

THE VETERANS' ADVISORY BOARD ON DOSE RECONSTRUCTION

MEETING VIII

DAY TWO

ORIGINAL

The verbatim transcript of the Meeting of the Veterans' Advisory Board on Dose Reconstruction held at the Westin Baltimore Washington Airport Hotel, Linthicum Heights, MD, on Sept. 11, 2008.

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TRANSCRIPT LEGEND

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(By Group, in Alphabetical Order)

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AL-NABULSI, ISAF, VBDR
BARNHILL, PATTY, VBDR
BELL, TOM, VBDR
FLOHR, CHERYL, V.A. BALTIMORE
GOCHNAUR, TIM, DTRA
HOOTEN, KATE, DTRA
LEWIS, BLANE, DTRA
SANDERS, JERRY, DTRA
SCHAEFFER, D. MICHAEL, SAIC
TEAGUE, CARLOTTA, NCRP/VBDR
TENFORDE, THOMAS S., NCRP
WRIGHT, ERIC, DTRA

P R O C E E D I N G S
SEPT. 11, 2008

(9:00 a.m.)

CALL TO ORDER AND OPENING REMARKS

VICE ADMIRAL ZIMBLE: It's one minute of 9:00; it's just about time to start the meeting. I would like to remind everyone that -- who doesn't have a television set, I guess -- that today is the -- seven years since the terrorist attack of 9/11. And the first plane hit the Twin Towers at 8:47, I believe. The second plane hit the second tower at 9:04. And somewhere after that, the Penta-- I don't have the time, the Pentagon was struck. And then we had the brave souls on that other flight that landed in Shanksville, Pennsylvania. I'd like to take a moment of -- stand for a moment of silence regarding the 9/11, and I think we'll think about how close this is. You know, we all remember where we were and what we were doing when this happened. I certainly do. But this is just about the right time, when this tragedy struck, so one minute of silence, please.

(Pause)

Thank you. One of the things that we could

1 remember during this time is how fortunate
2 we've been and how lucky we are that we have
3 not had a second major incident. Everybody
4 felt that that second shoe was going to drop,
5 and I think it's very important that we all
6 remember how important it is to remain vigilant
7 and not become complacent.

8 The first item on the agenda is public
9 testimony. The -- we have one individual who
10 wishes to speak, and I think since he's
11 relatively well known here to this group, we --
12 we will accede to his wishes even though he's
13 not one of the atomic veterans. But we'll ask
14 Dr. Tenforde to speak right now.

15 Oh, Ron, is it possible for you to wait for
16 about two minutes -- just two minutes?

17 **ADDRESS BY DR. TENFORDE**

18 **DR. TENFORDE:** Well, good morning, everyone,
19 and thank you, Admiral, for giving me an
20 opportunity to speak. I think all of you on
21 the Board know that Dr. Isaf Al-Nabulsi will be
22 leaving NCRP to take a very challenging new
23 position at the Department of Energy in the
24 Office of Health and Safety. And of course
25 we're very sorry to lose her at NCRP, and I'm

1 sure the Board will echo that in terms of its
2 sense of loss of someone who has served the
3 Board so well.

4 I really do appreciate this opportunity to
5 speak in a public forum before the Board and
6 express sincere appreciation to Isaf Al-Nabulsi
7 for her excellent dedicated service to the VBDR
8 program as administrator for the last three and
9 a half years. I think, looking at it
10 retrospectively, she has been very instrumental
11 in helping the Board achieve its goals in an
12 efficient and a very timely way, and I wish to
13 also congratulate the Board on their excellent
14 activities and performance over the last four
15 years.

16 Now at this point I want to assure the Board
17 and others observing the meeting that NCRP will
18 indeed take all the steps necessary to ensure
19 continuity of its administrative and technical
20 services to the Board. To accomplish that goal
21 we are expanding the role of Mr. Thomas Bell as
22 a technical consultant who will be taking over
23 many of the administrative responsibilities
24 that have been performed to date by Dr. Al-
25 Nabulsi. Tom, would you stand up? I think

1 most of the people on the Board probably know
2 you, but welcome aboard. And he to date has
3 already been serving the Board by doing
4 independent radiation dose assessments as part
5 of the double-blind studies in support of the
6 work of Subcommittee 1 evaluating the dose
7 reconstruction program of NTPR and its
8 contractors. You can sit down and make
9 yourself comfortable.

10 And he's also been serving a very important
11 role as the technical staff consultant to an
12 NCRP committee producing what I think will be a
13 landmark report on uncertainties in internal
14 radiation dosimetry. This report is now in a
15 final peer review stage. It is a huge report,
16 as you can imagine, given the complexities of
17 internal dosimetry, which has already been
18 discussed to some extent in terms of upper
19 bound estimates, et cetera, at this meeting.
20 And we hope to add some clarity and methods to
21 that effort to better characterize internal
22 doses.

23 And I want to point out, although Tom will
24 perform his services to the Board from his home
25 in Cary, North Carolina, all the lines of

1 communication between the Board and NCRP will
2 not change. They will be the ones that Admiral
3 Zimble mentioned yesterday in his slide, and
4 the telephone will be directed -- and the e-
5 mail, pa@vbdr.org, will be directed, starting
6 tomorrow, to Tom Bell's home.

7 And I'm fortunate to say that we'll also
8 continue to have the excellent services of
9 Patty Barnhill and Carlotta Teague, whom you've
10 seen at the desk throughout this meeting.
11 They've served us well for many VBDR meetings
12 and they will continue to do so.

13 I thought it would be useful if I provided a
14 little bit of background information on Tom
15 Bell, largely because I think it demonstrates
16 very well his qualifications for this new
17 position. After receiving his master of
18 science degree in physiology and biophysics
19 from Georgetown University, Tom served for
20 several years at the National Naval Medical
21 Center in Bethesda as the Radiation Safety
22 Officer and Occupational Health Officer. He
23 then joined the Department of Defense in
24 several capacities, first as Director of
25 Medical Records Search, Retrieval and Review;

1 second as leader of the Radiological Control
2 and Health Branch for Naval Operations; and
3 third, and very importantly, he was the head of
4 the NTPR program from 1986 to 1990. He was the
5 second predecessor of Dr. Blake, so he knows
6 the program well from its very inception.

7 In 1990 Tom began working for DOE in several
8 roles. He was the Director of the Health
9 Physics Program Division. He was Program
10 Manager of the Marshall Islands Program. And
11 third, he was Project Manager of the Techa
12 River Dose Reconstruction and Dose Validation
13 Program.

14 Since 2004 he's been working as a private
15 consultant, which has included work providing
16 advice on issues related to dose reconstruction
17 in the NIOSH program for former Energy workers
18 who were involved in the production of nuclear
19 weapons. That of course is the reason for the
20 Presidential board that has some similar
21 challenges as the VBDR -- maybe more
22 challenges, in fact.

23 So please welcome Tom aboard and begin
24 corresponding with him. And if you would,
25 please, copy me on important correspondence

1 from the Board and others associated with the
2 Board for at least a while. I want to watch
3 the transition in the program from Isaf to Tom
4 very closely, and I want to make sure it's
5 perfectly smooth and seamless, if you will.
6 And I just might mention, my e-mail address is
7 very simple. It's just tenforde -- my last
8 name -- @ncrponline.org.

9 I'd like to end on a high note, Admiral. I'm
10 pleased to inform the Board that one of your
11 members has received another very well-deserved
12 distinction. It adds to a long list of
13 distinctions that he's received, including a --
14 an award this year from the Health Physics
15 Society, and Dr. John Boice has been selected
16 by the NCRP Board of Directors as the 33rd
17 Lauriston S. Taylor Lecturer in 2009. This is
18 an honor that's conferred only on scientists
19 who have made very major contributions to
20 radiation protection and measurements, a long
21 career of distinguished contributions, and that
22 indeed is the hallmark of Dr. Boice's career.
23 His lecture will be presented at the 45th NCRP
24 annual meeting that will be held on March 2nd
25 and 3rd, 2009 at the Hyatt Hotel Conference

1 Center in Bethesda, Maryland, right in the
2 center of town. And I want to mention, because
3 I think it will be of interest to many of you,
4 the topic will be "The Future of Nuclear Power
5 Worldwide; Safety, Health and Environmental
6 Issues." And we have an international program,
7 many speakers from throughout the world will
8 talk about the growth and safety issues and
9 expanding nuclear power uses and alternative
10 energy resource. So I'm hoping many of you
11 will attend this meeting, and if you want to
12 see more details, visit the NCRP web site,
13 which is simply ncrponline.org, and there's no
14 registration fee, by the way. We're probably
15 the only large national meeting that does not
16 charge many hundreds of dollars for attendance,
17 and we -- we usually -- I'm expecting about 500
18 registrants again this year, so things have
19 gone very well and so please sign up on the
20 online pre-registration link.

21 And with that I've concluded. Thank you very
22 much, Admiral, for this time.

23 **VICE ADMIRAL ZIMBLE:** Thank you very much, Dr.
24 Tenforde. I would now like to make a request
25 that Isaf -- would you come forward, please?

1 (Pause)

2 **VICE ADMIRAL ZIMBLE:** I can't find the switch
3 for this thing -- oh, it's on. This young lady
4 -- young lady -- by me, everybody's young -- 3
5 and a half years with this organization.

6 First of all, you need to know that without
7 her, this organization would not have existed
8 because she was the director of the program
9 that produced the Green Book that incited the
10 Congress to create the VBDR, so we can blame
11 her for that.

12 Secondly, Tom talked about the challenges that
13 she's going to face at DOE. After dealing with
14 the members of this Board, that's going to be a
15 piece of cake. But I will tell you that every
16 member of this Board has been so overwhelmed
17 with your responsiveness, with your ability to
18 respond quickly to every issue, nothing's been
19 too hard, I've never been disappointed, neither
20 has anyone else here. She's always there.

21 Sometimes she calls a little too often, but
22 she's -- but she's always been there. She's
23 been the glue for this organization. She has
24 really done a fantastic job, and a great deal
25 of our success can be attributed directly to

1 the day to day efforts of Dr. Isaf Al-Nabulsi,
2 and we thank you very, very much.

3 **DR. AL-NABULSI:** Thank you. I couldn't --
4 thank you.

5 **VICE ADMIRAL ZIMBLE:** I would also tell you
6 that there will be a token of appreciation
7 that, because of your sudden departure, you --
8 you will have -- it will succeed you, not
9 precede you, so it will be coming and -- and we
10 just want you to know that we really, really,
11 truly will miss you --

12 **DR. AL-NABULSI:** I will miss you, too.

13 **VICE ADMIRAL ZIMBLE:** -- and -- and we -- and
14 we all have your new e-mail address.

15 **DR. AL-NABULSI:** Oh, yes, you have all my
16 contact numbers.

17 **VICE ADMIRAL ZIMBLE:** Yes, good luck -- yes,
18 exactly, and I'll share it with the Board.
19 Okay?

20 **DR. AL-NABULSI:** Okay. Thank you. Thank you
21 all.

22 **VICE ADMIRAL ZIMBLE:** Bye now.

23 **DR. AL-NABULSI:** Thanks.

24 **VICE ADMIRAL ZIMBLE:** Now what I'd like to do
25 is have the group go out and we'll take a quick

1 photo from the PAO and from our new lecturer
2 for the 33rd lecture.

3 (Whereupon, a recess was taken for
4 photographs.)

5 **VICE ADMIRAL ZIMBLE:** Dr. McCurdy, are you on
6 line?

7 **DR. MCCURDY:** Yes, I am.

8 **VICE ADMIRAL ZIMBLE:** Okay. Well, we -- I --
9 I'm sorry you can't be here with us. We -- we
10 sort of left a little gap in the -- in the
11 photo that we just took of the Board --

12 **DR. MCCURDY:** Yeah, stick my -- stick my face
13 in there.

14 **VICE ADMIRAL ZIMBLE:** Yeah, if you'll -- if
15 you'll send me a little picture, we'll -- we'll
16 PhotoShop you in. How -- is your wife doing
17 all right?

18 **DR. MCCURDY:** Yeah.

