaps
3 that's obvious, but that's one of the things it
4 applies to.

5 They are also binding on a member state,
6 and a member state by the way is a country, so the
7 United States is a member state, 153 member states of
8 the International Atomic Energy Agency I think,
9 something like that.

10 They are binding on a member state which
11 is getting assistance from the IAEA, technical
12 assistance and support from the IAEA in developing
13 their regulatory infrastructure and programs.

14 Some countries, like the United States,
15 provide assistance, we don't receive assistance. So
16 again, that doesn't obligate the U.S. to in any way
17 adopt these requirements.

18 So there are some situations in which
19 they're binding, they're not particularly binding in
20 the United States, but they do serve as a point of
21 reference.

22 And obviously in the global economy and
23 activities that are now ongoing these days, if you're
24 doing business across national borders, you are
25 probably going to run into these requirements in other

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1 places.

2 And so that's part of the reason why we
3 wanted to provide an opportunity for everyone to ask
4 some questions about what's going on, see what's going
5 on, provide some viewpoints that would help to inform
6 what the U.S. Government would do in terms of actually
7 providing comments back to IAEA in this process.

8 I'm going to say this a couple of times.
9 What we're going to be doing here today is getting
10 some thoughts and ideas and questions together on an
11 international document.

12 This is not a U.S. Agency proceeding, it's
13 not a U.S. Agency document, this isn't an NRC document
14 or an EPA document. We don't have a formal docket, so
15 this is not an Administrative Procedure Act process
16 with formal comment, comment docketing, comment
17 resolution, responses to comments and all those sorts
18 of things.

19 Anything that might eventually move to
20 being looked at in a U.S. regulation or guidance
21 document would have to go through that process, and
22 those opportunities for public comment and public
23 input would be provided then. So just to try and help
24 differentiate where we are now in this process.

25 So let's look a little bit at how IAEA

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1 develops the standards. As with any good organization
2 I suppose there's some nice structure process that has
3 actually been developed over a number of years to try
4 and be rigorous in looking at the information that's
5 available in developing the process.

6 So they start, as you might expect, by
7 developing a work plan. Anybody just can't have a
8 bright idea and go start writing a document. They
9 actually have to put together a formal what they call
10 document preparation profile.

11 I know some who have looked at the IAEA
12 website who are trying to download this document were
13 saying what's that little thing that says DPP. Well
14 that's what that is, Document Preparation Profile.

15 And that's a small little file that says
16 what they were originally intending to do. That was
17 not the draft that people are actually commenting on.

18 It's gets to be a little bit confusing.

19 It goes through a development process,
20 sometimes that's a very iterative process that goes
21 around multiple times with a number of people
22 involved. It gets reviewed by one or more of the
23 safety committees, those are listed over on the right-
24 hand side of the screen.

25 The acronyms, nuclear safety, that's the

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1 NUSSC or NUSSC, radiation safety, waste safety or
2 transportation safety; four major topical committees.

3 In the case of a document like the Basic
4 Safety Standards, everyone had an opportunity to
5 review because there are issues for all of those
6 organizations and all of those topical areas within a
7 document such as this.

8 After it's finally gone through that
9 process and the committees are comfortable for a
10 requirements document such as this, it goes to a
11 higher level committee actually called the Commission
12 on Safety Standards or CSS which has to provide an
13 additional review and finally endorsement.

14 And then it actually has to be approved by
15 the International Atomic Energy Agency's Board of
16 Governors. So there's a fairly long process with
17 multiple steps in the process.

18 The United States has individuals who
19 serve as representatives on each of the safety
20 committees and on the Commission of Safety Standards
21 and of course the U.S., as a member state, is to
22 participate in the final approval process, we are a
23 member of the IAEAs Board of governors. So if we can
24 go to the next slide.

25 Because the classic question, so where are

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1 we? Or where's Waldo? Or where's the draft? We are
2 here.

3 Because one of the steps in the process
4 after the safety committees have become sufficiently
5 comfortable with the draft is to send it out to all of
6 the countries who are members of the IAEA to provide
7 all of them an opportunity to provide comments and
8 inputs and thoughts on the document before it
9 completes the process.

10 So this is the IAEA's formal opportunity
11 for all of the government's for all of the countries
12 who are members of the IAEA to provide comments.

13 So like I said, the U.S. as a member state
14 of the IAEA has this opportunity to provide comments
15 back to the agency as will all of the other countries.

16 The Basic Safety Standards is also a bit
17 unique in that not only is it an International Atomic
18 Energy Agency document, it also has a number of co-
19 sponsoring organizations, Trevor will talk a little
20 bit more about that.

21 It includes the World Health Organization,
22 the International Labor Organization, the Food and
23 Agriculture, I'm not going to try and give you a
24 complete list, but a number of major international
25 organizations play an active role in the development

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1 process.

2 And in fact, the U.S. Government as
3 members of those international organizations has the
4 opportunity to look at it from each of those
5 perspectives.

6 One of the things that the Interagency
7 Steering Committee on Radiation Standards is going to
8 be doing is coordinating the views of all the federal
9 agencies, including Health and Human Services, the
10 Occupation Safety Health Administration other units in
11 the U.S. Government so that all of the views come
12 together for the U.S. Government view.

13 So you don't have different parts of the
14 government just looking at discrete little pieces and
15 getting separated from each other.

16 As Rob noted, the Basic Safety Standards
17 were posted for the member state review at the end of
18 February and every country's comments are due back to
19 the IAEA at the end of May.

20 So, let's move on, try and look at the
21 question. So who is ISCORS? ISCORS is, as I said, an
22 agency, set of agencies committees intended to foster
23 early resolution, coordination of regulatory issues
24 associated with radiation standards and guidance.

25 We do not have a mandate that in any way

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1 takes away from the mandates of each of the agencies.

2 Our job, our role is to coordinate the views and to
3 put some things together. But each of the agencies
4 still has all of its own legal authorities and other
5 activities in putting things out.

6 But we serve as a coordination mechanism,
7 a communication mechanism to help the agencies work
8 together to achieve common goals.

9 The federal agencies that are formally a
10 part of this include the Environmental Protection
11 Agency, the Nuclear Regulatory Commission, Department
12 of Energy, the Department of Defense, we have several
13 representatives from some of the branches of the Armed
14 Services today, Department of Health and Human
15 Services represented by the Food and Drug
16 Administration and by the Centers for Disease Control,
17 the Occupation Safety and Health Administration, the
18 Department of Labor, Homeland Security and the
19 Department of Transportation.

20 We also have a number of folks that server
21 as observers, including the Office of Management and
22 Budget, Office of Science and Technology Policy, which
23 is actually a group that's directly associated with
24 the Executive Office of the President of the United
25 States, the Defense Nuclear Facility Safety Board and

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1 we have folks who are observers from the radiation
2 control programs of the states.

3 Because each of the states in the United
4 States have radiation control programs, have very
5 active programs and are responsible for significant
6 segments of the overall plan of looking at and
7 providing protection against various types of
8 radiation exposure in the United States.

9 So all of them actively contribute and
10 they're all looking at the process.

11 So what is this meeting? Why are we here?

12 In certain situations because a document has far
13 reaching implications we have in the past tried to
14 provide opportunities to get additional input to these
15 kind of international documents.

16 And I'll give you a couple of examples
17 that have been in the past. We've done this on a
18 couple of occasions associated with some of the
19 transportation standards because of the necessity for
20 there to be quite a high degree of alignment with
21 standards for transportation.

22 Because it just wouldn't work very well if
23 you were to ship it out of the United States and it
24 gets rejected at the border when it tries to go across
25 into Canada or something else.

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1 So we've provided opportunities for people
2 to provide comments and inputs in that area.

3 Likewise, as the U.S. Government agencies
4 were looking at the recommendations that the
5 International Commission on Radiological Protection
6 were developing over the last several years, we
7 provided a couple of public opportunities to help
8 inform the agencies as comments were being provided to
9 the ICRP.

10 So it seemed logical to us that in this
11 case, because the Basic Safety Standards also have far
12 ranging implications for cross boundary movement of
13 materials and people in the global economy.

14 Lots of things move back and forth,
15 sources move back and forth, people move back and
16 forth, medical activities, all sorts of things happen
17 to provide everyone an opportunity to help inform us
18 of some of the issues that are out there in developing
19 our points of view.

20 As I said, what we're here today is to
21 talk about an international document. It's not a U.S.
22 document. So as I said, this is not an agency comment
23 process. We're not planning to try and write up a
24 docket.

25 On the other hand, we are transcribing

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1 this, we are webcasting and archiving all of this so we
2 have the information available.

3 If, as a result of this discussion you go
4 back and you scratch your head a little while and you
5 say I'd really like for them to think about whatever
6 it is, a particular issue, go ahead and send it to us.

7 You have the contact information for
8 myself and Ms. Monica Orendi, who's been helping me in
9 this effort.

10 Materials that we get, we will put into
11 our agency management system so they'll be publically
12 available and we will make sure that they're
13 circulated to all of the agencies.

14 So all of the folks in the federal
15 interagency, who are going to be looking at and
16 developing the comments, have the opportunity to see
17 and be informed by your suggestions. So there is a
18 mechanism in order to make sure that we capture and
19 receive that sort of input.

20 We recognize that when you're looking at a
21 document like this, that there's going to be lots of
22 viewpoints. And it's not surprising that people will
23 not always have exactly the same viewpoint, we won't
24 even have exactly the same viewpoint amongst the
25 federal agencies.

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1 So, don't be surprised if not everything
2 that gets said can possibly end up in an agreed upon
3 interagency set of comments. We eventually have to
4 reach through the process and decide what position
5 would actually go back to the IAEA.

6 So we make no promises that this is in and
7 that's in and everything else is in, but we will try
8 to use the information to develop all of the
9 materials.

10 In addition to that you're probably saying
11 well, so how does what is in the IAEA standards relate
12 to what you're going to do in the U.S. It's a very
13 good question, a very logical question.

14 This serves as another point of reference.
15 There are certainly some reasons why having
16 consistency with what's going on internationally and
17 what other countries may be doing is an advantage for
18 the people of the United States, for commerce for
19 trade, for consistency. So we want to look at it from
20 that perspective.

21 The Basic Safety Standards is being
22 updated to help reflect information that's been
23 obtained over the last 15 years.

24 The IAEA has gotten a lot of information
25 as a result of applying the previous set of standards

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1 that came out in 1996 and they're responding to the
2 new recommendations of the ICRP that were published in
3 2007.

4 The United States is also looking at those
5 recommendations. We have started the process, the NRC
6 has started the process, other agencies have started
7 the process of looking at our own regulations and
8 guidance to see if there are issues and areas which
9 might need to be adjusted in our own regulations.

10 As I said, that's going to be a separate
11 process from what we're trying to focus on today. But
12 this serves as another input. They're not
13 disconnected. They're not inextricably linked either.

14 Just try and get a clear understanding of the
15 relationship.

16 As U.S. agencies, such as the NRC,
17 continues to move forward with our discussion, there's
18 going to be our own stakeholder dialog forum meetings
19 that are going to be taking place.

20 Eventually there would be the formal
21 notice and comment process that would work through
22 anything that might be looked at to adjust the U.S.
23 regulations.

24 So this is certainly not the opportunity
25 to tell the agencies and never again will we listen.

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1 No, not at all. It's only the very beginning of an
2 early step and it's related to a document which is an
3 interesting point of reference, not even exactly the
4 U.S. document.

5 The comments that are submitted by the
6 interagency steering committee once we've been through
7 this process, we expect to be publically available on
8 the IAEA's website.

9 Obviously I can't give you a weblink today
10 to tell you where to go to get there eventually,
11 that's still several months down the road. We will
12 have those available.

13 The IAEA will continue to work through
14 that process I showed you a little bit earlier. The
15 committees will review it, eventually it would get to
16 the Board of Governors.

17 And so I would expect sort of one of the
18 last questions to say, well Don, so when is that going
19 to happen? Good question. A little too soon to tell.

20 I can tell you that the agency is in hopes
21 to have a document which can be reviewed again that
22 responds to all these comments during the safety
23 committee meetings which will happen late this year.

24 But depending upon the number of comments
25 and the issues, it may be a document to begin moving

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1 on further in the process at that time or it may need
2 some other discussions. So we'll just have to see how
3 that process progresses.

4 And with that, I'm going to open it up,
5 Chip, to see if there are questions from everyone on
6 what we're doing here and the process so that we can
7 spend the rest of the day focusing on the BSS. Thank
8 you.

9 MR. CAMERON: Thank you, Don. Don, before
10 we go to the audience for questions and then the
11 phones, could you introduce Mike Boyd if you didn't
12 already and also Marty Virgilio.

13 MR. LEWIS: Why certainly. We actually
14 have a number of members of the ISCORS different
15 agencies here. My co-chair for the Federal Guidance
16 Subcommittee is Mr. Michael Boyd from EPA.

17 And since you wanted me to, I guess I'll
18 introduce my boss. Mr. Martin Virgilio who is our
19 Deputy Executive Director for Operations.

20 MR. CAMERON: Great.

21 MR. LEWIS: And he's able to listen to
22 some of these discussions today.

23 MR. CAMERON: Thank you very much Don.
24 And Don mentioned Monica Orendi is right over here and
25 Leah Spradley who is also working on this.

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1 And with that, are there any clarifying
2 questions for Don in terms of what I call all the
3 moving parts on this? We're going to go to the
4 audience first and then we'll go to the phones.
5 Anybody in the audience have a question?

6 Okay, great. Operator are there anybody
7 who has questions that are on the phones?

8 OPERATOR: Yes, sir. Len Howard Ehrle, go
9 ahead with your question.

10 MR. EHRLE: Yes, Dr. Cool there's a
11 process question, it relates to the organizational
12 structure. It appears as though the comment process
13 makes no provision for involving non-governmental
14 organizations in a direct role in formulating this
15 particular response to the document.

16 I would urge the Nuclear Regulatory
17 Commission to move to involve NGOs. I'm Senior
18 Biomedical Policy Analyst for the Organic Consumers
19 Association and I chair it's 43-member International
20 Science Oversight board composed of scientists,
21 physicians and policy analysts from 11 countries.

22 We have 17 members on a low dose radiation
23 policy group who are experts, many of whom have been
24 closed out with papers that have been presented to
25 various journals throughout the last few years.

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1 And there's a concerted effort to prevent
2 comments and presentation by persons who have
3 criticisms of the IAEA and its agreement with the
4 World Health Organization.

5 That was established in 1959 whereby the
6 IAEA has taken over the investigatory role of
7 accidents such as Chernobyl even though it has a
8 statutory requirement to "accelerate and enlarge the
9 contribution of atomic energy through peace, health
10 and prosperity throughout the world," unquote.

11 And it is that charge that places it in
12 conflict of interest with the World Health
13 Organization and other health related agencies. It
14 cannot promulgate standards in this area and
15 particularly also in the medical x-ray area, which is
16 part of this document.

17 So that now is placed in a unique position
18 of not only promoting nuclear energy throughout the
19 world, but of making efforts to correct some of the
20 inequities and to investigate a nuclear accident. So
21 you can see --

22 MR. CAMERON: Len, can you hear me?

23 MR. EHRLE: -- the obvious conflict of
24 interest here.

25 MR. CAMERON: Len?

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1 MR. EHRLE: In addition, the NRC has an
2 advisory committee --

3 OPERATOR: I'll check that.

4 MR. CAMERON: Thank you, Operator. Can
5 you make sure that Len hears me. Len can you hear me
6 now?

7 MR. EHRLE: Yes, I can.

8 MR. CAMERON: Len, let's get on to answer
9 your fundamental process question. And I have put the
10 conflict of interest issue up in the parking lot and I
11 think you've gotten the point across there, but we'll
12 ask you to elaborate on that when we get to the open
13 session at the end of the day.

14 MR. EHRLE: That's fine.

15 MR. CAMERON: Okay.

16 MR. EHRLE: That would be fine.

17 MR. CAMERON: Thank you very much, Len.
18 And Don, the NGO question, how does that work?

19 DR. COOL: Well first, let me thank you
20 for being able to listen and provide the views. Part
21 of the reason that we're doing what we're doing is
22 because we want to provide you the opportunity that
23 you're asking for.

24 So this discussion is in fact, I think,
25 exactly the kind of opportunity that you're asking.

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1 There are a number of organizations that has
2 international NGOs and otherwise, have an opportunity
3 for some discussion and input to someone at the
4 international agencies that are co-sponsors.

5 I can't give you specific details because
6 there are lots of folks that interact with lots of the
7 different units and their six co-sponsors, but there
8 are some opportunities.

9 In the end, whether we sort of like it or
10 agree with it or not, the IAEA looking to the
11 government's of the member states so the final
12 approval process happens with governmental
13 representatives.

14 So we make some differentiation between
15 more inclusive opportunities for everyone to be
16 involved in providing comments including what we're
17 doing here and then the final approval process that
18 the IAEA might pursue, which has to involve the actual
19 government of its member states.

20 In terms of the conflict of interest, we
21 will certainly take some note of that. I think that's
22 a bit outside of what specifically we're looking at
23 today, but I will work on making sure that the folks
24 in the Department of State and others are aware of
25 some of those concerns. Thank you.

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1 MR. CAMERON: Okay. And I just note that
2 we do have a submission from Len Ehrle who is the
3 questioner on the phone that we have copies of here.

4 And Len, I can assure you that as the NRC
5 moves forward with its development of radiation
6 protection standards here in our workshops that we're
7 glad you're on the radar screen now and we'll contact
8 you about those.

9 Operator, anymore questions from people on
10 the phone?

11 DR. COOL: We lost them?

12 MR. CAMERON: Okay. Anybody -- yes? And
13 please introduce yourself too.

14 MS. FOLKERS: My name is Cindy Folkers,
15 I'm with Beyond Nuclear, we're a citizens group in
16 Tacoma Park, Maryland.

17 My question is, and I apologize because I
18 came to this process a little late knowing about this
19 meeting, and there's a huge document that I have not
20 had time to read from the IAEA.

21 But, I wanted to know sort of a timetable
22 of when the NRC and/or ISCORS and all the other member
23 organizations are looking at doing some sort of final
24 thing and what the process would be. And I assume
25 some of the process has to be in the Federal Register.

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1
2 So if we could have sort of a timetable
3 because I know that public comments for NRC and ISCORS
4 most likely will be able to be promulgated through the
5 Federal Register notices and I assume you have to
6 notice some of this stuff.

7 MR. CAMERON: Okay. Thank you Cindy. Don
8 is that clear?

9 DR. COOL: For this document, our
10 timetable is dictated of course by the IAEAs comment
11 invitation process where the U.S. Government, as all
12 the other countries, are invited to provide comments
13 and they have to be provided by the 31st of May.

14 The U.S. agencies will spend the next
15 month and a little bit more working more or less
16 individually trying to help develop their particular
17 issues. And then we'll work together in the ISCORS
18 format to develop a consensus set of comments to go
19 out.

20 Because this is not a federal agency
21 document, an action of any one of the particular
22 agencies, there was not an expectation that there
23 would be an additional notice or comment process on
24 comments that the U.S. Government would eventually try
25 to assemble from all this information and provide back

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1 to the International Atomic Energy Agency.

2 As the U.S. moves forward, or if the U.S.
3 moves forward with any looks at how we might look at
4 our own regulations and guidance, those certainly
5 would be part of notice and comment process probably
6 at a number of steps in the process.

7 MR. CAMERON: Okay. Thank you very much
8 Don. We're going to take a short break, if people
9 want to get coffee or use the restroom. And thank you
10 and Len Ehrle and others on the phone and thank you
11 operator.

12 We'll be back, we're going to start sharp
13 at 10:35 Eastern Standard Time. So we'll give you 15
14 minutes. And you do not need an escort to go up to
15 the lobby for coffee. Thank you.

