Update on Nuclear Test Personnel Review (NTPR) Program

Brief for: Veterans' Advisory Board on Dose Reconstruction

(VBDR)

- Briefer: Paul K. Blake, Ph.D.
- *Time:* 4:00 PM 4:30 PM
- Date: September 19, 2007





Briefing Outline

- Program update
- Technical report status
- Level II & III document status
- Expedited dose initiative
- Quality initiative: double-blind study
- VBDR-DTRA* recommendation status
- The road ahead

• Projected Briefing Time: 30 minutes

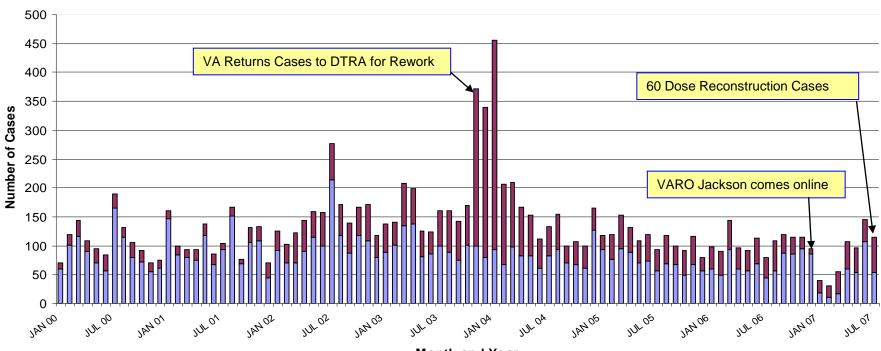


*DTRA: Defense Threat Reduction Agency



Historical Incoming Case Load (January 2000- July 2007)

□ All Other Incoming ■ Non Presumptive Incoming



Month and Year



NTPR Case Load

Type of Case Time to Complete (Goal) Non-Expedite (~7/month) < 6 Months **VA Non-Presumptive** Expedite-SPARE* Required (~28/month) < 4 Months **VA Non-Presumptive** Expedite-SPARE Not Required (~13/month) **VA Non-Presumptive** Department of Veterans Affairs (VA) $(\sim 28/month)$ Presumptive < 2 Months Department of Justice (DOJ) $(\sim 21/month)$ Presumptive Veteran (~24/month) Personal Verification and/or Dose

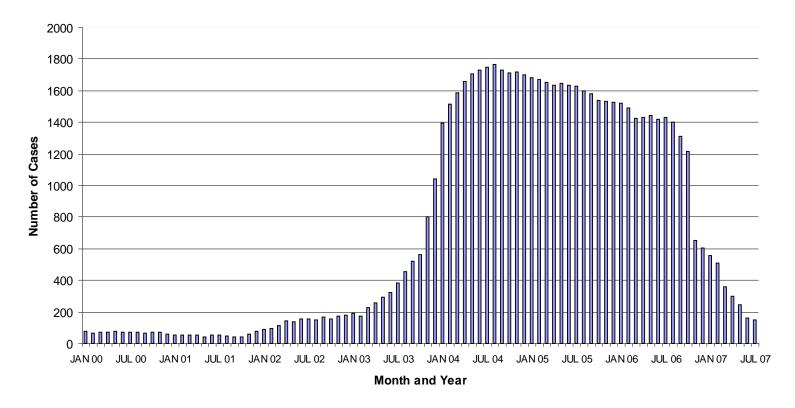
TOTAL <u>121</u> Incoming Cases/month (Average, May-Jul 2007)

*SPARE: <u>Scenario of Participation And Radiation Exposure</u>



NTPR Pending Case Load History

Historical Actual Non-Presumptive Pending Case Load (January 2000- July 2007)





NTPR-VA Non-Presumptive Case Status

- VA Non-Presumptive cases 27 Aug 2007: 146
 - Expedite-SPARE* Required: 59
 - Expedite-SPARE Not Required: 53*
 - Hiroshima & Nagasaki: 27
 - Non-Expedite: 7
- VA Non-Presumptive cases > 6 mo: 21
- VA Non-Presumptive cases < 50 days: 90

*: includes 41 cases pending verification



NTPR Other Case Status

- Other cases (27 Aug 2007): 119
 - Verification VA: 26
 - Verification DOJ: 28
 - Verification Personal: 38
 - Dose Assessment-Personal: 27
- Other cases > 6 mo: 31



DTRA Technical Report Status

Title	Status		
Neutron Dose Upper Bounds	Published:		
	DTRA-TR-07-3		
Probability of Causation Screening Dose	Published:		
	DTRA-TR-07-4		
Bounding Analysis of Fallout	Published:		
Radionuclide Fractionation	DTRA-TR-07-5		
Fallout Inhalation and Ingestion Dose	Published:		
(FIIDOS)	DTRA-TR-07-11		
Plutonium Bioassay Results	Final Review:		
	DTRA-TR-07-27		
Nevada Test Site Inhalation and	At NCRP for		
Resuspension Dose	peer-review		
Dermal Contamination Dose	At NCRP for		
	peer-review		

Reports available at: http://www.dtra.mil/ (see "Veterans")



