



# HealthWatch

A newsletter of the Worker Health Protection Program; a partnership between Queens College, CUNY and the following organizations:  
United Steelworkers, Atomic Trades and Labor Council and the Fernald Medical Screening Program

Volume 12, Issue 16 | Spring/Summer 2015

## WHPP BEGINS SCREENING AT THE WASTE ISOLATION PILOT PLANT

In February 2015, the Worker Health Protection Program (WHPP) initiated medical screening for former workers of the Waste Isolation Pilot Plant (WIPP), a Department of Energy (DOE) facility located outside of Carlsbad, New Mexico. The new program marks the 14th site where WHPP offers screening.

Screening protocol for the new program was developed by WHPP physicians based on a hazard investigation conducted with USW Health, Safety and Environment staff and Local-9477 in accordance with national Former Worker Program guidelines. The investigation identified the presence of ionizing radiation, solvents, diesel engine exhaust, salt dust and noise, all of which can contribute to occupation related illnesses and conditions.

Screenings will build upon WHPP's experiences examining over 30,000 DOE workers from other facilities and may include a chest X-ray, hearing test, breathing test, audiometric exam and blood tests. There is also a general health component of the



Underground at the Waste Isolation Pilot Plant

exam to test for conditions such as elevated blood pressure and cholesterol. Screenings take place in Hobbs, New Mexico and are available to former workers who worked for at least 30 days at WIPP. Once enrolled, participants will be eligible for ongoing follow-up examinations every three years.

*(Continued on Page 6)*

## DEPARTMENT OF ENERGY EXTENDS WHPP FUNDING FOR FIVE YEARS

WHPP has received a renewal of co-operative agreement funding from the Department of Energy (DOE) to provide ongoing medical evaluations for former workers through 2020. This renewal will allow WHPP to continue to offer occupational health screenings for former DOE workers who have yet to enroll in the program and to provide follow-up "rescreen" exams every three years for those who have already participated. It will also allow WHPP's Early Lung Cancer Detection (ELCD) Program to continue providing low-dose CT scans in former workers who are at high-risk for lung cancer.

Of WHPP's 17 year history, 2014 was our most successful. Over 4,200 workers from DOE sites throughout eight states were screened for occupational illness, marking the most people to have received a WHPP exam in a year. Of the 4,200 workers, over 1,000 were first time enrollees, demonstrating a sustained demand and interest in the program.

The WHPP ELCD Program, which is the component of WHPP that utilizes low-dose CT scans to screen for lung cancer, is available to former workers at the highest risk of developing lung cancer due to a combination of smoking, age and exposure to lung carcinogens such as asbestos, radiation, silica and beryllium. Low-dose chest CT scanning can identify lung cancers when they are small and can be surgically removed, reducing the likelihood of death. Over 13,000 former workers have been

screened for lung cancer, making ELCD one of the largest occupational lung cancer screening programs in the world. To date, WHPP has found more than 130 lung cancers, with three-quarters in early and largely treatable stages.

"Once again, we are grateful that the DOE continues to support the work that we do," said Steven Markowitz, M.D., director of WHPP. "More importantly, we are gratified that we are able to help so many people understand how their jobs might have affected their health."

The primary goal of WHPP is to detect selected illnesses and conditions in early stages, when treatment may be more effective and symptoms can be minimized. Additionally, findings from medical exams may be helpful for workers in obtaining compensation through the Energy Employees Occupational Illness Compensation Program (EEOICP) or state workers' compensation programs. The renewal will also allow WHPP's local coordinators to continue to provide free assistance in helping former workers navigate the EEOICP process.

The five-year agreement signifies a continued commitment from the DOE to provide medical screening for its former workers. WHPP will continue to provide medical screening at its current sites, including its newest site — the Waste Isolation Pilot Plant.



# A Message from Dr. Steven Markowitz WHPP Project Director

## PREVENTING CANCER AND ITS CONSEQUENCES

Everybody loves the idea of preventing illness but it is tough in practice. If you feel good, it is not easy to make a habit to eat right, exercise often, and get the medical tests that you need. And if you are sick, it is even harder to focus on prevention, since your energy is directed towards getting better.

Further, we are constantly bombarded with advice or new studies about keeping healthy, and worse, much of it is contradictory or uncertain. This seems especially true when we think about cancer. What is a person supposed to do?

