

November 15, 1996

30-31566

Nora A. Janjan, M.D.  
Department of Radiation Oncology  
M. D. Anderson Cancer Center, Box 97  
1515 Holcombe Boulevard  
Houston, TX 77030

SUBJECT: PROFESSIONAL SERVICE INDUSTRIES, INC. APPARENT OVEREXPOSURE

Dear Dr. Janjan:

This letter is to confirm our telephone agreement of November 8, 1996, that you will assist this U. S. Nuclear Regulatory Commission regional office by serving as a physician consultant with respect to the apparent extremity overexposure described in Enclosure 1. A Charter detailing the tasks that should be completed under this contract is provided as Enclosure 2. (For misadministrations only: NOTE, you should not evaluate the appropriateness of the prescribed treatment or its medical effectiveness.) If you encounter difficulty in completing these tasks or identify additional tasks that should be performed, please contact Mr. Charles M. Hosey, Chief of the Materials Licensing and Inspection Branch 1, Region II, the NRC office contact for this matter. This individual should also be contacted if you believe that your involvement in the case would result in a possible conflict-of-interest situation. In addition, please note the information in Enclosures 3 and 4 regarding medical consultant liability and service with other Federal departments or agencies. Please notify Mr. Hosey if you are currently performing work for other Federal departments or agencies.

It is our understanding, based on a telephone conversation between you and Mr. Hosey on November 14, 1996, that you will not conduct an onsite visit. Your evaluation of the incident shall include a review of all pertinent documents available, regardless of whether an onsite visit is conducted.

The licensee, Professional Service Industries, has been notified by our office of your participation in this incident evaluation and has been asked to contact the individual's physician regarding your involvement in NRC activities.

Enclosure 5 contains a brief summary of the U. S. Department of Energy (DOE), Office of Epidemiology and Health Surveillance Long-Term Medical Study Program. DOE sponsors this life-time morbidity study of personnel involved in radiation incidents through The Radiation Emergency Assistance Center/Training Site (REAC/TS) of the Oak Ridge Institute of Science and Education (ORISE). NRC will provide information on the Study to the individual's physician or referring physician, after NRC has investigated the incident. However, you may want to discuss this information with the individual's physician or the referring physician.

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Please inform Mr. Hosey when you have completed the tasks specified in the Charter. A report of your findings and conclusions shall be provided to us within 30 calendar days of the completion of the case review unless there are extenuating circumstances which have been discussed with Mr. Hosey before the 30 day period ends.

Please follow the instructions provided in the Charter when preparing and submitting claims for reimbursement. These claims should be submitted on a monthly basis (Enclosures 6 and 7) but no later than 30 days after the completion of your report. You should submit your voucher to Mr. Hosey.

Thank you for your assistance in this matter. The NRC regional office contact for this case is Mr. Charles M. Hosey at (404) 331-5614, office facsimile at (404) 331-5559, or e-mail him at CMH1@NRC.GOV.

Sincerely,

(Original signed by L. Reyes)

Stewart D. Ebnetter  
Regional Administrator

Enclosures:

1. Preliminary Description of Incident
2. Physician Consultant Charter
3. Medical Consultant Liability
4. Restrictions on Service with Other  
Federal Departments or Agencies
5. Summary of U.S. Department of Energy  
Office of Epidemiology and Health  
Surveillance Long Term Medical Study Program
6. Medical Consultant Report
7. NRC Form 64/64A, "Travel Voucher"
8. NRC Form 148, "Voucher for Professional Services"

Distribution w/encls:

D. Serig, NMSS (with Enclosures 1 and 2)

OFFICE	R11-DNMS	R11-DNMS	R11-QRA			
SIGNATURE	<i>DMC</i>	<i>DMC</i>	<i>[Signature]</i>			
NAME	DCollins	DMallett	LReyes			
DATE	11 / 14 / 96	11 / 14 / 96	11 / 15 / 96	11 / / 96	11 / / 96	11 / / 96
COPY?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

