

2/11/00

@ 4:30 p.m.

Observations:

- 1)  $R_u$  increases prompt fatalities in all cases
- 2) For uniform pop. density, increase is about a factor of 5.  
(Early evacuation case) and about a factor of 15  
(Late evacuation case).
- 3) For surry pop. density, increase is about a factor of 25  
(Early evac. case) and about a factor of 100  
(Late evac. case).
- 4) Only get  $> 1$  early fatality w/ Surry/late evac.

Plan to complete work

- I can do these calcs.
3. Verify that Ru-106 acute-DCF for inhalation is dominating prompt fatalities by setting it to 0. DONE 2/14
  1. Run 100 persons/m<sup>2</sup> with .75 mile EAB for the late evacuation case to get this number DONE 2/14
  2. Run a case w/ 1000 persons/m<sup>2</sup> (vs 100) to verify that all consequences increase by exactly a factor of 10. DONE 2/14
  4. Find out about D, W, Y and why Ru-106 has higher DCF than Cs-137 — Talk w/ Health Physicist.

WF Tin Mo  
2/14/00

5. Grouping

5. What is the cause of the higher doses increases for Surry ( $\times 2.5$ ) vs. uniton ( $\times 5$ )? Is it because at Surry the prevailing wind is toward the population?

6. How far away from the site are the doses high enough to cause a prompt lethality?

7. Write up results and give it to CT for review and feedback.