19 **COURSES OF ACTION**

20 **VICE ADMIRAL ZIMBLE:** We're ready to take care
21 of the business of the day, and I think both
22 General Manner and I had a -- a sense that was
23 pretty much in agreement as to -- as to where
24 we need to go. I -- if -- if you don't mind,
25 you can look here and see that there -- there's

1 several courses of action that we can take.
2 The first one requires no change whatsoever, no
3 recommendations, and we'll just continue as we
4 have been doing. The fact that we have no
5 recommen-- no formal recommendations from any
6 Board -- any of the committees, other than
7 recommendations for a -- a modification in--
8 into the future, I think we can all recognize
9 that that course of action has got to be
10 adjusted somewhat.

11 The second one is reducing the size of the
12 Board to six members. That would be required
13 by law, providing no one is double-headed. And
14 to go to just one meeting a year. And if we
15 went to that -- it's my understanding if we
16 went to that size, we would have to utilize
17 consultants to do a lot of the work of the
18 Board in terms of the follow-through on the
19 implementation of recommendations and -- and
20 the refining and deployment of quality
21 assurance issues, et cetera.

22 A third is a -- just a modification of number
23 two by a few more members. A few more members
24 -- again, looking at just one -- one annual
25 meeting. And again, the -- the issue is always

1 going to be to make recommendations to the
2 agencies. That's all we can do is advise.
3 The fourth -- the fourth course of action is to
4 have no change, but not to have any meetings.
5 That's a -- that's sort of a very gradual long-
6 lived sunset, I think. That's probably not
7 worth considering.

8 The fifth course is to become -- is to become a
9 non-FACA organization or to transition to a
10 non-FACA organization. I'm learning more and
11 more how difficult a process that is, and then
12 we need to ask the question, is there an
13 advantage -- is there -- is there any truly
14 significant disadvantage to remaining FACA, and
15 is there a significant advantage to not being
16 FACA. We might want to talk about that for a
17 while. And -- yes, Dr. Swenson has a
18 suggestion.

19 **DR. SWENSON:** A quick note. Four actually
20 disestablishes the VBDR, so you're recommending
21 to -- to get rid of it.

22 **VICE ADMIRAL ZIMBLE:** Oh, okay. I -- I have
23 heard from the Congressional liaison people
24 that -- that in order to disestablish it, we
25 must -- definitely requires legislation, and

1 the earliest that legislation can -- can now be
2 -- can now occur is 2011. Just -- go ahead.

3 **BRIGADIER GENERAL MANNER:** Actually on course
4 of action number four, it's actually a
5 combination of two things. One is if we fail
6 to renew the charter, we cannot meet, and that
7 may be a choice that the group may make. Now
8 the second part of that is you could also
9 decide -- don't renew the charter, so therefore
10 we can't meet; and by the way, recommend
11 disestablishment. So it's actually two
12 separate acts combined into one, so it's just
13 something where -- it's a course of action.
14 Remember, this is -- our responsibility was
15 just to put on the table a host of varied
16 options for you to consider to discuss.

17 **VICE ADMIRAL ZIMBLE:** Okay. Mr. Beck?

18 **MR. BECK:** I would suggest one other option,
19 which I think we had discussed before or it had
20 been mentioned, and that was combining this
21 Board with another existing board, as a
22 subcommittee of another existing board, so
23 perhaps we ought to put that on the list as
24 well.

25 **VICE ADMIRAL ZIMBLE:** Okay. All right.

1 **BRIGADIER GENERAL MANNER:** The only nuance
2 there is is that you cannot change the Board
3 charter because it is Congressionally mandated.
4 So even that would fall into requiring
5 Congressional approval. So that is possible,
6 but it is something that will take a
7 considerable amount of time.

8 **VICE ADMIRAL ZIMBLE:** It looks like to get to
9 any transition to a different committee, a
10 different group which will require
11 Congressional action, needs to be an iterative
12 process that we can -- we can keep addressing.
13 It may be we ought to be making recurrent
14 recommendations in the course of the
15 recommendations that we send forward. But --
16 but I understand from our liaison that -- that
17 this is the time that -- it may have already --
18 the Department of Defense has already submitted
19 everything through the Office of Legislative
20 Affairs for 2009 and they're now getting
21 together stuff for 2010, and our priority would
22 be very low on the -- on the OLA list and so
23 probably be 2011 before anything's enacted. So
24 -- so we can feel somewhat similar to -- I
25 guess to the chief justices of the Supreme

1 Court in -- in our longevity on this Board.

2 But -- Mr. Groves.

3 **MR. GROVES:** I -- I think you may have answered
4 my question, and that is where are we in the
5 process of renewing? I believe that Eric
6 mentioned sometime in the meeting that this
7 November, so that option would -- if -- if we
8 chose not to renew the charter, that would be
9 an action that would have to be taken
10 essentially immediately. The -- and I assume
11 that the charter is on its way through and,
12 since it's the renewal of an existing board, we
13 would not expect any flack in just continuing
14 to meet for another year.

15 **BRIGADIER GENERAL MANNER:** That is correct.

16 **VICE ADMIRAL ZIMBLE:** That's correct. That's
17 correct. We're also budgeted for another year.
18 Dr. Fleming.

19 **DR. FLEMING:** Actually a couple of questions.
20 The first is about quorum, and I'm looking at
21 two and three. Could -- could I just be
22 reminded of what the issues are around quorum?
23 If we get so small, as in two, would we be
24 presented consistently with a problem of
25 quorum? Does any-- in other words, could --

1 first of all, could someone remind me what
2 constitutes a quorum, out of six? Does anybody
3 know?

4 **VICE ADMIRAL ZIMBLE:** I don't know. I -- I
5 think it's -- I think it's just a majority. I
6 think it's a simple majority of the Board.

7 **MR. GROVES:** I think we have a -- we have a --

8 **VICE ADMIRAL ZIMBLE:** Oh, there's a lawyer,
9 great.

10 **MR. LEWIS:** Neither the statute nor your
11 charter designates what's a quorum.

12 **VICE ADMIRAL ZIMBLE:** That -- that's correct.
13 And that's correct. I -- I understand that and
14 I think we made a decision three years ago as
15 to what we were going to con-- what constitutes
16 a quorum, but I don't -- I can't remember what
17 we -- what we said.

18 **DR. FLEMING:** Okay, but that's helpful then
19 because then if -- if it's not mandated as a
20 majority, then the size of the -- the group
21 could be -- the quorum could be determined as
22 five or six, in other words. Right? If it's -
23 - if it's something we determine.

24 **MR. LEWIS:** If you fall back to just customary
25 parliamentary procedure, usually a quorum is

1 somewhere between a simple majority and
2 (unintelligible).

3 **DR. FLEMING:** Okay.

4 **MR. LEWIS:** A simple majority would seem to
5 make sense.

6 **VICE ADMIRAL ZIMBLE:** Yeah.

7 **DR. FLEMING:** So my point then is that if we
8 get too small, we might run into a problem of
9 not being able to meet together -- three --
10 three folks not being able to meet together
11 because it violates the quorum rules, and I
12 don't know if there's quorum rules that are
13 associated with a non-FACA.

14 The other question I have, or the other concern
15 I have about moving to a non-FACA -- again,
16 this is really a point of information that I
17 would need to have clarified or -- is I think
18 it's very important for us to retain persons of
19 the stature as Paul Blake and Tom Pamperin.
20 And I don't know if a non-FACA is regarded with
21 less significance by the agencies, such that
22 they might reassign us persons that have less
23 stature than Paul or Tom. I don't know if
24 that's a real concern or not.

25 **VICE ADMIRAL ZIMBLE:** No, that -- that is a

1 very good point. It was pointed out to me
2 earlier that -- that some of the -- that the --
3 the major ability to find consensus between two
4 agencies is the fact that it is FACA, that --
5 the agencies seem to be a little bit more in
6 tune with the needs of the Board and -- and so
7 FACA -- I -- I was asking, are there any
8 advantages to FACA because -- because it's so
9 restrictive. You know, we -- we could be open,
10 we could invite the public, we could even ask
11 for testimony, we could maintain minutes, we
12 could follow all of the necessary -- all of the
13 necessary mandates of a FACA organization
14 without being FACA and therefore avoid having
15 to never be able to meet without *Federal*
16 *Registry* announcement and -- and never being
17 able to meet without making sure that the
18 public has been informed. And so that's the
19 one restriction.

20 But -- but counter that with the fact that we
21 get -- we can really enhance the level of
22 cooperation between two executive departments
23 that frequently are unable to find a -- a field
24 of -- of cooperation, despite the logic that
25 they -- they should and -- and it's usually the

1 Department of Defense's fault, by the way. I -
2 - I'll tell you that. But I think the FACA can
3 help that, so I -- I think that, at least for
4 the time being, we ought to -- my -- my sense
5 is we ought to take the idea of non-FACA off
6 the table for the time being. I -- I don't
7 think any of us have been inhibited by the --
8 by the FACA rules. There just has been a
9 procedural requirement to make sure that we --
10 we -- we meet all the imprimaturs of the FACA.
11 Does anybody have a comment about that? Yes,
12 sir.

13 **MR. PAMPERIN:** Just a -- I think one of the
14 reasons why this is working, I -- please don't
15 interpret this in any way as being, you know,
16 chest-pounding or anything like that, but it's
17 -- I -- it's -- it's the fact that I think both
18 Departments -- the representatives from both
19 Departments are attuned enough to their
20 agencies, even though we have to get clearance,
21 but -- that generally speaking, we can say yes
22 or no, rather than sending somebody who will
23 have to get back to you. But you know...

24 **VICE ADMIRAL ZIMBLE:** That's a ver-- that's a
25 very good point, and I would say that with--

1 without -- without the FACA, I have a feeling
2 that the agency heads might want to -- might
3 want to put in someone else 'cause they -- I
4 think you have other things on your agenda
5 during the course of a day. So I really
6 appreciate the fact that we have Tom Pamperin,
7 an SESer from -- from the VBA, to -- to be with
8 us at every one of these meetings and to also
9 be on a subcommittee is very, very helpful and
10 -- and has allowed us to move along very
11 quickly.

12 I -- I know that Paul Blake would be here no
13 matter what because -- because that's his --
14 you know, his life is on the line with some of
15 the recommendations that we could have made,
16 and -- and we've always tried to -- to be able
17 to accommodate him and his efficiencies.

18 I think -- John?

19 **DR. LATHROP:** I -- I was just curious as why
20 there is not a row on the table that would stay
21 16 and one meeting per year. That's not just
22 idle curiosity or filling out all the corners
23 in the space, because that would involve very
24 little change. It keeps all the expertise on
25 the Board we have now. And the actual -- I

1 would -- I guess I don't have a sense of -- of
2 -- of part of what we're trying to do in
3 downsizing, and somebody ought to remind me.
4 Are we trying to do it because people are tired
5 of serving on the Board, are we trying to do it
6 to save money, are we trying to do it so it's
7 more appropriate to the furtherance of the
8 Board? I'm just trying to get a feel for that,
9 and I guess I would vote to add a row which
10 would be 16, one meeting per year.

11 **VICE ADMIRAL ZIMBLE:** All right, that's a --
12 that's an -- that's interesting, and let's --
13 let's -- let's -- let's get some comments on
14 this particular topic before we move on to --
15 to another subject. You want to talk to -- to
16 John's proposal?

17 **MR. RITTER:** No, no, I can talk later.

18 **VICE ADMIRAL ZIMBLE:** Okay. Paul -- Harold,
19 you want to talk to -- to John's proposal?

20 **MR. BECK:** I want to talk about something a
21 little bit more general.

22 **VICE ADMIRAL ZIMBLE:** Okay. Let me just say
23 this, that the downsizing was -- was mainly to
24 support -- to support a -- a less cumbersome
25 organization. You know, 17 members is -- is a

1 -- is a lot of folks, and we're at 16 right
2 now, but -- but we do know that we still need a
3 risk communicator. We don't have that. So --
4 so we have to go to -- we'll -- it's 17, and I
5 think 17 is a pretty good-sized board. It's
6 bigger than most. It'll save some money,
7 whether we -- whether we go to one meeting --
8 even if we went to one meeting, it would still
9 be costly to have 17 members because they --
10 there is a responsibility for those 17 members
11 to do some work, other than coming to the Board
12 meeting. And so it really is going to depend
13 upon what work has to be done by the -- by the
14 subcommittees, as well.

