#### The NCRP Operation Tomodachi Radiation Dose Assessment Peer Review





VBDR 13<sup>th</sup> Meeting Arlington, Virginia

July 23, 2013

M.P. Grissom, MPG-HP, Inc.

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- A.I. Apostoaei, SENES Oak Ridge, Inc.

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- J. Boice, NCRP



# **DOD Operation Tomodachi Registry Effort**

- <u>OTR</u> Operation Tomodachi Registry was established for US Forces Japan taking part in "Operation Friendship" and affiliated individuals following the March 11, 2011 great Tohoku Earthquake and Tsunamis.
- <u>Period</u> March 12 to May 11, 2011 was identified as the principal time for potential exposure to Fukushima Daiichi Nuclear Power Station (FDNPS) radiological releases.
- <u>POI</u> Population of Interest was made up of 70,000 DODaffiliated individuals ashore and afloat.
- <u>NCRP</u> Provided peer review of a series of reports produced by DOD's OTR Dose Assessment and Recording Working Group.
- <u>OTR Website</u> https://registry.csd.disa.mil/



## **Scientific Committee 6-8 Peer Review**

- DARWG-TP-12-01 "Post 3-11 Radiological Assessment of U.S. Military Installations in Japan" – Comments submitted to DOD on 5/16/12
- DTRA-TR-12-001 "Radiation Dose Assessments for Shore-Based Individuals in Operation Tomodachi" - Comments submitted to DOD on 6/25/12
- OTR Website Comments submitted to DOD on 11/1/12
- DTRA-TR-12-002 "Probabilistic Analysis of Radiation Doses for Shore-Based individuals in Operation Tomodachi" - Comments submitted to DOD on 12/10/12
- DTRA-TR-12-004 "Radiation Internal Monitoring by In Vivo Scanning in Operation Tomodachi" - Comments submitted to DOD on 12/14/12
- DARWG-TM-12-03 "Cosmic Radiation Component of MEXT Data Results" - Comments submitted to DOD on 12/29/12
- DTRA-TR-12-017 "Radiation Dose Assessments for the Embryo, Fetus, and Nursing Infant during Operation Tomodachi" - Comments submitted to DOD on 4/2/13
- DTRA-TR-12-041 "Radiation Dose Assessments for Fleet-Based Individuals in Operation Tomodachi" - Comments submitted to DOD on 6/13/13



## Key Aspects SC 6-8 Looked For

- Realistic but high sided (95<sup>th</sup> percentile) estimates of dose – confirmed by the probabilistic dose assessment
- Realistic exposure scenarios (such as pathways analyzed were valid)
- Comparison of dose estimates with those from other sources (such as the World Health Organization's 2012 report "Preliminary Dose Estimation from the Nuclear Accident after the 2011 Great East Japan Earthquake and Tsunami")
- Comprehensive use of available data
- Quality assurance
- Clear communication of methods and findings

#### **RDA for Shore-based Individual (DTRA-**TR-12-001 [R1]) – SC 6-8 Comments



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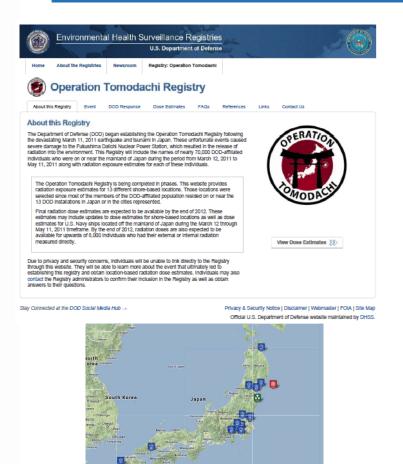
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	Prepared by:
	Operation Tomodachi Registry, Dose Assessment and Recording Working Group
	For:
	Assistant Secretary of Defense for Health Affairs

This report is available on the OTR website.

- Use of the term "upper bound" dose was deleted
- Emphasized the magnitude of the doses are small and would not result in discernible short-term or long-term health effects
- Executive Summary was added to ۲ the Report
- Encouraged further clarification and • justification of the assumptions used
- SC 6-8 agrees the doses provided • are high-sided doses suitable for scoping studies but not for radioepidemiological or individual dose assessment studies



#### **Operation Tomodachi Registry Website**



- 8/10/12 DOD releases OTR website for internal review
- 9/5/12 DOD releases OTR website for public review
- 11/1/12 SC 6-8 comments on OTR website were generally favorable and recognized the action as an important step in providing information to the public

https://registry.csd.disa.mil

#### Probabilistic Analysis of Radiation Doses for Shore-based Individuals (DTRA-TR-12-002)



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•			Assistant Secretary	of Defense for Health Affairs

This report is available on the OTR website.

- Used probabilistic method and analyses to obtain doses for comparison with those that used deterministic methods in the Shore-based Report
- Comparison for selected areas showed the deterministic method effective doses were higher than the 95.8<sup>th</sup> percentile
- SC 6-8 noted in general the
  analysis was well done and
  confirmed doses to adults using
  deterministic methods met the
  objective of the dose estimation
  process in the Shore-based Report

#### Radiation Internal Monitoring by In Vivo Scanning in OT (DTRA-TR-12-004)



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	l		DI	24FT DTRA-TR-12-004
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- 7,960 DOD-affiliated individuals internally monitored
- Monitoring took place March 16 to August 31, 2011
- About 3% monitored had results greater than MDA
- Because the thyroid was the critical organ for organ equivalent dose, prompt monitoring for radioiodines in particular was essential
- SC 6-8 noted the need to effectively communicate the low-doses actually measured
- SC 6-8 was concerned about the use of grab samples and issues relating to the Cs-134/Cs-137 ratio