OFFICIAL RECORD COPY

DOCUMENT NAME: S:\VRS\S\SIMED.DMC



## PHYSICIAN CONSULTANT CHARTER

### A. GENERAL INFORMATION

The U. S. Nuclear Regulatory Commission's authority and responsibility for conducting special inspections of radiation exposure incidents are provided under the Atomic Energy Act of 1954, as amended, and under the Energy Reorganization Act of 1974. The purpose of these inspections is to ascertain the facts and other related information surrounding the incident. This may involve the following tasks: determining the circumstances surrounding the incident and the root cause of the incident; evaluating the actions taken by the licensee at the time of the incident, in providing medical care to exposed persons; evaluating corrective actions taken by the licensee, to preclude future similar incidents; verifying or estimating dose to the exposed individual(s); evaluating the probable deterministic effects of the exposure; evaluating the notifications made by the licensee, and the licensee's follow-up plan, if available; and gathering evidence to support any necessary enforcement actions by NRC.

### B. SPECIFIC GUIDANCE AND TASKS TO BE PERFORMED

1. The physician consultant shall not do the following:
  - a. Enter into a physician-patient relationship with the exposed individual.
  - b. Provide medical opinions or recommendations to anyone other than NRC, without NRC's written permission, unless compelled by legal process to do so. To minimize the risk of liability, any recommendations made by a physician consultant should be accompanied by a disclaimer that the recommendation is not a substitute for the professional judgment of any physician involved with, or responsible for, the patient's or individual's care.
  - c. Recommend a particular expert. The physician consultant may indicate that the services of an expert are needed, and if asked, the consultant may identify, after consultation with NRC management, sources for identification and location of such experts. Recommendations will be in accordance with 5 CFR 2635.702, which prohibits Federal employees from using public office for the endorsement of any product, service, or enterprise. Information on 5 CFR 2635.702 is available from the regional contact listed in the cover letter.
  - d. Divulge or make known to the licensee, individual, individual's physician, or referring physician any official findings or conclusions resulting from the NRC inspection, without NRC's permission.



- e. Evaluate the appropriateness of the prescribed treatment, or its medical effectiveness.
- f. Volunteer advice about corrective actions to be taken by the licensee.

2. The physician consultant shall do the following:

- a. Provide an estimate of the radiation dose to the exposed individual based on effects observed, and the probable error associated with the estimation of the dose. If necessary, request that the licensee and/or individual's physician furnish information on medical history, physical examinations, and other pertinent laboratory work, etc.
- b. Assess any probable deterministic effects on the exposed individual.
- c. Evaluate the medical data provided by the exposed individual's physician and interpret the results for the NRC regional office staff; keep the NRC regional or Headquarters staff informed (as appropriate) of the medical condition of the individual.
- d. Prepare and submit to the NRC regional office, a report of findings and conclusions, within 30 calendar days of completion of the case review and/or site visit, unless there are extenuating circumstances. These circumstances should be communicated to NRC regional management as soon as they are discovered. If information is discovered that is directly relevant to a potential violation of NRC regulations, it should be promptly communicated to NRC.

The report may be submitted on the enclosed report form. If the enclosed form is not used to submit the findings, you shall, at a minimum, address the items listed on the form.

- e. Promptly prepare and submit NRC Form 148, "Voucher for Professional Services," to the NRC regional contact, indicating days/hours claimed. Per NRC Manual Chapter 4139, "Utilization of Consultants and Experts," these vouchers should be submitted monthly, when work is performed.
- f. Prepare and submit NRC Form 64/64A, "Travel Voucher," to the NRC regional contact for expenses incurred during days/hours worked in the region or Headquarters.

(NOTE: The regional offices shall make travel arrangements through an NRC travel request Form-279.)



- g. Evaluate the licensee's plan for the individual's follow-up, if available.

3. The physician consultant may consider performing the following:

Informing the individual's physician of the U.S. Department of Energy, Office of Epidemiology and Health Surveillance's Long-Term Medical Study Program. This life-time morbidity study of personnel involved in radiation incidents is maintained by the Radiation Emergency Assistance Center/Training Site (REAC/TS) of the Oak Ridge Institute of Science and Education (ORISE). Information on the Study is attached to the confirmation letter.