15 I -- I -- my own feeling is that we could let
16 the -- we could -- we could make a
17 recommendation that says we are going to
18 restructure the membership and downsize,
19 without specifying the particular number. I
20 don't think there's any need to do that. We --
21 we know that the minimum number is going to be
22 six, and -- and we'll consider that we are at
23 maximum. So it'll be a -- a downsizing that we
24 could downsize by attrition. Those who really
25 would prefer to come off the Board will be

1 allowed to come off the Board. I -- to me,
2 that's what I -- I would suggest for right now.
3 Yes, Pat.

4 **DR. FLEMING:** Again it's a question. Could
5 some of the members that are currently on the
6 Board come off if they wish to and serve as
7 consultants, if they wish to, and is there any
8 --

9 **UNIDENTIFIED:** Sure.

10 **DR. FLEMING:** The question is, is there any
11 problem with that in terms of the ethics
12 guidelines that we were apprised of two days
13 ago? By ethics I mean the legal issues
14 associated with conflict of interest and so
15 forth. I mean could the -- could members of
16 the Board become consultants who I'm assuming
17 would not be unpaid -- if they wish to do so.
18 I don't know if this is the case, but it -- it
19 might be. So they'd be serving, but -- the --
20 serving the concern, but in a different
21 capacity.

22 **MR. LEWIS:** (Off microphone) If I could defer
23 your questions to maybe a private conversation,
24 I think we're getting into an area where
25 (unintelligible) advice and in order to

1 preserve (unintelligible) ethics is
2 (unintelligible) scheduling an executive
3 session or something like that --
4 (unintelligible) answer your question.

5 **THE COURT REPORTER:** Could he repeat that?

6 **DR. FLEMING:** It wasn't -- I'm not asking it
7 for myself personally. I just am trying to
8 understand how those rules work, but that's
9 fine. You know, there must be some answer that
10 -- that isn't personal to an individual but is
11 related to the issue of whether somebody can
12 come off a board and become a consultant.

13 **MR. LEWIS:** There is, but I'd rather not give
14 it in public session. Thank you.

15 **VICE ADMIRAL ZIMBLE:** I think that that could
16 be worked out satisfactorily and stay within
17 the law. I don't think that's going to be -- I
18 don't think that's a real problem.

19 Look at all these -- all of these names. Where
20 do I go from here? Okay, everybody's awake,
21 that's a wonderful sign. Did -- have -- John,
22 do you think that -- that we have discussed the
23 topic --

24 **MR. GROVES:** My topic is relative to John's.

25 **VICE ADMIRAL ZIMBLE:** Okay, let's go then, Ken.

1 **MR. GROVES:** Since -- since one of the comments
2 you made was in downsizing the Board
3 potentially dealing with some cost savings, and
4 we had talked in general terms yesterday and it
5 came up again about some -- either members of
6 the Board or some others being hired as
7 consultants with similar expertise to do the
8 work, the -- the question becomes, and I guess
9 I'm -- I'm looking at Tom Tenforde now, if --
10 if we were to transfer from a Board member to a
11 consultant, is the pay the same so that
12 therefore it's the same cost, or is each
13 consultant fee determined individually based on
14 expertise, blah, blah, blah? Is there a
15 standard consulting fee that NCRP pays so that
16 we would have some feel for what the impact
17 would be, because if in fact it -- it's
18 significantly more than what we make as Board
19 members, then of course we'd all want to be
20 consultants. Or two, there would be no
21 ultimate cost savings if -- if essentially we
22 were paying essentially the same thing, so that
23 -- that would help -- that maybe helps, if it's
24 an issue. If it's not an issue, then we can
25 avoid it.

1 **VICE ADMIRAL ZIMBLE:** Let me just say that. I
2 would rather not discuss this matter at -- at
3 the Board meeting. More important is not how
4 we determine the si-- the size or the
5 constitution of the membership. We surely do
6 not need any more members than necessary to do
7 the work. And what I really want to talk about
8 is what the work should be for the VBDR in the
9 future. We have come -- we have already
10 reached the point where we feel the
11 recommendations that we have made, as -- as
12 implemented and as in the process of being
13 implemented, really have enhanced the process.
14 It has got the DTR down to a steady state. We
15 have reduced to some extent the backlog that
16 the VA faces in -- in terms of delay in claims
17 adjudication. And so we -- we've done the job
18 and we can pat ourselves on the back for that.
19 But now what we really need to do as we look to
20 the future is what do we want to be doing. And
21 we want to be doing something that is
22 consistent with what the mandate is from
23 Congress. We can't just stop doing certain
24 things and if there's a reason to continue to -
25 - to look to the processes of dose

1 reconstruction and the processes of -- of
2 veterans' claims motion and look to the
3 communications and look to quality, those
4 things are all what we want to do. But we want
5 to move on to monitoring and the implementation
6 of the recommendations that have yet to be
7 completed, to deployment of a quality system,
8 to managing the -- the work of DTRA in terms of
9 -- of decision-making and communication and
10 making the outreach as -- without risk, those
11 are the things we want to be doing and -- and
12 we want to be wordsmithing to that -- and then
13 we'll see what size Board we need to accomplish
14 that task.

15 Ron (sic) Randy.

16 **BRIGADIER GENERAL MANNER:** I need to jump in as
17 the DFO for a second.

18 **VICE ADMIRAL ZIMBLE:** Okay.

19 **BRIGADIER GENERAL MANNER:** Number one, I need
20 to strongly endorse the Chairman's perspective
21 of the guidance he just gave all of you. It's
22 very important that you all decide what are the
23 tasks you need to do and how large should this
24 Board be; should it stay at 16 or should it be
25 some number between 16 and six. I advise that

1 you not go down a slippery slope of -- I mean -
2 - of considering switching to a consultant
3 status because effectively that means the
4 manpower is the same and essentially the cost
5 will then go up. So I would encourage you to
6 follow the Chairman's guidance, from my
7 position as DFO, that -- determine your tasks,
8 determine the manpower required of the 16 of
9 you to execute those tasks, then size the Board
10 accordingly, with no consultant status. So,
11 sir.

12 **VICE ADMIRAL ZIMBLE:** Okay. Thank you. I
13 always appreciate a good official order. It's
14 very helpful. Thanks.

15 Dr. Swenson.

16 **DR. SWENSON:** I have a follow-on to that. I
17 think that we do need to be good stewards of
18 the taxpayers' money. And since we don't
19 believe we're going to have more
20 recommendations, we could use a smaller Board
21 to oversee those. I do think that we will have
22 to have some consultants, not the same number.
23 But the audit consultants that -- that look at
24 the RDAs, we're going to have to have some of
25 them.

1 Now will they have to travel to the Board
2 meetings? Probably not. They could submit
3 reports to the Board meetings, or maybe one
4 travels. A lot of the work that they have
5 done, they do at their own location. They do
6 get together. I think that's where the
7 consultant cost will probably go, in the
8 audits. And you may have consultants on maybe
9 some other issues as well, but I don't think
10 it's going to be a consistent consultant cost.
11 It'll -- and that board, whatever size they
12 are, could decide what is needed. So I do
13 think, in my opinion, we -- we could downsize
14 and still do the advisory capacity and kind of
15 monitoring.

16 **VICE ADMIRAL ZIMBLE:** Yeah, I don't think
17 anyone disagrees with that. We -- we currently
18 have in -- in place consultants that -- that we
19 utilize. The -- the -- Subcommittee 2 uses a
20 consultant to help with the auditing of the VA
21 records. Subcommittee 1 uses consultants right
22 now. Subcommittee 3 has -- no, not 3, but 4
23 has consultants. So we -- we -- we're -- we
24 have that prerogative. It's only -- it's a
25 budgetary issue and -- and it does require

1 submission of a -- a requirement for
2 consultant. That's -- that's no problem. I --
3 I think -- what I want to do is try to come up
4 with a recommendation that'll rouse -- give us
5 some flexibility and doesn't re-- doesn't
6 restrict us at all and -- and doesn't have to
7 be -- doesn't have to have a level of
8 specificity that says this will be the number
9 of members. I think we can -- we can attrite
10 down appropriately, and I think that's probably
11 the way it ought to go.

12 Dr. Blanck.

13 **DR. BLANCK:** Let's see if I can frame this, and
14 -- and I would begin with saying we -- whatever
15 we become, we'll continue to have
16 recommendations. It's not that we won't have
17 recommendations, but they're going to be
18 relatively small process recommendations as
19 opposed to the major structural -- if I can
20 make that distinction -- recommendations that -
21 - that we've had in the past. So there is
22 still a very important role.

23 But John, to your point, I think the -- the
24 Board is changing in its -- in its focus from
25 looking at the large pieces -- we -- we've done

1 that and we've made recommendations and changes
2 have been made -- to now more of a
3 monitoring/audit function, and there will be
4 changes that we'll recommend and -- and maybe
5 there will be visits made to the VA office in -
6 - in Jackson that'll generate some
7 recommendations, but very, very different.
8 Because of that, we don't need the robustness,
9 I believe, of the current number and probably
10 can do it with less, with or without
11 consultants. I don't think that's germane.
12 What we're trying to do is -- is in fact define
13 that monitoring/audit function and then the
14 number that it would take to do that, probably
15 less than what we currently have. And that
16 gets at, John, your point of -- of 16 or 17
17 versus something less, I think, if we look at
18 it that way.
19 So it's back, Mr. Chairman, to what you've
20 charged us with and that is we define, within
21 the parameters set, the -- the mission of this
22 Board. And then form will follow function,
23 with any luck.

24 **VICE ADMIRAL ZIMBLE:** Right, I -- I appreciate
25 that. What I need is some -- some good

1 wordsmithing that talks to -- and I'm going to
2 turn to the committee chairs and say how -- how
3 -- what -- what do each of the chairs see as
4 something other than what they're currently
5 doing. Now what is it that -- that you feel
6 needs to be done. Now you've said it, every
7 one of you has said it already. You want --
8 you want the -- you're not ready yet to -- to
9 walk -- to dismiss your -- your work from --
10 with each one of the -- the subjects that
11 you're -- you're looking at. S-- SC-1 still
12 wants to look at where we're going with -- not
13 -- not satisfied with the DSS yet, not
14 satisfied with the -- with the standard
15 operating manual and procedures, and so there's
16 some oversight that you -- that -- and maybe
17 oversight's the word we want, but I need some -
18 - some words that's -- that goes into the
19 recommendation for where we want to go in the
20 future.

21 Same thing with Subcommittee 2. We know that
22 there are audits left to be done, a -- a new
23 auditor needs to be found, and that needs --
24 that needs to have oversight to see that it's
25 proceeding in the direction we wanted to go.

1 Subcommittee 3 has certainly more things that -
2 - that it needs to do in order to fully deploy
3 the system. Also you need to -- to look more
4 at the quality that's -- the quality assurance
5 methodology that's -- that's now at VA, the
6 STAR system, the STAR report, and see how do --
7 how do we intermingle the quality assurance
8 activities so that we have a syst-- a quality
9 system that fully envelops the entire process
10 for the atomic veteran. And so that's work
11 that has to get done. There's mentoring that
12 has to -- that -- occur in -- in Jackson,
13 Mississippi for the -- for the quality
14 assurance to -- to be a -- to take off.
15 And certainly in 4 we know that we have -- we
16 have a -- a strong and -- and what we think is
17 a meritorious suggestion from the VA that says
18 here are some defined cohorts that we can make
19 an outreach to and we want to make sure we do
20 that right, and the risk communication right,
21 so there's work to be done in all four.
22 Do we need to re-- do we need to make a
23 recommendation that talks to how we are going
24 to -- to devote our energies towards the
25 process for the atomic veterans, so -- and --

1 and I'd like to see if we can wordsmith, to
2 some extent, a motion that we can -- that we
3 can all agree to.

4 Mr. Beck.

5 **MR. BECK:** That's the question we have to ask
6 when we're -- we're talking about the size of
7 the Board. We have developed a way of doing
8 this work. Now the amount of work and the
9 nature of the work, we all agree, is going to
10 change. But it -- we all also agreed yesterday
11 that the -- and as you just pointed out, there
12 is going to be continuing work. We are going
13 to have to continue monitoring, and this is a
14 long-term thing.

15 So the real question is, if we change the size
16 of the Board, how do we do this work? That's
17 really it. I mean we -- we -- if -- if we have
18 less work, we can meet less frequently, but we
19 can do it the same way as we've been doing it,
20 and then we don't have to have any
21 Congressional problems here. But if we really
22 want to change the size of the Board, then
23 we're going to have to change the way we do the
24 work, even though it won't be as much work or
25 as frequent.

