

**Minority Report In Response to  
House Memorial 9**

**Presented by**

**1199NM Hospital and Health Care Workers Union**

**and**

**Citizens for Alternatives to Radioactive Dumping**

**Introduction**

The training conducted by the Department of Energy (DOE) for WIPP related emergencies, in New Mexico, in some respects has been adequate. Many of the statements in the Majority report submitted by the State Department of Health and the State Environment Department can be accepted. However, a minority of the members of the WIPP Medical Working Group feel such a level of frustration over a failure to protect the first responders and health care workers of New Mexico that a minority report is justified and warranted.

After reading the report prepared by the State of New Mexico Department of Health in response to House Memorial 9 it has become apparent that the WIPP Medical Working Group has not given equal representation to all the citizens of New Mexico. In fact, the Working Group is biased in favor of the Department of Energy and the Westinghouse Corporation and does not reflect the views of many of the people who will be confronted by a possible WIPP disaster.

The fact that the Working Group is biased could be tolerated on a purely political basis. However, a very serious situation exists when the health and safety of first responders and health care workers depend on the decisions made by an organization which does not consider all of the facts, or makes decisions contrary to the facts available.

Since the WIPP Medical Working Group was created with no decision-making process many issues that have been raised numerous times have been conveniently dismissed or ignored. Some of these issues are:

1. Training which is designed to minimize the hazards presented by WIPP waste and reassure the emergency response community;



2. Misleading evaluations from the training and misleading and inaccurate conclusions drawn from these evaluations;
3. Conflict of interest created by the use of the Radiation Emergency Assistance Center/Training Site (REAC/TS) and Westinghouse to conduct the training;
4. Training which could endanger the health and safety of the health care provider instead of protecting that person's health and safety; and,
5. The lack of a decision-making process.

Until these issues are addressed the State of New Mexico will have failed to protect the health and safety of the emergency responders and in turn the citizens of New Mexico.

#### **Minimizing the Hazard**

The Department of Energy and Westinghouse are not telling the emergency responders the whole truth. The threat to health and safety has been continually minimized in the training in order to reassure the emergency responder that their safety is not jeopardized. If DOE wanted the emergency responder to have the whole picture, they would include training that explicitly described the toxicity of Plutonium. Instead students get platitudes and misinformation like the following:

- "It takes a lot of energy to form a biological insult."
- "The gamma radiation is less than what is used in an X-ray."
- "Plutonium internally may cause injury."
- "Nature has ways of dealing with radiation in our bodies."
- "Ionizing radiation is based on chance or probability that it will strike an atom."
- "Low doses are beneficial to life and not harmful."
- "Nature knows that we get ionizing radiation."
- "DNA can repair itself."



A "Critique of WIPP Emergency Training" is included as Appendix A to this report which describes the extent of deficiencies in the DOE-provided training. Apparently, in an attempt to convince the emergency response community that little or no risk exists in handling a WIPP accident, the Department of Energy and Westinghouse have conspired to mislead the emergency response community.

The use of air-purifying breathing apparatus is mandated throughout industries which handle or work in the vicinity of radioactive materials, yet the DOE, through its WIPP training is willing to sacrifice the health and safety of the health care provider by recommending the use of a surgical mask in a plutonium contaminated work space. A surgical mask does not meet the personal protection required in a radioactive environment. Even as early as 1973 it was recognized that,

The biological evidence of the long retention time of [plutonium] particles, the experimental production of neoplasms of the animal lung, the notable concentration of the particles in lymph nodes, and the difficulty of removing known deposits, all lead to some concern about the reliability of present maximum permissible lung burdens. There is no health physics area in which full attention to the concept of lowest practical exposure is more relevant. (HEP, p.628, 1973)

The Handbook of Experimental Pharmacology recommends that protective clothing include "ready access to full face air masks in the event of detected air contamination." (HEP, p.622, 1973)

Some recent studies question the "linear-quadratic" dose-response curve model of radiation and its effect on living cells. (BEIR V, p.21, 1990) "Recent results have suggested the absence of a dose-rate effect with alpha particles." (BEIR V, p.145, 1990) This conclusion questions not only our ability to predict the health effects of exposure to internal plutonium contamination, but also the concept of a threshold dose, below which there are not health effects.

It should be obvious that the only way to absolutely prevent an inhalation injury is to prevent the inhalation of plutonium; however, the DOE, does not inform the first responder or the emergency room workers of this fact. A double standard exists in the use of airway protection. Workers who are employed by DOE contractors would not be allowed to work with these materials without full airway protection and redundant systems to warn of a contaminated work area and yet the DOE feels that state workers do not need the same protection.