In defense of medical science, cancers are an extraordinarily complicated set of diseases. They all have a common definition – uncontrolled growth of cells – but types of cancers are very different from each other in terms of causes, mechanisms, ability to do harm, treatments, and survival. So, if progress is slow, erratic, or uncertain, it surely isn't from lack of scientists' efforts. Progress is being made in the "war against" cancer, first declared nearly 50 years ago, but there is not as much as we would like.

A bright spot in all of this is **cancer screening**. We now have good screening tests for most of the major cancers – lung and colon cancer among men and lung, breast and colon cancer among women. These screening tests are excellent. They are not, however, foolproof and will not detect all cancers, but they have been demonstrated by scientific studies to be effective and have saved or will save many lives.

Here is what you need to know:

### Lung Cancer

- Adults between the ages of 55 and 80 should seek annual screening for lung cancer with a low dose CT scan if they have a 30 pack-year smoking history (1 pack-year = smoking 1 pack per day for 1 year) and currently smoke or have quit within the past 15 years. *Source: United States Preventive Services Taskforce (USPSTF)*
- Adults between the ages of 50 and 80 who have had occupational exposure to agents that cause lung cancer – such as asbestos, silica, beryllium or a few others - and who had at least 20 pack-years of smoking should seek annual screening for lung cancer. *Source: National Comprehensive Cancer Network (NCCN)*

### Breast Cancer

- Women between the ages of 50 and 74 should seek screening mammography every two years. *Source: USPSTF*
- Screening mammography for women under the age of 50 is recommended after a discussion of risks and benefits with their personal physician. *Source: American Cancer Society (ACS), USPSTF*
- Select groups of women (due to family history, genetic tendency, other risk factors) should be screened with a MRI as well as a mammogram. *Source: ACS*
- Women may wish to do breast self-exams starting in their 20's. *Source: ACS*

### Colorectal Cancer

- Adults between the ages of 50 and 75 should seek regular screening through testing of the stool for blood, sigmoidoscopy, or colonoscopy. Adults above the age of 75 should discuss screening with their personal physician. *Source: USPSTF*
- The American Cancer Society specifies having any of the following tests at the recommended frequency: flexible sigmoidoscopy every 5 years, colonoscopy every 10 years, double-contrast barium enema every 5 years, or CT colonography every 5 years. *Source: ACS*

The Affordable Care Act of 2010 requires that most health insurance policies cover these screening tests, at no or little cost. Medicare (and, in some cases, Medicaid) also cover these tests. WHPP's Early Lung Cancer Detection Program offers lung cancer screening to eligible DOE workers from certain sites using criteria similar to the NCCN guidelines.

Doing these tests on a regular basis may allow early detection and cure of the most common deadly cancers. Think about it. Better yet, call your doctor now and arrange to be screened.

## WHPP Success At-A-Glance

(as of 3-31-2015)

### WHPP MEDICAL SCREENING PROGRAM

Total number of individuals who have participated in WHPP..... 30,816  
Total number of WHPP exams completed (including 3-year re-screen exams).....50,082

### WHPP EARLY LUNG CANCER DETECTION PROGRAM

Number of participants screened for lung cancer..... 13,790  
Number of low-dose CT scans completes.....41,536

**If you haven't taken advantage of the free WHPP medical screening, or to find out when your three-year re-screen exam can be scheduled, call today!**

Brookhaven (BNL), Fernald, the GDPs, and WIPP.... 1-888-241-1199  
Idaho National Labs..... 1-208-522-4748  
Mound..... 1-877-866-6802  
ORNL and Y-12..... 1-800-906-2019  
NTS..... 1-877-771-7977  
Northern California Labs..... 1-866-460-0628



# WORKER HEALTH PROTECTION PROGRAM NEWS

## WHPP Welcomes New Local Coordinator in Northern California

WHPP welcomes our newest local coordinator, Eileen Montano. Eileen has been conducting outreach activities and helping former workers of the Lawrence Livermore, Lawrence Berkley and Sandia-California National Laboratories enroll in medical screening since late 2014. Eileen has an impressive history of fighting for the rights of DOE workers. In addition to her work with WHPP, since 2001 she has been working for the Society of Professionals, Scientists and Engineers (SPSE) Local 11 of the University Professional and Technical Employees (UPTA) local 9119 where she is the current Leadership Development Coordinator. In this role, her prime responsibility is to support DOE Laboratory workers in safeguarding and protecting their rights in the workplace.