16 (Whereupon, the foregoing matter went off the record
17 at 10:21 a.m. and resumed at 10:41 a.m.)

18 MR. CAMERON: Okay. If we could get
19 everybody in and operator, if we could make sure
20 people on the phones can hear us at this point.

21 Before we go to Trevor Boal from the IAEA,
22 there was one question that Don got on the break about
23 where the United States is relative to all of this in
24 terms of our radiation protection standards. And
25 let's just see what Don has to say about that, Don?

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1 DR. COOL: Yes, thank you, Chip. The
2 question really was trying to make sure that they had
3 an understanding of, I guess the easiest way to say it
4 is what generation of the recommendations and
5 information are being used now in the U.S. regulations
6 and what's being looked at in this draft revision.

7 And so just to lay it out very clearly so
8 that no one can -- the U.S. regulations, right now 10-
9 CFR Part 20 of the Nuclear Regulatory Commission are
10 based, included as an underlying basis, the
11 recommendations of the ICRP from 1977.

12 ICRPs recommendations came out, the NRC
13 went through a rule making process and our regulations
14 were published in the early '90s. In parallel with
15 that, the ICRP was working on revising the
16 recommendations which came about the same time the NRC
17 regulations were done.

18 And so, some of the provisions and those
19 recommendations are included and some of them are not.

20 Most of the rest of the world and the
21 Basic Safety Standards that Trevor is going to be
22 talking about that were published in 1996 are based on
23 those somewhat more recent ICRP recommendations that
24 were published in 1990.

25 ICRP has, after another 15 years, done

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1 another update of their recommendations consolidating
2 information and putting things together. So the IAEA
3 is doing yet another update to theirs.

4 The NRC, and many of you are maybe aware
5 of what's a parallel effort, the NRC staff is looking
6 now at issues to try and increase alignment with the
7 recommendations with one of the possibilities being
8 that certain pieces of our regulations would actually
9 leapfrog from 1977 recommendation basis all the way to
10 the 2007 basis for the recommendations.

11 So there are some differences. There are
12 some distinct differences between regulations in the
13 United States and regulations in other countries of
14 the world and the recommendations of the ICRP.

15 So I just wanted to try and clarify a
16 little bit for some people what the basis of some of
17 the different things are. Because it has changed
18 every 15 years or so.

19 And we in the NRC actually made a rather
20 deliberate decision in 2000 or so to wait for the next
21 set of the ICRP recommendations rather than going
22 through the involvement process and getting all of our
23 stakeholders and working through all the issues only
24 to be done about the time new recommendations came
25 out.

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1 We've tried to actually do a lessons
2 learned last time and wait for these to be completed
3 so that we can include all of the considerations as we
4 looked at it here in the United States.

5 MR. CAMERON: Great. Thanks, Don, that's
6 very helpful. And thank you to whomever asked that
7 question to you. And Trevor, let's go to you now and
8 you can be comfortable here or be comfortable at the
9 podium, whichever you would like.

10 Trevor Boal from the IAEA. And we will
11 take a break for questions at a point during Trevor's
12 presentation.

13 DR. BOAL: I might sit for my
14 presentation.

15 MR. CAMERON: Wonderful.

16 DR. BOAL: Thank you. Thank you for the
17 invitation to attend this meeting. It's my pleasure
18 to be here. And I'm going to cover -- can we go to
19 the next slide first.

20 The aim of the presentation is to provide
21 a brief overview of draft 3.0, I think in some parts
22 the overview may be rather brief, to highlight areas
23 where text of the current BSS has been revised or new
24 text has been added.

25 I'm assuming you have some familiarity

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1 with the current BSS. And to highlight areas there's
2 been considerable discussion and the text has been
3 developed. There are some areas I'm focusing on
4 because we've had a lot of or many hours of discussion
5 on these key issues or these issues which I'll
6 highlight.

7 The IAEA statute gives the agency the
8 mandate to develop standards. And Article 3 IA-6 of
9 this meant, the statute says to establish or adopt in
10 consultation with competent organs of the United
11 Nations and the specialized agencies concerned
12 standards and safety for protection of health.

13 And so through the consultation competent
14 organs of the United Nations and for that reason we
15 work with our co-sponsors, the other UN organizations,
16 World Health Organization, Food and Agriculture
17 Organization, ILO are fully involved in the
18 development of the BSS. Next slide.

19 And to facilitate the involvement of the
20 other UN organizations and other specialized agencies,
21 we have established the BSS Secretariat. There's a
22 resolution of our general comments from 2005 to set up
23 the BSS Secretariat to carry out a review of the
24 current BSS.

25 And the Secretariat there consists of the

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1 IAEA plus seven other international organizations.
2 There's five other co-sponsors of the current BSS,
3 Food and Agriculture, International Labor
4 Organization, Pan American Health Organization, World
5 Health Organization and Nuclear Energy Agency, the
6 OECD.

7 And for this revised BSS UNEP, United
8 Nations Environment Program and the UP Commission are
9 potential co-sponsors and are also members of this
10 Secretariat.

11 And again, there is now the resolution of
12 the general conference in 2006 for the Secretariat to
13 cover the revision process. And we still have the
14 revision process in 2007.

15 And the objectives of that Secretariat are
16 set out in this slide, to support and facilitate the
17 revision making sure that interest views and the
18 responsibilities of each cosponsoring organizations
19 are fully taken into account, to provide a forum for
20 the co-sponsors, to inform each other of developments
21 that need to be taken account and to coordinate the
22 approval process.

23 Don mentioned in his presentation the IAEA
24 process for developing standards. And the final step
25 is the approval by the IAEA Board of Governors.

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1 But the BSS Secretariat is another part of
2 the process, which I have outlined is the IAEA
3 process. So through each step through that process we
4 have gaining the agreement, we've had co-sponsors for
5 various drafts.

6 And each of these co-sponsoring organizers
7 will have their own approval process. So the IAEA
8 Board of Governors will approve the revised BSS, but
9 my understanding is it will also go to the WHO, World
10 Health Assembly, the ILO equivalent to the Board of
11 Governors, these other organizations have their own
12 approval processes as well.

13 In developing various drafts, we started
14 the drafting process in 2007, and the co-sponsors have
15 been fully involved. So the chapter on -- for example
16 the chapter on occupational protection, we had our
17 first drafting meeting on that part hosted by ILO.

18 The International Labor Organization is
19 unique among the UN organizations in that there's a
20 Secretariat plus there's also employee representatives
21 and representatives of the workers. And they are
22 fully involved, all three parties of that organization
23 involving the review and revision process.

24 And for the protection of patient section,
25 WHO and PAHO, Pan American Health Organization have

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1 been fully involved in the drafting meetings and have
2 hosted some of the drafting meetings in relation to
3 the chapter on medical exposures.

4 The co-sponsorship, at least through
5 organization, provide an assistant advice and
6 assistance through member states' various government
7 agencies.

8 So for example, one being the World Health
9 Organization Ministry of Health, ILO deals with
10 Ministry of Labor, Environment Program with the
11 environment protection agencies.

12 And so by having the UN co-sponsored the
13 one document, we should be giving consistent advice to
14 our different constituencies within each member state.

15 It also leaves the expectation that change order-
16 sponsoring organizations apply the co-sponsor safety
17 standards in their work assisting their mistakes.

18 And it also is a basis for exchanging
19 information between the co-sponsoring organizations.
20 And my final point on this slide is that each co-
21 sponsoring organization has its own process for
22 seeking input.

23 And so some of the co-sponsoring
24 organizations are sending this draft out to their own
25 member states as well for input or seeking comments.

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1 The agency has about 153 member states as
2 Don mentioned. The World Health Organization has more
3 than 119 member states and so there are additional
4 member states who receive this through the WHO.

5 The Pan American Health Organization has
6 member states from the Caribbean Islands and in
7 Central America, which may not be member states of the
8 IAEA. So it extends the coverage of these standards
9 to states which are not part of the agency.

10 And through the PAHO process some of these
11 member states will be providing feedback on these
12 standards or this draft.

13 Don also mentioned the DPP. The DPP is
14 approved by our standards committees and as we've been
15 developing the drafts of the BSS, we've been getting
16 feedback from the standards committees.

17 And the guidance from RASSC and the other
18 committees and from our Secretariat in revising the
19 BSS is to retie in the BSS as the international
20 benchmark for radiation safety standards across all
21 fields.

22 So across medical, across the protection
23 of the workers, across the protection of the public.

24 To recognize the need for stability and
25 that we have to justify any changes to the standards

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1 to maintain close to ICRP. So ICRP, as Don said, the
2 1990 recommendations were taken up in the 1996
3 standards. And now the 2007 recommendations of ICRP
4 we're adopting into our revised BSS.

5 To keep the co-sponsors fully involved and
6 they've all been involved through their BSS
7 Secretariat and we are having three to four meetings
8 with the Secretariat each year.

9 And as each draft has been sent, been
10 developed and sent to the committees for comment, as
11 they've gone through the Secretariat for their
12 agreement to send the text to our committees, to seek
13 and take feedback from member states on the current
14 BSS and to assist developing countries to participate.

15 During our review process we hold a
16 technical meeting where we invited developing
17 countries who are not normally members of our
18 committees to attend and make presentations on their
19 experience in using the BSS.

20 And during our -- last year we held a
21 meeting with developing countries in West Asia, we're
22 holding -- I'm sorry a meeting in April for countries
23 in Central and South America to discuss this trial for
24 the BSS.

25 The other guidance is the commitment to

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1 maintain the paradigm, which is what Don mentioned.
2 INSCA publishes documents on the effects of atomic
3 radiation, ICRP makes recommendations for protection
4 and these are taken up into the agencies standards.

5 And we're also asked to maintain the
6 comprehensive character of the BSS, the regulatory
7 framework, occupational and public exposure from all
8 practices.

9 Whether that's from nuclear power plants,
10 mining, medical uses of radiation, industrial uses of
11 radiation, transport to cover safety of sources, to
12 cover places for the safety of radioactive waste,
13 medical exposure of patients, existing exposures
14 including radon from dwellings or radionuclides in
15 building materials, remediation of contaminated sites.

16 To cover the basis for emergency
17 preparedness, remediation I've covered already and
18 then the basis for the safe transport of radioactive
19 materials.

20 This slide contains an overview of the
21 contents of draft 3.0. Like all standards, we have a
22 standard introduction.

23 Chapter 2 is the general requirements for
24 protection and safety and this chapter contains
25 requirements which are applicable to all three

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1 exposure situations.

2 Chapter 3 is the planned exposure.
3 Chapter 4, emergency exposure. Chapter 5, existing
4 exposure.

5 So chapter 2 contains requirements which
6 would be applicable to Chapter 3, 4 -- all three
7 exposure situations covered in Chapter 3, 4 and 5.

8 And there are four schedules covering,
9 exemption, clearance, categorization of sources, dose
10 limits and planned exposed situations and criteria for
11 use in emergency preparedness.

12 Our first part will cover some general
13 issues. The draft 3.0 of the BSS has a new structure
14 compared to the current BSS. There's a new format for
15 the requirements document.

16 For the first time we've included some
17 requirements for actually protection of the
18 environment. And I wish to make some general comments
19 about -- between safety and security.

20 So the new structure, next slide. The
21 structure of the revised BSS follows from the new
22 recommendations of ICRP 2007. And these new
23 recommendations there are three exposure situations,
24 so we based the three chapters.

25 And within each exposure situation, there

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1 are three categories of exposure; occupational
2 exposure, public exposure and medical exposure. And
3 so the structure follows from this new recommendation
4 of the ICRP.

5 And the decision to follow this route was
6 taken after a technical meeting on the revision of the
7 BSS held in 2007 with over 130 participants from
8 member states from the co-sponsoring organizations and
9 from other international organizations such as
10 International Society of Radiologist, International
11 Organization of Medical Physicists, the World Nuclear
12 Federation or the nuclear medicine experts, the
13 Society for Radiation Technologists.

14 The technical meeting involved experts in
15 all of these areas and they recommended we should
16 follow that new structure.

17 I'd like to make a brief comment about the
18 new format. The current -- this draft 3.0 contains 52
19 so-called overarching requirements.

20 These are rather -- they contain a shall
21 statement with a discrete number written in plain
22 language, clear short sentences. And this was a
23 decision from SCSS, Commission on Safety Standards in
24 2008 to follow this new format for our safety
25 requirement documents.

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1 Underneath these overarching requirements
2 have been conditions associated with that overarching
3 requirement. And they're an integral part of our
4 safety requirements document.

5 In the draft 3.0, they are written as
6 shall statements, in some of the other safety
7 requirement documents they are written as has to
8 statements or they may contain explanatory text.

9 In this BSS here, these conditions
10 associated the overarching requirement are written as
11 shall statements. And one of the aims of this new
12 format was to improve user friendliness of the safety
13 requirement documents.

14 As I mentioned, draft 3.0 contains 52
15 overarching requirements that maybe uses too many or
16 too few that's maybe some area you wish to provide in
17 your comments.

18 For the first time there are requirements
19 for protection of the environment. And I'll urge you
20 to read one, paragraph 126, which sort of -- which
21 sets out some basis for current decision with
22 protection of the environment.

23 And the requirements contained in, now
24 this is at the bottom there, the number of paragraphs,
25 essentially this stated appropriate assessment made

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1 with the potential impacts of the environment. It's a
2 rather basic requirement of this stage.

3 The framework for protection of the
4 environment is still being developed. And since this
5 BSS will be in use for the next 10, 15 years, we feel
6 it's important to include something in this revision
7 of the BSS.

8 Although how far we can go -- it's unclear
9 whether we can go further than requirements of and
10 assessment of the potential impacts. It's still an
11 evolving area.

12 Interface between safety and security,
13 there are a number of paragraphs in the current draft
14 relating to this interface between safety and
15 security.

16 In Chapter 1, there's a reference to the
17 documents being prepared in the nuclear security
18 series, it's a parallel series to the nuclear safety
19 series. And the number of paragraphs sitting out
20 requirements in relation to security or the interface
21 between safety and security of sources.

22 And I mentioned that the paragraph in the
23 text is paragraph 228 in relation to requirement on
24 government. Paragraph 331 on licensees when they're
25 preparing their safety assessment. Paragraph 350 it's

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1 another requirement on licensees.

2 I mean, one of the issues being raised
3 during the revision process was that we needed to
4 expand the interface between safety and security in
5 the draft BSS.

6 Whether this is sufficient, it's unclear,
7 but I guess it's one area where we'd expect feedback
8 on during the comment period.

9 Chapter -- Section 1 is the introduction
10 to the BSS. It's a standard chapter in all of our
11 safety standard series documents. It includes a
12 background, sets out the objective, scope and the
13 structure of the document.

14 The background chapter leads to our safety
15 fundamentals. To ICRP 103 system of protection and
16 safety and some expansion material.

17 Whether there's too much data or not
18 enough data would be an area where we seek comment.
19 But there's been considerable discussion to have --
20 which would go into describing ICRP system.

21 Chapter 2 of the general requirements of
22 protection and safety, and as I mentioned earlier,
23 these requirements were applicable to all three
24 exposure situations; planned exposure, emergency and
25 existing.

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1 The first part of the chapter covers three
2 radiation protection principles. And these radiation
3 protection principles, justification, optimization and
4 dose limitation apply to all three exposure
5 situations.

6 They might be slightly different the way
7 they're worded, but they're still applicable. Well
8 the dose limits only apply to planned exposure
9 situations.

10 The next block of paragraphs within
11 section 2 cover the responsibilities of government and
12 the responsibilities of the regulatory body.

13 In the current BSS there are no
14 recruitments in these two areas, but in the preamble
15 to the current draft it's stated that these standards
16 are based on the presumption that a national
17 infrastructure is in place and having the government
18 charged with responsibilities with for radiation
19 protection with safety, which included establishing
20 legislation, establishing regulatory body, the
21 functions of the regulatory body and other national
22 infrastructure which may be required to support users
23 in using -- when they use sources.

24 So there are about 26 paragraphs in these
25 two parts. Don mentioned that we have about 10 to 15

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1 safety requirements documents and one of the other
2 safety requirements document is GS-R-1, Legal and
3 Governmental Infrastructure.

4 So some of these paragraphs are common to
5 both documents and certainly those which are not
6 common text are consistent, but have been included in
7 the BSS to retain a comprehensive character of the
8 BSS.

9 The next part of the Chapter 2 are the
10 responsibilities of other parties. So the list of
11 responsible parties includes, for example, licensees,
12 employees in the case of occupational exposure, and
13 that's in the current BSS.

14 And this has been expanded to include
15 principal parties to include radiological medical
16 practitioners in the case of medical exposure and for
17 emergency and existing exposures, the principal
18 parties are the designated persons organizations who
19 are required to deal with those situations.

20 So a list of principal parties has been
21 expanded from the current two, the licensees and the
22 employees to these other two groups.

23 And there's another paragraph in there
24 about the importance of education and training in
25 qualified people in implementing the requirements of

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1 the standards.

2 The next block of paragraphs in Chapter 2
3 are management requirements. In the current BSS,
4 there's two or three paragraphs on quality assurance,
5 that's now been updated to paragraphs on management
6 systems.

7 And there's a paragraph on safety culture,
8 which has also been extended, updated to take account
9 of another publication in 2006 of management GS-R-3
10 Management System for Facilities and Activities, which
11 is currently subject in much more detail, but is a
12 basis for these two areas included in the BSS.

13 Chip, this is about half way, would you
14 like to have a short break?

15 MR. CAMERON: Well, Trevor why don't we
16 see if anybody has any questions on the materials so
17 far before you go into three, four and five, is that
18 okay?

19 DR. BOAL: That's fine.

20 MR. CAMERON: All right. I'm going to go
21 to the audience first. Trevor has given you an
22 overview here, are there any questions on what he's
23 talked about so far before we go into some of the
24 details? Okay, Cindy?

25 MS. FOLKERS: This is Cindy with Beyond

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1 Nuclear. I have a question. In the United States we
2 recently had a tritium leaks from Vermont Yankee Power
3 Reactor and I was wondering in this particular plan,
4 I'm assuming it would be an emergency release, but I'm
5 not exactly sure where it would fit in.

6 And obviously how -- I mean if the NRC
7 would adopt this plan how would they account for that
8 particular pathway and it's not clear to me that
9 there's an answer formulated.

10 MR. CAMERON: And Trevor, I don't know if
11 you've been following what's been going on with
12 Vermont Yankee in the United States in terms of the
13 leakage of tritium and this has been an issue at other
14 plants.

15 The question is, is where are those types
16 of releases covered in the BSS?

17 DR. BOAL: Chapter 3 covers planned
18 exposure situations, which are practices. And so in
19 Chapter 3 there's a section on general requirements, a
20 section on occupational, section on medical and public
21 exposure.

22 And within the public exposure it would
23 cover -- I'm sorry, within the general requirements
24 there would be a section where a practice would need
25 to require an authorization to conduct their practice.

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1 And as part of that, that would require a
2 safety assessment and that would require procedures in
3 place for covering prevention of excellence,
4 prevention or how to deal with situations where you
5 may get releases.

6 Chapter -- the third part protection of
7 public includes requirements related to discharges and
8 would cover all the different monitoring of the
9 environment, it would cover all different pathways, in
10 other words direct radiation or pathways through
11 exposures in different parts of the environment.

12 MR. CAMERON: And thank you. Thank you
13 Trevor, let's see if Rob wants to add to this. And if
14 we need to go further into this, we'll do it when we
15 get to Section 3 as long as Cindy's going to be here
16 with us after lunch. But go ahead Rob.

17 MR. LEWIS: Well first I think it's a very
18 good question. I think Trevor got it just right. In
19 the way that the BSS has divided up planned emergency
20 and existing exposure situations, that type of
21 activity would be a planned exposure situation.

