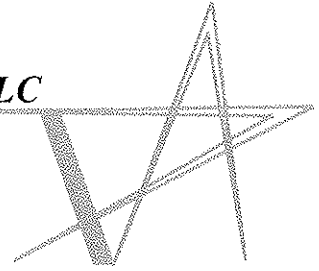


COMMONWEALTH ENVIRONMENTAL SERVICES, LLC

"A Native American - Woman Owned Company"



Gary Vander Boegh, Vice President
Commonwealth Environmental Services, LLC
4645 Village Square Drive, St. F
Paducah, Kentucky 42001
Telephone: (270) 450-0850
Facsimile: (270) 450-0858

August 15, 2010

U. S. Department of Labor,
Frances Perkins Building, 200 Constitution Ave., NW
Room S-2018
Washington, DC 20210

Attention: Madam Secretary Hilda Solis

Employee: Joseph A. L [REDACTED]
File Number: [REDACTED]-6450
Claimant: Dorothy L [REDACTED]
Power of Attorney: Linda W [REDACTED]

Dear Ms Solis,

As "Authorized Representative" (AR) for claimant Dorothy L [REDACTED], I hereby submit the attached EE-1 form and further request Part B and Part E claims reopening based on additional evidence of employment that meets the statutory requirements for Mrs. L [REDACTED]'s claim for Chronic Beryllium Disease (CBD), in addition to chronic renal disease, pneumonia, rhinitis, cardio vascular disease. Mrs. L [REDACTED] also bases her request for reopening on 20 C.F.R. § 30.320(b):

"At any time after the FAB has issued a final decision pursuant to § 30.316, a claimant may file a written request that the Director for Energy Employees Occupational Illness Compensation reopen his or her claim, provided that the claimant also submits **new evidence of either covered employment or exposure to a toxic substance**, or identifies either a change in the POC guidelines, a change in the dose reconstruction methods or an addition of a class of employees to the Special Exposure Cohort.

(1) If the Director concludes that the evidence submitted or matter identified in support of the claimant's request is material to the claim, the Director **WILL** reopen the claim and return it to the district office for such further development as may be necessary, **to be followed by a new recommended decision.**"

DOL Evey Christian letter dated August 5, 2010 (Claimant Attachment (CA) 001)

....”**Employment:** There is employment evidence contained in the file which verifies that the employee worked for Union Carbide and Martin Marietta, at the Paducah Gaseous Diffusion Plant (PGDP), in Paducah, Kentucky from April 28, 1952 to April 14, 1975. **Therefore, no further employment evidence is necessary.**

Medical: Submitted with your client's claim was a narrative report, regarding an x-ray exam noting that the employee had a, "generalized metting *over* most of the chest which is suggestive of some pulmonary congestion and edema". The unsigned report, which was dated January 24, 1952 (prior to the employee's confirmed DOE employment), is insufficient to support the claimed illness of Chronic Beryllium Disease (CBD).”....

.....”*For any test results, your physician must provide an opinion whether the finding are consistent with chronic beryllium disease.*

2. In order to meet the criteria for CBD **before January 1, 1993, you must submit at least three (3) of the following:**

- A characteristic chest radiographic (x-ray) or computed tomography denoting **ABNORMALTIES (emphasis added).**
- **A restrictive or obstructive lung physiology test or diffusion lung capacity defect**
- A lung pathology report consistent with chronic beryllium disease
- **A clinical course report consistent with chronic respiratory disease disorder**
- Immunologic tests showing beryllium sensitivity (skin patch test or beryllium test).

For beryllium disease prior to January 1, 1993, a specific diagnosis of CBD IS NOT REQUIRED (emphasis added.)”....

[(PER 42 USC § § 7384I. (13))

Although the DOL claims examiner (CE) Ms Christian has indicated, “**no further employment evidence is necessary**”, Mrs. L [REDACTED] presents irrefutable evidence that the CE did not fully consider her husband’s complete employment record in arriving at her conclusions. In fact, in direct violation of the EEOICPA stated mission “of claimant favorability” DOL Director Rachel Leiton violated the entitlement rights of Ms. L [REDACTED] by indicating in a separate letter to Mrs. L [REDACTED]’s AR Commonwealth Environmental Services, LLC from Director Rachel Leiton (signed by Christy A. Long on August 10, 2010) the following:

.... "In your inquiry, you indicate that employees of the Division of Energy Employees Occupational Illness Compensation (DEEOIC) are not allowed to issue favorable claims decisions. I can assure you that the DEEOIC strives to process claims fairly and efficiently and to be as claimant-favorable as possible. Under DEEOIC policy, all avenues that may lead to the acceptance of a claim are pursued completely before any denial is issued. If a denial must be issued, the DEEOIC strives to explain in detail the reasons why a given claimant does not qualify for compensation or medical benefits under the law, and to explain what information would be necessary to establish eligibility. **THE EEOICPA IS A COMPENSATION PROGRAM WITH STATUTORILY SPECIFIED ELIGIBILITY REQUIREMENTS, AND THE DEEOIC MUST ADMINISTER THE EEOICPA AS IT IS WRITTEN.**".....

The actions of the Director of the DEEOIC, her program managers, FAB officials, and federal claims examiners and their supervisors with regard to Mrs. L [REDACTED]'s Part B and E claim for compensation are a direct contradiction to Ms. Leiton's above statement. In fact, Ms. Leiton's self serving comments above only enforce the fact that the DEEOIC went out of their way to ignore Mrs. L [REDACTED]'s evidence of her husband's employment and lung abnormalities/ illness after beginning work at the PGDP in October 1951 rather than April 1952 (Reference CA - 002, 5 pages). Mrs. L [REDACTED] asks a simple question, "Since the DOL was provided employment evidence that clearly confirmed Mr. L [REDACTED]'s statutory compliance with the EEOICPA for CBD, how would the program Director, her upper level management "TEAM", and ALL federal claims examiners come to the same "non-claimant favorable" conclusions that Mr. L [REDACTED] had not met his statutory obligations? Of course the answer is Mrs. L [REDACTED]'s claim for compensation (among other EEOICPA claimants) would not have been denied, "Absent the existence of "internal" DOL claims denial procedures being utilized by all involved in the denial process?"