Eileen Montano

## WHPP Staff Present at the 2014 American Public Health Association Annual Meeting

WHPP staff at Queens College collaborated on research that was presented at the American Public Health Association (APHA) Annual Meeting in New Orleans, LA in November 2014. The two presentations were entitled "Solvent Exposure and Hearing Loss in Department of Energy Workers" and "Evaluating Telephone Outreach in Enrolling Former Department of Energy Workers in a Free Medical Screening Program." Conducting this type of research helps WHPP operate more effectively while also contributing knowledge within the field of public health.



Queens College Staff (l) to (r): Jessica Krieger, Jonathan Corbin, Dr. Lewis Pepper and Jennifer Imasuen

## WHPP Hosts Joint Outreach Task Group Meeting for Former Workers of Recently Closed Paducah Gaseous Diffusion Plant (PGDP)

In October 2014, WHPP participated in Joint Outreach Task Group meetings for workers from the PGDP. The meetings were of significance, because the PGDP closed operations earlier that month. The plant is currently in the early stages of an anticipated lengthy clean-up, for which \$359 million will be spent in 2015 alone. Many workers at the PGDP have returned to perform this remediation work, while a depleted uranium hexafluoride (DUF6) conversion facility located on the PGDP site remains active and employs approximately 200 workers.

## WHPP, DOE and Cold War Patriots Host the 6th National Day of Remembrance for DOE Workers

The 6th annual National Day of Remembrance for DOE workers was held on October 31, 2014 at the Atomic Testing Museum in Las Vegas. This marks the sixth consecutive year that Congress passed a resolution recognizing the efforts and sacrifices made by DOE workers by building and maintaining our country's nuclear arsenal for national defense. Over 300 people attended the event, and speakers included DOE Deputy Under Secretary David Klaus; The DOE's Office of Enterprise Assessments' director Glenn Podonsky; and U.S. House Representatives Dina Titus (D) and Joe Heck (R).



Pictured (l) to (r): Mr. Stephen Kirchhoff, Deputy Associate Under Secretary for Environment, Health, Safety and Security, Mr. Greg Lewis, Director, Office of Worker Screening and Compensation Support, Mr. David Klaus, Deputy Under Secretary for Management and Performance, Mr. Matthew Moury, Associate Under Secretary for Environment, Health, Safety and Security, and Dr. Patricia Worthington, Director, Office of Health and Safety.

## Department of Energy Staff Receives Recognition from WHPP

Three Department of Energy staff members were presented with the Sylvia Kieding award at the 2014 WHPP Annual Meeting for their outstanding contribution to occupational health and safety. DOE's Director of Independent Enterprise Assessments Glenn Podonsky, FWP Program Officer Mary Fields, and FWP Outreach and Communication Coordinator Moriah Ferullo were all presented with plaques to recognize the work they have done at DOE headquarters to improve the health outcomes of former DOE workers.



Mary Fields (l) and Moriah Ferullo (r)

## Department of Energy Issues Former Worker Program Annual Report

The DOE Office of Environment, Health, Safety and Security issued its 2014 Annual Report on the Former Worker Medical Screening Program in March 2015. The report is a detailed review of medical screening program activities and findings from all DOE FWP sites, including all of the sites where WHPP operates. The report can be accessed online at <http://energy.gov/ehss/downloads/2014-former-worker-medical-screening-program-annual-report>.

# SOLVENT INDUCED OCCUPATIONAL HEARING LOSS AND COMPENSATION

## Background

Occupational hearing loss (OHL) is the most common work-related disability. Among the 63,840 DOE workers participating in the national Former Worker Medical Screening Program (FWP) who received audiograms through September 2014, nearly 60% exhibited signs of OHL on their initial medical screening. At some sites, the proportion of OHL is much higher, such as at the Nevada National Security Site, where 77% of participants were found to have OHL.

OHL is characterized by muffled or distorted hearing that is the result of damage to hair cells and nerves surrounding the inner ear, most often caused by excessive noise exposure or exposure to certain chemicals, including solvents. The type of hearing loss exhibiting the characteristics associated with OHL is referred to as sensorineural hearing loss. For many, OHL has the potential to negatively impact quality of life by reducing the ability to understand human speech or causing equilibrium disruption, leading to balance problems. Those with OHL are also more likely to be involved in other workplace accidents and injuries as a result of their impairment. OHL is almost always permanent and irreversible. In most cases, OHL is a result of cumulative exposures, with symptoms becoming most notable at older ages. Because continued damage to hearing is not likely to occur once exposures stop, WHPP only offers audiograms during initial screening exams of former workers.