1 And also it's going to change as we go forward.
2 Over the next year we still haven't gotten to
3 this steady state. We may not get there for
4 two years. Once we get there, the work again
5 will change. Then it will be reviewing new
6 things, monitoring. So there will still be
7 this need and there will have to be a decision
8 about how it's done.

9 If we have -- continue with the 16 or 17
10 members, we can continue to have subcommittees.
11 If we go to six or seven members, we can't. So
12 that's really the crux of it. I mean we don't
13 have to decide exactly, you know, which work
14 we're going to do. I mean we know that the --
15 that the mandate from Congress was continuing
16 oversight, so there's going to be continuing
17 work.

18 **VICE ADMIRAL ZIMBLE:** Right, so if -- if I
19 interpret what you're saying correctly, there's
20 work to be done and -- and -- and if we're
21 going to keep doing work, then the work should
22 det-- should determine the size of the group
23 necessary to do that work. Okay? And it may
24 turn out that the -- that we've got the right
25 size board. There is no mandate from any

1 higher authority that says we've got to reduce
2 our Board. Okay? This is all engendered right
3 here, and I -- I think -- we know there's a
4 legal minimum. Okay? But above that, it can
5 be what we need to do the work of the Board.

6 **MR. BECK:** A little bit more than that, because
7 we can do the work of the Board with a six-
8 member board, but then we have to do it in a
9 different way than we've been doing it now
10 because of the FACA rules. That's where the
11 down side of FACA comes in. We can have six
12 experts that meet once a year and every -- all
13 the work that we've been done -- that has been
14 done in the past by subcommittees can be done
15 by consultants who just send reports to the
16 Board members, and then the Board members
17 discuss these reports. That's another way of
18 doing it. It may --

19 **VICE ADMIRAL ZIMBLE:** Well, it --

20 **MR. BECK:** -- cost more --

21 **VICE ADMIRAL ZIMBLE:** -- it is, it's another
22 way of doing business, but I ask why. Okay?
23 Yes, we can -- we can go to a more expensive
24 way of -- we can increase our labor costs, is
25 what you're saying, and do the work. And I

1 would ask you, why should we want to do that?
2 Why would DTRA --

3 **MR. BECK:** Well, for -- for the individual
4 members who are doing the work at a quite
5 reduced cost from what they charge to do the
6 work otherwise, and from the Board's point of
7 view or from the agencies' point of view, I
8 fully agree.

9 **VICE ADMIRAL ZIMBLE:** Well, we certainly
10 appreciate the pro bono effort that we're all
11 making to -- to do this. There's no question
12 about that. But I -- I really think that
13 that's an issue that we don't have to address
14 today. What we have to address today is a
15 recommendation that says these are things we
16 want to do. And -- and -- and we can -- and --
17 by the way, I am -- I'm haunted by the remark
18 that John Lathrop made yesterday about fire in
19 the belly. Okay? And I think that turning
20 this over to new people, to people who haven't
21 started with us and gone with us, is -- is
22 going to -- is going to be a detriment to -- to
23 -- to the quality of the work that we did.
24 We've been with it, we know it, we know what we
25 -- and we know where we've gone and where we

1 want to go, and I think seeing it through is --
2 is something that I'm certainly in favor of.
3 John.

4 **DR. LATHROP:** Yeah, I -- I see a -- a lot of
5 the discussion here and I'm trying to figure
6 out a way to sort of deal with the uncertainty
7 we have, and I'd like to point out a couple of
8 things. One is, if we cut down the size and
9 find it's not working well, we could increase
10 it again. Is that true? I think it's true.
11 The other thing is, looking over the list I
12 went over yesterday -- general monitoring and
13 oversight, more work on the Decision Summary
14 Sheets, Standard Operating Procedures, letters
15 to the veterans, documentation and methodology
16 -- it's striking me that the carry-on work
17 still falls under the same four bins as some
18 genius figured out at the beginning of this --
19 perhaps you at that -- gee, we -- we need four
20 subcommittees, and we actually do need somebody
21 looking after the NTPR program, somebody
22 looking after VA, somebody on QA, somebody on
23 communication. And I would say maybe a way to
24 deal with all the uncertainty is -- would seem
25 fairly natural to suggest a board of about

1 eight, two in each of those general expertise
2 bins, and then see how that works.
3 And actually in terms of consultants, I don't
4 foresee much of a need for consultants, except
5 for the auditing. I don't see a need for
6 consultants in QA/QM or communications,
7 although maybe a little bit on the
8 communications. So I would say sort of
9 floundering around for some sort of rationale
10 that we might use to carry forward, I'd
11 recommend eight, two from each general category
12 of expertise that's called for.

13 **VICE ADMIRAL ZIMBLE:** Okay. That -- you're
14 looking at course of action three, and -- and -
15 - and yet I would say that we don't really have
16 to specify a -- a particular number in our
17 recommendation. Eight sounds like a
18 reasonable, workable number, and that would
19 allow us to retain committees that we have, and
20 I think that's a reasonable objective as well.
21 So I'm -- I'm supportive of that.

22 Pat.

23 **DR. FLEMING:** I -- I just wanted to be -- does
24 that include then Paul and Tom?

25 **VICE ADMIRAL ZIMBLE:** Yeah, I was just going to

1 mention --

2 **DR. FLEMING:** So for --

3 **VICE ADMIRAL ZIMBLE:** -- I was just going to
4 mention that that's a requirement.

5 **DR. FLEMING:** So that, for example, for
6 Subcommittee 2 that would mean, I would think,
7 Tom would be necessary and one other person.

8 **VICE ADMIRAL ZIMBLE:** No, I think -- I think we
9 -- we have to say that --

10 **DR. FLEMING:** I'm just seeing -- I'm just --
11 without articulating all this --

12 **VICE ADMIRAL ZIMBLE:** We really -- yeah --

13 **DR. FLEMING:** -- I'm seeing some concerns and
14 issues.

15 **VICE ADMIRAL ZIMBLE:** -- I would not consider -
16 - yes. I would consider, therefore, if you
17 include the two representatives, we're up to
18 ten. Okay? Because I think that's essential.
19 I would not want to -- to have a committee in
20 which one of the -- committee depended on one
21 of those representatives, who frequently has
22 many other things to do.

23 Okay. So -- yes, I'm sorry, I'm -- I've been
24 really favoring the right side and I apologize
25 for that. I -- I -- it's -- it's -- yeah,

1 right.

2 **MR. RITTER:** (Off microphone) (Unintelligible)

3 **VICE ADMIRAL ZIMBLE:** Right. This is not
4 profiling, I want you to understand that.
5 Curt.

6 **DR. REIMANN:** Yes, I -- I kind of come out
7 where -- where John did. We -- we actually
8 hadn't discussed that particular thing in -- in
9 any detail, and that is it seems to me that
10 we're in violent agreement that we're on the --
11 on the early stages of a transition of some
12 kind, but I think that the discussion of
13 membership size, consultants and cost are
14 getting in the way. They're mechanical things
15 getting in the way. I think there's a horizon
16 issue, a multi-year horizon. That multi-year
17 horizon I think has to give good recognition to
18 the fact that a board was created which had a
19 problem-solving mission, but a -- but a -- a
20 perpetual charter, and that I think -- I hate
21 to say it, but I think that was an error. And
22 so I think if we focus on the transition we
23 want to make, what we want to be able to do is
24 turn this thing over under a condition that the
25 future owners of it won't have a problem with

1 it. Which means that we have to have some
2 system of quality in place, measurements in
3 place, that some kind of a larger board would -
4 - would be able to see the visibility coming
5 from this, lit-- literally, about one percent
6 of the veterans is what we're talking about
7 here. I think Tom can verify that that point
8 is -- that that error is not a big one in terms
9 of -- upper bound two percent, should we say,
10 no pun intended.

11 **MR. PAMPERIN:** Cur-- current estimate is that -
12 - Current estimate is that there are between 23
13 and 24 million living vets.

14 **DR. REIMANN:** Right, okay. And about a quarter
15 of a million people who have served -- have --
16 have taken part in testing and so forth, so
17 we're talking about a one-percent effect. So a
18 longer run to have a board or a committee or
19 anything else that continues to worry about
20 this means that we didn't do our job in turning
21 over a -- a solid product. So if there are
22 existing bodies that can look at data from the
23 atomic veterans, it has all of the visibility
24 it needs to function. So I think all of this
25 short-term thing maybe relates to things like

1 Board fatigue and all other sorts of other
2 things that enter into the picture. But it
3 seems to me that the long run is that this
4 Board should not have been created with the
5 idea of looking, you know, out 20 years, but to
6 solve the basic problem. Is the basic problem
7 solved? No. So we would probably agree that -
8 - that we -- that a transition is the
9 appropriate thing to be looking at, but we
10 probably don't all agree on exactly where we
11 are in that transition. But certainly another
12 year or so would give us an excellent view of
13 what that transition is about. And bearing in
14 mind that it takes that long or longer to even
15 explore some of these other things in the legal
16 frameworks, that would allow for the programs
17 to settle, the metrics to settle in, all of the
18 recommendations that are made -- some of which
19 were called done and are really more fairly
20 called being addressed, is the way I would
21 describe it -- I think that that would give us
22 another year to get a good snapshot on what
23 that is doing and let all these other issues of
24 cost and consultants and membership and size be
25 little mechanical issues that occur at the

1 margin and address a need and not be -- not be
2 seen as somehow an end purpose. So I feel
3 fundamentally that we were -- that with -- with
4 one percent of the total population of veterans
5 in our purview, that what we owe to them is to
6 put the program on a solid footing and turn it
7 over so that other people, if they do their
8 jobs, can get a good snapshot and a moving
9 picture on what's happening in the service of
10 the atomic veterans, I think we'd all be very
11 proud of having been part of that -- that
12 transition. So I come out very close to where
13 John is, that one meeting a year is about
14 right. It would still allow some functionings
15 of the subcommittee, and we won't get into all
16 of these nasty issues of loss of corporate
17 memory, bringing in people who have no idea
18 what was done or why it was done or where
19 things stand. And so all the costs that --
20 all the costs and confusion that -- that attend
21 that kind of transition don't need to be
22 addressed as the principles under which we're
23 operating here. They will occur as mechanical
24 issues as we move -- as we move forward. So
25 that's the way I see it, but I would think that

1 we need at some point to look beyond the next
2 couple of years and say what is it that we want
3 to hand over to other people so that they would
4 be able to say this is not only good, this is
5 not a bad model for a lot of different veterans
6 groups or for issues that span VA and DoD, that
7 this is something we could -- we could easily
8 adapt to other -- other purposes and we would
9 consider it, you know, a good contribution from
10 this Board that existed for, you know,
11 somewhere between four and five years, whatever
12 it is. So anyway, that's my piece.

13 **VICE ADMIRAL ZIMBLE:** Okay. I think I --
14 you've added some really good insight, and I --
15 I really appreciate your comments. I -- I'm --
16 is there any -- anybody in the -- in -- on the
17 Board that has any comments or thoughts
18 regarding Curt's remarks? Harold?

19 **MR. BECK:** I just have a slight problem in the
20 sense --

21 (Whereupon, multiple Board members spoke
22 simultaneously.)

23 **VICE ADMIRAL ZIMBLE:** You -- you had comments
24 specific to --

25 **DR. ZEMAN:** Yes, as a matter of fact --

1 **VICE ADMIRAL ZIMBLE:** Okay.

2 **DR. ZEMAN:** And I almost put my card down
3 because Curt said much of what I was going to
4 say.

5 **VICE ADMIRAL ZIMBLE:** Oh, okay.

6 **DR. ZEMAN:** And I -- let me just reiterate then
7 what I thought the high points were of what he
8 said. One is -- is that I think the -- we've
9 all agreed and I've heard a lot of consensus
10 that the structure of the four subcommittees
11 and their taskings are derived from the law and
12 they -- there's business to be done in all four
13 of those areas, so those four areas or four
14 thrusts or four subcommittees are what we need
15 to retain.

16 Number two, I've heard that we can't just turn
17 the switch and go non-FACA because it would
18 take an act of Congress to do so.