Evidence of Joseph L [REDACTED]'s Lung Scaring before 1993

On February 21, 1992, Mr. L [REDACTED] (CA - 003, pg. 7 of 10) was diagnosed with diffusely decreased breath sounds, renal failure and diabetes mellitus. On May 10, 1994, G.W. Heath, MD, consulting for Dr. Eric Scowden, diagnosed Mr. L [REDACTED] with "re-occurring pneumonia" with "old granulomatous changes", stable since December 1990 (CA 003 pg 8 of 10). On six separate occasions after the 1994 diagnosis, Dr. Eric Scowden diagnosed Mr. L [REDACTED] with "Scattered crackles at the bases" of his lungs, clearly confirms that Mr. L [REDACTED] was diagnosed with lung scaring after his exposure to beryllium in the workplace.

New Evidence of Additional Exposures to Toxic Heavy Metals in Workplace

Ms. Leiton and Ms. Christian are again provided exposure evidence not considered by the Director as a result of employment records NOT PROVIDED BY DOE officials at PGDP. At this time, Mrs. L [REDACTED] presents additional exposure evidence not previously considered by the DOL with regard to his job duties and responsibilities after working in

the "Converter Shop" on and before April 11, 1973 (CA-003, pg 10 of 10). Therefore, Mr. L [REDACTED]'s occupational exposure to kidney and renal system toxins such as uranium 235, Uranium 238, plutonium, neptunium, Tc-99, americium, tritium, thorium 230, neptunium, carbon disulfide, lead, copper, chromium, tin, mercury, welding fumes, silicon-containing compounds, and "listed hazardous waste" as listed in the Paducah Site Exposure Matrices and referenced in the following:

<http://www.atsdr.cdc.gov/hac/pha/pha>

CDC ATSDR FOR THE PGDP ... uranium brought to the site other radioactive materials not associated with naturally occurring uranium, e.g., technetium 99 (Tc-99), americium 241 (Am-241), neptunium 237 (Np-237), and plutonium 239 (Pu-239). Tc-99 was first reported in airborne releases in 1953 [12]. Tc-99, Np-237, and Pu-239 were first reported in liquid releases in 1953. The uranium hexafluoride manufacturing plant was deactivated in 1964, but reactivated in 1968 and used until 1977. At the *uranium metal plant*, depleted UF₆ was reacted with hydrogen to recover hydrogen fluoride and to convert the volatile UF₆ to more easily stored uranium tetra-fluoride (UF₄). Some of the UF₄ was reduced with magnesium to uranium metal. The uranium metal plant stopped operating in 1975 [13]. Also, between 1952 and 1986, PGDP operated several secondary smelters to recycle scrap metals [14]."

The DOL cannot ignore Mr. L [REDACTED]'s toxic exposures in the PGDP workplace that is casually linked to his diagnosed illnesses of CBD, kidney disease, renal failure, arteriosclerotic cardiovascular disease, hypertension, hyperthyroidism, rhinitis, proteinuria, diabetes mellitus, all of which have been compensated per under the EEOICPA.

In closing, the disparate treatment of Mrs. Dorothy L [REDACTED] can in no way be interpreted or considered by DOL Ms. Rachel Leiton, Ms. Christy Long, and Ms. Evey Christian as "claimant favorable." In fact, at this point it appears that DOE and DOL have gone out of their way to deny this "cold war hero's widow" (and Senator Durbin constituent/resident of Southern Illinois), her "Congressional" entitlements in the EEOICPA Parts B and E. Although DOL should be commended for their "programmatic efforts" of compensation sick workers through out the nation, those DOL officials remain accountable for those "cold war heroes" who have been (as the evidence confirms) have been treated inconsistently different. The CE's denial based on a pre-existing condition is not supported by the evidence that clearly establishes Mr. L [REDACTED] has met his statutory requirements for his claimed illness of CBD and other diagnosed illnesses (Reference Claimant Attachment 002, pages 1 thru 10).

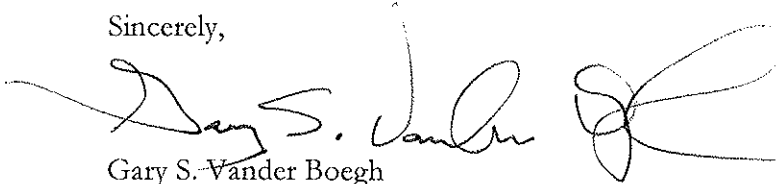
Due to Mrs. Dorothy L [REDACTED]'s 87 years of age, I further request that Madam Secretary Hilda Solis provide Mrs. L [REDACTED] with a personal message with regard to the status of her claim for Part B compensation in the amount of \$150,000 and for Part E compensation in the current maximum of \$125,000. I further attach a picture of Mrs. L [REDACTED]'s now deceased husband Joseph A. L [REDACTED] (CA -004), who after much

suffering passed away never realizing his contribution to the nations security and the "freedom" citizens take for granted today as a result of his service to the country.

Your timely response to Mrs. L [REDACTED]'s Part B and E claims for compensation is appreciated.

Please feel free to contact me at 270-559-1752 or 270-450-0850.

Sincerely,



Gary S. Vander Boegh

"Authorized Representative"

Vice President- Commonwealth Environmental Services, LLC.