Noise is the most common cause of OHL. Environments with elevated noise are not only common within DOE facilities; they are quite common across many industries, with roughly 30 million workers across the United States exposed to dangerous levels of noise on an annual basis. Age is also a major contributing factor to hearing loss, so older workers with OHL can have their condition exacerbated by naturally occurring age-related hearing loss. Age-related hearing loss is also known as presbycusis.

In addition to noise and aging, certain chemicals can contribute to hearing loss. These types of chemicals are referred to as “ototoxic.” The most notable group of ototoxic chemicals that DOE workers handle are specific types of organic solvents. Solvents, which are generally liquids, are a class of chemicals that are used to dissolve other substances. Solvents have numerous industrial applications and are commonly used in paints, cleaners, varnishes, lacquers, adhesives, glues and degreasing agents.

Some solvents have long been known to cause organ damage, such as to the kidneys and liver, cancers and neurological damage. By the 1980s, researchers found evidence that exposures to specific organic solvents could contribute to OHL. Solvents that have been found to cause or contribute to hearing loss include toluene, styrene, xylene, trichloroethylene and methyl ethyl ketone. Researchers have found that these solvents may cause hearing loss even in the absence of noise exposure and can increase the risk of OHL in a noisy environment when compared to those exposed to noise alone. Some studies found that solvents can contribute to OHL even when used at levels in compliance with regulatory standards. Use of these solvents has been widespread throughout the DOE complex; an estimated 10 million US workers in general industry may be exposed annually, making solvent exposures that contributes to hearing loss a public health issue.

## WHPP Findings

Members of WHPP staff at Queens College recently presented research on hearing loss related to noise and solvent exposures among WHPP participants from DOE sites in Northern California at the 2014 American Public Health Association conference. The research looked at OHL among workers who had either noise exposure or both noise and solvent exposure. When taking into account factors such as age, gender and length of time worked, the data showed that those who reported working with both noise and solvents were **one and a half times more likely to suffer from hearing loss** than those who reported noise exposure only. The findings are consistent with the existing scientific literature and suggest that exposure to these solvents should be eliminated or minimized and that workplace hearing conservation programs need to account for exposures to ototoxic chemicals, not just noise.

## Applying for Energy Employees Occupational Illness Compensation Program (EEOICP)

While EEOICP does not cover hearing loss induced by noise alone, certain DOE workers may be eligible for compensation under Part E, since Part E of the law is written to cover “illnesses that are due to exposures to toxic substances at certain DOE facilities.” While noise does not fall into the “toxic substance” category, certain solvents do and, in some cases, the DOL compensates for hearing loss that can be at least partially attributed to solvent exposures. As of July 2014, 753 workers from WHPP sites had filed for EEOICP compensation through Part E for solvent induced hearing loss and 523 (69%) had received compensation for their condition. Details for claims acceptance for solvents are listed on DOL’s website and can be found in the link below. For a summary of EEOICP’s requirements for hearing loss compensation, see the box on the facing page. Detailed information can be found at the DOL website: [http://www.dol.gov/owcp/energy/regs/compliance/PolicyandProcedures/proceduremanualhtml/unifiedpm/Unifiedpm\\_part2/Chapter2-1000EligibilityCriteria.htm](http://www.dol.gov/owcp/energy/regs/compliance/PolicyandProcedures/proceduremanualhtml/unifiedpm/Unifiedpm_part2/Chapter2-1000EligibilityCriteria.htm).

## WHPP Participants

Most WHPP participants receive an audiogram on their initial examination. If you have been diagnosed with sensorineural hearing loss and believe you meet the criteria below, you may wish to consider applying for compensation through EEOICP. You should also be aware that state workers’ compensation programs may provide benefits for noise-induced hearing loss, although state laws vary greatly.

Regardless of your current hearing loss or compensation status, it is important to always protect yourself from exposure to loud noises and organic solvents, both inside and outside of the workplace. For more details on hearing protection in the workplace, visit <http://www.cdc.gov/niosh/topics/noise/>.