# RDAs for Embryo, Fetus, and Nursing Infant during OT (DTRA-TR-12-017)



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ORT	Embryo, F	Dose Assessments for the Cetus, and Nursing Infant during Tomodachi				
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Ш		The Operation Tomodachi Registry, Dose Assessment and Recording Working Group				
		For:				
		The Assistant Secretary of Defense for Health Affairs				

- SC 6-8 was concerned about too much conservatism leading to highsided doses that were unrealistic (a few scenarios would not have existed)
- SC 6-8 was concerned about overlapping results (*i.e.*, the Shore-Based Report and this Report needed to report the same results)
- SC 6-8 agreed these were very conservative dose estimates
- SC 6-8 cautioned that any concerned individual should have a radiation dose assessment prepared specific to the situation for that individual's location and activities

#### Radiation Dose Assessments for Fleet-based Individuals in OT (DTRA-TR-12-041)



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- SC 6-8 provided a large number of comments in June 2013 on the 2<sup>nd</sup> revision of the report which is not expected to be completed before August 2013
- Noted a unique analysis since it involves both measured data and mathematical modeling
- Observed that more verification of the source term was needed
- Noted that the dispersion modeling needed strengthened support
- Opportunities for validation of the methods using data from different sources



### **Summary and Conclusions**

- NCRP review process was thorough, timely and met all contract deliverables within budget
- Response of DOD to SC 6-8 comments was exceptionally good based on the final reports published to date
- NCRP will publish a summary of the Operation Tomodachi peer reviews as an official document in the future

#### **Questions and Contact Information**





- National Council on Radiation Protection and Measurements – http:// www.ncrponline.org
- 7910 Woodmont Avenue, Suite 400, Bethesda, Maryland 20814-3095
- Phone: (301) 657-2652
- Fax: (301) 907-8768



#### What about the doses?

#### **Shore-Based Report** – Changes in Process (Published on OTR Website)

Table ES	1. Range of estimated doses durin	ng Operation Tomodachi		
Group	Effective Dose (rem [mSv])	Thyroid Dose (rem [mSv])	_	10/10/0010 \/oraior
Children (<17 y)	0.002 to 0.16 [0.02 to 1.6]	0.008 to 2.7 [0.08 to 27]	]←	- 12/10/2012 Version
Adults (≥17 y)	0.002 to 0.12 [0.02 to 1.2]	0.007 to 1.2 [0.07 to 12]	]	

Table ES-1.	Range of estimated	doses during	Operation [	Tomodachi

Group	Effective Dose (rem [mSv])	Thyroid Dose (rem [mSv])	
Children (<17 y)	0.001 to 0.16 [0.01 to 1.6]	0.003 to 2.7 [0.03 to 27]	
Adults (≥17 y)	0.001 to 0.12 [0.01 to 1.2]	0.003 to 1.2 [0.07 to 12]	

#### Internal Monitoring Report – Changes in Process (Publication Pending)

This report documents the radiation internal monitoring (IM) program conducted by the Department of Defense (DOD) during Operation Tomodachi (OT). During this program, 8,378 DOD-affiliated individuals were internally monitored as part of the radiological safety program established between and including March 16 and August 31, 2011<sup>1</sup>. About 3% of those monitored had a measured activity greater than the minimum detectable activity (MDA). Those persons with measured activities greater than MDA had a maximum committed effective dose of 0.03 rem (0.3 mSv) and a maximum thyroid committed equivalent dose of 0.5 rem (5 mSv). About 11% were monitored in the United States using existing equipment at naval shipyards, about 87% were monitored in and around Japan using a combination of portable instruments and fixed whole-body monitoring systems, and about 2% were monitored as part of a voluntary self-referral or open monitoring period.

<---- 10/11/2012 Version

/ 7/1/2013 Update

A total of 8,380 measurements were made on approximately 7,960 individuals. (The number of individuals is less than the total number of measurements because more than one valid measurement was made on approximately 400 individuals.)

The maximum committed effective dose was 0.40 mSv and the maximum committed equivalent thyroid is 6.54 mSv. Mean values for personnel with detectable doses are 0.07 mSv committed effective doses and 1.13 mSv committed equivalent thyroid.





# **Embryo, Fetus and Nursing Infant Report** – Changes in Process (Publication Pending)

Table ES-1. Range of estimated doses during Operation Tomodachi

Group	Effective Dose (mSv [rem])	Thyroid Dose(mSv [rem])	]
Embryo/fetus	0.01-1.5 [0.001-0.15]	0.04-20 [0.004-2.0]	] ← 2/22/2013 Version
Nursing Infant	0.05-2.8 [0.003-0.28]	0.16-42 [0.004-4.2]	

Table ES-1. Ranges of estimated radiation doses during Operation Tomodachi

Group	Effective Dose (mSv [rem])	Thyroid Dose (mSv [rem])	
Embryo/fetus	0.01–0.89 [0.001–0.089]	0.04–12 [0.004–1.2]	← 7/1/2013 Update
Nursing Infant	0.02–1.3 [0.002–0.13]	0.04–21 [0.004–2.1]	

#### **Fleet-Based Report** – Significant Changes in Process (Publication Pending)

Table ES-1. Maximum external, internal, and total effective and thyroid doses for all PEPs

PEP	Maximum Total Effective Dose (mSv [rem])	Maximum Total Thyroid Dose (mSv [rem])
A, B, and C	0.38 (0.038)	3.4 (0.34)

← 5/8/2013 Update (still preliminary)