Cc. Honorable Secretary of Labor Hilda Solis w/Attachments (202) 693-6111

- 1/ Claimant Attachment (CA) 001 – DOL CE Evey Christian letter dated 8/05/10
- 2/ CA - 002 – Union Carbide Job Application listing F.H. McGraw Employment
- 3/ CA – 003 – Evidence of Converter Shop job.
- 4/ CA - 004 - PGDP photograph of Joseph A. I [REDACTED].

U.S. Department of Labor
200 Constitution Avenue, NW
Room S-2018
Washington, DC 20210

Director OWCP Shelby Hallmark w/o Attachments (202) 693-1465
Director DEEOIC Rachel Leiton
FAB Final Adjudication Branch Chief LuAnn Kresley
FAB Assistant Director Thomasyne L. Hill
Claims Examiner - Evey Christian



AUG 10 2010

Mr. Gary S. Vander Boegh
7660 Old Hinkleville Road
West Paducah, Kentucky 42086

Thank you for your inquiry dated July 23, 2010, written on behalf of former employees of the Paducah Gaseous Diffusion Plant (Paducah GDP) in Paducah, Kentucky, who filed claims under the Energy Employees Occupational Illness Compensation Program Act (EEOICPA). Your inquiry was addressed to Secretary of Labor Hilda L. Solis, copied to President Barack Obama, and forwarded to me for response.

In your inquiry, you indicate that employees of the Division of Energy Employees Occupational Illness Compensation (DEEOIC) are not allowed to issue favorable claims decisions. I can assure you that the DEEOIC strives to process claims fairly and efficiently and to be as claimant-favorable as possible. Under DEEOIC policy, all avenues that may lead to the acceptance of a claim are pursued completely before any denial is issued. If a denial must be issued, the DEEOIC strives to explain in detail the reasons why a given claimant does not qualify for compensation or medical benefits under the law, and to explain what information would be necessary to establish eligibility. The EEOICPA is a compensation program with statutorily specified eligibility requirements, and the DEEOIC must administer the EEOICPA as it is written. Thus, I assure you that neither Mr. Shelby Hallmark, Director, Office of Workers' Compensation Programs (OWCP), nor I have ever instructed or encouraged DEEOIC staff to deny eligible EEOICPA claims. In fact, as of July 28, 2010, the DEEOIC has awarded 60,740 employees or their families \$5,419,593,634 in compensation and \$539,927,800 in medical benefits under Part B and E of the EEOICPA. In reference to the Paducah GDP, the DEEOIC has awarded 5,309 employees or their families \$565,027,654 in compensation and medical benefits under the EEOICPA.

You also express concern that DEEOIC staff is encouraged to use information against the claimants after they evaluate all the evidence in the file. In fact, you state that DEEOIC claims examiners used information from claimants that was based on their best recollection of events from fifty years ago. EEOICPA policy requires that DEEOIC claims examiners consider all the evidence in the claims

CLAIMANT ATTACHMENT 001
PAGE NO. 1 OF 3

file and use multiple sources of evidence to make a determination on a claim. I am not aware of DEEOIC staff using information in claims files against the claimants; however, if you have specific examples, I encourage you to bring them to my attention.

You make specific statements on how the DEEOIC adjudicated certain claims and you refer to the accompanying procedures used in developing these claims, but you did not identify the claimants in question. Again, if you have specific issues about a particular claim, my office would be glad to address them. Otherwise, it would be challenging for me to address the development practices utilized by the DEEOIC staff since all staff are encouraged to account for the unique facts, context and situation of each claim and to develop that claim accordingly. Also, due to privacy protections, it would be challenging for me to answer questions about other claimants' claims.

You inquire about why the Department of Labor has not updated its database, the Site Exposure Matrices (SEM), with any information pertaining to the Paducah GDP in the last sixty days. As you are aware the DEEOIC has released a greatly enhanced version of the SEM to the public. The new version contains more data and provides additional ways to look for information regarding toxic substances at DOE facilities covered under Part E of the EEOICPA. This more robust version of the SEM was made public as a result of a DOE decision to release more detailed information on 69 of the 116 DOE weapons facilities, as well as for all uranium mines, mills and ore buying stations. The enhanced system is available online at <http://www.sem.dol.gov>. Currently, the Paducah GDP is under review by the DOE, and the goal is for the DOE/DOL to have these reviews completed by the end of the fiscal year. However, please be advised that our office is constantly processing updates or modifications to the SEM database, and I can confirm that we have processed updates to the SEM database in reference to the Paducah GDP in the last sixty days.

The last issue you discuss is your belief that I refuse to reopen claims based on established criteria regarding newly discovered employment, violations of the law, and new exposures not previously identified. In reference to reopening requests, EEOICPA policy indicates that in order for a reopening to occur on a claim, there must be new evidence of employment, survivorship, exposure information, changes in dose reconstruction information, or changes in law, regulations, or policies. However, if a reopening request is not accompanied by new evidence, the reopening request is denied by one of the DEEOIC District Directors or by me. As I mentioned above, if you have a specific issue about a particular claim's reopening denial, my office would be glad to address it. Otherwise, it would be challenging for me to address this issue other than to state what EEOICPA policy is regarding this matter.

I hope this information has been helpful.

Sincerely,

Christy A. Long

for Rachel P. Leiton
Director, Division of Energy Employees
Occupational Illness Compensation

CARBIDE AND CARBON CHEMICALS COMPANY
A DIVISION OF UNION CARBIDE AND CARBON CORPORATION

POST OFFICE BOX 748
PADUCAH, KENTUCKY

JAN 14 1952

Janitor (Male)
Tested 3/15/72

QUALIFICATION RECORD

Please answer each question fully -- all information will be treated confidentially.

PERSONAL DATA

Date 1-11, 1952

Name L JOSEPH A
last first middle

Type of work applied for Janitor

Present address BLANDVILLE KY
number street city state

Date available when called

Present Telephone No. 6450 Social Security No. [redacted]

By whom referred to this company none

Permanent address BLANDVILLE KY
number street city state

Previously employed by this corporation or company no.