**Contact WHPP at 1-888-241-1199 if  
you need to obtain copies of  
your screening records.**



## DOE Workers may qualify for compensation related to solvent induced hearing loss through EEOICP if they meet the following criteria:

1. Diagnosed sensorineural hearing loss in both ears.
2. Ten or more consecutive years worked prior to 1990 in one or more of the following jobs: *Boilermaker, Chemical Operator, Chemist, Electrician/Electrical Maintenance/Lineman, Electroplater/Electroplating Technician, Garage/Auto/Equipment Mechanic, Guard/Security Officer/Security Patrol Officer (i.e. firearm cleaning activities), Instrument Mechanic/Instrument Technician, Janitor, Lab Analyst/Aid, Lab Technician/Technologist, Lubricator, Machinist, Maintenance Mechanic, Millwright, Operator, Painter, Pipefitter, Printer/Reproduction Clerk, Refrigeration Mechanic/HVAC Mechanic, Sheet Metal Worker, Utility Operator.*
3. Documented exposure to specific organic solvents that include toluene, styrene, xylene, trichlorethylene, methyl ethyl-ketone, methyl isobutyl ketone, ethyl benzene. (*Evidence of solvent use at each DOE site can be found on the DOL site exposure matrix at <http://www.sem.dol.gov>.*)
4. Other circumstances may be considered by the DOL for compensation, including exposure to solvents not listed or for workers with less than 10 years of employment prior to 1990.

Please be aware that while state workers' compensation programs may provide assistance for noise-induced hearing loss, individual state laws vary greatly.

**For details on applying for compensation, contact your local DOL-EEOICP resource center:**

**California**.....925-606-6302  
**Kentucky**.....270-534-0599  
**Idaho**.....208-523-0158  
**Nevada**.....702-697-0841

**New Mexico**.....505-747-6766  
**New York**.....716-832-6200  
**Ohio**.....740-353-6993  
**Tennessee**.....865-481-0411

**As always, you can contact your local WHPP coordinator for assistance; see Page 8 for contact information.**

## JOTG RELEASES VIDEO SERIES

The Joint Outreach Task Group (JOTG) has released a series of videos that provide an outline of the member agencies' roles and responsibilities in regards to compensation and medical screening for Department of Energy (DOE) workers. The video series is available through the [energy.gov](http://www.energy.gov/ehss/joint-outreach-task-group-video-series) website (<http://www.energy.gov/ehss/joint-outreach-task-group-video-series>). For those without internet access, DVDs are available to borrow through your WHPP local coordinators.

The JOTG was established in 2009 as a way for the federally funded agencies and programs that provide services to former nuclear workers to join together to enhance outreach. The JOTG consists of representatives from the Department of Labor (DOL), the National Institute for Occupational Safety and Health (NIOSH), the Offices of the Ombudsman for DOL and NIOSH, and the DOE-funded Former Worker Medical Screening Program (FWP) projects, including WHPP.

The main goal of the JOTG is educating former DOE workers about medical screening and the Energy Employees Occupational Illness Compensation Program (EEOICP). This mission has historically been accomplished through public meetings held in DOE communities. To date, the JOTG has held over 53 meetings for workers from 28 DOE sites, including every community where WHPP operates.

Now, in an effort led by DOE-FWP's Outreach and Communications Coordinator Moriah Ferullo, the JOTG developed the video series to extend their message to workers who have been unable to attend meetings or for those who need to revisit presentations, no matter where they're physically located. We hope you spend some time visiting the JOTG online to get an overview of the EEOICP and the FWP.

## WHPP JOINS FACEBOOK

The Worker Health Protection Program (WHPP) has entered the social networking arena, and launched our own Facebook page. WHPP seeks to use social media as a new and effective way to distribute important information to former DOE workers more directly.

Those with a Facebook account will be able to "like" and follow WHPP to receive frequent updates directly to their newsfeed. We'll post information about our medical screening programs, occupational and public health matters, links to pertinent articles and videos, relevant DOE news and updates, and details on upcoming meetings. In addition, you can browse our growing collection of program related photos.

With an estimated 71% of the United States population using Facebook, it's an obvious choice for WHPP to expand our online presence. For those unfamiliar, Facebook is a free online social networking service that makes keeping in touch with friends and family easy, as well as staying up to date with interests and matters important to you.