22 Because in the U.S. when the license was
23 issued, there would have been a safety analysis report
24 submitted with the license application and that would
25 have to cover any potential discharges and risk

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1 assessment including the probability of types of
2 releases and the consequences of those releases.

3 MR. CAMERON: Okay. That's great. And we
4 have it in the parking lot, we'll go back when we get
5 to Section 3. Thank you. Anybody else have a
6 question in the audience for Trevor on material so
7 far?

8 Operator, can we see if anybody on the
9 phone has a question for Trevor?

10 OPERATOR: There are no questions on the
11 phone, sir.

12 MR. CAMERON: Okay. Thank you. Thank
13 you, operator. We're going to go back to people here
14 in the room. Rob?

15 MR. CAMERON: Yes, one thing that we in
16 the NRC hope to discuss today, and I think this is the
17 right time is that the provisions in the BSS on
18 protection of the environment.

19 Those, as Trevor mentioned, appear in
20 Paragraph 1.26, which is not in the requirement
21 section of the BSS. But they are adding in for the
22 first time into the BSS some explicit consideration of
23 environmental protection.

24 And in terms of the explanatory text in
25 paragraph 1.26 there's some key words in there that we

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1 hope people would weigh on here or later that
2 essentially the guidance in paragraph 1.26 notes that
3 the environment needs to be protected irrespective of
4 any human connection to that environment.

5 And another way to think of that is when
6 we have environmental protection evaluations in the
7 U.S., we always have the key factor is the potential
8 dose that people that might be living and affected by
9 that environment.

10 And IAEA is saying is whether people are
11 there or not, the environment needs to be protected in
12 the amount of radiation, radioactive material going
13 into the environment would need to be limited.

14 And that's kind of a shift in the
15 fundamental radiation protection structure that's been
16 in existence many years and ICRP is covering this. So
17 I was wondering if anybody had any thoughts on that
18 provision.

19 MR. CAMERON: Let's see if they do. As
20 Rob mentioned, this is a dramatic shift and it's in
21 the BSS. There's nothing similar in the United States
22 regulations on this. Trevor do you want to add
23 anything before -- on this environmental protection
24 before we go to the -- see if there's any questions or
25 discussion?

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1 DR. BOAL: No, I think Rob referred to the
2 text.

3 MR. CAMERON: Okay. Well let me check
4 with the audience. Does everybody understand the
5 implications of what Rob was talking about in terms of
6 this particular provision? Did anybody have any
7 questions or comment on it while we're here?

8 Okay. And just introduce yourself to us
9 Mike.

10 MR. BOYD: Thank you, Chip. This is Mike
11 Boyd from EPA. I just wanted to point out relative to
12 your last statement that while Human Health is almost
13 always the driver under the Superfund legislation,
14 CERCLA, there is a requirement for doing an ecological
15 risk assessment and there are other requirements and
16 statutes for national resource damage assessments.

17 So, there are instances where the effects
18 on biota are a particular focus of our regulations.
19 But in general, it's almost always, if not always so
20 far the human health risk that drive the clean up
21 decisions. Thank you.

22 MR. CAMERON: Thank you, Mike. Just
23 another example how the differences in the United
24 States regulation are. Amanda?

25 MS. ANDERSON: Yes. Amanda Anderson from

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1 Department of Energy. And we actually already have
2 this worked into our own regulations. We do require
3 our sites to do assessments of the environment
4 separate from Human Health and Safety and so we do see
5 this as an improvement.

6 MR. CAMERON: Great. Thank you. Is that
7 under an order, DOE order then?

8 MS. ANDERSON: Yes. Right now it's DOE
9 Order 5400.5, Radiation Protection in the Public and
10 Environment. And we do require them to look at biota
11 separate of Human Health and Safety.

12 MR. CAMERON: Okay. And that covers the -
13 - the order covers DOE facilities, that's who it's
14 applicable to. Okay. Thank you. Anybody else on
15 this issue? Let's go to Henry, and Henry please
16 introduce yourself to us.

17 MR. MORTON: I'm Henry Morton, consultant
18 to the nuclear industry. I think my observation would
19 be looked at long term, beginning especially in the
20 growth of the reactor era in the United States, in the
21 early environmental impact assessments, there was a
22 lot of investigation, a lot of studies of the
23 ecological impact dose to biota.

24 And out of that eventually came a sense
25 and a guidance basically through the standard setting

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1 agencies. If you protect people, you have adequately
2 protected the environment.

3 That basically then diminished the
4 attention for decades or so. But then in more recent
5 decade, we've had increased attention through more
6 microbiological investigations to return to this
7 issue.

8 So the fundamental question I think now
9 would be will the conclusions be different and will
10 the microbiology then indicate that we should have
11 standards for concentrations in the environment with
12 respect to the biota.

13 The key question will be then, if so,
14 what? If we, for example, apply this to the nuclear
15 power industry, the nuclear reactors, then you would
16 have, you would revisit, for example, Part 50 Appendix
17 I and look to see whether there is additional
18 restriction or guidance needed with respect to
19 effluence.

20 MR. CAMERON: Great. Thanks for that
21 explanation Henry. Let's see if anybody on the phones
22 wants to comment on this particular provision, not a
23 requirement as you'll see in the parens.

24 Operator, does anybody on the phone want
25 to say anything to us on this?

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1 OPERATOR: At the present time no. We did
2 get some new parties so I'd like to inform them once
3 again, to ask a question, please press star one on
4 your touch tone phone.

5 MR. CAMERON: Thank you very much
6 operator. And we'll keep going on to the phones
7 throughout the day. Okay. Trevor, let's go on at
8 this point and then we'll sometime for clarifying
9 questions before we break for lunch.

10 And then we're going to get in depth on
11 three, four and five. Go ahead Trevor.

12 DR. BOAL: Thank you. So we move to
13 section 3, planned exposure situation and the first
14 part of the generic requirements. The first part of
15 the requirements are the scope and the first paragraph
16 is on the list of practices covered by the standard.

17 So that's been expanded for clarity,
18 includes medical uses, nuclear -- sorry, nuclear power
19 sources, research reactors, mining of radioactive
20 material, uses of radiation for industry, security,
21 Ethiopia cetera.

22 Then the next paragraphs on sources within
23 those practices and there's a group of -- there's
24 another paragraph on natural sources of radiation.

25 The current BSS essentially had three

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1 bullet points; public exposure from discharges or
2 waste arising from practice involving natural sources,
3 occupational exposure to radon required by directly
4 related to work. And that would cover radon exposure
5 in the mining of uranium or other mining procedures.

6 Occupational exposures to radon, existing
7 exposure situation where the annual average activity
8 exceeds the reference level and the current business
9 is 1,000 becquerel per meter cubed.

10 And the final paragraph is new to this
11 BSS, exposure to material other than and other sources
12 whether it's natural sources in food or fetal brooding
13 materials and any relative activity listed in the
14 practices where the activity concentration of material
15 of any radio nuclide and uranium or thorium in K
16 series is 1 becquerel per gram or for testing
17 authority 10 becquerels per gram.

18 So essentially it's saying that in some
19 industries which use naturally occurring radioactive
20 material, that the activity is 1 becquerel per gram
21 therefore within the scope of the standards. So
22 uranium mining has always been covered by the
23 standards, but some of the other industries where
24 norms are covered right now fall within the scope of
25 the BSS.

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1 And I think the current BSS says that the
2 regulatory body could nominate industries in the area
3 of natural sources to include, the current BSS is more
4 clear that those industries which are -- where there
5 are natural occurring radio nuclides in the uranium
6 and thorium series above 1 becquerel gram are now
7 within the scope.

8 Whether the -- sorry. The stringency of
9 the or the implementation standards would depend on
10 the concentrations and regulatory body would still
11 have the reply graded approach and that may exempt
12 some of these industries from the standards if they
13 think the regulatory control is not required.

14 Sorry. The next part of the generic
15 requirements cover notification and authorization.
16 They cover -- they assign prime responsibility of the
17 standards to the licensee and then the overarching
18 requirements set out responsibility on government
19 regulatory on a number of areas in relation to
20 extension and clearance, relation to justification,
21 optimization, protection of safety, dose limitation,
22 requirement to set up, requirements for safety
23 assessment and requirements in relation to human
24 imaging which we'll come to soon.

25 There are a number of other requirements

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1 for the licensee, related to monitoring, prevention
2 and mitigation of excellence, investigation of
3 excellence and providing feedback and the control of
4 radiation generators.

5 In developing these overarching
6 requirements there was some discussion about where to
7 assign the responsibility, whether to assign the
8 responsibility to licensees or to the regulatory body
9 and whether it is still right is something we would
10 like feedback.

11 Another one is overarching requirement
12 graded approach. Graded approach applies to all
13 exposure situations, so whether it belongs in Section
14 2 or Section 3 is still, there was some discussion.

15 At present it's been included in Section
16 3, but there has been some discussion where to put
17 that requirement.

18 I just want to cover the next few slides
19 some areas where there was a lot of discussion in
20 developing draft 3.0. The first one is optimization
21 of protection.

22 A lot of -- the current BSS includes the
23 use of dose constraints as part of the optimization
24 process. I'm not quite sure we had so much discussion
25 on the use of dose constraints.

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1 It's a tool for optimization and dose
2 constraints are not limits. They may be set or
3 approved by the regulatory body and this is the
4 approach within the draft 3.0. I love this current
5 change from the current BSS.

6 The definition of constraint was reviewed
7 and the definition is as set out there, a perspective
8 in source routed failure for individual dose or risk,
9 uses of tool and optimization protection and safety of
10 the source, which serves as the boundary in defining
11 the range of options in optimization.

12 And there's also a lot of discussion in
13 the development of the text about whether we should
14 say it's optimized or subject to an optimization
15 process.

16 The protection safety is optimized and as
17 a regulatory requirement the enforcement of such
18 requirements. And there were some arguments saying if
19 we say subject to optimization process, it gives no
20 guarantee that the -- we've received an optimized
21 solution. So the current text is written right as
22 protection is optimized.

23 We'll go to the next slide. The
24 paragraphs on radiation generators and radioactive
25 sources, there are a number of new requirements that

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1 have been added to the BSS, paragraph 3.54, 3.59.

2 And that covers subjects licensees sharing
3 inventory records with regulatory body, categorization
4 of sealed sources, the marking of sealed sources,
5 identification of traceability of sources, storages of
6 radioactive sources and the disposal of sealed sources
7 at the end of their useful life.

8 These paragraphs have been taken from the
9 code of conduct on safety security of sources, which
10 was issued by the agency in early 2000. And they've
11 been included in the BSS now to strengthen the
12 requirements relating to the control of sources.

13 There are a number of paragraphs in this
14 section from the existing BSS which are unchanged, but
15 these paragraphs were added on the basis to strengthen
16 the control of some sources.

17 The next part, final part of the generic
18 part of Chapter 3 that's covering human imaging for
19 purposes other than medical diagnosis. And just some
20 background, this covers two types of exposures, those
21 carried out by medical staff using conventional
22 radiological equipment.

23 So for example it may be exposures for
24 occupational, legal or health insurances purposes
25 without reference to clinical indications.

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1 Let me talk about legal purposes. We may
2 be talking about exposure of a person suspected of
3 carrying drugs, where they have to go and undergo a
4 radiological procedure to determine whether there are
5 drugs within the body or maybe a procedure such as
6 injuries to a child in say abuse.

7 Another type of non-medical or purposes
8 for -- imaging for purposes other than medical
9 diagnosis are those carried about by a non-medical
10 staff, now maybe for theft detection, which is used in
11 some countries for say in diamond mining, security
12 screening, and there's been a lot of increased
13 emphasis in the last decade in relation to security
14 screening of passengers before flying or people
15 visiting jails to prevent smuggling and screening of
16 cargo and certainly in relation to whether there are
17 people inside of cargo containers.

18 And so the requirements in these areas are
19 under the justification paragraphs 3.18 to 3.20.
20 There are a number of paragraphs relating to
21 justification of such practices.

22 Human imaging for radiation for
23 occupational, legal and health insurance purposes are
24 referenced to clinical indications shall not be deemed
25 not to be justified. If an exceptional circumstances,

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1 justification of such needs to be considered, the
2 requirements of 3.60 to 3.64 shall apply.

3 And this requires that such a practice be
4 justified and a number of other requirements in
5 relation to the regulatory control. They should be
6 controlled by regulation.

7 Paragraph 3.19 says that human imaging for
8 theft detection purposes shall be deemed to be not
9 justified and it is a strengthening of the requirement
10 in the current BSS.

11 In the copy it says if it is carried out,
12 it should not be considered as occupations public
13 exposure -- so, not considered occupational medical
14 exposure, but shall be considered as public exposure.

15 And paragraph 3.20 which again refers to
16 security -- sorry imaging for security or anti-
17 smuggling purposes shall not only be deemed not to be
18 justified if an exceptional circumstance for
19 justification imaging is to be considered a
20 requirement to 3.60 or 3.63 and 3.65 to 3.67 shall
21 apply.

22 So that again is that there should be a
23 justification process or the practice should be
24 justified by the government or a regulatory body and
25 that there will be regulatory controls on the use of

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1 such or carrying out such practices.

2 And so the paragraphs 3.60 to 3.67 are due
3 progress to strengthen the safety and regulatory
4 control of non-medical imaging practices by making
5 regulatory control justification decisions and
6 optimization protection of safety explicit in the BSS.

7 Okay. The next group of paragraphs in the
8 BSS covered occupational exposure. The current BSS
9 essentially is unchanged. They cover responsibilities
10 or occupational protection, local rules,
11 classification of work areas, monitoring of work
12 areas, dose assessment of employees, health
13 surveillance, responsibility of workers and some
14 paragraphs in relation to pregnant workers.

15 The definition of occupational exposure
16 has been changed or it's been modified. The current
17 definition would be similar exposure workers incurred
18 during the course of their work. The current
19 definition also include excluding an exposure from
20 excluded sources or from sources which are exempt.

21 And the definition of worker is a person
22 who works, has recognized rights under the
23 occupational protection. There have been a number of
24 paragraphs added in the section on responsibilities of
25 regulatory bodies.

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1 Regulatory body shall establish and
2 enforce requirements, the protection of safety is
3 optimized and doses for exposure comply with limits.
4 The regulatory body shall establish and enforce
5 requirements of monitoring and recording of exposures
6 in planned exposure situations.

7 The next paragraph. The requirements in
8 this section on licensees and on workers in relation
9 to occupational exposure are essentially unchanged.
10 There has been some rearrangement, consolidation and
11 editing of text, the detailed requirements of
12 monitoring have been removed and now been placed in a
13 lower -- in a safety guide or other requirements of a
14 document.

15 And the requirements for special
16 circumstances, which apply to relaxation of dose limit
17 have been removed. They're considered no longer
18 necessary.

19 I think when the last piece has come into
20 play, was approved there may have been some, perhaps,
21 they may have relaxed the limit until they improve
22 their procedures. But, now this is no longer required
23 in the BSS.

24 The next section is on public exposure.
25 Again, it covers responsibilities for public exposure,

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1 monitoring, discharges to the environment, waste
2 management, requirements in relation to visitors and
3 requirements on consumer products.

4 The new requirements in this section in
5 relation to placed on government or the regulatory
6 body, to establish and enforce requirements, to ensure
7 public exposure control, to establish or approve
8 source constraints for dose and risk to be used in
9 optimization and protection.

10 One of the use of constraints is that
11 public may be exposed from several different sources
12 at the same time. So a licensee would -- sorry,
13 several different facilities public might get their
14 exposure from. And so the constraints are applied to
15 each different source.

16 To establish or approve source related
17 criteria such as limits for discharge for the
18 demonstration of compliance with the standards.

19 To ensure environmental monitoring
20 programs are in place, results of record made
21 available. And setting out response to regulatory
22 body in relation to authorizing supply of consumer
23 products.

24 The next slide covers new requirements
25 placed on licensees. The monitoring area more

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1 specific requirement on reporting of results and
2 retrospective system of doses.

3 The requirement in the waste area has been
4 expanded to include a requirement to maintain an
5 inventory of waste generated. And I've already
6 mentioned there's a new requirement in relation to
7 environmental impact or impact on the environment.

8 The next part of Chapter 3 covers medical
9 exposures. A medical exposure is an exposure to a
10 patient undergoing a medical procedure.

11 It also includes exposure of carers or
12 comforters from a patient who received a nuclear
13 medicine procedure and also includes exposure of
14 people participating in biomedical research
15 activities.

16 There are a number of new terms, currently
17 the BSS only has medical practitioner, but the revised
18 BSS refers to referring medical practitioners and
19 radiological practitioner who carries out the or is
20 responsible for the procedure being carried out. In
21 some cases it can be the same person.

22 The medical physicist definition has been
23 updated and now uses the definition from the
24 International Organization of Medical Physicists. And
25 the medical radiation technologist definition has been

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1 updated and it's from the International Society for
2 Radiation Technologists.

3 There are a number of requirements, new
4 requirements in the BSS related to the responsibility
5 of government and the requirements refer to
6 consultation between health authorities, professional
7 bodies and regulatory body.

8 There's a proper authorization of all
9 parties to ensure the responsibilities. The DRLs,
10 DRLs and diagnostic preference levels are established.

11 Dose constraints are established for carers and
12 comforters and for volunteers in biomedical research
13 and the guidelines are established for the relation of
14 patients that have the radio nuclide therapy.

15 It just ensure that the health authorities
16 and regulatory bodies and professional societies are
17 all involved in the processes.

18 The next slide covers the responsibility
19 of the regulatory body. And that must ensure that the
20 personnel carrying out such procedures are properly
21 qualified, they're specialized in the appropriate
22 area, they've received education training and
23 competence -- meet the competence requirements in
24 radiation protection and as such, a list are
25 maintained by the licensee.

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1 Medical physicists, technologists,
2 radiological practitioners are included in there,
3 after that list, maintained by the licensee.

4 There's also a requirement in medical
5 exposure part that on the licensee for the patient to
6 be informed as appropriate on the potential benefit of
7 the procedure as well as the radiation risk. That is
8 a new requirement.

9 The next slide covers justification. The
10 current BSS has a general requirement that medical
11 exposures be justified. And since the current BSS was
12 published ICRP has expanded its guidance on the
13 recommendations related to justification of medical
14 procedures.

15 There are three levels of justification of
16 medical procedures. One is medical exposures are
17 justified, a second level that particular procedure be
18 justified and the third level is that there be
19 justification for each particular individual patient.

20 And these are reflected in the revised
21 BSS, there are three separate paragraphs covering each
22 level of justification.

23 So the general requirement is as in the
24 current BSS, level two requirement, health authority
25 or professional bodies justify each particular type of

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1 procedure and then requirement on the radiological
2 medical practitioner that is justified for each
3 patient. And it may involve use of relevant
4 guidelines as before.

5 The next slide. Justification is also
6 paragraphs in the medical exposure also covers health
7 screening programs. There's a requirement on
8 asymptomatic individuals and a requirement relation to
9 biomedical research as in the current draft. But the
10 requirement to asymptomatic I think is a new
11 requirement for the BSS.

12 The next section, optimization of
13 protection, this is by far the biggest part of this
14 section and essentially some of the data of the
15 current BSS has been deleted or has been removed and
16 will go into a safety guide.

17 I think safety guides are developed on how
18 to implement the requirements. So some of the data is
19 considered too much for a report, to data for the BSS.

20 All assigned subjects in the current BSS
21 have been retained. Some of the requirements which
22 are updated, the design considerations, is a lot of
23 equipment, the scope of equipment has been expanded to
24 include gamma cameras, image intensifiers and
25 software.

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1 Operational considerations was a major
2 consolidation requirement for the material was taken
3 out to go into safety guides. Radiation optimization,
4 protection and calibration of equipment that can't be
5 assessed was the responsibility with the licensee in
6 the revised draft 3.0, the responsibility has been
7 assigned to a medical physicist.