19 On the other hand, we don't want to be sitting
20 on this same committee ten years from now, so
21 maybe we need to ask the agencies or recommend
22 to the agencies that they work with Congress to
23 put some authority in here so that at some
24 point we can recommend that we be
25 disestablished or transitioned to something

1 else.

2 **VICE ADMIRAL ZIMBLE:** Okay.

3 **DR. ZEMAN:** If they start now, perhaps in a
4 year or two we'll have authority to do that,
5 because we don't have that authority now and --
6 and -- all right, so that was the second point.
7 The third point I wanted to make is that each
8 of the subcommittees -- maybe I'll just speak
9 for Subcommittee 1, if the partners will allow
10 me. We want to change the way that we've done
11 work because of what's transpired and what
12 we've accomplished over the last couple of
13 years. We've put a lot of work personally into
14 dose recons-- dose reconstruction audits and --
15 and subcommittee meetings, separate from our
16 Board meetings, and we can scale that back I
17 think a lot and still accomplish the level of
18 oversight that -- that we want to accomplish.
19 Exactly how we're going to do that, we haven't
20 figured out yet. And maybe -- maybe what we
21 should be asking each of the subcommittees to
22 do is to modify their charter and come back to
23 the Board with a proposal of exactly how they
24 want to do business in the future. So that --
25 **VICE ADMIRAL ZIMBLE:** Okay.

1 **DR. ZEMAN:** I don't think we're ready to do
2 that right now. Maybe if we quorumed and came
3 back in a day or two or in a month or whenever
4 our next meeting is, we'd be ready to do that.

5 **VICE ADMIRAL ZIMBLE:** All right. Harold, did -
6 - did you want to say something? I -- I didn't
7 mean to cut you off, but I have been ignoring
8 this side.

9 **MR. BECK:** Okay. I just wanted to comment on
10 Curt's point. I think that -- you know, this -
11 - this Board was not put in -- I mean it was
12 put in specifically for that one percent, and
13 the key thing there was that it was based on
14 having something that would have continuing
15 oversight. I always harp on that. So I -- I
16 think that -- you know, you have to recognize
17 that it -- it's not supposed to finish its job
18 and go away in four years. It can transition,
19 and I agree with that, and it's going to -- you
20 know, one of our problems with trying to make a
21 decision here -- a firm decision is that a year
22 from now we may need something else. So I
23 think we have to do something that's flexible
24 because it can transition to something very
25 small, which is just a maintenance sort of

1 function, but there has to be some continuing
2 function, I think -- I mean to satisfy that
3 oversight requirement, which Congress
4 recognized and started from the Green Book.

5 **VICE ADMIRAL ZIMBLE:** Okay. R. J.

6 **MR. RITTER:** Just a short comment. Dr. Reimann
7 I think really expressed what I -- what I was
8 thinking in terms of, you know, what the nature
9 of the Board is. And of course if we remain at
10 the present level, given maybe some attrition,
11 the number of meetings we have per year can be
12 directly proportional to the -- to the
13 workload. And for the most part, most of the
14 work is done. We just have to tweak a few
15 squeaky wheels, so to speak.

16 But I have to step back and look at it from
17 America's atomic veteran community standpoint,
18 and that is that they're now -- just now
19 gaining faith in the VBDR. They know the VBDR
20 now is working for them, they -- they see the
21 results of the meetings and the subcommittee
22 meetings and how the VA and DTRA's
23 participating, and then the quick response and
24 turnaround on claims at this point in time. So
25 I would say from that perspective, you know,

1 perhaps Dr. Reimann is -- is right on the nose
2 when he says we can still maintain a Board, but
3 meet once a year and still have subcommittees
4 meeting as may be required. And in that way we
5 -- we still -- the American -- America's atomic
6 veteran community still knows that -- that the
7 VBDR is there looking out for their -- for
8 their best interests.

9 **VICE ADMIRAL ZIMBLE:** Okay. Thank you, R. J.
10 Dr. Boice?

11 **DR. BOICE:** Let's just -- comments on Dr.
12 Reimann's and R. J.'s comments. First a
13 general thing, I think it's obvious -- you
14 know, this committee, our Board, will not go on
15 forever. There is a finite limit related to
16 the age of the atomic veterans. You know, we
17 started off --

18 **VICE ADMIRAL ZIMBLE:** And ours.

19 **DR. BOICE:** Yeah, and our own age, too. But
20 you know, we started off, there was 450,000 and
21 what, there's 225,000 now, and it's a --
22 they're at a very -- what, the youngest atomic
23 veteran is probably 65 or something like that.
24 That's the youngest, and so there's going to be
25 a high -- there's a high mortality rate so this

1 -- there is a limit, you know. In ten years,
2 just based on age, there may not be enough
3 claims or anything to -- to be concerned about,
4 so we do have a short-term issue here.

5 I also just -- then the opinion, as -- was, it
6 seems easiest to stay as we are, meet less
7 frequently related to the work span, and those
8 that need to retire, allow them to retire
9 through attrition.

10 The other thing, too, as we've mentioned a
11 number of times throughout the few days and --
12 and Curt reinforced it, this Board has worked.
13 This Board has been effective, and we've
14 actually stated a number of reasons why. But
15 shouldn't -- and then Curt's suggestion is
16 well, maybe this format, since it's worked, it
17 could be adapted for other circumstances. But
18 how will the other circumst-- how will the
19 other people know about it unless we write it
20 up, put it up -- you know, say these were our
21 goals, we were problem-solving, we did this, we
22 did -- that should be written up in some
23 fashion, as a report or a publication then that
24 the agencies have worked together. We were --
25 have in this charter, it wasn't we worked

1 together and it came to this very successful
2 transitional phase. So that would be one
3 recommendation for us as a group or for the
4 communications committee or all the components
5 to write it up now where it's still fresh in
6 our minds of what we've done, how it's worked,
7 get input from both the agencies of gee, you
8 know, this did work for us, and then let's try
9 and codify it in some way so in fact can be
10 passed on to others.

11 **VICE ADMIRAL ZIMBLE:** Okay, that's a very
12 interesting thought. That -- want to make us a
13 model, huh? Why not?

14 I haven't heard from the two agency reps. I
15 wonder if they have any comments.

16 **MR. PAMPERIN:** Well, you know, I kind of agree
17 that there is a finite limit to this because of
18 the age of the population, so on the other
19 hand, R. J., I'm very sensitive to the -- the
20 notion that hopefully atomic veterans are
21 gaining trust. I remember the first time I
22 went to an atomic vets' meeting in San Diego,
23 Clyde just berated me. I'd never met the man
24 before and I was -- yeah, and I was quite -- it
25 was quite clear I was the devil incarnate, but

1 you know -- so there -- there is that.
2 I also think I -- I know in -- in some of the
3 advisory committees that I have seen -- I'm
4 thinking of one in particular that, from my
5 perspective, is -- is a book club, you know,
6 that -- that comes to -- comes to Washington
7 three times a year for the sole purpose of
8 going to the same restaurant and -- you know,
9 and -- and I'm sure there are lots of extremely
10 energetic and important advisory committees,
11 but I do kind of like the idea of writing this
12 up as a best-practice. 'Cause I'm just
13 thinking Secretary Peake has made a decision,
14 although it isn't -- we don't think it's
15 necessarily true, there's been a great deal of
16 criticism of VA's rating schedule because it's
17 referred to as the 1945 rating schedule. Well,
18 the 1945 rating schedule merely is a -- is a
19 concept, not the individual parts. It's a
20 concept that you don't pay for the impact of
21 disability on an individual, you pay for the
22 impact that it would have on the average
23 person; that you pay in ten percent increments
24 and that you pay for earnings loss. That's
25 what the 1945 rating schedule is, not how you

1 evaluate knees.

2 But because the -- the message is hard to sell
3 and because there are some deficiencies in the
4 rating schedule, we are establishing a new
5 advisory board for the rating schedule. And we
6 know very well what the -- what the criticisms
7 are, whether real or perceived, in the rating
8 schedule. And they're -- they're similar to
9 the kinds of things this Board faced. So I
10 mean if you -- if we wrote something up, not
11 only for us but for other agencies, as to --
12 how do you tackle something like that. And as
13 well, what are some of the downsides. For a
14 population that has had a very, very unique
15 experience and many of whom are very, very
16 distrustful of the government, the -- the
17 simple fact of the matter is, in three years I
18 doubt that we have met 30 atomic vets, without
19 regard to advertisements and, you know, our
20 very best efforts. So you know, even -- that's
21 an area where I don't know if we failed or not
22 failed. It -- suffice it to say, whatever it's
23 -- our existence, at least at the individual
24 level, has not been responded to. So even if
25 that's an open question, how do you engage the

1 public, you know, what -- because right now
2 what we have is basically sort of like the
3 defensive thing that you have when you declare
4 bankruptcy. You know, you put six lines in the
5 local newspaper and the entire world is then
6 put on notice that if you've got a debt with
7 us, you know, you'd better settle it now. I
8 mean we've -- we've noticed, we've notified
9 everybody, we can honestly say we've done our
10 best efforts, but yet the atomic vets haven't
11 engaged. Every --

12 **DR. MCCURDY:** I'm not hearing everyone right
13 now.

14 **MR. PAMPERIN:** I'm sorry?

15 **DR. MCCURDY:** I say I'm not hearing everyone
16 right now if they can turn up the volume a
17 little bit.

18 **VICE ADMIRAL ZIMBLE:** That's -- that's McCurdy.

19 **MR. PAMPERIN:** Oh, I'm sorry, John -- or Dave,
20 rather -- excuse me.

21 But I mean I -- even in a write-up it would --
22 I -- I think that that, you know, is -- is
23 clearly something -- like how do you engage the
24 public, you know. This was what we tried and,
25 for whatever reason, it didn't work -- whether

1 that's because of the population or because
2 somehow or another what we did was inadequate,
3 I don't know. But I -- I do think that there
4 is merit in -- and I don't even know if -- if
5 we did a literature search, if anybody -- if
6 you could even find anything on how to make a
7 FACA work, you know, and it might be worthwhile
8 to do.

9 **DR. BLAKE:** Just briefly, Admiral, I think Dr.
10 Boice's proposal to do a report at this time is
11 appropriate. It could be a brief report, and
12 what I would recommend is that the NCRP, our
13 contract support, take the initial lead on
14 drafting that report. That way the rest of the
15 Board members then can review it. And I -- I
16 think the two agency reps certainly can provide
17 input, but we should not be the ones writing
18 it. And if you need metrics and figures, we're
19 more than happy I think to -- to do that, but
20 using your contract support to do the initial
21 draft, perhaps in just a few weeks to get it
22 back in time, I think -- I don't think it needs
23 to be a real lengthy report, but it does
24 document -- if we're about to transition to
25 some place -- putting it in writing, not only

1 for the agencies but also our representatives
2 in Congress, too, to see what we've done and
3 summarize at that point.

4 **VICE ADMIRAL ZIMBLE:** John, I think that this -
5 - this may turn out to be a recommendation from
6 the Board, that -- that -- that a -- that the
7 agencies contract someone to write that report.
8 Would you put that in the form of a motion and
9 see if we can get something moving here, just
10 on that -- just on that one issue? You brought
11 it up.

12 **DR. BOICE:** Oh, yeah, I -- I would make the
13 recommendation that in this time of transition
14 we write up our -- our accomplishments and our
15 processes as a FACA board so that it can be in
16 the public record on the -- the approaches that
17 have used, the successes and the failures, and
18 that this write-up be given first to the
19 responsibility of the NCRP to provide the
20 drafts for us to review. That's pretty long.

21 **VICE ADMIRAL ZIMBLE:** Do I hear a second?

22 **DR. BLANCK:** Second.

23 **VICE ADMIRAL ZIMBLE:** And in favor? Who's in
24 favor?

25 (Affirmative responses)

1 Any opposed?

2 (No response)

3 Okay, that's a recommenda--

4 **VICE ADMIRAL ZIMBLE:** Discussion.

5 **UNIDENTIFIED:** Kristen's had her sign up.

6 **DR. SWENSON:** That's on something else.

7 **VICE ADMIRAL ZIMBLE:** Oh -- I figured, it's
8 been there for a long time. I get it.