WHPP hopes that establishing a strong social networking presence will increase awareness of the program through former workers within online social circles. Word of mouth outreach has been crucial to WHPP's expansion, and we encourage our Facebook followers to share our page with their friends and colleagues.

We currently have over 200 followers and are growing. If you have any suggestions or new ideas for our Facebook page, please e-mail us at [info@worker-health.org](mailto:info@worker-health.org).

**Follow us on Facebook at:**

**[http://www.Facebook.com/](http://www.Facebook.com/WorkerHealthProtectionProgramwhpp)**

**WorkerHealthProtectionProgramwhpp**



## WORKER HEALTH PROTECTION PROGRAM TESTIMONIALS

I am very grateful that I participated in the Worker Health Protection Program. If it had not been for the exam, my outcome could have been much worse. I had no symptoms when I went to my screening, but findings from the exam led to the eventual diagnosis of early stage lung cancer. After successfully undergoing treatment and recovery, I have regained much of my strength and most days, I pretty much forget I was ever a lung cancer patient.

*-Irva Hertz-Picciotto, PhD, Northern California WHPP Participant*



When I retired in 2008 from working at the INL site, I was offered a free chest x-ray by the Worker Health Protection Program to scan for any lung related issues. In October of 2013, an ELCD CT scan showed a suspicious nodule on my lung, and a biopsy showed it was lung cancer. After having surgery, all the cancer was successfully removed. I've had no symptoms since, and had it not been for WHPP, the cancer very likely would have developed and spread. This program probably saved my life!

*-Michael Graefe, former INL worker*

## WHPP BEGINS SCREENING AT THE WASTE ISOLATION PILOT PLANT

*(Continued from Page 1)*

### About WIPP

WIPP is the United States' first "permanent" nuclear waste storage facility. The primary mission of WIPP is to receive and store transuranic waste that is a byproduct of DOE nuclear weapons production. The transuranic waste consists of contaminated materials, such as clothing, tools and rags, which are received in storage containers after being collected and packed at other DOE sites throughout the country.

The facility is comprised of a repository built deep within a naturally occurring salt basin, nearly a half mile underground. Salt repositories are recognized as good geological formations for storing radioactive waste, as there is virtually no groundwater in which contamination can be transferred. Salt also acts as a natural sealant for radioactive materials and the site's plan is to eventually re-fill the mine with its original salt, trapping the waste deep underground. The design of WIPP is regulated by EPA to "safely" contain radioactive waste for a period of 10,000 years.

### Significant Health and Safety Issues Lead to a Shutdown at the WIPP

Prior to the initiation of medical screening, WIPP had been under scrutiny for two major health and safety violations that occurred in February 2014. First, WIPP had an underground fire following the ignition of a diesel salt haul truck, which forced an evacuation of the facility, and led to six workers needing treatment for smoke inhalation. A little more than a week later, an inappropriately packed waste container leaked radiation into the exhaust ducts of the facility and resulted in low-level radiation exposure for 21 workers, and forced a shutdown of operations for a major investigation.

At the time of this publication, over one year later, there is still no set date to resume operations. DOE contractors at WIPP and Los Alamos National Laboratory, where the waste container in question originated, have been fined over \$50 million for the incident.

The radiation leak has raised important questions about operations at WIPP and the permanent storage of radioactive waste in general, although the DOE has publicly made a com-

mitment to reopen the facility. The cost for clean-up and modifications has been estimated at nearly \$500 million dollars prior to the resumption of operations. In December 2014, the federal government passed legislation to provide an initial \$324 million to aid in recovery efforts at the facility.

### Joint Outreach Task Group Meetings in Carlsbad, New Mexico

In conjunction with the medical screening program opening at WIPP, WHPP representatives participated in two Joint Outreach Task Group public meetings to help educate the former WIPP workforce about medical screening. The meetings also featured presentations by the DOE, Department of Labor, and the Energy Employees Illness Compensation Act Ombudsman's office.

New Mexico Senators Tom Udall (D) and Martin Heinrich (D) sent representatives to voice their support for the WIPP workers and medical screening. Both Senators issued letters of support that were read by their representatives during the meetings.

In a written statement, Senator Udall said, "Safety should always be the first priority. I want to commend the Worker Health Protection Program. You are providing a vital service, in insuring ongoing medical examinations for those who may be at risk for occupational diseases. I urge all of those workers that qualify to learn about the program."