Marital Status: Single Married Separated
Divorced Widowed No. of dependents none

Name relatives or friends employed by this company none

If husband or wife is employed, give name of employer

Work in which you are most experienced Janitor

Date of birth (if employed you will be required to present birth certificate or other evidence) 11-13-14 Age 37

Work for which you wish to train, such as production, sales, research, etc.

Place of Birth BLANDVILLE KY

Are you willing to accept employment at any of our branches or plants in the U. S. and be transferred as the company may require yes

(b) Have you filed first papers no (c) Date of such filing

If No, please explain

Sex male Height 6' 2" Weight 215

Are you willing to travel (as may be required) if employed yes

Physical limitations none

If No, please explain

Any recent serious illness none

To be notified in case of emergency: Louisa L. [redacted]

Father's full name Caleb L. [redacted]

Address Blandville, Ky

Father's occupation (past or present) farmer

Telephone No.

1-99

EDUCATION

School or Institution Location	No. of Years	Were You Graduated	Year Left	Courses Taken and Degree
<u>Blandville Grade</u>	<u>8 yrs</u>	<u>yes</u>	<u>1930</u>	<u>Grade school</u>

In which subjects did you excel Reading & math

In which subjects were you most interested math In which subjects did you specialize none

What foreign languages do you speak none Read none Write none

Did you receive any academic honors in college

CLAIMANT ATTACHMENT 002

CES0055.

Was your scholastic standing average, above average, or below average average

Did you win any letters or numerals in any sports _____

What part did you take in extra-curricular affairs, such as debating, athletics, social service work, publications, etc. _____

Please mention any membership in class organizations, students' societies or offices held _____

Please name any U.S. military, business, professional or fraternal organizations (excluding Labor Unions or organizations of a religious, racial or foreign national character) to which you belong none

If not in college, are you studying now no What and where _____

What further courses do you expect to take none

BUSINESS EXPERIENCE, INCLUDING SUMMER WORK & U.S. MILITARY SERVICE

OK
R

JAN 52
To APR 52

Present or Last Position	Company	Street Address and City	Month	Year	Position	Reason for Leaving
		<u>D.H. Mc. Graw</u>	<u>Knox, Ky</u>	From <u>1/29</u>	<u>51</u>	<u>Janitor</u> Dept. Head
	Line of Business and Products		To <u>1/4</u>	<u>52</u>	<u>Dept. Head</u>	<u>52.00 wkl.</u>
Next Position	Company	Street Address and City	Month	Year	Position	Reason for Leaving
	<u>Waldsmith Lbr Co.</u>	<u>Benton, Mo.</u>	From <u>9/30</u>	<u>50</u>	<u>Labor</u> Dept. Head	<u>Job ended</u> Salary
	Line of Business and Products		To <u>4/30</u>	<u>51</u>		<u>36.00 wkl.</u>
Next Previous Position	Company	Street Address and City	Month	Year	Position	Reason for Leaving
	<u>W.L. Varnard Lbr Co</u>	<u>Blandville, Ky</u>	From <u>10/1</u>	<u>45</u>	<u>Labor</u> Dept. Head	<u>Self-employed</u> Salary
	Line of Business and Products		To <u>4/30</u>	<u>46</u>		<u>20.00 wkl.</u>
Next Previous Position	Company	Street Address and City	Month	Year	Position	Reason for Leaving
			From		Dept. Head	Salary
	Line of Business and Products					
U. S. Military Service	Military Assignment	Area	Month	Year	Highest Rank	Special Training
			From			
	Type Activity		To			

Please state on next page any further facts or details concerning your experience and training which explain more fully your qualifications for the employment for which you are applying. If there is not sufficient space to record in detail your work experience and training, we suggest that you give us this information on separate sheet and attach hereto.

CLAIMANT ATTACHMENT 002

PAGE NO. 2055

PLEASE CHECK ANY OF THE FOLLOWING IN WHICH YOU ARE EXPERIENCED

	Clerical field				Promotion	
	Correspondence				Advertising	
	Statistics				Publicity	
	Engineering				Sales	
	Financial				Purchasing	
	Accounting				Research	
	Control				Sales	
	Credit				Domestic	
	Insurance				Foreign	
	Legal				List Others	
✓	Production			✓	<i>Janitor</i>	
	Technical					
	Time-Study -- Rate Setting					
	Warehousing - Shipping					

PERSONAL REFERENCES

Please give names, etc., of three persons other than former employers or relatives who have known you more than three years. Do you authorize us to secure confidential reports on your character and ability from present employer and any or all of your former employers and personal references

Name in Full	Street Address and City	Business	Years Known
<i>Joe [Redacted]</i>	<i>Blandville, Ky</i>	<i>Fireman F.H. McGraw</i>	<i>10</i>
<i>J.W. [Redacted]</i>	<i>Wickliffy, Ky Rt 1</i>	<i>Fireman F.H. McGraw</i>	<i>30</i>
<i>E.R. [Redacted]</i>	<i>Blandville, Ky</i>	<i>News Agent</i>	<i>30</i>

Please state approximate salary which you expect *52.00 w/h*

Joseph B [Redacted]
Signature

Please send this complete application form to *Carbide + Carbon Chem, Co* *Paducah, Ky*
Name Company Location

NO. TO BE FILLED IN BY APPLICANT

Application noted by:		Interviewed by:	
Name	Date	Name	Date

Notes: (Including test results, If any)

Ref. list 1-22-52

TO BE FILLED IN BY DEPARTMENT HEAD

Applicant engaged by: Co. _____ Location _____ Dept. _____

Position _____ Date Effective _____ Rate per Month _____

Signature of Dept. Head _____ Approved by _____

Applicant engaged by: Co. _____ Location _____ Dept. _____

Position _____ Date Effective _____ Rate per Month _____

Signature of Dept. Head _____ Approved by _____

SPACE BELOW FOR USE BY EMPLOYMENT OR PERSONNEL OFFICE

Notes *1-17-52 - Called in for PSO - medical*
1-21-52 - will return with PSO papers -
to be put in clearance for janitor - Cof
1-22-52 - PSO fingerprints - 1-24-52 - medical
Reg 10094 in dept. 5001

Records complete for filing

Employment Dept.