9 Okay, was there any discussion?

10 (No response)

11 All right, seeing none, any opposition to this
12 recommendation?

13 (No response)

14 Hearing none, so moved. Okay.

15 Okay, now, Dr. Swenson.

16 **DR. SWENSON:** I just wanted to -- that we
17 should think about, with this outreach that
18 we're going to do, how will that impact? If we
19 outreach and all of a sudden now we have a
20 group of vets who now are not getting --
21 because there's such a group that come in,
22 backlog, are they going to come to the meetings
23 -- we may get nothing like that. But we might
24 want to think about that outreach and is it
25 going to impact like our future for the Board.

1 **VICE ADMIRAL ZIMBLE:** Well, it's certainly
2 going to impact the future of the VA if there's
3 a -- there's -- recognizing that right now, of
4 all the claims that have gone on since the
5 onset of the program, only represents three
6 percent of all the atomic veterans, that there
7 is a great potential -- as a matter of fact, I
8 would tell you that -- that Tom Pamperin is
9 concerned that -- of the perceptions that will
10 occur if there is a major onslaught of claims
11 which all get denied, and that's -- that's I
12 think something to really be -- not so much
13 claims that come in and get granted and it's
14 going to cost money and we're going to have to
15 go back to Congress and get a supplemental. I
16 mean those things happen. But that's what we'd
17 like to see happen, personally. But all the
18 claims that are going to come in because of
19 great expectations that get denied. So I think
20 the idea that Tom has come up with is go --
21 let's go after the cohorts who were in the high
22 radiation areas. There's three cohorts of
23 those people. And -- and they can -- they --
24 be identified by the NTPR people and -- and
25 it's a reasonable way to reduce the total cost

1 of the outreach and see what comes back. And
2 then -- and then that fourth group that has
3 been also recommended, which is -- which is
4 very clever, and that is to find those who are
5 atomic veterans who are being treated in VA
6 facilities for a -- some -- one of the
7 presumptive conditions and making sure that we
8 reach those people as well. I think that makes
9 great sense. That ought to be a recommendation
10 from the Board.

11 **MR. PAMPERIN:** I was -- I was talking to
12 Washington this morning -- George, that is --
13 and --

14 **VICE ADMIRAL ZIMBLE:** George Washington?

15 **MR. PAMPERIN:** -- and -- and you know, I
16 advised our leadership what I had agreed to,
17 everybody's comfortable with that. And what
18 we'll be able to do is once we get the data
19 from NTPR, we can -- we can begin doing feeder
20 reports, how many people in the cohort, how
21 many have we found in BIRLS, how many have we
22 found in VHA -- you know, give some basic stuff
23 before we have the letter drafted. And quite
24 frankly, we are looking to you to -- to find
25 some pleasant way to say hey, if you've got

1 prostate cancer, forget it, don't -- don't
2 bother us, but you know -- but then -- and then
3 what the results of those are, you know, in
4 terms of claim volume and -- and output. But
5 the -- so we'll do that -- I mean if we get a
6 lot of them that require doses, I don't know
7 what that'll do to Paul. He may be beat up
8 like he used to be, but we'll go from there.

9 **VICE ADMIRAL ZIMBLE:** Okay, should that be in
10 the form of a formal motion from the Board to
11 the VA?

12 **MR. GROVES:** Well, I think that with the way we
13 discussed it yesterday and the way I -- we
14 wrote the report from Subcommittee 4, that --
15 that we have a recommendation for outreach
16 which has been accepted and we now have a
17 methodology that we're going to use, so there
18 seems to be violent agreement on how we would
19 go forward, so I don't think we need a motion
20 more specific than what is currently there.
21 I would like to comment that I think it was a -
22 - a brilliant strategy that we kind of got to
23 where we are now before we decided to take on
24 what may be a significant outreach. And that
25 is that we have aligned all of the

1 organizations that are going to have to
2 respond, should there be a -- a large number of
3 claims, to handle them in an ef-- in an
4 efficient manner and to ha-- and to communicate
5 to those veterans a perspective of what their
6 expectations should and could be. And so I
7 think we -- we're -- we've set ourselves up to
8 now do this in a way that, you know, should be
9 successful. And -- and so we're ready to go
10 forward with our part on -- on Subcommittee 4
11 in supporting that activity. And again, I
12 don't think we need a specific recommendation
13 other than what's already in the system.

14 **VICE ADMIRAL ZIMBLE:** Okay.

15 **DR. LATHROP:** And just, by the way, from my
16 memory of the three cohorts, they're all small.
17 Right? It's the pilots, the guys at the
18 weather station, and I forget the third one,
19 but they're all small --

20 **VICE ADMIRAL ZIMBLE:** The volunteers that --

21 **UNIDENTIFIED:** Forward observers.

22 **VICE ADMIRAL ZIMBLE:** Forward observers, yeah.

23 **DR. LATHROP:** And I don't know the size of that
24 one, but I -- but I suspect it adds up to not a
25 lot of people.

1 **VICE ADMIRAL ZIMBLE:** It's just going to be a
2 few hundred.

3 **DR. LATHROP:** That's all?

4 **VICE ADMIRAL ZIMBLE:** Pat.

5 **DR. FLEMING:** On this point, I just wanted to
6 hear from Tom. And being a member of
7 Subcommittee 2, if you felt, Tom, that it would
8 be helpful if we did articulate this in the
9 form of a recommendation with the specific and
10 --

11 **MR. PAMPERIN:** Well, I don't kn-- I don't know
12 that it's really necessary. We already have a
13 recommendation out there to do outreach and
14 we're -- you know, we've -- we've plotted the
15 strategy here. You know, just to say that it
16 remains open and that we -- you know, we
17 respond to it or -- I don't -- I don't know. I
18 don't know that you need to make a new one.
19 We've -- you know, in the past we've made some
20 recommendations in the past which are -- which
21 are really components of the -- when I went
22 back and did my slides and said that there were
23 25 recommendations, there were actually more
24 than that. But when you looked at them, they
25 were -- they were subsets of the same

1 recommendation so I just lumped them all
2 together and -- so -- I don't -- I don't think
3 it's -- I don't think it's necessary; I don't
4 think it would hurt.

5 **DR. FLEMING:** The reason why I bring this up is
6 because VA, perhaps to some extent unlike --
7 how do we say this now, N -- NTPR -- NTPR has
8 actually not accepted some of our
9 recommendations, and for good reason. And if
10 there's anything about the specific nature of
11 what we're talking about now in terms of this
12 outreach that VA might not accept, perhaps it
13 would be helpful to hear that directly from
14 them if we put it in the form of a
15 recommendation.

16 **MR. PAMPERIN:** Well, you know, my -- my sense
17 is that -- I didn't realize that it's only a
18 couple hundred in these three co-- three
19 cohorts, but my guess if it's -- if it's three
20 hundred in these cohorts, we're doing a special
21 outreach to a particular population of agent
22 orange beneficiaries who are receiving care
23 from VA but have never come to VBA for claims.
24 And there is a substantial number. I mean
25 we're talking in the thousands of people who

1 are en-- are clearly entitled to compensation
2 but have never filed a claim, and they're
3 getting health care from us. So my guess is
4 that people -- if we queried the VISTA
5 database, we will probably find more people
6 than there are on the three cohorts. But if
7 we -- if we mail to them and we get a very,
8 very low response rate, my sense is that there
9 will be less enthusiasm for doing a large-scale
10 thing, you know, just -- you know, just to dot
11 an I or cross a T, I mean --

12 **DR. FLEMING:** And so you don't need any
13 recommendation?

14 **MR. PAMPERIN:** No.

15 **DR. FLEMING:** Thank you.

16 **MR. GROVES:** I think that we will, in
17 Subcommittee 4, very shortly, in consultation
18 with Tom, put this together in the form of a
19 plan of action, if you would, so there will be
20 documentation of how we plan to start this
21 activity and -- and go forward, and -- and I
22 think Tom added what would be the final
23 paragraph of that plan of action which does
24 represent that pilot that we had discussed
25 before, which will give us some indication of

1 what the success rate might be in going to the
2 larger population. And it would be, I think,
3 an excellent marker to then make a decision on
4 -- on where to go. And I think that while the
5 three specific high-dose cohorts are critical
6 to this, it is probably the group who is in the
7 system that we now think we could identify as
8 both being atomic veterans and having a
9 presumptive disease and their interest in
10 filing a claim that would help us know where we
11 go next.

12 **MR. PAMPERIN:** And just to -- just to add some
13 fleshing out of this, one of the reasons why I
14 would say that, you know, if we don't get much
15 of a response, we probably would be not
16 inclined to do much more, is because it's --
17 you know, there's a general assumption that
18 people who have experiences or who have
19 disabilities seek compensation. And that is
20 not true. There -- for example, we -- we now
21 think that there are still remaining about
22 35,000 former prisoners of war. There are a
23 third of them -- there's a small percentage, we
24 don't know who they are; we can't find them,
25 you know -- but there are about a third of them

1 we know who they are, we've sent them a million
2 letters -- people from the POW advisory
3 committees talk to them. We know they've got
4 issues, you know, that -- for which they could
5 be compensated. You couldn't get them to file
6 a claim if, you know, you strapped them down
7 and, you know, moved their hand for them. So I
8 -- you know, there -- the fact that there's
9 money available and somebody had an experience
10 and somebody now has some negative consequence
11 of that, there are a whole lot of people who --
12 that's life and I did my part, and if that's
13 what it is, that's what it is. And so I -- you
14 know, if you put stuff out and put stuff out
15 and people don't come, then at some point you
16 say the group has made a choice and you've done
17 what you can and move on.

18 **VICE ADMIRAL ZIMBLE:** Kris-- oh, I saw your
19 name was still vertical. Do you have --

20 **DR. SWENSON:** Yes.

21 **VICE ADMIRAL ZIMBLE:** Okay.

22 **DR. SWENSON:** Once you've gone through those
23 three cohorts, would it -- and I know when you
24 have claims come in you do prioritize on health
25 or age. Could you look at the oldest group --

1 you know, sort them by age and actually then
2 take on a mailing to the older population of
3 that group?

4 **MR. PAMPERIN:** It -- it's worth looking into.
5 I mean what -- what we're going to -- my sense
6 is the way that we will manage this outreach
7 letter is that the letter will come from the
8 Jackson Regional Office, directing them to file
9 their claims at the Jackson Regional Office, so
10 that, you know, we don't run into this getting
11 mixed up with other claims and all that kind of
12 thing, so that we'll have fairly tight control
13 on it. But you know, we -- we can take a look
14 at it. I don't know what the -- you know, when
15 you start looking at the population, it may be
16 that they're all in the old category, you know,
17 but we'll see what we get.

18 **VICE ADMIRAL ZIMBLE:** I -- when you get down to
19 numbers like 300, 400, do you need to
20 prioritize those?

21 **MR. PAMPERIN:** No. I think Kristen's thing is
22 that if we were -- after that, after this
23 population, is there a way to then go after the
24 rest of the population. And you know, we'll
25 take a look at that.

1 **VICE ADMIRAL ZIMBLE:** All right, I -- I have
2 some distress signals suggesting that we take a
3 break -- is that what you're saying with the --
4 with the B and the --

5 **DR. BLANCK:** Thought you ought to be reminded.

6 **VICE ADMIRAL ZIMBLE:** That's right, right.
7 Okay. We -- we'll take a -- a short break. I
8 think that we -- we've just about finished up
9 and I -- I would -- I need to tell you that I
10 find that this kind of dialogue, this kind of -
11 - of conversations are really very, very
12 helpful to -- to bring out where we're supposed
13 to be going. Go ahead.

14 **BRIGADIER GENERAL MANNER:** Just for 30 seconds
15 before we take that break, just a point of
16 order only as far as process. Any time we
17 refer to contractors or to consultants, we need
18 to refer to them for the record as just a
19 product of the Board rather than referring to -
20 - I mean it's just a point of order so we --
21 it's the Board's results, the Board's
22 recommendations, the Board's analysis and so
23 on, since it is a public record. Thank you.

24 **VICE ADMIRAL ZIMBLE:** Okay, that's good. Now I
25 -- I would just mention that I think this has

1 been -- the membership here is outstanding and
2 I -- I am loathe to see the -- the membership
3 get reduced too soon. I -- I really have --
4 have -- from what I'm getting as a consensus
5 from this group really is that things sort of
6 go along cour-- the course of action number
7 one, that we not look to any major changes
8 right now, right at this moment; that we see
9 what the work is going to be and, over the
10 course of the next year or so, we can -- we can
11 see what happens. Those people that are really
12 ready to come off the Board will be allowed to
13 attrite away and we'll see where we are and --
14 and see what has to be done.