"I would like to thank the employees of WIPP—both past and present—for your service to our country. I am glad that these medical screenings are now available to former WIPP employees. Screenings make it possible to detect and treat medical issues in early stages," stated Senator Heinrich. The WHPP opening also received coverage in the *Carlsbad Current-Argus*, *Albuquerque Journal* and *ABC news*.

**Former workers from the  
Waste Isolation Pilot Plant should call  
1-888-241-1199 to schedule exams.**

## ELCD UPDATE 2015: END OF AN ERA – MOBILE UNIT IS RETIRED; PROGRAM TRANSITIONS TO LOCAL RADIOLOGY FACILITIES

As the WHPP ELCD Program approaches its 16th year in operation, we would like to note the program's accomplishments since its inception in 2000: Over 13,000 DOE workers from nine DOE sites have enrolled in the ELCD Program; over 41,000 scans have been completed, including baselines and follow-ups; and over 130 lung cancers have been detected, the majority of which have been in early stages, when treatment is likely to be successful. In addition, other significant medical findings are sometimes found on the low-dose CT scan, findings which have led to diagnoses such as kidney and thyroid cancer, aneurysms and asbestos-related disease.

As with other screening methods, such as mammograms for breast cancer, lung cancer screening is recommended on an ongoing (annual) basis. This is the key to early detection. A little over a year ago, the DOE announced new, more stringent eligibility criteria that would allow those at the highest risk of lung cancer to receive ongoing screening as long as DOE funding continues.

The world of lung cancer screening has changed tremendously since we began the program 15 years ago. Back in 2000, the mobile unit was the only way to ensure that low-dose CT scanning (then a promising but incompletely studied screening method) would be available to WHPP participants. But over the years, especially the last four years, there has been significant progress. First, the results of the National Cancer Institute's randomized clinical trial, which were published in 2011, showed that screening with low-dose chest CTs significantly reduced deaths from lung cancer. Following that publication, there have been several other seminal events that propelled the availability of lung cancer screening — the US Preventive Services Task Force ("Grade B") recommendation for low-dose CT screening, followed by the no cost coverage of low-dose CT under the Affordable Care Act and, just a few months ago, the decision by the Centers for Medicare and Medicaid Services (CMS), a government agency, to cover low-dose CT for Medicare patients. This means that many hospitals and radiology facilities throughout the country will now offer lung cancer screening.

Due to the changes described above, and revisions in the ELCD criteria, the ELCD mobile unit has been officially "retired" and taken off the road. The mobile unit originally traveled between the three GDP locations and, since 2009, rotated between Mound, Fernald, and two GDP sites. To ensure a smooth transition from the mobile unit model to the use of local radiology groups, we have contracted with three facilities close to the original mobile sites, all of whom have agreed to follow the ELCD Program procedures that we have developed over the last 15 years, including the ELCD radiation dose minimization

and tracking quality assurance checks. This will help ensure the best quality of screening care for our participants. When the new relationships with the imaging centers were established, we

maintained virtually all of the elements that make our program unique and successful at identifying lung cancer early. Queens College and the WHPP Ground Teams will remain the face of the program. We will still make ELCD appointments, send confirmation and results letters, and follow-up with those with significant findings to ensure the proper follow-up has been done. The ELCD medical director, Dr. Albert Miller, as always, is available and happy to answer any specific questions concerning individual CT scan reports for all participants, including those screened at these local imaging sites.

Though we are pleased with the transition to local services, we are sad to say goodbye to our CT technologist Lori Lanier (formerly Lori Brannon-Fatzinger), who has been with the program since 2000. Lori was not only an outstanding, hard-working technologist, but she truly cared for the WHPP participants she served, as she had a personal connection with the Paducah GDP plant and came to know so many of the participants very well over the years. We also want to acknowledge the terrific job that our lead mobile unit driver, Gerold "Buzzard" Wilkin, has done. By the time the mobile unit was retired, Buzzard (along with his co-driver Mike Church from 2000-2006 and, more recently, his co-driver, Mike Curry) had driven the unit between the ELCD sites for a total of 87,000 miles. Buzzard, a former worker from the Portsmouth GDP plant, treated the mobile unit as if it were his own – and, as a result, in all these years we have never had to cancel a screening "rotation" because the truck was not in good working order. Both Lori and Buzzard have been proud to have had a role in helping Cold War veterans who were put at high risk for lung cancer while helping to protect their country. We are thankful for their dedication to the program.