8 And clinical dosimetry responsibility is
9 now assigned to the medical physicist in the current
10 BSS I think it's on the licensee. And diagnostic
11 reference levels have been strengthened to the link to
12 the clinical dosimetry part of the chapter.

13 Optimization protection in relation to
14 quality assurance, the next slide, have been updated
15 to -- that our quality assurance be carried out on the
16 supervision of medical physicists at the time when
17 quality control tests are made at the time of
18 acceptance and commissioning prior to use and
19 periodically thereafter and after any major
20 maintenance that could affect patient safety.

21 And then the requirements optimization in
22 relation to pregnant and breast feeding women that
23 arrangements in place for protection, there be signs
24 and procedures in place and to ask if the woman is
25 pregnant or not.

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1 The next part of the BSS Section 4 covers
2 emergency exposure situations. Since the current BSS
3 was published, there's been another requirements
4 document GS-R-2 on emergency preparedness and
5 responses been published by the agency.

6 So the current BSS, there's been some
7 restructuring of the text and some parts have been
8 deleted as they're covered by GS-R-2 and there are
9 references made to the other requirements document.

10 And there's been a paragraph added to the
11 BSS in relation to transition from emergency exposure
12 situations to an existing exposure situation. And the
13 current text has been updated to take account of the
14 new ICRP recommendations.

15 The structure of this chapter follows, as
16 the other generic, there's a generic requirement for
17 public exposure, protection of workers and this
18 transition paragraph.

19 So the generic requirements include the
20 requirement that there be an emergency system
21 established by member states and this is -- there's a
22 cross reference to the requirements in GS-R-2 on the
23 establishment of the patient system or the emergency
24 preparedness and response arrangements within a member
25 state.

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1 Protection of public exposure has been
2 updated to the new ICRP recommendations. The
3 protection strategies include protective actions and
4 these must justified and optimized. The ICRP now use
5 a term reference level instead of action level.

6 Reference levels apply to residual dose
7 and the BSS recommends a reference level in the range
8 of 20 to 100 milisieverts. Half of the reference
9 levels have been established, developed generic
10 criteria for particular protective and other actions.

11 These actions maybe say iodine prophylaxis
12 or evacuation, sheltering, reaction to food, Ethiopia
13 cetera. And there may be default triggers for
14 initiating different parts of the response plan.

15 And the requirements -- in relation to the
16 protective strategies and then the response will be
17 taken to implementation of their arrangements.

18 The annex -- annex four includes generic
19 criteria numbers for in relation to prevention of
20 acute effects. It wasn't tabled in annex four in
21 relation to prevention of stochastic events that has
22 been taken out or has not been included.

23 It was included in earlier drafts, it was
24 not included in draft 3.0 it is in a safety guide,
25 which is under -- close to completion and is going

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1 through the approval processes within the agency's set
2 of documents at present.

3 And these paragraphs here are consistent
4 with what's in this other safety guide on the generic
5 criteria for these protective actions. The next part
6 of chapter on emergency preparedness, also emerging
7 exposure situation covers exposure emergency workers.

8 The definition of emergency worker has
9 been changed in the BSS and now covers any person
10 having a defined role as a worker in an emergency and
11 who might be exposed while having -- while taking
12 actions in response to the emergency.

13 The section on emergency workers includes
14 a program for controlling dose. They should not be
15 sub-bullets, they should be to the definition, they're
16 sub-bullets to the exposure chapter.

17 That the requirements for occupational
18 exposure in planned exposure situations apply, but
19 there are certainly cases where the maximum single
20 year dose for occupational exposure may be exceeded
21 during an emergency.

22 And they're set out within the paragraphs
23 of this section on emergency, protection of emergency
24 workers.

25 And the final part of this chapter covers

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1 transition from emergency exposure situation to
2 existing exposure situation and that there must be
3 arrangements made in advance for this transition.

4 The final section of the revised BSS
5 covers existing exposure situations. A few comments
6 before I cover the text. The current BSS they're
7 referred to as chronic exposure situations, so we're
8 now adopting the ICRP terminology, existing exposure
9 situation.

10 The current BSS uses action levels. An
11 action level is if you exceed this level you're
12 required to take action to reduce the exposure
13 situation to below the action level.

14 The new ICRP recommendations use a
15 reference level and the reference level it's
16 undesirable to be exposed situation above the
17 reference level, but you're still required to optimize
18 below the reference level. So it's a slight -- so
19 it's been a major change in approach to any of the
20 existing exposure situations.

21 And compared to the current BSS, the
22 section on existing exposures have been expanded and
23 completely rewritten. So the scope of existing
24 exposures, exposure to natural sources so includes
25 radon, radon in dwellings or radon in work places,

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1 radio nuclides in commodities, exposure to accrue to
2 what cosmic radiation is now specifically included
3 within the BSS -- has been included in the current
4 BSS.

5 And this chapter includes exposure to
6 contamination of various residual radioactive material
7 from past activities which were never regulated or
8 regulated to different standards.

9 And it covers residual radioactive
10 material from nuclear radiological emergency, after
11 the emergency has been declared ended. So this is
12 carries on from the previous chapter where we saw the
13 transition from emergency exposure situation to
14 existing exposure situation.

15 The generic requirements for existing
16 exposure situation there are specific responsibilities
17 assigned to government, regulatory bodies and other
18 relevant authorities, It may not be the regulatory
19 body for regulating practices who's the responsible
20 party within the member state and maybe another
21 government agency.

22 The requirement in relation to government
23 and these other various other authorities to identify
24 and evaluate existing exposure situations, to
25 establish a framework for protection of safety, to

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1 develop national strategies, evaluation of existing
2 exposure situations, to establish appropriate
3 reference levels and to involve stakeholders.

4 And again, this chapter is broken into two
5 sections; one for public exposure and one for
6 occupational exposure.

7 Within the public exposure situation,
8 there's a general section, three paragraphs in
9 relation to protecting the public, justification of
10 protective actions and optimization of protection and
11 general recommends that the reference levels for the
12 public exposure be in the range of 1 to 20
13 millisieverts.

14 There's a large group of paragraphs in the
15 section on remediation of areas contaminated by
16 residual radioactive material. There's currently a
17 safety guide -- sorry a requirements document W-SR-3
18 on remediation and essentially all the text in this
19 part of the document has been brought in from W-SR-3
20 and W-SR-3 will no longer be superceded by this
21 revised BSS.

22 And there's a paragraph on areas, living
23 in areas with residual contamination. There's a
24 section on indoor radon, radon in dwellings or radon
25 in other public buildings with examples schools or

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1 hospitals.

2 And requirements in relation to
3 dissemination of information to the public that if a
4 significant radon level is found within the country
5 that there should be a national action plan.

6 The reverence reference level established
7 in general not exceed 300 becquerel per meter cubed
8 and there's a requirement then to optimized protection
9 below this reverence reference level.

10 There's a technical meeting in December of
11 last year to -- on radon. And the outcome from
12 technical meeting was to recommend that the reverence
13 reference level in the BSS should be that in general
14 should not exceed 300 becquerel per meter cubed and
15 then the states could decided on the lower level if
16 they wished to adopt a lower level.

17 The next part of protection of public
18 relation commodities, for example food, water,
19 construction materials is recommended reverence level
20 for the not exceed 1 milisievert per year.

21 And for example for food it recommends
22 after an accident the Codex Alimentarius values be
23 considered by the regulatory body in relation to food.

24 The water organization has also published guidelines
25 for drinking water which will be considered.

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1 The final paragraph in Section 5 are to
2 occupational exposure. And the first part says
3 requirements for public exposure for occupational
4 exposure except for a number of situations.

5 In remediation of contamination areas that
6 occupational exposure is controlled as per the
7 requirements for planned exposure situations. So it's
8 considered that the activity is planned and therefore
9 the worker should be under an occupational protection
10 program.

11 In relation to radon in workplaces, the
12 technical meeting heard by the agency in December of
13 last year recommended a reference level not to exceed
14 1,000 becquerel per meter cubed.

15 So if the level is below 1,000 becquerel
16 per meter cubed, the requirements stated earlier in
17 this chapter would apply. I it's above 1,000
18 becquerel per meter cubed, then the requirements for
19 planned exposed situation would apply for workers.

20 This would require the protection to be
21 optimized and as I already said, if the radon levels
22 remained above the reference level after optimization,
23 the require for occupational exposure in section 3
24 apply to workers in areas where any average levels
25 exceed 1,000 becquerel per meter cubed.

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1 The final part of the occupational
2 exposure in this chapter on existing exposure relates
3 to exposure of cosmic rays. In relation to air crew,
4 it's up to the relevant authority to determine where
5 the assessment exposure is required and whether any
6 agency requirements on the chapter on occupational
7 exposure in section 3 apply, e.g., for pregnant air
8 crew.

9 And then we were requested by a number of
10 organizations to include some paragraphs on humans in
11 space-based activities. The European Space Agency and
12 the Canadian Space Agency requested that there be a
13 paragraph in the BSS.

14 And so the paragraph says up to the
15 relevant authority to establish a framework for
16 radiation protection appropriate for this situation.
17 They feel like this must be made to optimize
18 protection, but the dose limitation requirements set
19 out do not apply to humans in space-based activities.

20 Then there are four schedules. Schedule 1
21 comes exemption and clearance. The first part of the
22 schedule is the criteria for exemption and clearance,
23 dosimetric criteria and they include tables for radio
24 nuclides.

25 Exempt, one title has exemption of

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1 moderate quantities and material and a second title
2 which covers levels for clearance and exemption of
3 bulk quantities of material.

4 The current BSS includes only the table
5 for moderate quantities, but since the current BSS was
6 published, the agency has developed a safety guide,
7 RS-G-1.7 which covered clearance and exemption of bulk
8 quantities and that has now been brought into the BSS.

9 So the artificial radio nuclides are
10 entitled I-2 and for natural radio nuclides exemption
11 values clear and phase are 1 becquerel per gram as per
12 the paragraph on defining the scope for natural radio
13 nuclides in uranium thorium chains.

14 Schedule 2 sets out categories for source
15 using common practices. This is a new schedule in the
16 BSS, it is taken from a safety guide, RS-G-1.9, which
17 was published several years ago. So this is updated
18 since the current BSS.

19 And this characterization scheme was using
20 the code of conduct for safety and security of
21 radioactive sources.

22 Schedule 3 sets out dose limits for
23 workers and for public and planned exposure situations
24 and it does change from the current BSS, for ICRP
25 recommendations.

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1 The schedule does include dose
2 coefficients for calculating exposure from radio
3 nuclides for ingestion or inhalation.

4 The current BSS includes many, many pages
5 of titles for these dose coefficients and we're
6 currently investigating ways on presenting the tables
7 in the new BSS or the reference to the ICRP
8 publications or include a CD-ROM in the back cover
9 with these dose coefficients.

10 These dose coefficients are currently
11 being revised based on the 2007 recommendations of
12 ICRP and they may not be -- a revision of those dose
13 coefficients may not be completed by the time the BSS
14 is completed.

15 So, if it's CD-ROM we can update the CD-
16 ROMs after the -- as ICRP develops or publishes the
17 new sets of coefficients.

18 Schedule 4 covers generic criteria for
19 emergency exposure situations. Table 4.1 is generic
20 criteria for acute doses in which protective and other
21 actions are expected to be taken.

22 And table 4.2 a guidance for restricting
23 exposure to emergency workers. And this covers other
24 situations where they grant them the annual dose
25 limit.

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1 The next slide is a glossary. There's a
2 glossary of terms in the BSS. The current draft
3 includes those terms which are used in the BSS and
4 list those which have been modified from the current
5 IAEA glossary.

6 The IAEA has a separate publication on
7 this glossary which has been updated in parallel with
8 the original BSS. So any comments on the definitions
9 are also welcome.

10 I have not included this slide on the next
11 steps, but I'll just make a few comments before I
12 finish. I mean the documents have been sent to member
13 states by the -- IAEA member states by the agency and
14 we have a standard 120-day comment period.

15 It was posted, draft 3.0 was posted on the
16 agency's website on about the 30th of January and the
17 closing day for comment is the 31st of May.

18 And the agency issues a note to the
19 ministries of foreign affairs and comments are
20 normally posted back through the official channels,
21 which come back through the Ministry of Foreign
22 Affairs to the agencies.

23 Some of the other co-sponsoring
24 organizations are also seeking comment from their
25 member states. The agency has -- from the 31st of

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1 May, the agency will then be considering these
2 comments.

3 And radiation, nuclear safety, waste
4 safety and transport safety committees meet in the
5 last two weeks of June or last three weeks of June, I
6 think transport one is the second week of June and the
7 radiation safety committee meets the third week of
8 June and the waste safety and the nuclear safety are
9 in the last week of June.

10 We are hoping to be able to present a
11 summary of the comments to those committees during
12 those meetings and if any issues identified prior to
13 those meetings we may even seek some feedback on those
14 key issues.

15 The intention is that the agency will go
16 through those comments by mid to late July and we're
17 planning to have a meeting our co-sponsors in August
18 to review all the comments and revise the text on the
19 BSS.

20 The intention is that we would send
21 another draft to the committees by mid-September. The
22 committees meet in the last week of November and early
23 December for approval of the document. Now we hope we
24 can make this schedule.

25 The CSS meets March next year, we may

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1 attempt to get it to the CSS then and the Board of
2 Governors in June next year. This is how we'd like to
3 proceed and are our next steps. So I thank you.

4 MR. CAMERON: Thank you, Trevor. That was
5 a real tour-de-force. There's a lot of work
6 represented there, obviously and thanks for the
7 addition of the schedule.

8 We're going to be going into in depth on
9 sections three four and five, and when we do our open
10 session there may be people who want to talk about the
11 schedules, particularly schedule 1.

12 But, anybody in the room have any
13 preparatory or overarching issues or whatever you want
14 to say? Amanda?

15 MS. ANDERSON: In particular on Schedule
16 1, hopefully we will go into a lot more detail this
17 afternoon on that. I know from our own agency at
18 Department of Energy we had looked at this schedule in
19 the first draft and done a crosswalk between what was
20 already existing and it seemed like there was a lot of
21 change.

22 We had asked for a technical explanation
23 of that. We notice there was change in follow-on
24 drafts, but we still have some concerns and in
25 particular because we do -- what's currently in place

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1 has been considered all throughout our regulations.

2 And so, you know, we have concerns about
3 how something like this may impact us and if it does,
4 we'd like to know what's the justification and is it
5 really more protective of the public and the
6 environment or is it just someone just felt like
7 changing numbers.

8 And so we do want to know -- we'd like to
9 go into a little more detail this afternoon.

10 MR. CAMERON: Okay. Thank you very much,
11 Amanda and Trevor, do you want to say anything about
12 that now just for starters? You get the gist, the
13 drift of Amanda's concern, correct?

14 DR. BOAL: Yes, I think it's probably best
15 that we go into further discussion this afternoon. I
16 mean, I understand the discussion happens on planned,
17 emergency, existing. So we may -- we discussed the
18 planned exposure part, we should cover Schedule 1
19 within that discussion, but maybe we'll leave it until
20 then.

21 MR. CAMERON: Okay. And I think Amanda is
22 interested in hearing about what's the rationale for
23 those changes too when we get there, you don't have to
24 --

25 DR. BOAL: Well the criteria, well I'm not

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1 quite sure what change you're referring to. The start
2 is the criteria for exemption is set out there's a
3 dose criteria of 10 microsieveverts per annum for
4 artificial radio nuclides with a low probability it
5 can be slightly higher exposure.

6 Table 1 includes now about 800 radio
7 nuclides. The current BSS has a much smaller number,
8 but we were asked to include extra radio nuclides and
9 we've now expanded the list, which is quite -- that's
10 the exemption values.

11 You may be more concerned about the
12 clearance?

13 MS. ANDERSON: Yes, accepted clearance.

14 DR. BOAL: Clearance values. The values
15 in the path for clearance on bulk quantities are taken
16 from the safety guide RS-G-1.7 and we have not changed
17 any of the values from RS-G-1.7 into the BSS.

18 We've just taken the table from RS-G-1.7,
19 which was published I think in 2005, 2006 and brought
20 straight into the BSS. So I'm not quite sure when you
21 said the change.

22 MS. ANDERSON: Well and that's where I
23 guess that's where I guess are questions were because
24 I know in the first draft, not for the additional
25 radio nuclides, but ones that were already existing on

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1 some of these.

2 And I haven't been able to do a crosswalk
3 yet on the latest draft, but we noticed some of the
4 existing values on a few different ones actually had
5 changed.

6 DR. BOAL: Well I'm not aware of changing
7 any, so we'll have to -- I'll talk to you.

8 MR. CAMERON: Okay. And we'll get into a
9 specific discussion of that and maybe we'll have some
10 examples of where there's been changes. Anybody else?

11 Yes, sir.

12 MR. THOMADSEN: Bruce Thomadsen. You used
13 the term optimization a lot through the document.
14 Optimization has a quite clear meaning in the English,
15 in the dictionary and in computer work and in
16 medicine.

17 And it's clearly not as you use it, since
18 there is really no way to optimize the exposure. And
19 mindful of the, as you say footnote, and as it's
20 written in the glossary in this document, what you
21 really mean is a balance between risk and benefit in
22 the exposure.

23 But rather than trying to redefine the
24 term optimization or relying on the reader to go to --
25 to know that they need to go to the glossary to see

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1 what that means, it might be best to use a term which
2 is clearer and more in line with its regular
3 definition; for example, balance.

4 MR. CAMERON: Thank you, Bruce. Let's put
5 that in the parking lot for discussion perhaps a more
6 descriptive word for that. Anybody else in the
7 audience before we see if there's some comments from
8 the phones?

9 Okay. Operator could we see if anybody on
10 the phones has a question or comment for us right now?

11 OPERATOR: Yes, sir. Diane D'Arrigo, go
12 ahead with your question.

13 MS. D'ARRIGO: I'm Diane D'Arrigo from
14 Nuclear Information and Resource Service. I wanted to
15 continue to express our opposition to exempting or
16 clearing radioactive material that are currently under
17 controls from controls.

18 And if someone in the U.S. agencies could
19 correct me, the only place that the tables, the
20 exemption tables exist now are in the transport regs,
21 is that correct?

22 MR. CAMERON: Rob?

23 MR. LEWIS: Sorry about that. This is Rob
24 Lewis. The values in the transport regulation are not
25 clearance, the values in the transport regulation in

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1 the U.S. are values below which you're exempt for
2 purposes of transportation as a hazardous material.

3 It does not mean that it's not regulated
4 at the origin or destination. But other than that I
5 think I would agree with the statement you made.

6 MR. CAMERON: And Diane anything more on
7 this?

8 MS. D'ARRIGO: Yes. I just want to
9 express public opposition to the U.S. adopting these
10 tables into our regulations.

11 MR. CAMERON: Okay. Thank you very much
12 Diane. And so noted here.

13 OPERATOR: We have another question from
14 Len Howard Ehrle again. Go ahead, sir.

15 MR. EHRLE: In relation to the previous
16 two comments, I certainly support Ms. D'Arrigo's
17 comments on behalf of the International Science
18 Oversight Board.

19 I certainly recognize what Bruce said as
20 well relative to a linguistic problem, which is true,
21 and I recognized it early on when I began medical
22 writing that required teaching in that my interviews
23 with over 50 medical physicists and radiologists in
24 preparational papers I was working on indicated that
25 there is a very great need for definitions across the

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1 board.

2 It's very difficult for clinicians who are
3 not trained let alone those in the field to understand
4 what is being communicated.

5 There's an additional problem that I
6 should note at the outset that underlies this document
7 and the problems with it and also the nuclear
8 regulatory position that is raised in this document.