15 I think that -- the first thing I would suggest
16 that we think about is a recommendation that
17 goes forward that says we have reached -- the
18 Board feels it has reached a milestone and it's
19 ready to -- to transition into a more of an
20 oversight role. There is still work to be
21 done. We ask that the agencies consider that
22 sometime within the next few years that
23 legislation be proposed to provide a sunset
24 provision for the VBDR and -- and let it go at
25 that. And then -- and then we'll make a

1 decision -- after the break, think about it --
2 we'll make a decision about when we should have
3 the next meeting; should it be -- should we --
4 I'm -- I sort of say we go to six months, but
5 I'll leave it up to you, decide when we have
6 the next meeting and -- and suggest where. I
7 think we no longer need to do fact-finding by
8 taking veterans' testimony. I don't think this
9 -- I think we've -- we have gleaned enough from
10 that. We'll still be open to the public and,
11 should someone wish to speak, we would -- we
12 would certainly permit it, but I don't think we
13 need to go solicit public testimony. And --
14 and we're going to move into a monitoring role
15 and we'll ma-- we should make that kind of a
16 recommendation that asks the agencies to begin
17 to look at some way of setting up a sunset
18 provision in the law for us.

19 Is that reasonable? We may not have to take a
20 break. We may be able to adjourn. Do I --

21 **BRIGADIER GENERAL MANNER:** Why don't you just
22 take a break so they can think about it.

23 **VICE ADMIRAL ZIMBLE:** Okay, think about it
24 without the stress. Okay, good point.

25 (Whereupon, a recess was taken from 10:40 a.m.)

1 to 10:59 a.m.)

2 **VICE ADMIRAL ZIMBLE:** Please, let's not extend
3 the -- let's not extend our work to fulfill the
4 time allotted for it. I think -- I think we
5 can do it in less time. We -- I -- I think
6 what I propose is that we make a statement, and
7 General Manner has suggested that we do it in
8 letter form, and I've asked John Lathrop to
9 prepare a letter that will go to the heads of
10 both agencies stating that -- what our
11 accomplishments are, what's still left to be
12 done, basically what he has already written in
13 the gap analysis -- what our accomplishments
14 were, what still needs to be done, the fact
15 that we have reached a milestone and are in the
16 process of transitioning to the work of
17 oversight and support of the implementation of
18 the two agencies -- recommendations to the two
19 agencies. And then that -- that we consider --
20 that we ask the agencies to please consider a
21 way of working with legislation to give us the
22 option to sunset the Board at the appropriate
23 times, as -- as -- at times deemed appropriate
24 by the two agency heads. Okay. That -- is
25 there any problem with that recommendation or

1 that -- that course of action? Yes, sir.

2 **MR. GROVES:** Only that that is a separate
3 document from the history of the Board and the
4 accomplishments.

5 **VICE ADMIRAL ZIMBLE:** Yes, exactly -- exactly.
6 This is a -- this is going to be a -- a one or
7 two-pager that goes to agency heads, with
8 copies to all the necessary people on the
9 agencies. Basically it says hey, we're making
10 a transition; this is why we're making it,
11 we're -- and we know that there will come a
12 time when we need to close down the Board.
13 Okay.

14 **FUTURE PLANS**

15 Now I'm going to ask each of the Subcommittee
16 chairs to articulate where they plan to go from
17 here on in. That's one piece of business. And
18 the second piece of business is to determine
19 the time and place for the subsequent meeting
20 of the Board. So let's start with -- I'm going
21 to go in reverse numerical order, just to
22 create some sort of something.

23 Go ahead -- so we start with Subcommittee 4.

24 **MR. GROVES:** Thank you very much, Mr. Chair.

25 As we've heard, I would say that the stars have

1 aligned for us to take on what all of us have
2 been looking for -- forward to in Subcommittee
3 4, and that is a -- an outreach effort, and I
4 want to commend the VA for recommending some of
5 the cohorts and some path forward for this, and
6 we look very much forward to working with them
7 on that. So from the Subcommittee 4
8 perspective, I see that maybe one of the most
9 work-related activities we've been involved in
10 is before us rather than behind us. So with
11 that in mind, we -- you know, we're certainly
12 prepared to take on that task, and I think we
13 have the right membership to do that. But I
14 would see that, for our subcommittee, there's
15 probably going to be an increase in workload in
16 -- in the near future. And I think that that
17 can be taken care of at subcommittee meetings
18 including representatives from the VA and DTRA,
19 and so I don't see the need for us to direct
20 what the frequency of the meeting of the -- of
21 the Board is. But I would like to be sure that
22 we would be able to meet in person, our
23 subcommittee, with the representatives from the
24 -- from the VA and DTRA to take on this
25 important outreach effort as we go forward this

1 next year.

2 **VICE ADMIRAL ZIMBLE:** I don't -- I don't think
3 that's going to be an issue. That should not
4 be a problem. I would ask -- ask you -- in
5 fact, I would ask each subcommittee chair to
6 look at your subcommittee's charter and, at --
7 by the next meeting, if it requires any
8 revision of your charter that you can bring it
9 to the next -- the next meeting for approval.
10 Okay.

11 **MR. GROVES:** I would think that there has been
12 value for me in the -- the subcommittee chairs'
13 meeting on the teleph-- by telephone, with you
14 as the chair, to cover some of the business
15 that we've needed to. And that is not at a
16 quorum level so it's perfectly acceptable under
17 FACCA. And that -- that is a way, other than
18 the face-to-face Board meeting, for us to kind
19 of keep track of what each other are doing.

20 **VICE ADMIRAL ZIMBLE:** I think the telephone
21 conferencing is a perfectly legitimate way.
22 Okay, Subcommittee 3.

23 **DR. REIMANN:** I think we've already covered a
24 great deal of this, but I think the discussion
25 this morning of the future of VBDR has I think

1 helped to crystallize in our mind what we
2 really need to do better, and that is the focus
3 on the day to day output of the agencies. I
4 think the material presented by Tom yesterday
5 is -- whets our appetite in terms of that
6 ability to catch up and to really dig into
7 those things as to what they are and how they
8 work with particular -- well, actually almost
9 total focus on the subgroup of atomic veterans.
10 So for example, as you -- as you do the -- the
11 reviews and -- and analysis of rating
12 specialists and -- and comparability across
13 your network and so on, I guess we'd want to
14 look at how that really plays out in terms of
15 how much data there are in terms of the -- what
16 it tells us about the status of claims with
17 respect to atomic veterans. So that's --
18 that's more of a trying to dig in deeper into
19 what already exists, but I think that side of
20 our work has -- has been on the -- on the
21 lighter side. And Kristen has already talked
22 to me about that and that she will be taking
23 special responsibility for that.
24 We've already signaled in our report yesterday
25 that we want to look in on the double-blind.

1 We see that now in a very different way than
2 when we proposed it a couple of years ago, but
3 that's not a bad thing. In a sense it might be
4 -- it might be covering a number of bases in
5 one -- in one approach, and so we want to
6 capitalize then. I think that's going to be
7 critical to -- for us to be in continued close
8 cooperation with SC-1 on that, and Dave and I
9 and -- and probably others -- in the last
10 analysis will try to cover that.

11 And then finally, as we see that transition and
12 the things that came up this morning in terms
13 of our transitioning to some kind of an
14 ultimate oversight group that's beyond the
15 horizon of any of us here, and that is a system
16 of metrics and so on that should be looked at
17 by management, and then could be looked at by
18 some kind of oversight group, maybe some joint
19 group of some kind, FACA group, that -- that
20 al-- that has allowed us to give this very,
21 very important constituency full attention,
22 even though it represents a very small fraction
23 of the total load of veterans. I think what we
24 have to be, I think, very sensitive to is
25 making sure that those that we were created to

1 -- to help have the visibility and that that
2 visibility be a clear indication of continued
3 support and -- and continued improvement in
4 terms of responsiveness and quality and so on.
5 So that's pretty much as we see it, so that
6 transitioning I think is -- is going to force
7 us to look at what that management scoreboard
8 ought to look like. And if we can keep that in
9 play for -- for the long run, that -- that
10 could be a major product turned over to some
11 future organization or part of an organization
12 that would allow everyone to get a -- a clear
13 visual picture of what's taking place for this
14 -- for this constituency.

15 **VICE ADMIRAL ZIMBLE:** Thank you very much.
16 Subcommittee 2, Dr. Blanck.

17 **DR. BLANCK:** Subcommittee 2 has begun revising
18 our purpose, membership and function. I would
19 point out that since our function was primarily
20 one of auditing the VA processes and how they
21 work with DTRA anyway, there will be only minor
22 modifications.

23 More specifically, I would remind NCRP that we
24 need to replace Jean York, who has gone back to
25 the VA, has -- our -- the subcommittee's

1 auditor, and of course we're hoping for some
2 recommendations from the VA. We intend to
3 continue reviewing the audits that are done by
4 whoever that is. That is, Dr. Otchin's
5 replacement, of course the SOP that that
6 individual will develop -- or -- or has. I've
7 -- we've heard some information that it may
8 actually be in place, that Dr. Reeves has used.
9 But anyway, we just need Mr. Pamperin's follow-
10 up on that.

11 And then we'll take particular interest in
12 reviewing how well the reconstituted team is
13 doing at the Jackson VA. I had mentioned
14 previously the possibility of a visit, and I
15 think we may try to have a couple of members of
16 the subcommittee make such a visit again. I
17 think it was helpful the first time and we may
18 do that again.

19 So I think we'll have plenty to do, and I would
20 support the idea that's been put forth, Mr.
21 Chairman, of another meeting in perhaps six
22 months. Thank you.

23 **VICE ADMIRAL ZIMBLE:** Thank you. And
24 Subcommittee 1.

25 **MR. BECK:** Subcommittee 1 will be focu--

1 changing its focus from audits to reviews, so
2 we will probably ask to change our charter so
3 that we will no longer do the formal audits,
4 the random audits, but we will instead focus on
5 reviews. And we will continue to hold meetings
6 with the DTRA staff and their contractors in
7 order to discuss the double-blinds, to discuss
8 the DSSs, to discuss our results of our reviews
9 and so forth, and we will probably -- the
10 timing of those meetings will continue to be
11 based on the timing of the VBDR meetings, so we
12 will probably, for each VBDR meeting, have at
13 least one of those meetings about a month
14 previous, as we have been having them. But
15 they will -- the focus, as I said, will change.
16 And I think the -- six months to nine months is
17 a perfectly reasonable type of time frame, I
18 think. Maybe closer to nine months, actually.

19 **VICE ADMIRAL ZIMBLE:** Okay. Having heard from
20 the four committees -- subcommittees, and I
21 would ask that -- that -- that at the time of
22 the next meeting that we be prepared to provide
23 any new -- new modifications of the charter of
24 -- of your individual charters to the -- to the
25 full Board for their approval.

1 Dr. Boice.

2 **DR. BOICE:** Very brief, just to reiterate that
3 -- I was just following up on what Dr. Reimann
4 articulated, and I just put it into a --

5 **VICE ADMIRAL ZIMBLE:** Well, we'll make sure --

6 **DR. BOICE:** -- form --

7 **VICE ADMIRAL ZIMBLE:** -- we'll make sure that
8 Curt is -- is included --

9 **DR. BOICE:** -- but -- but also to give him the
10 credit because he had used the phrase "this may
11 be valuable to others" and that's where I
12 picked it up.

13 **VICE ADMIRAL ZIMBLE:** Ah, okay.

14 **DR. BOICE:** And so that's -- just to -- the
15 idea that --

16 **VICE ADMIRAL ZIMBLE:** I apologize, Curt.

17 **DR. BOICE:** -- so -- so and your help and
18 guidance would be much appreciated.

19 **VICE ADMIRAL ZIMBLE:** Okay.