EMPLOYMENT RECORD

Date	Action	Company	Department	Position	Notes
<i>2-21-52</i>	<i>Q KY-8202</i>				

WCX-1095 (May '48)

(This supplementary page is provided for your convenience in giving detailed information concerning the duties and responsibilities of the positions listed in your employment record. Please begin your description of experience in each separate position with a new paragraph. Each description should correspond with the title and dates listed in the employment record. Use additional pages if desirable.

Dr. H. Mc Graw + Co., Kevil, Ky
was employed for period of nine weeks on
janitor force when layoff came and I was one
of last employed I was terminated.

Waldmich Lbr Co. Benton, Mo. was employed
cutting timber for mill. Tract of timber was cut and
was laid off.

W L Vinard Lbr Co. Blandville, Ky
cut timber and worked at mill. Timber was cut
operator became ill and ceased to operate mill

Blank lined area for additional text.

01-12-98

JOSEPH L [REDACTED]

PROBLEM:

1. Diabetes mellitus.
2. ASCVD.
3. End stage renal disease on dialysis.
4. History of GI bleeding with peptic ulcer disease.
5. Hypertension.
6. Prior history of gout.

S:
Mr. L [REDACTED] has had a chronically low blood pressure although he is relatively asymptomatic related to this. He has had no syncope or dizziness.

O:
Flow sheets show a systolic pressure ranging from 85-90. This actually goes up as he is dialyzed and fluid is ultrafiltered, although occasionally at the end of his treatments, it will again drop.

LAB: Calcium 8.2, phosphorus 7.9, BUN 65, potassium 5.1.

LUNGS: Scattered crackles at the bases. Otherwise clear.

CARDIAC: First and second heart tones are normal. No S3 or S4 gallops. Grade II-III/VI blowing systolic murmur.

GI: Nontender.


EXTREMITIES: Trace lower extremity edema.

STUDIES: Review of his studies indicates his last echo showed him to have global LV hypokinesis with probably significant aortic stenosis.

A:
Two cardiac problems that certainly could result in hypotension.

P:
1. Trial of Mannitol during dialysis.

Eric B. Scowden, M.D./te



CLAIMANT ATTACHMENT 003
PAGE NO. 12510

2

12-08-97

JOSEPH L [REDACTED]

PROBLEM:

- 1. Diabetes mellitus.
- 2. ASCVD.
- 3. End stage renal disease on dialysis.
- 4. History of GI bleeding with peptic ulcer disease.
- 5. Hypertension.
- 6. Prior history of gout.

S:
 Mr. L [REDACTED] had surgery done by Dr. Jones about 3 weeks ago. He is recovering from that. He has no complaints such as nausea, vomiting, fevers or chills.

O:
 Flow sheets show blood pressures are running on the lowish side about 108/60. He is on no antihypertensive regimen. Weight gains are anywhere from 3-9 pounds.

LAB: Hct 27, calcium 8.3, phosphate 9.2, potassium 4.6, BUN 44.

LUNGS: Scattered crackles at the bases. Otherwise clear.

CARDIAC: First and second heart tones are normal. No S3 or S4 gallops. Grade II-III/VI blowing systolic murmur.

GI: Nontender.

EXTREMITIES: Trace lower extremity edema.

A:
 Stable and doing well.

P:
 1. Possibly will be able to use his graft in the next 2 weeks or so.

Bikram S. Johar, M.D./te (dictated but not read)

9

CLAIMANT ATTACHMENT 004
 PAGE NO. 2 of 10

10-13-97

JOSEPH L [REDACTED]

PROBLEM:

1. Diabetes mellitus.
2. ASCVD.
3. End stage renal disease on dialysis.
4. History of GI bleeding with peptic ulcer disease.
5. Hypertension.
6. Prior history of gout.

S:

Mr. L [REDACTED] has had some worsening symptoms of degenerative joint disease lately with arthritis pain. He has started to take Aleve over-the-counter. He is otherwise more or less stable.

O:

Flow sheets show a blood pressure of 124/67. Weight gains are decent at 4-5 pounds.

LAB: Hct 33.6, creatinine 7.6, calcium and phosphate are 8.8 and 7.

LUNGS: Scattered crackles at the bases. Otherwise clear.

CARDIAC: First and second heart tones are normal. No S3 or S4 gallops. Grade I-III/VI blowing systolic murmur.

GI: Nontender.

EXTREMITIES: Trace lower extremity edema.

A:

Degenerative joint disease but more or less stable.

P:

1. D/C Aleve because he has had previous admissions for severe GI bleeding and gastric ulcers.
2. Try Ultram and Darvocet on as needed basis.

Bikram S. Johar, M.D./te (dictated but not read)

CLAIMANT ATTACHMENT 003
PAGE NO. 3 of 10

J.B

CES0055
OWA PHYSICIAN PANEL REPORT

- Cigarette smoking
- Street drugs
 - Cocaine
 - Amphetamines
- Alcohol abuse
- OTC cold remedies
- Excessive caffeine intake
- Pregnancy
- Hyperthyroidism
- Hyperparathyroidism
- Adrenal cortex neoplasms
 - pheochromocytomas
- Cushing syndrome
- Pregnancy
- Cadmium⁵

Mr. L [REDACTED] had diabetes, old age, diabetic end stage renal disease, and atherosclerotic vascular disease which played the significant roles in the development of his hypertension. There is no evidence of any significant cadmium exposure. It is my considered opinion the toxic exposures at the Paducah Gaseous Diffusion Plant did not significantly contribute to the development of his hypertension.