9 That is that the IAEA has used
10 recommendations from the 2007 ICRP document as basis
11 for this draft. That document has been rendered
12 obsolete by events and activities and research over
13 the past two years.

14 Recently, obviously, the assembled must
15 have read about the recent activity and action by the
16 Vermont State Senate in not renewing the license for
17 Vermont Yankee.

18 This was based upon some of the
19 misinformation that was provided to the public, but
20 this is going on across the board, not just there.

21 And at the very time, the IAEA has dipped
22 into the medical radiation field in these standards
23 and here we have articles in the press that indicate
24 tremendous over exposures, some of which have even
25 caused death, but certainly future cancer and non-

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1 cancer diseases.

2 What's going on here is criminal. Make no
3 mistake about it. These standards are set to protect
4 the industry no matter whether it's in the radiology
5 field or in the nuclear reactor field.

6 And as such, they can not be given any
7 credence and they certainly must be discarded by the
8 Nuclear Regulatory Commission. And there is certainly
9 good evidence to support a call for this kind of
10 action.

11 And I hope it will be taken seriously by
12 the NRC and by our other agencies. And furthermore,
13 there is no place in the process where public interest
14 NGOs can be involved directly in this process.

15 The comment period is a poor substitute
16 for involving the process of standard promulgation,
17 which is vital. And when we are closed out from that
18 process, no comment period can take the place of that.

19 So we'll get into this in more detail in
20 the afternoon.

21 MR. CAMERON: Okay. Thank you Len and I
22 think when we get the appropriate point this
23 afternoon, I think people might be willing or be
24 interested in hearing more of an explanation about on
25 the point that you raised about ICRP 2007 being

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1 obsolete at this point. So we'll look forward to
2 that.

3 Anybody else on the phones, operator?

4 OPERATOR: No, sir, not at this time.

5 MR. CAMERON: Okay. Well we're going to
6 break for lunch here. We're going to come back at
7 1:15, okay, and we'll be back with you on the phone.
8 We're going for lunch now.

9 You can go for lunch here in the audience
10 to the cafeteria, but you can't get back down here
11 without an escort. And at about 1:10 -- pardon me?

12 STAFF: Around 1:00 we'll have --

13 MR. CAMERON: Okay. Around 1:00 there
14 will be escorts available.

15 STAFF: We will be at the elevator to
16 bring you back down.

17 MR. CAMERON: So, Leah, Monica, whomever
18 will be there to help get you back down. And bring a
19 warm coat with you.

20 (Whereupon, the foregoing matter went off the record
21 at 12:13 p.m. and resumed at 1:21 p.m.)
22
23

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1 A-F-T-E-R-N-O-O-N S-E-S-S-I-O-N

2 1:21 p.m.

3 MR. CAMERON: All right. We're going to
4 get started with this afternoon's topics. But before
5 we go to Section 3 and then we're just going to go
6 through these and when we get done with Section 3
7 we'll move to Section 4, Section 5 then open
8 discussion.

9 We thought it might be useful because the
10 issue that Bruce raised about defining terms is for
11 Don Cool to talk a little bit about the use of these
12 terms, try to put that into context for you.

13 And Don, do you want to do that and we'll
14 see if there's any questions and then we'll move to
15 Section 3?

16 DR. COOL: Yes, thank you, Chip. One of
17 the things that I realized as we were having the
18 discussion just before lunch is that there are a
19 number of terms of art, the way that certain words
20 have been used internationally.

21 They've been used in the ICRP
22 recommendations, they've been used in the IAEA safety
23 standards for a long enough period of time that those
24 of us who have had some interactions in that community
25 don't necessarily think about the fact that we don't

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1 use those terms or we don't use those terms that way
2 here in the United States.

3 And so following up on the point that was
4 made, there are a couple of words that are -- have a
5 standard usage internationally, which I think in part
6 we have to recognize that they're there.

7 And then try to make sure that we
8 understand the definition and usage so that we can
9 perhaps see if we can get beyond the term and get to
10 the underlying concept and any issues that may be
11 there in the kids of proposals that are being made.

12 And so I wrote down a couple of them and
13 people may have some others. So let me quickly do
14 these and see if there are other questions.

15 But a couple of the words that Trevor used
16 as he was describing the provisions, one of them was
17 constraint, which is actually I think perhaps an
18 underlying phrase for one of the biggest pieces of the
19 new concepts in the new ICRP recommendations.

20 But when it all boils down to it, a
21 constraint, if you look at it from the way ICRP used
22 it in the recommendations, is simply a planning value
23 in the process of doing your ALARA program, using the
24 U.S. terminology.

25 ICRP would say it's a planning value to be

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1 used in the process of optimization. And it's what
2 kinds of doses, total doses, individual doses, whoever
3 you might, whatever materials you might have in
4 planning your particular activity, what are the kinds
5 of things where you know you don't want to be.

6 And in the United States, for example, in
7 the nuclear power industry, you do all sorts of
8 planning, you do task specific planning, you do outage
9 planning and all sorts of things.

10 All of those values, sort of defining the
11 area where they don't want to be and within which
12 they're trying to see how well they can do. All of
13 those fit the definition of constraint the way ICRP
14 laid it out.

15 But it's when you think about the word
16 constraint, it isn't intuitively obvious, but that's
17 how the international community has been using the
18 term.

19 Another word that got thrown around was
20 reference level. And unfortunately the phrase
21 reference level gets used a couple of different ways
22 internationally.

23 In ICRPs activities, they talk about a
24 reference level in the exact same way that they talk
25 about a constraint. They use the word reference level

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1 if they're talking about an emergency situation or an
2 existing situation simply because you couldn't plan
3 for it in advance.

4 So it still represents a kind of dose or a
5 dose rate where you really don't want to be, but there
6 had to be some recognition that when you discovered
7 the situation or the event happened, you might or
8 might not have the opportunity to make sure that you
9 were below it.

10 Instead, you might have to use that as a
11 target on the way to trying to do the best that you
12 could for radiation protection.

13 But it's also used in the medical
14 community as a benchmark for what constitutes a good
15 level of practice, that which is well accomplished in
16 a particular kind of procedure for facilities to match
17 themselves to, to see whether or not they're doing
18 protection that's comparable to protection that's
19 being achieved elsewhere.

20 And so that has a slightly different
21 connotation than the way ICRP used it in their
22 recommendations.

23 The other couple things I want to mention,
24 one of them was optimization, which we talked about
25 just before lunch, where it really is a whole process

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1 of trying to balance the set of things that are the
2 risks and then the benefits and the costs and other
3 activities, which is not the mathematical finding the
4 minimum on any given situation.

5 And in fact, as ICRP often talks about,
6 I've had an opportunity to listen to some of the ICRP
7 members talk about it, is as much an operational sort
8 of activity, what are the things that we can do to
9 improve it, is that a reasonable thing to do, how much
10 is this going to cost, a day-to-day constantly trying
11 to improve things as the process of optimization.

12 And that's why Trevor, in talking about
13 one of the issues, one of the issues that I know the
14 Joint Secretariat when the draft was being developed
15 had was does it -- does the requirements say to
16 optimize.

17 Because how can you ever possibly know
18 that you're optimized because it will always change,
19 or is it you've made the thing subject to a process of
20 optimization being that you've analyzed it and you've
21 tried to figure out what are the best things to do and
22 you make sure you run through the process.

23 Each of those has issues and so part of
24 what we would look for some feedback, and I expect
25 many people will want to comment on as member states,

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1 is what's the right way to represent it, because there
2 are issues.

3 If you say a process to optimize it, well
4 of course you could always run the process, but does
5 that mean you ever actually have to do anything or you
6 just ran it through the process, you said fine and
7 then you go on versus if you say you optimize it,
8 which is something you could never actually measure.

9 So that's what I believe Trevor was
10 highlighting on that issue. The other concept that
11 tends to get some discussion is the question of
12 justification, how do you justify an exposure.

13 And that happens at all sorts of levels,
14 many of which the radiation protection things that we
15 would talk about here are only one contributor.

16 And there's much broader questions of in
17 the medical community, the medical benefit of the
18 procedure, the value of screening at a certain time in
19 order to prevent and catch disease early, down to the
20 national level question, does a country want to have a
21 nuclear power program.

22 And the radiation protection aspects of
23 that really are only one contributor to a much larger
24 dialog. And so those are some of the things that I
25 note that have been tossed out on the table which may

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1 have some sort of unique aspects.

2 And I hope that this little explanations
3 been helpful and maybe some people would want to ask
4 some questions about that, which will help further
5 with the discussion this afternoon. Thanks, Chip.

6 MR. CAMERON: Okay. Thank you, Don. Why
7 don't we move into Section 3 and there may be
8 questions on not only optimization, but all the terms
9 that you used and I think we had an issue on the
10 tritium leakage, were that fits in and I think we said
11 that's in three also.

12 So is there anybody who has a question or
13 comment on the Section 3, planned exposure situations?

14 Yes, sir, and please introduce yourself for us.

15 MR. UPDYKE: Sure and I'll try to keep
16 this brief. My name is Craig Updyke, I'm with the
17 National Electrical Manufacturers Association.

18 I'm a manager for trade and commercial
19 affairs at our trade association, which is the E-trade
20 association in the U.S. representing manufacturers of
21 electrical infrastructure equipment and medical
22 diagnostic imaging and therapy equipment.

23 And I believe the comments I'm making do
24 fit into this section. And I'll try to keep it brief,
25 I have some written comments here which I'll try to go

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1 through as quickly as possible. And I'm happy to
2 provide these in written form to the transcriber.

3 Certain types of products that are
4 commonly known in the U.S. as light bulbs, but in the
5 industry, in our industry are referred to as lamps,
6 require the use of a very small quantity of materials
7 that emit ionizing radiation.

8 Minimal amounts of these materials are
9 required in order to achieve the most efficient
10 generation of light. These substances are
11 indispensable for the high performance of the products
12 and are entirely safe as used at any time in the life
13 cycle of the product.

14 Single lamps, high intensity discharge
15 lamps and certain compact florescent lamps are well
16 below the IAEA regulatory limit values, however, bulk
17 shipments of these products may exceed the limit
18 values, even though the radiation levels are
19 indistinguishable from background levels in the
20 environment.

21 Transportation, distribution and use of
22 these types of lamps do not present a potential health
23 hazard. Several scientific studies in the European
24 Union and in the United States have shown that these
25 products are not dangerous goods if shipped in

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1 commercial packaging, and should therefore not be
2 subject to these -- to requirements.

3 The cost of compliance with the
4 regulations, including confusion among freight
5 carriers who are handling products labeled radioactive
6 and denials of shipments of those products greatly
7 outweigh any additional measures of safety afforded by
8 the IAEA marketing and documentation requirements that
9 are applied to these products currently.

10 And I'll try to go through the rest
11 relatively quickly as well. Four isotopes are applied
12 in lamp technology. The most important of these are
13 two, the rare noble gas krypton-85 and then naturally
14 occurring thorium-232.

15 These isotopes have been selected because
16 they have a sufficient half-life and a suitable type
17 of radiation with a good ability to ionize.

18 They emit alpha and beta radiation with
19 high ionization inside the product and without
20 penetrating the light bulb. The share of gamma
21 radiation, which may be able to penetrate the bulb is
22 negligible.

23 Therefore the radiation exposure to the
24 consumer or anyone who's handling that light bulb is
25 very small. The applied activity inside the lighting

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1 product ranges between a few and several thousand
2 becquerel.

3 Many lamp manufacturers have enhanced
4 their research and development for the reduction and
5 in some cases elimination of the radioactive
6 substances in their products and have already made
7 enormous progress. However, many current applications
8 do not work without the required radio nuclides.

9 The IAEA standards as they stand today not
10 only concern U.S. lamp companies, but also affect
11 other global lamp manufacturers and their customers.

12 And the regulations also concern
13 distributors of lamps such as wholesalers, installers,
14 retailers and manufacturers and distributors of
15 products containing these lamps, for example,
16 luminaries or lighting fixtures.

17 In our view, there's a clear disproportion
18 between the regulatory requirements on one hand to
19 protect the public and human health from danger and on
20 the other hand the scientific facts demonstrating the
21 safety of the mentioned lamps.

22 And we believe this disproportion needs to
23 be corrected. Now I should say before I go on, this
24 is an issue that has been brought up within the IAEA
25 context within the transit subcommittee and has been

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1 worked on for a number of years.

2 We believe the marketing requirements and
3 the related restrictions on marketing and use of these
4 types of products are unwarranted since the products
5 in question do not pose any of the risks that the
6 package label radioactive misleadingly suggests.

7 In addition, import licensing is
8 remarkable burden, not only for lamp producers, but
9 also for their customers. Presently, lamp producers
10 have to apply for licenses in more than 120 countries,
11 which usually also have different and unclear
12 licensing regulations.

13 On the underside, each and every customer
14 of the lamp producers in a country should apply for
15 licenses. But a handling and application of lighting
16 products by end users, however, there are no special
17 measures for necessary protection in the view of their
18 radioactivity.

19 The resulting radiation exposure by
20 handing them, consumers handling them, is negligible
21 and not considered to be dangerous. For end users,
22 therefore lighting products are not regarded as
23 dangerous goods.

24 The radiation exposure to the consumer by
25 lighting products ranges well below the natural

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1 background level by more than a factor of 100.

2 The lamps I'm speaking about are
3 associated with an exposure of 10 microsieverts per
4 annum which corresponds to a dose rate of 0.0023
5 microsieverts per hour.

6 However, many influences on the human life
7 cause much higher exposures, for example an airline
8 flight of an altitude of 10,000 meters or 33,000 feet
9 causes levels of exposure 2,000 times higher than that
10 for these lamps about which I'm speaking.

11 The lamp industry proposes to exempt these
12 products from the requirements of an IAEA Basic Safety
13 Standards concerning authorization and reporting.

14 This position is based on the fact that
15 lamps with low levels of ionizing substances are safe
16 as confirmed by numerous studies, which I won't go
17 into at this time, but I'm happy to provide
18 information to anyone who's interested in getting
19 those references.

20 Moreover, in a study performed on behalf
21 of my organization several years ago, the
22 radioactivity of a fully loaded shipping pallet of
23 packaged lamps could not be distinguished from
24 background levels of radiation.

25 So we submit that the low public and

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1 occupational radiation doses satisfy the principal
2 criteria for exemption from the BSS. We have a long
3 proposal, which I can provide to anyone who's
4 interested in seeing it.

5 I just will summarize that we would
6 propose that approved consumer products, such as these
7 lamps, should be generally exempted from the
8 requirements of the BSS if radioactive content inside
9 is sealed and no direct contact with the radioactive
10 material is possible and independent studies,
11 scientific studies demonstrate that there is no safety
12 hazard.

13 The lamp industry consumer products should
14 not be defined as exempted products requiring
15 exemption granted by a regulatory body, but should be
16 generally exempted from the BSS based on these
17 legitimate criteria.

18 Furthermore, we apply the inclusion in
19 Schedule 1 of the draft, the current draft BSS, so the
20 limit values for thorium-232 from the current TS-R-1
21 document and even welcomes the readiness of the U.S.
22 and IAEA experts to consider our position and
23 proposals.

24 Than you very much for your indulgence.

25 MR. CAMERON: Okay. Thank you, Craig.

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1 And that was largely on the Schedule 1, is that
2 correct?

3 MR. UPDYKE: Yes.

4 MR. CAMERON: Okay. And Trevor or anybody
5 on the Panel, Rob, Don, any comment on any of that? I
6 think Rob does and we'll see if Trevor does. Rob?

7 MR. LEWIS: I just have the clarifying
8 comment. I guess Mr. Updyke what you're trying to
9 show, the situation you have is that the lamps exceed
10 the Table 1 values for krypton or thorium-232 and you
11 would propose that the BSS include a specific
12 exemption saying that that regulation or that standard
13 would not apply to consumer products provided they're
14 sealed?

15 MR. UPDYKE: I don't want to take the
16 position of speaking for other consumer product
17 industries of course, but that is something that we
18 would submit for a discussion.

19 We know that's something that has been
20 debated at the IAEA previously about how to treat
21 consumer products and that it's not a great
22 willingness to generally exempt consumer products.

23 We'll certainly be making the case on our
24 behalf for these specific, these very specific
25 products.

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1 MR. CAMERON: And Trevor, anything for the
2 audience on this?

3 DR. BOAL: Yes. I'm aware there's been
4 discussions at the agency on these products,
5 especially through the transport committee and I know
6 there's been a working group meeting in the last two
7 or three months on a document which will be fed into
8 transport committee and presumably will influence the
9 BSS will come into the process for reviewing the BSS
10 as well.

11 But I'm aware there's a document in
12 development in relation to these products.

13 MR. CAMERON: Okay. Thank you. Anybody
14 else on this particular -- let's see if there's
15 anything on Schedule 3. We are going to go back and
16 make sure that we address Amanda's questions on the
17 schedule.

18 How about anything on schedule -- or
19 Section 3, excuse me? Well let's go to the phones and
20 see if anybody there has anything to add on Section 3
21 or since that was a comment on the schedule, perhaps
22 Diane has something on that.

23 Operator, can we see if there's any
24 comments on this.

25 OPERATOR: Certainly. To ask a question,

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1 please press star one. Just a moment.

2 MR. CAMERON: Okay. Well we'll tune back
3 in with you.

4 OPERATOR: No, I have a question for you
5 just a moment. It's coming through.

6 MR. CAMERON: All right, sorry. What's
7 that, the nebula crab, the crab nebula? Is that where
8 it's coming from? All right.

9 DR. COOL: Maybe somebody has the mute on
10 their phone or something.

11 OPERATOR: Okay, finally your first
12 question comes from Diane D'Arrigo. Your line is open
13 ma'am.

14 MS. D'ARRIGO: Oh, hi. It's Diane
15 D'Arrigo. I wanted to express a concern that consumer
16 products or any radioactive materials that there
17 should be some notification. I mean, in the situation
18 that was just discussed, are the bulbs always going to
19 be sealed, can't the seals be broken.

20 I think it's important that people know,
21 even if it's a small amount of radioactivity that it's
22 present. I don't think people know in their smoke
23 detectors that it's there.

24 And my main issue is not consumer
25 products, but I do believe that things are being

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1 disbursed that are radioactive that there needs to be
2 labeling of some kind and so there's a concern with
3 that.

4 But the thing that I wanted to say to the
5 IAEA is that, you know, once again, that throughout
6 the United States there's strong opposition to
7 exempting, and I'm not sure because I don't have all
8 of your documents right here, but whether you're
9 calling it exemption or clearance.

10 But that we oppose these provisions in the
11 IAEA and in the ICRP and will continue to press our
12 government agencies not to adopt them and complain to
13 them for their part in including them in the
14 international regulations or recommendations.

15 MR. CAMERON: Okay. Thank you, Diane.
16 Operator, anybody else at this point?

17 OPERATOR: No further questions at this
18 time.

19 MR. CAMERON: Okay. Thank you, operator.
20 Cindy, do you have something?

21 OPERATOR: Sir, we just had another
22 question come in.

23 MR. CAMERON: Okay. We'll be right back
24 to you, we have someone who's ready to speak.

25 OPERATOR: Would you like to take it?

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1 DR. COOL: She can't hear you.

2 MR. CAMERON: Okay. Go ahead, we'll go
3 with you operator.

4 OPERATOR: The next question comes from
5 Len Ehrle. Your line is open, sir.

6 MR. EHRLE: I'm on?

7 MR. CAMERON: Yes, we hear you Len.

8 MR. EHRLE: Okay, thanks. Just one brief
9 comment. I certainly support the concerns that Diane
10 expressed and I would add to it that in view of the
11 BEIR-7 reports conclusion that there's no safe dose of
12 radiation right down to zero, it certainly would
13 suggest that persons dealing with standards take that
14 into account.