20 **DR. BOICE:** -- and then that was mentioned
21 gently by the General, but also privately by
22 others, and it was just not thinking and that I
23 believed that the -- that the work should be
24 done, and so in the recommendation I think will
25 change at that --

1 **VICE ADMIRAL ZIMBLE:** Okay, good. We'll --
2 we'll take --
3 **DR. BOICE:** -- without any mention to specific
4 groups or --
5 **VICE ADMIRAL ZIMBLE:** We'll take care of that
6 and --
7 **DR. BOICE:** Thank you very much.
8 **VICE ADMIRAL ZIMBLE:** -- make sure that it's on
9 the record that --
10 **DR. BOICE:** That I --
11 **VICE ADMIRAL ZIMBLE:** -- that credit for the
12 idea goes to Dr. Reimann --
13 **DR. BOICE:** Reimann, please.
14 **VICE ADMIRAL ZIMBLE:** -- because, you know,
15 sometime in the middle of next week I'll take
16 credit for it, you know.
17 **DR. REIMANN:** In my self-defense here, I just
18 want to say I have no idea what I meant.
19 **VICE ADMIRAL ZIMBLE:** Okay, next, as to the
20 site for the next, and I would suggest for all
21 subsequent meetings, be in the Washington, D.C.
22 area. We really do not have a need to globe-
23 trot in order to make sure that we're -- we're
24 touching base with all the veterans. We'll --
25 we'll just arrange to have the meetings in --

1 in -- in the -- in this area, unless of course
2 it gets very cold and we might want to go to
3 Honolulu, but aside from that.

4 Secondly, we -- we -- I have discussed this
5 with -- with Paul and with General Manner and
6 with Mr. Wright, and we think that we can have
7 a meeting facility under the auspices of DTRA
8 so that we no longer have to have the expense
9 of the hotel accommodations. And we'll make
10 sure that we find a spot that -- that is
11 convenient in terms of transportation for the
12 Board members and for -- for their hotel stays.

13 **DR. LATHROP:** But it's FACA, so it has to be
14 convenient to the public also.

15 **VICE ADMIRAL ZIMBLE:** It has to be conven-- and
16 yes, yes, and we've discussed that and it will
17 be convenient to the public and it will be --
18 it will be convenient for parking. We're going
19 to think -- we're going to think of everything
20 -- okay, yeah. Well, not always, but at any
21 rate, we need to select a date for that meeting
22 and the -- the place will be -- is to be
23 determined. We have to look at what DTRA can
24 offer. We know they have an office out at the
25 airport, but it may not be suitable because of

1 security reasons. We're going to check into
2 that. But -- but DTRA has other places where
3 they have various meetings being held and they
4 -- they -- I -- I've been assured by Dr. Blake
5 that we can be accommodated at one of the -- at
6 a DTRA facility that will be convenient.

7 Dr. Swenson. I'm going to get you a vertical
8 name tag.

9 **DR. SWENSON:** I would agree that I think it
10 would be cheaper to have most -- the rest of
11 the meetings in the D.C. area. I do think we
12 should consider, since we started in Tampa when
13 -- with the atomic veteran meeting, that we
14 consider having one of our last meetings with
15 the atomic veterans meetings, as well. I
16 believe they are meeting -- they only meet now
17 every two years, and the next meeting is in the
18 fall in New Orleans.

19 **MR. RITTER:** It's '09 -- '09.

20 **DR. SWENSON:** '09. Now that -- we may want to
21 meet locally sooner, and after that continue to
22 meet in the D.C. area, but it may be -- since
23 we have so much accomplished, it's kind of the
24 last time that we could meet with them -- just
25 an idea.

1 **VICE ADMIRAL ZIMBLE:** It's a terrific idea,
2 because that -- that helps bring some closure
3 to the -- we can -- we can then talk about the
4 milestones that we have achieved. Okay.

5 **MR. RITTER:** Bearing in mind that our '11
6 meeting is going to be in Virginia, so -- so
7 you may want to keep that in mind. If we
8 continue on for another year or so and, you
9 know, we still have the opportunity -- 'cause
10 NAAV needs to come back up to the northeast
11 sometime soon, and so this is our forward-
12 leaning plan at the moment.

13 **VICE ADMIRAL ZIMBLE:** I think tha-- I think we
14 would be -- we probably would have a more
15 complete picture in '011 than we have now.

16 **MR. RITTER:** Yeah.

17 **VICE ADMIRAL ZIMBLE:** So we'll -- we'll work
18 that for '011.

19 Now Mr. Groves.

20 **MR. GROVES:** I would say that as -- as you
21 know, we have attended a couple of the NAAV
22 meetings and I think it was very successful
23 when we did that, so it may be that while we
24 defer having the Board meeting in conjunction
25 with the NAAV meeting to '011, that next year

1 certainly, with the Board Chair's agreement, we
2 could certainly consider sending a
3 representative or two to update the progress of
4 the Board to the New Orleans meeting.

5 **VICE ADMIRAL ZIMBLE:** Right.

6 **MR. GROVES:** So I -- I will work that issue
7 with you and --

8 **VICE ADMIRAL ZIMBLE:** Okay.

9 **MR. GROVES:** -- and R. J.

10 **VICE ADMIRAL ZIMBLE:** Yeah, that's -- that's --
11 that's perfectly legitimate.

12 Okay, now we have to find a date for the next
13 meeting. The next meeting will be in the D.C.
14 metropolitan area and it will be in -- do we
15 have a consensus of nine months for the next
16 meeting? That sounds good. Okay, that would
17 be March and three, that would be in June --
18 June of '09 we will meet. We have -- we
19 usually convene on a Tuesday and have the
20 meetings on Wednesday and Thursday. How about
21 -- oh, Harold.

22 **MR. BECK:** Do we still need to have the same
23 length of meeting, considering in the past part
24 of our meeting has had, you know, ex-- outside
25 scientists come in and brief us and things like

1 that. Perhaps we don't need to have a -- as
2 long a meeting, also.

3 **VICE ADMIRAL ZIMBLE:** Okay.

4 **MR. BECK:** I think we should discuss that since
5 we obviously have different things that we need
6 to do.

7 **VICE ADMIRAL ZIMBLE:** We still need to have the
8 subcommittees come together a day before the
9 meeting, but we could have a two-day meeting
10 and -- would you like those two days to be on a
11 Thursday/Friday as opposed to a
12 Wednesday/Thursday or a Tuesday/Wednesday?

13 **MR. GROVES:** I think the ability to travel
14 during the week is --

15 **VICE ADMIRAL ZIMBLE:** Is better?

16 **DR. MCCURDY:** Yes.

17 **VICE ADMIRAL ZIMBLE:** Okay. So then why don't
18 we schedule a meeting for June the -- June the
19 3rd, with the subcommittee meeting on June the
20 2nd. That's Tuesday June the 2nd for the
21 subcommittee meeting and Wednesday June the 3rd
22 for the Board meeting. Is that -- is that a
23 problem?

24 **MR. PAMPERIN:** Isn't that -- isn't the
25 preceding -- isn't that Memorial Day weekend?

1 **VICE ADMIRAL ZIMBLE:** Memorial Day weekend's in
2 May.

3 **MR. PAMPERIN:** I understand that, but --

4 **VICE ADMIRAL ZIMBLE:** Oh.

5 **DR. FLEMING:** (Off microphone) (Unintelligible)

6 **MR. PAMPERIN:** Pardon?

7 **DR. FLEMING:** I won't be able to come. I don't
8 know when (unintelligible).

9 **VICE ADMIRAL ZIMBLE:** Okay. Well, no, let's --
10 I want to find a date when we can all come.

11 **DR. FLEMING:** Maybe later in June, but --

12 **VICE ADMIRAL ZIMBLE:** Later in June's better?
13 How about the 9th of June for the subcommittee
14 meetings and the 10th of June for the Board
15 meeting. Any -- anyone have a problem with
16 that?

17 **MR. GROVES:** Could I suggest that -- given the
18 fact that we may not all have our calendars
19 here -- that we ask Tom Bell to --

20 **VICE ADMIRAL ZIMBLE:** To get in touch with us?
21 Okay.

22 **MR. GROVES:** -- to essentially send us a
23 calendar for June with --

24 **VICE ADMIRAL ZIMBLE:** Okay.

25 **MR. GROVES:** -- with those dates and let's see

1 where we get the most response.

2 **VICE ADMIRAL ZIMBLE:** Okay. All right. So be
3 it. Does anyone have any other business to
4 bring before the Board?

5 Okay, yes.

6 **BRIGADIER GENERAL MANNER:** Okay, just a couple
7 of things I'd like to say to the group as the
8 DFO. The first thing is that I -- it was quite
9 a privilege to meet all of you and to observe
10 actually how the meeting is conducted and to
11 learn more about the -- quite frankly, the --
12 the devotion and dedication to what you are
13 doing. I mean it's very strong. You're
14 obviously all volunteers, and that says a --
15 that says a lot unto itself.

16 In contrast to our other veterans, whether they
17 are prisoners of war or Vietnam vets or even
18 our most OIF/OEF veterans, this particular
19 group of veterans, for 51 years, were
20 restricted in -- formally, legally restricted
21 to even say anything about what happened. And
22 in contrast to all the other veterans, they
23 really didn't have a voice and didn't have an
24 opportunity. So the fact that all of you help
25 to keep our government accountable for what

1 happened at that time, even though obviously
2 it's a small number of people and a small
3 number of veterans, every single one of those -
4 - it's a really big deal, and for the family
5 members around them. So as we heard even
6 yesterday by the one person who came in
7 relative to his brother, who may or may not
8 have been affected, it -- it shows that it's
9 not just the individual sailor, marine, airman
10 or Army soldier, but rather it's the families
11 that were affected as well. So I truly applaud
12 all of you for what you have accomplished in
13 serving those veterans far better than they
14 were being served in years past, so that --
15 that's just absolutely outstanding.

16 I'd also like to say that, from my position at
17 DTRA, having -- of course I've only been there
18 for six weeks so I'm brand new, I'm still -- I
19 know where the bathrooms are, that's about it.
20 Okay? And they've got me on travel
21 continuously for the past -- excuse me, I think
22 for one week I was back in the office, so it
23 must be their master plan to get rid of me or
24 something, ought to talk to the execs about
25 that. But one of the highlights was when I

1 found out about this early on from Mr. Wright
2 about -- this was a opportunity to serve as
3 your DFO, this is important to me and that's
4 why I'm here, and it's important because of the
5 -- the veterans who really didn't have a voice.
6 So it's my intent, particularly when you are
7 here in the Washington area, that also helps
8 me, quite frankly, be able to better
9 participate with you. So I look forward to our
10 next meetings and interactions. If I can be of
11 any help with my DTRA hat on, I will welcome
12 that opportunity to work with you. And again,
13 it's been a pleasure and an honor to have been
14 with you the past day and a half.

15 **VICE ADMIRAL ZIMBLE:** And that feeling is
16 mutual, General.

17 Do I hear a motion to adjourn?

18 **MR. RITTER:** I would make a motion.

19 **VICE ADMIRAL ZIMBLE:** And a second?

20 **DR. MCCURDY:** I second it.

21 **UNIDENTIFIED:** On the phone.

22 **VICE ADMIRAL ZIMBLE:** So -- oh, yes, I -- Dave,
23 you have any other comments to make before I
24 say "so moved"?

25 **DR. MCCURDY:** No, I just want to remind the --

1 that if they are going to do another double-
2 blind what have you, that we have to take that
3 in consideration for the dates for the next
4 meetings, so I think that Paul probably needs
5 to schedule something so that we will have some
6 results and have subcommittee meetings and
7 discussions before that next meeting.

8 **VICE ADMIRAL ZIMBLE:** Okay.

9 **DR. MCCURDY:** That's about it.

10 **VICE ADMIRAL ZIMBLE:** All righty, okay. Well,
11 everybody, we are now adjourned. Have a safe
12 voyage home. And to the staff of the NCRP,
13 thank you so much for everything you've done.
14 You've fed us, you made sure we had all our
15 materials and we greatly appreciate your help.
16 Thank you.

17 (Whereupon, the meeting was adjourned at 11:27
18 a.m.)

19

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C E R T I F I C A T E O F C O U R T R E P O R T E R

STATE OF GEORGIA

COUNTY OF FULTON

I, Steven Ray Green, Certified Merit Court Reporter, do hereby certify that I reported the above and foregoing on the day of Sept. 11, 2008; and it is a true and accurate transcript of the testimony captioned herein.

I further certify that I am neither kin nor counsel to any of the parties herein, nor have any interest in the cause named herein.

WITNESS my hand and official seal this the 11th day of Oct., 2008.

Steven Ray Green, CCR

STEVEN RAY GREEN, CCR, CVR-CM

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