Provide any evidence presented that is contrary to your determination and explain why you find this evidence not to be persuasive. Include a discussion of the information and other materials provided by OWA.

Only the unsubstantiated assertions of the claimant were found.

Section C2: Claimed Illness Conclusion

Claimed Illness # 2	Reviewer #1	Reviewer #2 (As Needed)	Reviewer #3 (As Needed)
HYPERTENSION			
Is it at least as likely as not that the claimed illness or death arose out of and in the course of employment by a DOE contractor and that exposure to a toxic substance at a DOE facility was a significant factor in AGGRAVATING, CONTRIBUTING TO OR CAUSING the illness or death?	Check one: Yes <input type="checkbox"/> No xx <input type="checkbox"/>	Check one: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Check one: Yes <input type="checkbox"/> No <input type="checkbox"/>

Claimed Illness # 3	Renal failure
Date of Onset	unknown

⁴ Booze CF: *Blood Pressure Levels Of Active Pilots Compared With Those Of Air Traffic Controllers*. Aviation, Space and Environmental Medicine, Vol. 56, No. 11, pages 1092-1096, 12 references, 19851985
⁵ Okanian: *Genetic Influence On Hypertension Induced By Cadmium In Dahl Hypertension-Resistant And Hypertension-Sensitive Rats*. Trace Substances in Environmental Health X, pages 451-457, 19 references, 19771977

L [REDACTED], Joseph

CLAIMANT ATTACHMENT 003
PAGE NO. 40510

OWA PHYSICIAN PANEL REPORT

Section B3: Physician Reviewer #1

Describe the key factors in rendering your decision, including a discussion of the information and other materials provided by OWA.

Does the claimant have the alleged condition?

Yes

Did his toxic exposures at the Department of Energy facility significantly contribute to the development of the alleged condition?

No

Industrial hygiene:

- Dosimetry: unavailable to author
- NIOSH dose reconstruction: unavailable
- Site analysis: non-contributory
- Area sampling: unavailable
- Industrial hygiene assertions: unavailable

Discussion: Renal failure can be the result of anatomical defects causing pre-renal ischemia, secondary effects of hemolytic or rhabdomyolytic agents, or the direct effect of occupational kidney toxins like uranium and carbon disulfide.⁶ Renal failure has been associated with occupational exposures to lead, copper, chromium, tin, mercury, welding fumes, silicon-containing compounds, grain dust and oxygenated hydrocarbons.⁷ There is no evidence of any significant exposures to lead, copper, chromium, tin, uranium, carbon disulphide mercury, welding fumes, silicon-containing compounds, grain dust or oxygenated hydrocarbon at the Department of Energy facility.

Based on my background, experience, and training it is my considered opinion that toxic occupational exposures at Paducah Gaseous Diffusion Plant did not play a significant role in the development of his renal failure.

Provide any evidence presented that is contrary to your determination and explain why you find this evidence not to be persuasive. Include a discussion of the information and other materials provided by OWA.

Only the unsubstantiated assertions of the claimant were found.

CLAIMANT ATTACHMENT 003
PAGE NO. 5 OF 10

⁶ Hu H: Occupational Health. Recognizing and Preventing Work-Related Disease, Levy, B. S., and D. H. Wegman, Editors; Little, Brown and Co., Boston, pages 381-390, 9 references, 1983/1983

⁷ Nutys, GT: *New occupational risk factors for chronic renal failure.* Lancet 1 July 1995, Vol.346, No.8966, p.7-11. Illus. 30 ref.

L [REDACTED], Joseph

LOURDES HOSPITAL
PADUCAH, KENTUCKY

DISCHARGE SUMMARY



FAMILY NAME	FIRST NAME	ATTENDING PHYSICIAN	ROOM	MEDICAL RECORD NUMBER
L [REDACTED]	JOSEPH A.	ERIC SCOWDEN, M.D.		068552

DATE OF ADMISSION: 6-30-92

DATE OF DISCHARGE: 7-03-92

DIAGNOSIS:

1. HYPERTENSION.
2. DIABETES MELLITUS.
3. RENAL FAILURE.
 - A. PERITONEAL DIALYSIS WITH FUNGAL PERITONITIS WITH A FUSARIUM ORGANISM.
4. TOPHACEOUS GOUT.
5. ARTERIOSCLEROTIC CARDIOVASCULAR DISEASE.

SUMMARY OF HOSPITALIZATION:

Mr. L [REDACTED] is a 77 year old gentlemen who has kidney failure due to diabetes mellitus and hypertension and is on home peritoneal dialysis. He has had repeated episodes of bacterial peritonitis receiving courses of intra-peritoneal antimicrobials. He recently developed another episode of peritonitis manifested as abdominal pain and a cloudy dialysate bag. Cultures were obtained and he was again started on the peritonitis protocol. The culture returned, however, growing a fungal organism termed fusarium. This type of infection does not respond to intra-peritoneal therapy very well. In view of his recurrent infections it was felt best to remove his catheter and convert him to hemodialysis temporarily. Therefore, he was hospitalized given 48 hours of intra-peritoneal Amphotericin B followed by removal of his peritoneal dialysis catheter by Dr. Charles Ross. A temporary dual lumen vas cath subclavian catheter was placed and he received hemodialysis support during this hospitalization. He will be discharged on hemodialysis and at a later date consideration will be given to placement of a new peritoneal dialysis catheter.