15 Because it certainly is implicit in that
16 statement that there is a risk following that albeit
17 small. But as we all know, radiation is cumulative
18 and so the combined effect of other radiation
19 procedures that whether it's in occupations or general
20 public, have to be taken into consideration,
21 unfortunately they are not.

22 MR. CAMERON: Okay. Thank you, Len.
23 We're going to go here for a question or comment and
24 then I'm going to ask the panel that we have, Trevor
25 and Don and Rob whether they have any comments on

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1 this. Cindy?

2 MS. FOLKERS: Sure. This is Cindy Folkers
3 with Beyond Nuclear. And we really are going to have
4 to insist that any product that contains a
5 radioisotope of any sort be labeled as such,
6 especially when you are having consumers going and
7 choose a product.

8 It's, you know, if we're going to have a
9 so-called free market society that assumes an informed
10 consumer and a consumer cannot be informed if the
11 content of what they're purchasing is unknown to them
12 and if the health effects are not clear.

13 MR. CAMERON: All right. Thank you. Any
14 commentary from the panel on what you heard from Diane
15 and Len and Cindy or anything that Craig said?

16 MR. LEWIS: Well, I think we have
17 understood the comments that have been made. But I do
18 want to point out, Trevor, correct me if I'm wrong,
19 but in terms of what's in the BSS, there is no marking
20 and label requirements of devices.

21 I think that the comment that was made
22 about the light bulbs was focused at the transport
23 regulation, which when it was changed in 2000 or 2001,
24 I don't remember the date, added the requirement to
25 now have marking of small devices like light bulbs.

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1 So in 2000 the IAEA changed the transport
2 requirements, not the BSS to add marking. And the
3 comment now is from industry representative in the
4 comments and opposition that have been voiced of that.

5 We understand the comments, but to be clear, those
6 aren't comments on the BSS.

7 MR. CAMERON: Okay. So to clarify,
8 Craig's comments really were applicable to transport?

9 MR. LEWIS: Well I took Craig's comment to
10 mean that there in the BSS there could be an exemption
11 for particular products. And we heard comments and
12 opposition to that comment as well, but the marketing
13 issue in and of itself is related to the transport
14 regulation.

15 MR. CAMERON: And Cindy, your comment was
16 broader in terms of labeling of products.

17 MS. FOLKERS: What I wanted to say was
18 labeling and you mentioned more concern than necessary
19 based on a label. And I don't want that to go -- I
20 want consumers to be aware of what they're purchasing.

21 So if his comment was directed toward the
22 consumer end of things, meaning individual consumers,
23 then we would insist that those products be labeled as
24 containing radioactive material.

25 MR. CAMERON: Okay, thank you. Trevor?

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1 DR. BOAL: The BSS does contain
2 requirements for consumer products, paragraph 3-137 to
3 3-142 and it does include a comment in relation to
4 labeling and identifying of radio nuclides
5 particularly aimed at items like smoke detectors,
6 Ethiopia cetera.

7 So, when you say about smoke detectors,
8 there should be labels that contains small amount of
9 americium what radio nuclide is included in it. I'm
10 not aware of all the issues relating around the lamps
11 and I'm not quite sure what the -- whether the lamps
12 are using all products or all types of lamps with any
13 specific types of lamps where the radio nuclides are
14 included.

15 There's an issue in which this working
16 group is looking at currently.

17 MR. CAMERON: Are you finished Trevor?

18 DR. BOAL: Talking, yes.

19 MR. CAMERON: Okay. Craig?

20 MR. UPDYKE: I'll just make two clarifying
21 comments in response to what's been said. These
22 products to which I'm referring are not really
23 consumer products in the sense that we would go out to
24 Home Depot here in the United States and purchase them
25 these are -- or you and I would purchase them.

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1 These are commercial and industrial types
2 of products that you find in factories and outdoor
3 lighting and other things. So it's not something that
4 you or I would necessarily go out and handle.

5 And we certainly do not oppose and
6 certainly support the comments that consumers should
7 be aware of what they're purchasing and the individual
8 package that's being sold to the commercial and
9 industrial or individual consumer should have a notice
10 on it.

11 We are much more focused on the shipping
12 packaging that is -- that can contain hundreds of
13 lamps that cannot be detected as a radioactive hazard
14 and do not present radioactive hazard in
15 transportation.

16 So going back to what Mr. Lewis mentioned
17 on the transport regulations. So I hope that
18 clarifies a couple of issues.

19 MR. LEWIS: Yes.

20 MR. CAMERON: Yes, that's good. Thank
21 you.

22 DR. BOAL: Can I one more comment on that?

23 MR. CAMERON: Yes, go ahead Trevor.

24 DR. BOAL: I mean this issue is also taken
25 up on the BSS and I think one of the paragraphs was --

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1 referred to the paragraph where the information is on
2 the retail packaging. I think the paragraph text may
3 have been changed. I know there is an issue about the
4 transport, but that is dealt with in the transport
5 regulations and not in the BSS.

6 But there is -- we had to make sure that
7 the terminology used in the BSS was going to be
8 consistent with the terminology used in the transport
9 regulations as far as packaging and we've worked to do
10 that.

11 MR. CAMERON: Okay. Is there anything
12 more that we want to say or -- on the leakage of
13 tritium from nuclear power plants? That's covered by
14 this section, correct? I think that's what we said
15 before.

16 Cindy, do you want to expand?

17 MS. FOLKERS: I want a clarification
18 actually, and I'm not sure that this question is for
19 IAEA as much as it is for NRC and depending on what
20 pieces of this they do and don't adopt.

21 I suppose with Vermont Yankee, I don't
22 know when it was licensed, but I'm assuming that under
23 the original license that this tritium leakage as of
24 late is a planned release. And I'm wondering what
25 health criteria or studies they based the release on

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1 at the time it was licensed.

2 And if we are looking at licenses for new
3 reactors, what studies and criteria are we going to be
4 basing those on and how are they different?

5 Because over the life span of a reactor,
6 as we get more and more into the health and the
7 science of what's going on and how radiation affects
8 human beings, I'm not sure that we can have static
9 licenses for nuclear reactors.

10 Because as we learn more and more, certain
11 things may be more damaging and should be taken into
12 account as the life of the reactor continues.

13 MR. CAMERON: Okay. Can we have some NRC
14 commentary on that? And can we also, if we can, try
15 to relate that back to the BSS in some way? We're
16 going to go to Rob and then perhaps Don. Rob?

17 MR. LEWIS: And I think industry person
18 had wanted to make a comment when we're done. But,
19 from the NRC point of view on the evolving issues,
20 Vermont Yankee, neither Don or I are in the part of
21 NRC that's working on that.

22 I'm not trying to dodge the question. I
23 think you asked a good question. I understand the
24 question. I think our earlier answer was if, you
25 know, if we had in the U.S. the regulations that are

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1 structured like the BSS, we would cover releases from
2 a plant when we license the plant in the safety
3 evaluation -- safety analysis report that's submitted
4 with the license application.

5 That's not to say what any particular
6 limit would be for any nuclide, that's part of the
7 licensing application and the safety analysis report.

8 And that's the structure essentially that
9 we have today under NRC regs in Part 20 and 10-CFR-
10 Part 50 for reactor licensing. So that fundamental
11 structure wouldn't change because of the way that the
12 BSS is formatted.

13 And I think our point was if releases from
14 plants are part of a planned exposure situation as the
15 way BSS has been things. And once you find a release
16 and there's environmental contamination, then you have
17 a planned exposure situation to clean it up.

18 Now, some releases like a prompt release,
19 like Chernobyl, would be an emergency exposure
20 situation. But the slowly leaking tritium into the
21 groundwater I don't think would be considered an
22 emergency exposure situation because of the dose. It
23 wouldn't meet the definition if you look at the
24 definition of those.

25 So all that said though, we do not have a

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1 static licensing situation. We have a system in the
2 Nuclear Regulatory Commission to change our regulation
3 as new information is learned and we have a system to
4 require plants to upgrade where there's a safety
5 issue, that's called back-fit.

6 And there's evaluations required, we have
7 a committee and generic review of -- CRGR, Committee
8 to Review Generic Requirements, which is chartered to
9 do just that, look at new information and new
10 regulations and see if they should be applied
11 retrospectively to plants that are already operating.

12 So, hopefully that gives you a little bit
13 of a response with the proviso that neither Don or I
14 have been involved in the Vermont Yankee or the other
15 reactor tritium leaks, but I'm trying to be as
16 responsive as I can from the generic point of view.

17 MR. CAMERON: And just to make sure, maybe
18 Don you can address this just to make sure that people
19 understand this and, you know, I can be the ignoramus
20 as the facilitator.

21 There are planned releases, the limits in
22 Part 20, what Appendix B or is that Table B, but if
23 there's a big spike of tritium that turns up in a
24 monitoring well above those limits, that falls under
25 the emergency?

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1 DR. COOL: No.

2 MR. LEWIS: No, no, no.

3 DR. COOL: Let me try to add a little bit
4 more clarity because it is complicated, no matter how
5 you sort of slice up this particular issue.

6 Planned means that you're talking about an
7 activity like running a nuclear power plant that you
8 planned to do. And so in your planning, you should be
9 planning to try and control all the materials.

10 Now, one of the things that has to be
11 looked and is looked at in the licensing of the
12 facility is the potential for releases in effluence.

13 There may be circumstances, and I think
14 some of the tritium in groundwater is one of these
15 where the conduct of the activities did result in a
16 release, it wasn't one of the things that was planned,
17 they didn't plan to release the tritium, but it
18 happened in the context of activities that they were
19 ongoing and doing, which puts it into this exposure
20 category of the IAEA.

21 So I believe from the standpoint of the
22 IAEAs regulations, and from our regulations, something
23 like this which is ongoing, occurring as part of the
24 normal activities, I'll say normal, operators of the
25 facility all must be dealt with in the context of the

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1 planning.

2 So, the agency is now requiring industry
3 to look at and deal with the question of these
4 releases which had not been previously anticipated and
5 analyzed and do something about it.

6 Contrast that with emergency, which I
7 think is probably best sort of put in a definition
8 where something has happened which takes you really
9 outside of the normal perimeters of the expected
10 operational activities.

11 And where you've got to go in and do
12 something immediately in order to try and regain
13 control of the activity, in order to try and provide
14 appropriate protection and the doses usually are
15 higher, so you need to take immediate actions.

16 Things may need to happen fairly promptly
17 when you find something like the tritium in the
18 groundwater wells, but I think it was probably best to
19 keep a distinction between something that happens like
20 right now because of a completely unexpected something
21 broke and you need to take some actions in the
22 facility to regain control of the facility and deal
23 with the exposures.

24 And something from the conduct of
25 activities which you do need to react to, understand,

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1 respond, inspect, correct and modify as part of the
2 ongoing licensing inspection enforcement of the
3 facility. I hope that helps a little bit.

4 MR. CAMERON: Okay. Thanks Don. We're
5 going to go to Henry Morton and then I want to check
6 in with Diane and Len and then we'll go to emergency
7 exposure Section 4 and I'm going to turn the
8 microphone to my colleague Elva. Henry?

9 MR. MORTON: Henry Morton. I'm not
10 familiar with this particular case so the first key
11 question was the route of discharge through an
12 effluent treatment system or was it a leakage through
13 -- from piping through an unexpected direction?

14 I think the way, instantly the way the
15 issue seems to me is this, if it wasn't through an
16 effluent pipe or system, airborne or liquid, then it
17 would be subject to Part 50, Appendix I, which
18 regulates the radioactivity in the effluent as an
19 operational or a planned release.

20 If it were not, but rather was an
21 unexpected leakage through a building into the ground
22 or something like that, then it would seem to me that
23 perhaps this becomes subject to the timeliness rule
24 under Part 20, Subpart E, which would then in effect
25 begin to subject the question of this radioactive

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1 material in the ground subject to perhaps
2 decommissioning timeliness rule.

3 And then of course the next question is,
4 was it found inside the restricted area or out in the
5 public area beyond -- in the publically accessible
6 area. But that is the way it would seem to me, but
7 then in either case, in either case it seems to be to
8 be subject to probably one of those two regulations
9 for action.

10 MR. CAMERON: Okay. Thanks Henry. And
11 Don, you want to say something on that and can you
12 tell us if this is going to be something that would be
13 going into the interagency debate on what the country
14 position, i.e., U.S. position is going to be on the
15 BSS? Just so we can see if we're connecting the dots
16 here or whether there's no dots to be connected.

17 DR. COOL: Yes, thank you, Chip. That's
18 actually exactly what I wanted to do. Because there
19 are a lot of the details of the event around some of
20 the findings of tritium at various nuclear power
21 plants, which are really beyond the scope of these
22 discussions here.

23 And there are ongoing investigations to
24 try and find the causes, sources, do corrective
25 actions and otherwise which, you know, we don't have

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1 the right knowledge to hold a really informed
2 discussion right here.

3 But what I take away from this is that the
4 interagency needs to look carefully at the question of
5 whether the provisions in the Basic Safety Standards
6 have a mechanism for clearly providing the right kind
7 of assessment before an activity is licensed and the
8 right kind of monitoring and inspection, to cause the
9 right kind of inspection and monitoring as activities
10 are being conducted.

11 In a situation like this where it may not
12 be on the a priory, identified list of effluent
13 pathways, but which as a result of activities, a
14 release may in fact occur at some point in time, in
15 order to make sure, as a matter of our comments,
16 whether or not a comment needs to be made, that this
17 is not properly dealt with.

18 And if it's not properly dealt with to
19 perhaps identify a mechanism that would help make sure
20 that it was dealt with. And we could reflect as to
21 whether there is something within the U.S. regulatory
22 structure that's doing it, we can suggest to them or
23 otherwise.

24 So I take that as something that the
25 interagency should look at in developing the comments

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1 is to ask this question and do that cross check.

2 MR. CAMERON: Great. That's a good
3 connection. Thank you, Cindy for brining that up.
4 Operator, can we see if Len Ehrle or Diane D'Arrigo
5 have anything that they want to add to the discussion
6 on tritium? And I think then we're going to go -- or
7 anything else in Section 3 and then we'll go to
8 Section 4.

9 OPERATOR: Diane, could you press star one
10 again on your touch tone phone, please? She took
11 herself out of the queue.

12 MR. CAMERON: Okay. And is Len, does Len
13 Ehrle want to say anything on this issue?

14 OPERATOR: Press star one on your touch
15 tone phone. One moment, sir.

16 MR. CAMERON: All right. Thank you.

17 OPERATOR: Go ahead Len.

18 MR. EHRLE: Thank you. Are we still
19 discussing the issues, other issues related not just
20 to tritium, but to the Section 1 on standards
21 generally?

22 Has that been -- because you're stating
23 we're now going to go to Section 4 and of course
24 there's Section 2 and 3 that have some specifics in it
25 as well.

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1 Bu in relation to the tritium issues, I've
2 been studying radiation health effects at low dose for
3 over 40 years, and in my readings I was amazed to find
4 that in Canada, they justified releases of tritium
5 into the Ottawa River as a de minimis and then went on
6 to explain that it dissipates in the water.

7 It was an amazing kind of a revelation to
8 me, except it supports the general notion that has
9 been promulgated that the solution to pollution is
10 dilution. Well, follow that line of reasoning and see
11 where it gets you.

12 And so here we have releases that
13 apparently from the prior discussion were unplanned
14 because they didn't know that tritium would be
15 released from the normal process in the reactor.

16 There may be other releases such as xenon
17 and krypton that are released that cannot be
18 contained. And then this leads to a discussion of
19 what was found in the KKiKK study, in Germany, where
20 they found elevated levels of childhood leukemia
21 around all reactors and they could not of course
22 identify any confounding factors because there weren't
23 any.

24 The same thing happened at Chernobyl, all
25 the releases related in the, for instance, low birth

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1 weight and related in the radiological problems,
2 radiation sickness and other issues that were hidden
3 by the government and were denied that there were any
4 problem because these releases were de minimis, they
5 were too low to have any health risk.

6 Well this is absurd on its face,
7 particularly in light of the no safe dose issue that
8 was dealt with by BEIR-7. So, in that sense I don't
9 know what you do with this because obviously if
10 there's some things that come out of the reactor that
11 cause, in the case of the German study, elevated
12 levels of childhood leukemia and then there's a cover
13 up of that because we've had commentaries from our
14 international oversight board, including my own, that
15 have been refused publication in environmental health
16 perspective and in science.

17 And I was an AAAS member. And they're
18 denying publication of clarifying statements and
19 commentaries, this was all across the board, and
20 that's what we're running into. So here we have this
21 issue and it relates to all of these safety principals
22 as well in Section 1.

23 And it relates to the international, the
24 ICRP standards and Dr. Cool you mentioned that you
25 wanted me to clarify the issue relative to the

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1 conflicts of interest and the issue with the document,
2 the 2007 document. Is that germane now or do you want
3 that later?

4 MR. CAMERON: Why don't you address it
5 now.

6 MR. EHRLE: Okay. It does relate to this
7 issue because first of all, ICRP has never
8 acknowledged research on internal dose, that which we
9 eat in our food and breathe in the air.

10 And these alpha and beta particles are
11 much more deleterious than external dose by which the
12 ICRP standards are based and which IAEA accepts
13 without question, because that's the foundation for
14 this document.

15 And so here we have a standard based upon
16 the A-bomb releases, a single external dose where they
17 never acknowledged -- they didn't even acknowledge
18 prior exposure from x-ray to these victims, they just
19 took the statistics from the dose, gamma dose from the
20 bomb.

21 And so there were other confounding
22 factors that were eliminated from the research, the
23 subsequent research that gave rise to the BEIR
24 statements. And so these principals are difficult to
25 square with ICRPs denial of internal dose, they only

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1 base their model upon external.

2 And by the way, they have the book I'm
3 sure, but there's an excellent critique of the ICRP
4 and its proposals and its modeling in the European
5 Committee on Radiation Risk document, Health Effects
6 of Ionizing Radiation Exposure at Low Doses for
7 Radiation Protection Purposes, regulators edition,
8 Brussels 2003.

9 I'm looking at the document now. It's an
10 excellent summation, if anybody cares to go online and
11 look up the European, ECRR, European Committee on
12 Radiation Risk. I'm sure they would send you a copy
13 at minimal cost to get the benefit of what 46 people
14 that are on this committee have worked on in this
15 document.

16 And it's very enlightening to go through
17 that, but that's something that the ICRP is unwilling
18 to do and of course the IAEA has its own statute,
19 which of course, is designed to support atomic energy.

20 And that's right in statute Part 2 of its statute.

21 And these requirements put it in conflict
22 of interest with the NRC and the documents of ICRP
23 even that say it want to protect the public health and
24 safety.

25 Well you can see the conflict there.

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1 That's an ethical issue and it's an issue that affects
2 people's health and safety, and it goes right to the
3 very heart of what is being caused by radiation at low
4 dose.

5 Namely non-cancer diseases where there may
6 be single strand breaks in the DNA, or in the case
7 double strand breaks, which by the way are admitted in
8 UNSCEAR 2000. In fact UNSCEAR even covers up the
9 Chernobyl accident and denies it.

10 And I'm looking at the quote right now
11 that says that these reports, critics say that it's
12 based on psycho social causes. The major problem with
13 health risk, meaning radiophobia, which those of us
14 are concerned about radiation, they say well we have
15 an undue fear of radiation.

16 Well, I don't have an undue fear, I've
17 been reading this stuff for over 40 years and it
18 certainly is not an undue fear because the science, I
19 believe is all on my side.

20 So this is another factor in this Section
21 1 that relates to the standards. And there are other
22 books that have been published by the European
23 Committee. There's one called Chernobyl 20 Years On,
24 and they published this book on the health effects of
25 the Chernobyl accident in 2006.