### **Misleading Evaluations**

The training evaluations conducted after the training classes do not provide an objective evaluation of the content or quality of the material presented. Evaluation forms passed out by DOE and State of New Mexico employees only evaluated how the training was presented; as a result no one knows if emergency response personnel are able to effectively respond to a WIPP emergency.

Best Available Copy

DOE and Westinghouse have used these evaluations in an attempt to justify their inadequate training. An example of the evaluation circulated at the end of the training is included in Appendix B.

This issue has been raised at least four meetings of the Medical Working Group or a sub-committee of the Group. The evaluation forms used by the DOE and REAC/TS have not been altered to collect the correct information. Appendix C contains an example of a suggested survey form created by 1199NM Hospital and Health Care Workers Union. The Union is collecting responses to these surveys which are being distributed independently of the Medical Working Group.

To insure adequate training, emergency responders and emergency room workers should be required to demonstrate proficiency in handling a WIPP emergency, and be certified to perform these duties.

#### **Conflict of Interest**

The Department of Energy's failure to inform the health care workers and first responders of the true health effects of Plutonium cannot be tolerated. It is a conflict of interest for DOE to select the agency which provides the emergency response training. The DOE has a vested interest in the contents of the training.

In addition, the DOE has created a conflict of interest by dealing only with the state agencies concerning their funding of the training. The DOE practice of conducting private negotiations with personnel employed by the State of New Mexico and excluding other members of the WIPP Medical Working Group leaves the impression that the State of New Mexico employees are complicit in DOE's attempt to minimize the hazards involved in WIPP related accident response. And when State employees defer the false statements and misrepresented facts submitted by DOE and Westinghouse the impression of complicity is further substantiated.



#### **Dangerous Training**

The DOE/Westinghouse training instructs the emergency room health care worker and first responder not to hesitate in providing needed care to a plutonium contaminated patient, regardless of the health care worker's own level of personal protection. This philosophy is in conflict with common sense and in fact goes against the policy of the University of New Mexico, Emergency Medical Services Academy. At the UNM Emergency Medical Services Academy students are taught that "the accident scene should be evaluated and if a patient is contaminated with a radioactive material the EMT is to pull back and call for

additional resources. An EMT should not approach a contaminated patient without airway protection." (Gaffney, 1992)

In spite of the fact that airway protection is the required industry standard for workers in the vicinity of plutonium contamination, the DOE with the complicity of the State of New Mexico are willing to sacrifice our first responders and health care workers in a WIPP accident by not providing the required instruction in levels of personal protection equipment.

During the emergency room practical exercise only a small number individuals are permitted to participate in the actual hands on training. In Santa Fe 38 nurses and doctors attended the 8 hour training course. It is unlikely that all 38 people received the individual hands-on training required to become proficient in dealing with a contaminated patient with serious medical problems in a four hour demonstration. In the entire training program conducted by REAC/TS only the people who actually participated in the hands on portion could be considered marginally trained.

The hands-on demonstration did not contain procedures to integrate medical treatment with the radioactive decontamination. As an example -- if a person is brought into the emergency room that has not been decontaminated and that person needs to be intubated, what is the procedure? This is only one of many questions that have not been answered.

A core team at each hospital should be designated to be the radiation response team. Each member should be assigned to a specific position, trained in that position, and tested to see that they meet a minimum standard of proficiency. This team should be on call 24 hours a day to respond to a WIPP emergency. If personal are not trained and tested they will be place in a position which endangers themselves and others.

Hospital training, including simulated radiation emergencies, should be conducted every two months until a response team is trained to a minimum level of competence, and then they should be retrained at least every six months or whenever a critical person leaves the team.

Under the present system of random training when an actual accident occurs hospital workers will be selected at random to attend to a possible radioactive hazmat situation. Without proper training, simulations, and certification the health care provided is questionable and life of the health care worker is put at risk.



## **Decision-Making Process**

The WIPP Medical Working Group does not have a functioning decision-making process. The decisions are in fact made by the Department of Energy, Westinghouse, and various departments of the State of New Mexico. No attempt has been made to reach a true consensus among all of the members of the Medical Working Group.

One problem is that all of the meetings are held on week days during working hours so that personnel who are not paid to come to the meetings have a hard time taking off from work to attend these meetings. As a result attendance of representatives of the medical community and public interest groups is almost non existent.

## **Conclusion**

If the Department of Energy, Westinghouse, and the State of New Mexico want the people involved in emergency response and emergency medical treatment of WIPP accident victims the issues raised in this minority report must be addressed. Before an EMT or Health Care Worker can become a member of the team he or she must be fully confident that the government is devoted to their safety first. This confidence can only come from a demonstrated commitment to worker health and safety -- a demonstration which has not yet happened.



Best Available Copy