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March 11, 1980

The Honorable John F. Ahearne  
 Chairman, Nuclear Regulatory Commission  
 Washington, D.C. 20555

Dear Chairman Ahearne:

The most recent report of the National Academy of Sciences' Committee on Biological Effects of Ionizing Radiation ("BEIR III") has reaffirmed past estimates of the most prominent man-made radiological hazards. According to the report, "The greatest man-made contributor to population exposure (to radiation) is the medical application of x-rays." The largest average whole-body dose rates for a group, however, continue to accrue to "the 30,000 people who are occupationally exposed in the civilian nuclear power industry." Other medical treatment and diagnosis-related exposures to the general population and to workers present a very significant part of the problem. I am writing to inquire regarding the status of the Commission's programs for health and safety in these areas.

Please provide me with answers to the following questions:

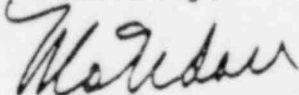
1. What has the Commission done since our authorization hearings last year to improve control of worker exposure to radiation, and to improve record-keeping systems for workers?
2. Do you agree with the BEIR Committee's assessment of the principle problem areas in radiation health effects? How do NRC priorities for standards development, fuel cycle safety, and inspection and enforcement programs correspond to these BEIR report conclusions?

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3. What steps are being undertaken to provide for record-keeping of radiological exposures received through medical diagnosis or treatment and related occupational exposure? What, if any, obstacles exist to implementation of such programs?
4. Are current standards for occupational exposure for uranium miners under review? What role does the NRC play in enforcing miners' health and safety standards?
5. Are training and record-keeping requirements for radiological exposure control applied to subcontractors at NRC-licensed facilities?

Sincerely,



MORRIS K. UDALL  
Chairman