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1 So here are documents that are available,
2 but they're denied. They won't even translate
3 hundreds of studies by Russian scientists, three of
4 whom are on my International Science Oversight Board.

5 The World Health Organization, the IAEA,
6 the NCRP, the ICRP, they have these studies, but
7 apparently they won't translate them, and if they did,
8 they wouldn't distribute them because they show much
9 greater risk than what the Chernobyl Forum came up
10 with in 2005.

11 So I've read all this stuff and I'm
12 beginning to get a little tired of seeing these
13 conflicts of interest and these ethical problems
14 because they do go to the very heart of the public
15 health and safety.

16 And it's affecting whole populations, not
17 just individual people. So here we have this issue
18 dealing with that. So as far as Section 1, I think
19 I've dealt with that, but I have comments on Section 2
20 if you want to get into that when you have time.
21 There are a couple of points there.

22 MR. CAMERON: Okay, Len, those comments,
23 and we get the point here on that.

24 DR. COOL: And we appreciate him putting
25 some of these materials on the record, because this is

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1 being transcribed so we have the information
2 available. And I suspect that the interagency will
3 want some of the legal folks to also take a look at
4 part of this as we continue to move forward.

5 MR. CAMERON: Okay. And let's hear from
6 Len on Section 2.

7 DR. COOL: Right. Because the general
8 requirements crosscut all sections. So it would be
9 good if there are any observations on that to take
10 care of that now.

11 MR. CAMERON: Okay. So we'll do that and
12 then I want to go to Rob Lewis for some comments
13 relative to Section 3. Len, why don't you go ahead
14 and tell us about your Section 2 concerns.

15 OPERATOR: Is Len on the phone, sir?

16 MR. CAMERON: Can we get Len back on to
17 talk about Section 2?

18 OPERATOR: Press star one on your touch
19 tone phone Len. One moment. Go ahead, Len.

20 MR. EHRLE: On Section 2.16, the
21 government shall ensure that the regulatory body is
22 effectively independent in protection and safety
23 related decisions of persons and organizations using
24 or otherwise promoting the use of radiation and
25 radioactive material so that it is free from any undue

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1 pressure from interested parties and any conflict of
2 interest.

3 Now, in the NRCS outline of its 15 member
4 advisory committee on reactor safeguards, and I assume
5 that committee has to deal with this document because
6 of that primary concern, it is composed of these 15
7 members, 12 are engineers and 10 are also either work
8 for nuclear industry or government agencies.

9 This is a violation of the Federal
10 Advisory Committee Act that requires advisory boards
11 to quote, "Be fairly balanced and will not be
12 appropriately influenced by the appointing authority
13 or by any special interest."

14 It is my contention, it's rather obvious,
15 that this is a stacked deck, it's incomplete and in
16 flagrant violation of FACA, which sets these
17 regulations, not just for NRCS advisory committee, but
18 for all agency committees.

19 So, it would seem to me that the NRC at
20 least has to take cognizance of this and now since
21 it's in the document by IAEA, it would seem to me that
22 they must respond to this in kind.

23 And then going on to 2.31, the document
24 indicates provision of information and consultation
25 with parties affected by its decisions, and as

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1 appropriate, the public and other interested parties.

2 I've been involved in similar discussions
3 with other agencies and in the comment sections, and
4 it's my conclusion that this is really somewhat of a
5 rouse to delay or not involve non-governmental
6 organizations in the process itself.

7 And we find ourselves in this unenviable
8 position of making comments that may or may not be
9 taken seriously because we're not sitting at the table
10 with people who promulgate the standards. The same is
11 true at ICRP and NRCP.

12 Those organizations were set up by self-
13 appointed medical physicists. And of course I go way
14 back to look at the history, and that's how they were
15 formed and there's no way they're going to put on non-
16 governmental public interest persons on those
17 committees that are set up.

18 So what we have is a revolving door, a
19 closed loop where we can't get in, all we can do is
20 make our concerns public in a comment section such as
21 you're giving me an opportunity now.

22 But I would submit that you have to go
23 beyond this and go to other issues that relate to the
24 structure because this has to do with the very heart
25 of how we deal with these critical life threatening

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1 issues.

2 And then going on to -- well this is in
3 the third section, so I won't -- you're going to deal
4 with that later. But it would seem to me that all of
5 these advisory boards should make slots possible for
6 representatives from non-governmental public interest
7 organizations.

8 It calls for consultation, which implies
9 collaboration. And since they affect entire
10 populations --

11 MR. CAMERON: Okay. Thank you, Len.
12 We're on Section 3 now also and Don Cool wants to say
13 something relative to your remarks, your comments on
14 Section 2 and we're going to come back to you for
15 something that you have on Section 3, perhaps, and
16 then we're going to go to Rob Lewis and then I think
17 we have to move to Section 4. Don?

18 DR. COOL: Two things very quickly.
19 First, just to note that it's probably appropriate for
20 us to provide this piece of the transcript to our
21 Inspector General since a great deal of these comments
22 were not related to the IAEA document that's the
23 subject of today's meeting, but rather relate to the
24 conduct of activities of the federal agency. So I
25 think we will do that.

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1 And then secondly to actually reflect back
2 a question and to see if my understanding is correct
3 because in quoting the IAEA standard, I take it that
4 you believe that the statement in the IAEA standard is
5 appropriate.

6 So I'm trying to make sure whether or not
7 you've identified an issue which should be commented
8 on, on the IAEA standard or whether as a result of
9 looking at the IAEA standard you have raised issues
10 associated with U.S. agency conduct.

11 MR. CAMERON: And Len, do you understand
12 what Don is asking you?

13 OPERATOR: One moment, sir. Len, go
14 ahead. You have an open line.

15 MR. EHRLE: Hello.

16 MR. CAMERON: Yes, we hear you Len.

17 MR. EHRLE: Okay. No, to clarify, I think
18 that what I was quoting was from the draft and it
19 relates specifically to the draft document.

20 Now the other issue, of course, does
21 relate to the federal issue and to the NRC, no
22 question about it. But, it flows from the document
23 itself that you're dealing with.

24 In Part 1 and Part 2 these issues are
25 specifically spelled out in the document and they have

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1 to be dealt with by the NRC, because that's what your
2 remit is in this particular instance.

3 So it seems to me that that's where --
4 that's what I'm coming down on here are these specific
5 provisions.

6 MR. CAMERON: Okay. And I think you
7 affirmed what Don said that it's appropriate to have
8 that statement in the Basic Safety Standards and he
9 also said that there would be a referral of your
10 concern for the NRC.

11 So I think that that is clear and perhaps
12 you could give us your Section 3 comments and then
13 we're going to move on.

14 MR. EHRLE: That would be fine. The
15 relative -- the specific issue relates to 3.149 Part
16 D; the patient has been informed as appropriate of the
17 potential benefit of the radiological procedure as
18 well as the radiation risks.

19 And it mentions prior to that, it mentions
20 the health safety reports. Well, informed consent is
21 mandated under the Nuremberg Code at Helsinki Accords,
22 but it is not provided in radiological procedures
23 partly because technicians are not trained, nor do
24 medical physicists and radiologists instruct them in
25 the necessity for this kind of informed consent.

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1 They have a fear, and in fact in the paper
2 that we published that demonstrated thousands of
3 future deaths coming from pediatric CT scans, it was
4 turned down by eight journals before number nine
5 published it.

6 And one of those peer reviewers said that
7 if the public -- if this document were to become
8 public, it might create too much public hysteria.

9 Well that's the fear these radiologists
10 have is that if you tell the people the truth, that if
11 you provide real informed consent as this document
12 calls for, then this shows the difficulty of bringing
13 this into fruition.

14 And obviously, I think the IAEA is out of
15 its element dealing with medicinal areas because these
16 deal with x-ray, again it goes to the very heart of
17 the mission statement of IAEA and I don't see how or
18 why they got into this here.

19 But since they've opened it up, then I
20 feel that it's our responsibility to at least note that
21 there's a serious problem with this document at that
22 point.

23 And this informed consent issue is a
24 burning issue right now. It's been raised in journal
25 articles, most recently in the Archives of Internal

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1 Medicine for editor Rita Redberg indicates that there
2 may be a problem where the risk actually is greater
3 than the benefit and she put that in her editorial.

4 I was amazed to see it. It's the first
5 time it's ever been raised in that way, but that issue
6 is certainly critical in this document and has to be
7 dealt with by the IAEA in a way that it can be
8 implemented, which I don't think it can.

9 Going down to 3.174 it talks about any
10 radiological procedure that may give a significant
11 dose to the embryo or fetus. It is my feeling and
12 it's that of any scientist, that any exposure
13 radiation to the fetus should be avoided and any
14 exposure is significant.

15 In fact, it's pretty well accepted by a
16 geneticist that in utero exposures are much greater
17 risk than those exposures after birth. And so you
18 have a problem there and there's very little research
19 on fetal exposures.

20 It dates back to Alice Stewart's work that
21 should have won her the Nobel in '57 and '58 where she
22 found that a single x-ray to the fetus would cause a
23 child to get cancer or leukemia before age 10, 40
24 percent increase in these particular diseases.

25 And so that was another issue in this

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1 document that should be dealt with by IAEA. 3.177,
2 the section is take practical measures to minimize the
3 likelihood of unintended or accidental medical
4 exposures arising from design flaws and operational
5 failures of medical radiological equipment.

6 Again, this points out how obsolete that
7 2007 paper was by ICRP and now it's being used by
8 IAEA. Because in this statement it ignores what just
9 happened in the past month where the New York Times
10 has publicized the terrible damage being done to
11 individuals by overexposure from x-ray machinery and
12 CT Scans unbeknownst to the operator.

13 Because there was very little oversight,
14 either by the institution or by regulatory agencies
15 who are charged with monitoring this equipment.

16 And of course, there are also government
17 cover ups that date clear back to Hiroshima. I might
18 point out to you that Hiroshima as at Chernobyl that
19 there were issues, statements issued by the government
20 to doctors not to report on radiation induced
21 illnesses. That went on for over three years at
22 Chernobyl.

23 MR. CAMERON: And Len are these all in the
24 written comments that you gave us?

25 MR. EHRLE: Just briefly. I will be

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1 giving further comments that will amplify on these and
2 in fact I'm revising the document right now and you
3 will get a copy of this and trust you will distribute
4 it to all the members that are in the audience as well
5 as your staff.

6 MR. CAMERON: Okay. Well that would be
7 very helpful. Do you have any -- do you have a last
8 point on Section 3?

9 MR. EHRLE: Yes, the other one -- yes, the
10 last one was 3.183 which states that the IAEA document
11 calls for making available as required the following
12 records; in diagnostic radiology necessary information
13 to allow retrospective dose assessment, including the
14 number of exposures and the duration of fluoroscopic
15 examination.

16 I can't get information for example from
17 radiological labs that I checked with and we go to
18 Mayo Clinic, I'm familiar with how they operate there,
19 but they keep no record, for example, of additional
20 mammograms that may be retake.

21 And of course you multiply the dose, which
22 is .04 millisievert, you multiply the dose by the
23 number of scans that they have to use and retakes.
24 And some women get two or three retakes because they
25 can't read them, but there's no way they keep a

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1 record.

2 So you would think that the labs and
3 radiologists, medical physicists would certainly be
4 concerned about this since radiation doses is
5 cumulative. But there is no record kept, to my
6 knowledge, and I've asked many of the labs for this
7 information, they just said they don't have it.

8 So they're not keeping proper records and
9 here again is a standard that IAEA is familiar with
10 and obviously they must have put this in here for a
11 reason, but there doesn't seem to be the ability to
12 carry it out.

13 And they also do not account for the fact
14 that protracted exposures over time at low dose are
15 now found to have a greater effect than an acute dose
16 of the same exposure given at one time, at one
17 examination. So those are the other issues relative
18 to Part 3.

19 MR. CAMERON: Okay. Thank you. Thank you
20 very much, Len. And we're going to go to Rob Lewis
21 here in Rockville for another comment on Section 3.
22 Rob?

23 MR. LEWIS: Yes. Just to wrap up Section
24 3. Well, first, those are some very thought provoking
25 comments and we'll look forward to the written version

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1 of those.

2 And I think we take those as
3 constructively as not so much critical of what's
4 written in the current BSS draft, but recognizing the
5 difficulties of implementation of many of these issues
6 at a national level.

7 We did get one written comment from the
8 American College of Radiology. Is anybody from the
9 ACR in the audience? I say I believe they went
10 downtown to a congressional hearing today and they
11 gave us this.

12 And so since the comment was on Chapter 3
13 I thought I would make mention of it for the record.
14 The ACR submitted a written comment related to
15 sections 3.149, 3.155, 3.156 and 3.158.

16 The same comment on all those sections
17 basically that the current text, which refers to the
18 referring medical practitioner they would like to
19 replace with language, the referring medical
20 practitioner in consultation with the radiological
21 medical practitioner when appropriate.

22 So we will take that comment into
23 consideration. The basis of the comment is that the
24 referring practitioner isn't always the same person as
25 the radiological practitioner. And I think that is

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1 true in the American medical system.

2 So another implementation issue of how
3 what's written in here may not be reflective of the
4 domestic medical practices.

5 MR. CAMERON: Okay. Thanks for putting
6 that on the record Rob. We're going to take a short
7 break here, do you want to just do a stretch break or?

8 Let's just take a stand up stretch, whatever break
9 here and come back in about five minutes.

10 And then we're going to go to Section 4
11 and we're not going to lose track that we need to
12 discuss Schedule 1 in terms of rational. Thank you.

13 (Whereupon, the foregoing matter went off the record
14 at 2:35 p.m. and resumed at 2:48 p.m.)

15 MS. BOWEN BERRY: Okay, we're going to
16 start again. We heard a little bit on emergency
17 responses and so we're going to move on to that
18 section and we're going to open it up for questions to
19 anyone.

20 Anyone in the audience have a question or
21 comment on Section 4? Okay. Operator, we're going to
22 go back to the phone lines, is there anyone in the
23 queue who wants to make a comment or have a question?

24 OPERATOR: Once again, to ask a question
25 press star one. Len, go ahead.

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1 MR. EHRLE: The section 4.7, reduce the
2 risk of statastic effects to the public and timely
3 implementation is another phrase there that's used in
4 response to an emergency.

5 Is it my understanding, perhaps you could
6 clarify this Dr. Cool, is the zone of evacuation still
7 a 10 mile radius?

8 DR. COOL: I believe that is the case.
9 There are actually a number of criteria that relate to
10 when you would take certain actions at certain
11 distances.

12 In the U.S. system for reactors and
13 emergency preparedness there are a set of criteria and
14 a set of things, which I believe correspond to the
15 triggers or to take prompt actions in order to fulfill
16 the statement.

17 So, I believe that's the case and I would
18 ask back to you if there is a particular issue that
19 you would like to raise around the wording of the IAEA
20 standard that we need to consider in preparing some
21 comments?

22 MR. EHRLE: Yes. In relation to the
23 timely implementation and its response to the
24 emergency, it would seem to me that based upon what
25 happened at Three Mile Island, and I had all the

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1 reports from the government, a whole big stack of
2 them, the response did not really go to the heart of
3 the problems down with beyond any 10 mile limit.

4 And I think that there's also a problem
5 here that might be addressed relative to the need for
6 planning by the relevant governmental agencies
7 surrounding nuclear power plants.

8 Because this certainly may come into play
9 in the future and an evacuation process would, I
10 think, would be very difficult in some locations
11 because of the high density of population. So that
12 was not mentioned in the document.

13 I also wanted to ask, are you going to ask
14 for final questions and comments later?

15 DR. COOL: Yes, we will be.

16 MR. EHRLE: Because I just wanted to make
17 one brief comment because I don't have any further
18 comments on the other parts of the document. So I can
19 wrap mine up very quickly.

20 MS. BOWEN BERRY: Okay. We are going to
21 ask at the end if there are any final questions or
22 comments, so if you want to hold to there and we'll go
23 back to the phone lines and see if there is anyone
24 else for a comment or a question on this particular
25 section. Operator, do we have anyone else?

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1 OPERATOR: There's no other questions at
2 this time.

3 MS. BOWEN BERRY: Okay. Are there anymore
4 questions in the audience? Then we're going to move
5 on to Section 5, existing exposure. Does anyone have
6 any comment or question on Section 5, in the audience?
7 Okay. Please introduce yourself.

8 MR. BOYD: Okay. Thank you. Again, it's
9 Mike Boyd with EPA and I want to address this to
10 Trevor based on the slides you showed this morning
11 about Section 4 and 5. And in the emergency exposure
12 situation we have the reference, residual dose level
13 given as 20 to 100 millisieverts.

14 And then in Section 5 it's very
15 interesting, we say that once a nuclear or
16 radiological emergency, after the emergency has been
17 declared ended, it then becomes an existing exposure
18 situation and the residual dose limits there are 1 to
19 20 millisievert.

20 And I think there's been a lot of
21 confusion, particularly among the lay public as well
22 as some of us in the government about, you know, what
23 residual dose means in the context of an emergency
24 response.

25 And some people would say that, you know,

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1 20 to 100 millisieverts would be, you know, they
2 interpret that as that being the appropriate, you
3 know, residual dose level in all phases post
4 emergency.

5 And I think it would be -- all I'm
6 advocating for is a very clear statement in the BSS
7 that once the emergency has been declared ended, that
8 the residual dose levels could in fact be quite lower,
9 so.

10 MS. BOWEN BERRY: Thank you Mike for your
11 comment. Trevor, would you like to comment on that?

12 DR. BOAL: In establishing these levels I
13 think we followed the advice of the ICRP and their
14 recommendations and the recommendations for the
15 residual dose during emergency as well as 20 to 100.

16 The definition of residual dose is the
17 dose expected to be received after protective actions
18 have been implemented. So it's -- so during the
19 emergency phase there would be a difference between
20 your protected dose and the aversive dose.

21 When you get to the existing exposure
22 stage, we're then talking about the residual -- yes,
23 the reference level being established somewhere
24 between 1 and 20 and it's up to the member state to
25 decide what level they would decide to establish.

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1 In the BSS we've just -- the
2 recommendation is it should be between 1 and 20. And
3 for other parts -- that's the level set and I think
4 it's set in paragraph 5.8.

5 If you go then to the later paragraphs, if
6 you're looking at commodities it's recommended that
7 one for radon, the level is set at about 300
8 becquerels per meter cubed, which is a level somewhere
9 around 10 millisieverts, I think the footnote says.

10 So they're in the range of, yes, footnote
11 37, the 300 becquerel per meter cubed corresponds to
12 per annum dose of around 10 millisieverts. So we're
13 setting reference levels somewhere between 1 and 20
14 but they're varying from situation to situation.

15 And that reference level of 300 becquerel
16 per meter cubed is the maximum level you can set for
17 radon and the states may choose to even set a lower
18 reference level for radon. Is that?

19 MR. BOYD: Yes.

20 MS. BOWEN BERRY: Okay.

21 MR. BOYD: I'm really saying that I like
22 what's in the BSS and I wanted to sort of reinforce
23 that there's been a misperception that a level as high
24 as 100 millisieverts per annum would be considered
25 acceptable for 30, 50, 70 years of exposure, which I

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1 think all of us agree is not the case.

2 And that after an emergency has been
3 declared over, that the lower limits would then be
4 appropriate. And that's what the BSS says, I just
5 wanted to sort of put a nail in the coffin to the
6 misperception that those higher numbers would be
7 appropriate for long term exposures.

8 And I think the ICRP was a little
9 ambiguous and I'm hoping that the revision to ICRP
10 publication 82 will be, you know, more explicit in
11 that regard. Thanks.

12 DR. BOAL: Okay. Thank you.

13 MS. BOWEN BERRY: Do we have anymore
14 questions or comments? All right. We're going to let
15 Dr. Cool talk.

16 MR. CAMERON: Questions from the phone?

17 MS. BOWEN BERRY: Right. On the phone
18 line, operator, do we have any questions or comments
19 for Section 5, existing exposures?