In 2015, lung cancer remains the leading cause of cancer death for both men and women. With the long-awaited acceptance of low-dose CT as an effective method for detecting lung cancer early, we expect to see this statistic improve. At the WHPP Program, we are thrilled to be a part of that changing statistic, especially for our veteran DOE employees who so deeply deserve this benefit.

**Note:** The ELCD Program will still offer lung cancer screening at the trailer in Oak Ridge (for K-25, ORNL, and Y-12 workers) and our two existing local radiology facilities in Las Vegas (for NTS workers) and Idaho Falls (for INL workers).



Lori Lanier, WHPP ELCD mobile unit CT technologist since 2000

*It is important to note that insurance coverage for lung cancer screening under the Affordable Care Act and Medicare (and Medicaid in certain cases) applies only to smokers – specifically those with at least a **30** pack-year smoking history. The WHPP ELCD criteria, which are based on the National Comprehensive Cancer Network (NCCN) Guidelines, take occupational exposures into account. That is, if certain job history criteria are met, participants with at least a **20** pack-year smoking history may be eligible for screening.*





## WORKER HEALTH PROTECTION PROGRAM (WHPP)

Barry Commoner Center for Health and the Environment  
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65-30 Kissena Blvd.  
Flushing, NY 11367

# HealthWatch

A newsletter of the Worker Health Protection Program; a partnership between Queens College, CUNY and the following organizations:  
United Steelworkers, Atomic Trades and Labor Council and the Fernald Medical Screening Program



On October 1, 2008, less than two weeks after my ELCD CT scan, my doctor and I received a letter with the results that I had fluid in my abdominal area. I underwent a series of tests, then a surgery where I learned I had a rare form of appendix cancer that required an innovative treatment. Now over five years later, there have been no signs of the cancer returning.

Without the CT scan, there was little chance this cancer would have been discovered in time to save my life.

- Marie Watts, Former Y-12 Worker

## HELP FILING YOUR EEOICP CLAIM

As a former or current worker at a Department of Energy (DOE) facility, you are entitled to file an Energy Employees Occupational Illness Compensation (EEOICP) claim if you became ill as a result of toxic exposures at your site. The claims, if successful, entitle you to 100% free medical coverage for treatment related to that condition and financial compensation that may total up to \$400,000. If the DOE worker is deceased, there may be compensation available to their widow, children, parents, grandchildren or grandparents.

At many of the WHPP sites, our local coordinators can provide free assistance and advice on navigating the often complicated process of applying for compensation. Many of our local coordinators are former workers themselves and have assisted former workers with EEOICP claims for years. They do not, however, serve as official authorized representatives.

The Department of Labor (DOL) administers the EEOICP and have regional resource centers where you can obtain paperwork to file your claim and also obtain assistance in your application process. Phone numbers for your local resource center can be found on page 5.

If you need specific assistance or have questions about filing an EEOICP claim, call your local coordinator(s) at the following numbers:

<b>Brookhaven National Laboratory</b> .....	631-585-2084
<b>Fernald</b> .....	812-577-0113
<b>Idaho National Laboratory</b> .....	208-522-4748
<b>K-25</b> .....	865-481-3395
<b>Mound</b> .....	877-866-6802
<b>Nevada National Security Site</b> .....	702-485-6724
<b>Northern California</b> .....	925-321-3637
<b>ORNL and Y-12</b> .....	800-906-2019
<b>Paducah Gaseous Diffusion Plant</b> .....	270-556-4489
<b>Portsmouth Gaseous Diffusion Plant</b> .....	740-289-2405
<b>WIPP</b> .....	718-670-4228

## WHPP Health Watch

*Vol. 12, Issue 16 Spring/Summer 2015*

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**For more information, to find out if you're eligible for your 3 year rescreen exam, if any of your contact information has changed or you have any questions or comments, please call us at:**

**(888) 241-1199**

**Or e-mail:** [info@worker-health.org](mailto:info@worker-health.org)

**Visit us online at:** <http://www.worker-health.org>

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This newsletter has been made possible through the funding from the Department of Energy, contracts: DE-FC01-06-EH06018 and DE-FC01-06-EH06008