His studies included a white count of 7.1, hemoglobin 7.7 grams, hematocrit 23.7%, platelet count was normal. Urinalysis showed proteinuria with 2+ bacteria read, although the nitrite and leukocyte esterase studies were negative. 1+ budding yeast were reported. A urine culture was requested on admission 6-30, this had not been reported as yet. His calcium was 9.3, phosphorous 4.2, creatinine 6-8 mg/dl, BUN 20-26, electrolytes normal, liver function studies normal, amylase 34. Chest x-ray following placement of a subclavian catheter showed no acute disease and appropriate placement of the catheter. His EKG shows left axis deviation, poor airway progression in the continued

CLAIMANT ATTACHMENT 003

2-21-92

JOSEPH L [REDACTED]

PROBLEM:

1. Diabetes mellitus.
2. Renal failure.

S:

Mr. L [REDACTED] feels well and has no complaints. He now admits to now using sterile technique with his bag changes in that he was not washing his hands, wearing sterile gloves and has occasionally missed spiked bag. He has peritonitis February 1 and was treated through the 12. One week later, he now again has peritonitis with an organism growing that is a gram negative rod.

O:

Flow sheets show stable treatments.

LAB STUDIES: Show a blood sugar of 209, phosphorus 7.3, Calcium 7.3.

CHEST: Lungs are clear. Breath sounds are decreased diffusely.

CARDIAC: First and second heart tones are normal. No S3 or S4 gallops. No murmur.

ABDOMEN: Unremarkable. Catheter exit sight looks fine.

EXTREMITIES: Show trace pretibial edema.

A:

Recurrent episodes of peritonitis. Hopefully this does not represent an infected catheter and necessitate removal of same. He clearly needs more education regarding his procedure.

P:

1. Change antibiotics to Fortaz plus Gentomycin intraperitoneally.

2. Re-instruct regarding dialysis procedure. Try Baxters no hand technique.

3. Urokinase treatment to PD catheter.

EBS/lse

CLAIMANT ATTACHMENT 003PAGE NO. 7 of 10

DEPARTMENT OF RADIOLOGY
502-444-2177

RADIOLOGY REPORT

NAME: L [REDACTED], JOSEPH
PHYS: SCOWDEN, ERIC B.
DOB: 11/13/14 AGE: 79 SEX: M
ACCT: 0230710 LOCATION: CLINICAL
EXAM DATE: 05/10/94 STATUS: OUT
RADIOLOGY NO:
UNIT NO: 068552

SCOWDEN, ERIC
225 MEDICAL CENTER DRIVE
PADUCAH, KY 42001

5024414242

EXAMS: CHEST PA/LATERAL

HISTORY: R/O PNEUMONIA

CHEST, TWO VIEWS: Comparison is made to chest from December 1990. Calcified right paratracheal lymph node and some calcified granulomata are seen. Heart is normal in size. I do not see any acute cardiopulmonary changes radiographically.

IMPRESSION:

- 1) OLD GRANULOMATOUS CHANGES. THE HEART IS NORMAL IN SIZE. THE LUNGS APPEAR CLEAR AND STABLE SINCE DECEMBER 1990.

G. W. HEATH, M.D.

CC: SCOWDEN, ERIC

TRANSCRIBED DATE/TIME: 05/10/94 (1317)
TRANSCRIPTIONIST: KAL2314
PRINTED DATE/TIME: 05/10/94 (1342)

PAGE 1

SCOWDEN, ERIC

CLAIMANT ATTACHMENT 003

PAGE NO. 8 OF 10

RADIOLOGY

DISPENSARY RECORD

9

Page 652 of 824

DATE	NAME	DEPT. NO.	MEDICAL NO.
8-21-70	L. [REDACTED]	5001-H	1449
9 A.M.	<p>pt. came in requesting a blood sugar check. He does not know which one. He ate breakfast at 6 A.M. - 3 hrs ago. Advised to call Dr. Baird this week and find out whether he wants fasting or 2 hrs P.C. Then come in Monday prepared for same.</p> <p>(R.W.) M. Stiles, R.N.</p>		
9-23-70	1.97	<p>10:50 A.M. Rhinitis + nasal congestion. R. Conception IV Supp. Cepacol loz. Green Peppermint Allitudin in P.C. as requested.</p> <p>(R.W.) M. Stiles, R.N.</p>	
10-6-70	<p>Influenza Vaccine $\frac{1}{2}$ cc S.C. M. Stiles, R.N.</p>		
10:10 A.M.			
11/20/70	OT 20	<p>pt. has been (OW) 8 injured on (2) toes, upper has no particular com- plaints at this time. Dr. [Signature] [Signature]</p>	
12/18/70	<p>1:55 P.M. Influenza Vaccine $\frac{1}{2}$ cc Sub q (B)</p>		
	<p>H. E. HOUSMAN, R.N.</p>		