20 OPERATOR: No questions on the phone.

21 MS. BOWEN BERRY: All right.

22 MR. CAMERON: We can discuss Amanda's
23 issue.

24 MS. BOWEN BERRY: We're going to go back
25 to Amanda's question from DOE and she was talking

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1 about Schedule 1 and the rationale behind that, so
2 let's go back to that. I'll give the mic to you
3 Amanda.

4 MS. ANDERSON: If you go to page 111,
5 there's a note here and it gets a little bit at where
6 our concern originated from. In the first draft of
7 this, I recall there being a note that there were
8 people who wanted to take out or delete the exemption
9 column and replace it just with the bulk quantities.

10 And if you do that, it does change some of
11 those numbers and then in another iteration of the
12 draft, it seemed like the concern was addressed, but
13 when you tried to match up numbers, there were still
14 some radio nuclides where we were using bulk
15 quantities for exemption when they were different.

16 And in reading the note further, there's a
17 further concern because it basically here, I think
18 what I'm reading is that there's still a lot of work
19 to be done on the tables, on tables 1 and 2 and that,
20 you know, for these 800 new radio nuclides or not new,
21 but of the 800, you know, you included some new ones,
22 but we use the European Basic Safety Standards.

23 And so it seems like it's those are now
24 being inserted on the BSS and, you know, we've got
25 concerns about how this will evolve and what went into

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1 that and maybe you can speak a little more on that.

2 MS. BOWEN BERRY: Thank you, Amanda.
3 Trevor, would you like to comment?

4 DR. BOAL: Yes.

5 MS. BOWEN BERRY: Okay.

6 DR. BOAL: The criteria for exemption is
7 set out in paragraphs I-1, I-2 and I think they're
8 essentially unchanged from the current BSS.

9 And in the current BSS in Table I-1 we
10 have a list of around 300 radio nuclides, which were
11 developed and published in a European Union document,
12 I think it's reference -- it's in the list of
13 references, RP, Radiation Protection 65, so it's
14 reference number 20.

15 And the numbers in the current BSS for
16 moderate quantities material are derived from that
17 document, reference number 20, using the criteria
18 which are here presented in the table. It's the same
19 criteria -- the criteria is really taken from that
20 European document as well.

21 Now since that European document was
22 published, there were an additional 100 or so radio
23 nuclides which for as far as the modeling done, which
24 were then included in the transport regulations.

25 And transport community may have different

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1 scenarios decided that would adopt the values from the
2 BSS even if the level is slightly different from their
3 own modeling just to have one set of numbers rather
4 than having two sets of numbers.

5 And so there was a uniformity to all of
6 it, the same numbers appear -- I'm sorry. The
7 transfer rates had a larger set of radio nuclides than
8 the BSS, but the criteria for deriving those numbers
9 and the scenarios used for deriving those numbers for
10 the extra radio nuclides were the same.

11 There was a slight difference in the fact
12 that the extra set of radio nuclides there may have
13 been a slight update in the ICRP dose conversion
14 coefficients.

15 Then since the transport regs and the BSS
16 were published in the mid-1990s, the group within the
17 European community who developed those first two sets
18 of numbers then produced the third paper expanding it
19 up to 800 radio nuclides.

20 But they've used the same dose criteria,
21 they've used the same scenarios in deriving the
22 numbers for the extra radio nuclides. So essentially,
23 they've all been derived in using the same, the dose
24 criteria set out in the exemption numbers here and the
25 same scenarios, but there's a slight difference in the

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1 dose conversion factors again used in the most recent
2 ICRP factors.

3 And I can give you a copy of that paper if
4 you want a copy of it. So they're still based on 10
5 microsieveverts per year, they're still based on the
6 list of 20 scenarios which were in that original paper
7 RP-65.

8 But people have asked that extra radio
9 nuclides be added in. They didn't ask for all 800,
10 but things people asked in the regs we thought we'd
11 put all 800 in there and see the reg.

12 The first draft, 1.0, you referred to
13 earlier did have tables I-1 and I-2 in the same table.

14 There was an extra column, I think column three was
15 the values from I-1 and column four in the first draft
16 was the values from I-2.

17 And we're asked by RASSC in some of the
18 feedback we got on draft 1.0 to separate the numbers
19 from moderate quantities from the bulk quantities.
20 And so we were asked to put them in two separate
21 tables to avoid any confusion.

22 And initially we also got some feedback
23 from some member states wanting to abolish the numbers
24 for moderate quantities, just work with the
25 quantities, the numbers for bulk quantities.

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1 But at the present stage, other member
2 states said no, we wish to continue having two sets of
3 numbers for both moderate quantities and bulk
4 quantities in the BSS.

5 The numbers for the bulk quantities are a
6 smaller set of radio nuclides and at present we've got
7 no plans to increase that number in the modeling. I'm
8 not quite sure whether it's needed or whether the list
9 included in I-2 is sufficient for the purposes of
10 weight that we used. Does that --

11 MS. ANDERSON: That does shed some light
12 on what -- where that came from and answers some of
13 the question. But a remaining question, because I see
14 after the BSS is published, Schedule 1 may need to be
15 updated through an addendum.

16 And again, it's going to use a European
17 Basic Safety Standards directive, so who -- where do
18 you -- how do you see that evolving?

19 Will it, as those -- if it is updated in
20 an addendum, who will be involved in that and will it
21 be something where, you know, it may be that the
22 European Basic Safety Standards directive, you know,
23 is based on that, but will that also be open to review
24 by other member states?

25 DR. BOAL: No, it will not be reviewed

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1 after it's part of the European union. It will be --
2 one of the -- comes from the latest ICRP
3 recommendations was that there were new weighting
4 factors, new dose conversion factors which are
5 currently being developed based on the weighting
6 factors in the new ICRP publication organ weighting
7 factors and weighting factors for the different type
8 of radiation.

9 When ICRP publishes them, I know under the
10 transport committee I came to reevaluate some of these
11 numbers. If they're checked, it does not mean that we
12 will automatically take them up into an addendum.

13 There would be consultations with RASSC,
14 TRANSSC, WASSC and NUSSC, certainly RASSC and TRANSSC
15 on any evaluation and whether there is a need to
16 change numbers would have to be decided by the
17 committees.

18 And that would involve also input then
19 from the member states. It would not just be an
20 automatic, the agency will do this, it would have to
21 be an agreement that would have to be shown the output
22 from these calculations and say is this sufficient to
23 make a change or are we happy to keep the numbers, but
24 as it changes would only be very, very small or minor.

25 I think the numbers in these tables have

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1 been rounded to the nearest factor of 10. So for any
2 -- if there's less than .3 it's rounded down or
3 greater than .3 is rounded up. So there's a rounding
4 going in these documents anyway. So we would not
5 expect them too much, a great change.

6 MS. BOWEN BERRY: Do you want to comment
7 Don?

8 DR. COOL: Don Cool. Let me just make the
9 observation. In the United States we legally have to
10 go through the formal notice and comment review
11 process for changes to the numeric numbers.

12 And so part of what I think Amanda's
13 identifying and I think probably which we in the NRC
14 would also be looking at was to have confidence that
15 there would be a systematic opportunity to review
16 things like some of these numeric values when they
17 came up.

18 And so we may well identify, put a marker
19 in this in the comments as part of the process issues
20 in addition to potential QA checks on the numeric
21 values that are in here at the moment, to make sure
22 that there are the opportunities to do the same thing
23 as dose coefficients are changed and otherwise so we
24 can all reach agreement.

25 Because legally here, we will have to go

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1 through that process. And in fact part of the reason
2 in the discussions that the agencies are having, for
3 example what the NRC is looking at in terms of
4 possible update of our regulations, part of our timing
5 is driven by the fact that we need to have those
6 values and be able to publish them and go through
7 public comment and review before putting them in
8 place.

9 So this ends up being a fairly sensitive
10 process issue for us as well as a QA check to validate
11 the numeric values versus what's in place today.
12 Thank you.

13 DR. BOAL: And I think the agency also --
14 we consult through our committees. RS-G-1.7, the
15 numbers which have been brought into the BSS, that
16 took a long time to develop and again it went to
17 member states for comment.

18 I'm not sure where the -- what process
19 we'd have to follow for an addendum, but again it
20 might be -- an addendum needs member state
21 consultation, it possibly will, this is something I'd
22 have to follow up on.

23 But again, that document -- those new
24 numbers either went to the Board of Governors, even
25 though a safety guide is normally not reviewed by the

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1 Board of Governors, so that was seen through the Board
2 of Governors and who advised that they should be taken
3 into account in the next revision of the BSS because
4 it was considered such an important.

5 But I'm not quite -- we have to clarify
6 that process in the future, but it would involve
7 member state consultation.

8 MS. BOWEN BERRY: Okay. Do we have any
9 additional questions or comments from the audience?
10 We'll go back to the phone line, do we have any --

11 OPERATOR: To ask a question on the phone,
12 press star one. At this time there are no questions.

13 MS. FOLKERS: Okay. This is Cindy Folkers
14 again from Beyond Nuclear. Len Ehrle had referenced
15 the KKiKK study, which was a study done in Germany of
16 childhood leukemias, five kilometers from operating
17 nuclear reactors.

18 The data was from 1980 to 2003 I believe.
19 I think that it would be an interesting comparison to
20 look at the data in that study versus what the ICRP
21 recommendations were and the IAEA recommendations were
22 for an effective dose in milisieverts to the public at
23 the time.

24 Because apparently something, and the dose
25 levels may have been changed in 1990, I'm not sure

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1 I'll have to look at that. But, at some point the
2 standards were obviously not protective enough for
3 children in Germany at that time and so it would be an
4 interesting thing to follow that up.

5 But I have something more pointed to say
6 on the Schedule 1 issue. As far as our organization
7 is concerned, we don't think that any of these
8 materials should be exempted out of hand because for
9 childhood leukemia, and I want to get this language
10 correct, ionizing radiation is the only established
11 environmental risk factor for childhood leukemia.
12 That's number one.

13 We know, and part of the reason I'm so
14 interested in the tritium issues is that the low
15 energy beta that comes from tritium is more damaging
16 than X or gamma rays and it causes not only DNA double
17 strand breaks, but complex DNA double strand breaks.

18 And that's the low energy beta so you're
19 talking about from 5.7 keV, I believe it is, to 18.3,
20 if memory serves that that could be wrong. But it's 5
21 to 18 approximately.

22 Further, studies are also showing that
23 incorporated radio nuclides, and radio nuclides taken
24 into a system are four to five times more damaging in
25 utero than exposure from external radiation such as

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1 your x-rays for medical procedures.

2 So we're dealing here with something
3 that's quite complex with something that can affect
4 children who are developing or either in the womb or
5 outside just, you know, just born from ages.

6 The KKiKK study was ages I believe five
7 and under that showed a greater than two times
8 leukemia increase five kilometers from the reactors.

9 And, you know, we're also looking at not
10 just individual dose, which is important in some
11 respects, but population dose as well.

12 Because a lot of the work that I've looked
13 at for genetics, question is not only just individual
14 changes and mutations, but population wide mutations
15 which can actually be over time much more damaging
16 than anything that registers on the individual level.

17 So it is for these reasons and sort of
18 we're not absolutely sure what we're exposing
19 ourselves to so to speak, that we really need to take
20 a very precautionous approach when dealing with these
21 materials.

22 And I don't think that any of them should
23 be exempted because 10, 20, 30 years down the road I'm
24 not sure we're not going to have some horrible
25 surprises.

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1 MS. BOWEN BERRY: Okay. Thank you, Cindy.
2 Don, would you like to comment?

3 DR. COOL: Yes. I want to go back briefly
4 to the first of your two points and I'm going to look
5 at Mike Boyd to make sure, because I'm actually going
6 to speak for EPA at the moment, or at least tee-up the
7 item for you.

8 Because in fact in the United States, EPA
9 has been looking at a reexamination of their radiation
10 risk perimeters and estimation and have gone through a
11 process, which in fact amongst other things, has been
12 specifically looking at the risk of some of the low
13 energy x-ray and beta and a possible change to that
14 RBE.

15 So, separate from the consideration of the
16 IAEA, just to note in the record here that there is in
17 fact in the U.S. an ongoing examination of that exact
18 issue. So I appreciate you just noting that, thank
19 you. Mike, did I get it right?

20 MR. BOYD: Thank you. Yes, we had asked
21 our Science Advisory Board about the RBE issue for low
22 energy photons and beta emitters. And they have
23 advised us to do a peer review examination and, you
24 know, once the peer review process is complete then we
25 would move forward with whatever changes to the RBE

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1 were warranted then.

2 But that's an ongoing process and I don't
3 want to presuppose what the peer review process is
4 going to conclude, but certainly the data is out there
5 that shows that -- I think it's been known for a long
6 time that the low energy photons and beta emitters
7 might have a higher than unitary RBE. So, thanks.

8 MS. BOWEN BERRY: Thank you. Anymore
9 comments? All right. Then our panel is going to do a
10 final wrap-up.

11 DR. COOL: I think now what we should do
12 is go back to any other general issues, because I know
13 we had at least one individual on the phones who said
14 they had a final point that they wished to raise.

15 And I think now it's probably appropriate,
16 because I think we've gone through the basic text and
17 see if there's any final questions or cross-cutting
18 issues that we haven't already managed to touch upon.

19 MS. BOWEN BERRY: Are there any final
20 questions from the audience and do we have any general
21 comments? All right. Then we're going to go to the
22 phone line. Operator are there any individuals on the
23 line who want to make general comments?

24 OPERATOR: Yes. Len Ehrle, go ahead.

25 MR. EHRLE: I wish to express my

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1 appreciation to the NRC for establishing this forum.
2 I think it's been instructive, it has given us an
3 opportunity to present issues that I think years
4 before have not been addressed adequately and I
5 certainly appreciate this opportunity.

6 For those in the audience who may have a
7 copy of this draft, and I don't know, Mr. Cameron, did
8 the people get copies of my draft?

9 MS. BOWEN BERRY: Yes, they did Mr. Ehrle.

10 MR. EHRLE: Okay. In that regard, I just
11 point out in my haste to finish the draft yesterday
12 and on short notice, I had neglected to put my contact
13 information in there. I would appreciate any critical
14 commentaries and critique of what -- of my remarks and
15 anything that was printed in the document.

16 I always look for issues that I can engage
17 in and improve on my own particular evidence that I
18 have. And if there are those then my e-mail is my
19 last name, E-H-R-L-E bird after it because you might
20 say Ehrle. So it's EhrleBird@organicconsumers, all
21 one word, dot org.

22 So I would close with one issue that I
23 came upon in my readings that I leave you with. In
24 March 1988 the government of Belorussia decided to
25 release information on radiation contamination against

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1 the wishes of the central Soviet government.

2 This immediately causes a problem. The
3 government of Belorussia establishes in fact that in
4 the radiation doses of 250 milisieverts or more during
5 the coming years, if these persons do not move, it is
6 following this that the Soviet Minister of Health
7 decides to raise the maximum permissible dose of
8 radiation from 250 to 350 milisieverts.

9 This is the typical of government response
10 when they find out that these emissions are well
11 beyond any so-called acceptable level. And of course,
12 there are no acceptable levels.

13 In fact, I would call your attention to
14 PNAS in 2003, November issue in which a team of 15
15 cancer experts throughout the world came up with a
16 conclusion that, and I'll read it to you, good
17 epidemiological evidence for increased cancer risk at
18 a 10 to 50 milisievert acute dose and 50 to 100
19 milisievert protracted exposure.

20 Many people were surprised by that because
21 they've always said these low doses don't have any
22 effect. And indeed, this document, which really
23 hasn't been given much plan either in the media or in
24 medical journals in terms of the ones I've been
25 reading and looking for references.

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1 So these kinds of issues demand attention
2 because they do go to the very heart of the public
3 health and safety.

4 So again, I wish to express my
5 appreciation to the NRC for establishing this forum
6 and would look forward to any further contacts from
7 any person where I might be able to sharpen my focus.

8 And I always appreciate critical
9 commentaries on the statements that I make. I set
10 that up with my students in high school and appreciate
11 any comments that causes me to rethink the conclusions
12 that I've drawn. With that, I bid you adieu.

13 MS. BOWEN BERRY: Thank you, Mr. Ehrle, we
14 appreciate your participation. Does the panel want to
15 make any comments?

16 DR. COOL: On behalf of the Interagency
17 Steering Committee on Radiation Standards, a number of
18 folks here in the room, we do appreciate everyone
19 really taking the opportunity to spend a day with us
20 here, endure a bit of cold temperatures this morning
21 and provide us a number of very useful things to think
22 about as we work to assemble some comments, some areas
23 that need to looked at a little bit further.

24 Some places where I do think there may
25 well be a scope to try and prepare some comments that

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1 would go back to the IAEA as part of the ongoing
2 process as we develop our comments.

3 We appreciate everyone's participation.
4 As I said earlier, if, as you go home or as you sit at
5 home and log off and then you get this, oh I wish I
6 had done this or that, we would certainly accept some
7 of those bits of information.

8 If you send it to us, we will make sure
9 that it is distributed around to the various agency
10 representatives so that it can all be included in our
11 ongoing consideration development of the U.S.
12 Government's set of comments.

13 I'll briefly look to my Federal Guidance
14 Subcommittee Co-chair, Mr. Boyd, to see if he has any
15 closing remarks, he might wish to make. Mike is
16 saying no. Rob?

17 MR. LEWIS: I'll comment in closing on
18 behalf of the NRC and personally. I just want to
19 thank everyone for participating today. I know it's a
20 significant investment of your time and that's a very
21 valuable commodity to us.

22 I think as many times as Don and I have
23 gone through this document and earlier versions of it,
24 I think it's fair to say that both of us heard things
25 today that we hadn't thought about before.

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1 So that's a good thing. And these open
2 forums are our best tool we have to turn the best
3 product over to IAEA so they can resolve comments.

4 And even though there were some
5 disagreements today, I think it was pretty clear to me
6 that everyone -- well, first of all, thank you
7 everyone for your professionalism, but even though
8 there was disagreements, I think it's very clear to
9 everyone in this room and on the phone had a common
10 goal of ensuring that people are safe from radiation
11 and the environment is safe from radiation.

12 So, in that, hopefully we find some common
13 ground in moving forward. And we will, as Don
14 mentioned earlier and Trevor as well, all of the
15 comment resolution IAEA has promised will be done
16 public through their website.

17 So the same website that was in our
18 Federal Register notice as they move forward will be
19 updated with the updates and the comment resolutions
20 that the IAEA gets on this document. So thank you.

21 MS. BOWEN BERRY: Trevor, did you have
22 anything to add?

23 DR. BOAL: I would just to thank you for
24 the opportunity to be here and to engage in this
25 meeting, get comments for than just from our member

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1 states.

2 We look forward to getting comments from
3 the U.S.A. as part of the member state process and as
4 Rob has said, we try to be as transparent as possible.

5 All the resolution tables from the
6 comments received during the -- when the draft leaves
7 the committees are on the website now and after we
8 deal with member state comments again, the how each
9 comment was dealt with will be placed on the website
10 and whether the text was changed.

11 And so as each draft, the revised draft
12 goes to the committees there on the committee websites
13 and when it goes to the CSS it will go to the
14 committee website, so each draft as developed is
15 placed on our websites for our committee members.

16 But they're open to the -- they're not
17 just closed to committee members, they're open to all
18 the community. So thank you for inviting me here.

19 MS. BOWEN BERRY: Okay. With that, I
20 think we can adjourn the meeting. Make sure that you
21 signed in and thank you all for participating today.
22 And thank you to the panel.

23 (Whereupon, the foregoing matter went off the record
24 at 3:25 p.m.)

25

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