Document Hierarchy

- 1. Policy and Guidance documents
 - a. External: Code of Federal Regulations, National Research Council reviews, VBDR recommendations
 - b. Internal: Policy and Guidance Manual
- 2. Program Planning documents
 - a. Quality Plan
 - b. Program Management Plan
- 3. Implementing documents
 - a. Procedures
 - b. Technical guidance
 - c. Training materials
- 4. Operating documents
 - a. Worksheets
 - b. Forms



Level II & III Document Status

Level II & III Documentation	Draft Date	Final Date
Quality Plan	30-Mar	Done
NTPR Quality Assurance Procedures	31-May	Done
Program Management Plan	30-Apr	30-Sep
Program Standard Operating Procedures		
Veteran Assistance	29-Jun	31-Oct
Case File Management	30-Mar	Done
Dose Reconstruction	31-May	31-Oct
Records Research and Support	15-Jun	30-Sep
Information Management - Library	31-Jul	31-Oct
Information Management - Network	31-Jul	31-Oct
Program Management	31-Oct	31-Dec
External Agency Support	30-Nov	31-Dec
Process Improvement	30-Nov	31-Dec



- In May 2007, the VBDR recommended that DTRA develop screening and expedited dose assessment (where scientifically justified) for cancers not already being expedited.
- DTRA embraced this initiative and published an NTPR point paper. Expedited processing was initiated shortly thereafter.



Expedited Dose Initiative (cont.)

- In addition to skin, prostate, and posterior subcapsular (PSC) cataracts the following cancers/sites were determined to be scientifically eligible for expedited processing:
 - Oral cavity and pharynx
 - Colon and rectum
 - Pancreas
 - Bladder
 - Nervous system
 - Lung, respiratory tract (other than lung)
 - Bone and red marrow
 - Eye
 - Thyroid, endocrine glands (other than thyroid)
- These sites account for ~50% of expedited doses



- The impact of the collective expedited process has been the virtual elimination of full radiation dose assessments (RDAs).
- RDAs are currently performed for cases involving multiple operations and/or a cancer/condition not on the expedite list.
 - In these cases, it is appropriate to perform a full RDA due to the complexity and uniqueness of the veteran's exposure scenario. However, to provide maximum benefit of the doubt and fairness to the veteran, the higher doses (expedited or RDA) are reported to VA.



Expedited Dose Initiative (cont.)

- In summary, VBDR expedited dose recommendations have allowed DTRA to:
 - Provide faster responses to our veterans and VA
 - Enable a significant increase in favorable service-connection outcomes for veterans with skin and cataract claims
 - Reduce the NTPR backlog of VA Non-Presumptive cases
 - Free up funds to support our troops:
 - CY2006: 882 expedited cases (DTRA savings: \$10.0M)
 - CY2007: 475 expedited cases (DTRA savings: \$5.2M)
- VBDR recommendations are win-win for veterans and DTRA



- NTPR dose reconstruction contractors initially performed independent RDAs on identical cases in Mar 2007
- The second round of independent NTPR RDA comparisons occurred in Aug 2007:
 - NTPR and VBDR reviewed the results of the double-blind dose reconstructions.
 - The independent contractors responded to technical questions from NTPR and VBDR.



- Mar 2007 results differed primarily due to differences in supporting materials provided to contractors
- Aug 2007:
 - RDAs briefed at VBDR sub-committee (#1) meeting on 30 Aug 2007.
 - Results were significantly better than Mar 2007, reflecting the continuing improvement in the NTPR RDA Standard Operating Methods and Procedures.



- Documentation provided to consultants:
 - 32 CFR 218
 - NTPR Policy & Guidance Manual
 - Dose Reconstruction Draft Procedures
 - DTRA Technical Reports
 - NAS/NRC Publications
 - SAIC Memos
 - Ship Deck Log Excerpts
 - NTPR Software

(CD-ROM contained 321 files in 49 folders)



VBDR-DTRA Recommendation Status

2006 Jul Recommendations:	Status
1. Develop expedited procedures for skin RDAs	Done
2. Develop expedited procedures for prostate RDAs	Done
3. Publish an analysis of beta dose uncertainties	Ongoing
4. Develop a quality plan; develop a comprehensive SOP that includes QA elements/metrics	Ongoing
2006 Dec Recommendations:	
1. Initiate double blind RDA analysis by 2 independent analysts; assessment of results by pre-defined metrics	Ongoing
2. Provide VBDR key QA tracking results	Ongoing
2007 Mar Recommendations:	
1. Develop a detailed SOP that ensures appropriate treatment of upper bounds	Ongoing
2. Provide VBDR final drafts of SOPs and quality plan	Ongoing
3. Develop expedited procedures for PSC cataract RDAs	Done
4. DTRA and VA agree on a process regarding competent	No
medical authority for non-radiogenic conditions.	progress
2007 May Recommendations:	
1. Develop expedited procedures for most other cancers, where scientifically justified	Done
2. Complete development of templates; improve annotation of calculations and equations	Ongoing
3. Minimize information requested of veteran	Done



The Road Ahead

- 2nd Half 2007:
 - Complete scheduled report and documentation
 publication
 - Complete older cases and ensure all future cases are completed within six months
- 2008:
 - Update 32 CFR 218, "DTRA Dose Reconstruction Policy"
 - Complete work on VBDR recommendations to DTRA