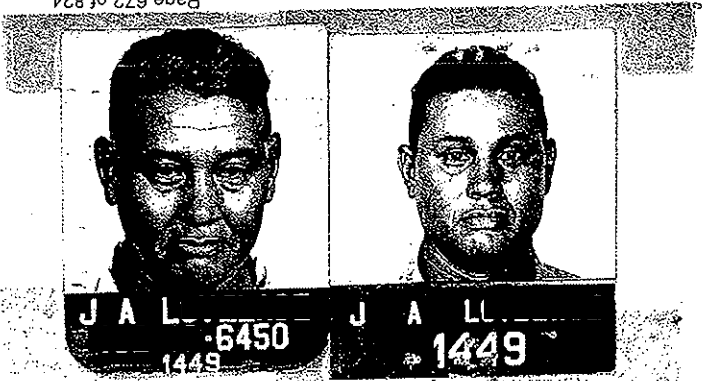
ITEM	(5)	(4)	(3)	(2)	(1)
PERSONAL QUALITIES Judgment - Consider common sense and judgment. In his work. Sense of proportion.	Always makes good decisions. Excellent judgment and sense of proportion to new situations.	Well balanced in general situations. Needs some guidance under changing conditions. ✓	Generally Good. Hasty at times.	Uncertain. Sometimes good or bad.	Incapable of good judgment. Undependable.
Dependability - Appraise the confidence you have in the man to carry out instructions conscientiously.	Always dependable. Can be counted on 100%.	Usually performs well without reminders. ✓	Dependable under normal conditions.	Usually must be checked on or corrected.	Requires constant follow-up. Cannot be counted on.
Attitude - Consider the open mindedness, willingness to carry out instructions and cooperation with others.	Cooperative in every respect. Exceptionally willing to abide by rules and regulations.	Cooperates willingly when required. Better than Average. ✓	Normally receptive. Average cooperation.	Rarely regards others. Rules to be obeyed only under close supervision.	Inconsiderate. Refuses to cooperate or comply with rules and regulations.
Cost Consciousness - Appraise ability to apply cost reduction and control principles to job and/or program.	Effectively controls cost on job or program. Constantly cost conscious.	Always thinks in terms of cost control. Finds ways to cut cost. ✓	Will control cost normally. Must be reminded occasionally. Little planning.	Thinks in terms of producing at any cost. No conscious control.	Disregards cost. Requires constant checking.
Leadership - Consider effort made, consciously or unknowingly, to supervise, inspire, organize, or motivate others.	Effectively assumes leader position. Consciously gets results through others.	Demonstrates leadership qualities in most situations. Needs occasional reminders. ✓	Generally satisfactory in organization and planning for others.	Has few leadership qualities.	No leadership qualities. A follower.
Advancement Potential - Consider qualifications, abilities, ambitions, image, etc.	Demonstrates outstanding qualification. Has drive to assume greater responsibilities.	Above Average ability to lead. Has better than average possibilities. ✓	Displays Average abilities. After training could be considered for promotion. ✓	Limited Potential.	No qualities for advancement.

REMARKS

4-11-73 Is now assigned temporarily to Converter shop

WHICH BEST DESCRIBES EMPLOYEES PERFORMANCE DURING EVALUATION PERIOD	OUTSTANDING <input type="checkbox"/>	TOTAL POINTS
	COMMENDABLE <input checked="" type="checkbox"/>	51
	STABILIZED <input type="checkbox"/>	
		RATED BY
		M. T. Miller
		DATE
		4-3-73

1973



6/25/68 Telenova
 7/25/68 -
 6/19/69 "
 6/30/75 Telenova Topoid (B)
 0.5 2nd ind.
 0.5 sec 2nd ind.
 0.5 sec 2nd ind.

CLAIMANT ATTACHMENT
 PAGE NO. 150

5096-H

1449 J A L

403 1/24/52
 4/15/55
 7/24/73
 12/17/77

IBM 1000

Name Joseph Arthur

Badge No. 1119

Dept. No. 5096-H

Home Address Blandville, Ky.

Blood Type A

Rh Factor Pos

Date 1/21/52

CE50055

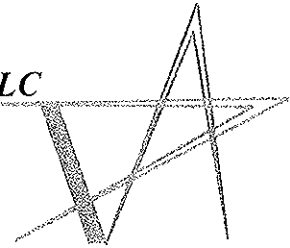
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USAGE T	06' 19
PGS.	24
RESULT	OK

COMMONWEALTH ENVIRONMENTAL SERVICES, LLC

"A Native American Woman Owned Company"



Gary Vander Boegh, Vice President
 Commonwealth Environmental Services, LLC
 4645 Village Square Drive, St. F
 Paducah, Kentucky 42001
 Telephone: (270) 450-0850
 Facsimile: (270) 450-0858

August 15, 2010

U. S. Department of Labor,
 Frances Perkins Building, 200 Constitution Ave., NW
 Room S-2018
 Washington, DC 20210

Attention: Madam Secretary Hilda Solis

Employee: Joseph A. L [REDACTED]
 File Number: [REDACTED]-6450
 Claimant: Dorothy I [REDACTED]
 Power of Attorney: Linda W [REDACTED]

Dear Ms Solis,

As "Authorized Representative" (AR) for claimant Dorothy I [REDACTED], I hereby submit the attached EE-1 form and further request Part B and Part E claims reopening based on additional evidence of employment that meets the statutory requirements for Mrs. L [REDACTED]'s claim for Chronic Beryllium Disease (CBD), in addition to chronic renal disease, pneumonia, rhinitis, cardio vascular disease. Mrs. L [REDACTED] also bases her request for reopening on 20 C.F.R. § 30.320(b):

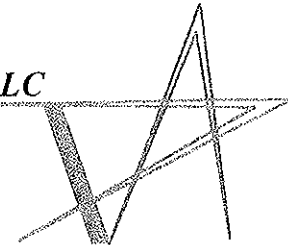
"At any time after the FAB has issued a final decision pursuant to § 30.316, a claimant may file a written request that the Director for Energy Employees Occupational Illness Compensation reopen his or her claim, provided that the claimant also submits new evidence of either covered employment or exposure to a toxic substance, or identifies either a change in the POC guidelines, a change

*** TX REPORT ***

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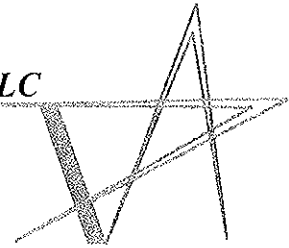
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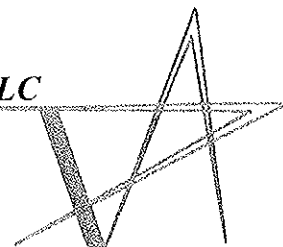
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*** TX REPORT ***

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*** TX REPORT ***

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TRANSACTION OK	gvandy@villagebusinesscenter.com	Gary Vander Boegh
	gvandy@comcast.net	VanderBoegh
	judyvanb@comcast.net	judy v
	jvandy@commonwealthenvironmentalservices	Judy Vander Boegh
	astevens@commonwealthenvironmentalservic	amanda stevens
ERROR	-----	