(NOTE: NRC will make the referring or individual's physician aware of the Study if the consultant does not inform the physician.)



## MEDICAL CONSULTANT LIABILITY

Medical consultants who are appointed as Special Government Employees are considered to be Federal employees. When a Federal employee is personally sued for a common law tort committed within the scope of employment, the United States will be substituted as the defendant pursuant to the Federal Tort Claims Act. Government counsel will defend the suit on behalf of the United States. The United States will be responsible for any damages that might be awarded. In addition, the consultant would have absolute personal immunity for injury or damage arising from common law torts. A Federal employee (including present and former employees) may also be provided personal representation by the Government in a proceeding in which he or she is sued, subpoenaed, or charged in his or her individual capacity, provided the actions for which representation is requested reasonably appear to have been performed within the scope of the employee's appointment, and representation is in the interest of the United States.

The consultant's provision of professional opinions and recommendations to the U. S. Nuclear Regulatory Commission does not constitute "practice of medicine" within the scope of State licensing laws, provided the consultant does not enter into a physician-patient relationship with the patient.



## RESTRICTIONS ON SERVICE WITH OTHER FEDERAL DEPARTMENTS OR AGENCIES

U. S. Nuclear Regulatory Commission policies and procedures for obtaining the services of consultants are defined in a Commission Directive.<sup>1</sup> The following information is contained in the Directive and has direct implications for the physician and scientific consultant.

### Service with Other Agencies

An employee who serves two or more Federal Departments or agencies is required to inform each of his or her arrangement(s) with the other. If the individual's appointments are made on the same date, the aggregate of the estimates of the days of services will determine the decision, by each agency, as to whether the individual is "Regular" or "Special." If, after being employed by one department or agency, a Special Government Employee is appointed by another agency, the second agency must make an estimate of the individual's days of service for the remaining portion of the 365-day period which was initiated by the first appointment. The sum of the estimate and of the actual number of days of service to other departments or agencies, during the prior portion of such 365-day period, will determine whether the individual is "Regular" or "Special." Close coordination between the agencies and the appointee must be maintained to insure that the 130-day limitation is not inadvertently exceeded.

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<sup>1</sup>Information taken from U.S. Nuclear Regulatory Commission, Management Directive Chapter 4139, "Utilization of Consultants, Members, and Other Advisory and Assistance Services," Part I, Appendix D, Paragraph 4.



SUMMARY OF U. S. DEPARTMENT OF ENERGY, OFFICE OF EPIDEMIOLOGY AND  
HEALTH SURVEILLANCE'S LONG-TERM MEDICAL STUDY PROGRAM

The Office of Epidemiology and Health Surveillance (OEHS) of the U. S. Department of Energy (DOE) sponsors a voluntary life-time morbidity study of personnel involved in radiation incidents, which is maintained by the Radiation Emergency Assistance Center/Training Site (REAC/TS). This study includes the gathering of clinical and epidemiological data at an early stage, after a significant exposure to radiation, and continues throughout the lifetime of the individual involved. The purpose of this study is to compile the best human radiobiological data available for improving immediate medical care, to develop the best prophylactic and anticipatory care for possible late effects, and to upgrade the bases for radiation risk estimates.

Persons sought to participate in the study are those involved in a radiation incident or misadministration during which one or more persons received radiation exposure that equals or exceeds the selection criteria listed in the accompanying table. If a willingness is expressed by an individual to participate in the study, direct contact with the individual will be made by the DOE contractor at which time the details of the program will be explained fully, a consent form will be signed, and a schedule for future contacts will be arranged.

Generally, the follow-up program will consist of obtaining copies of all medical records associated with the treatment of the individual, immediately after the incident, and then annual contacts with the individual, to follow his/her medical history. Initially, the types of information sought will include a complete medical history before and after the incident or misadministration, and copies of all relevant hospital, laboratory, and physicians' records covering the period of observation. The annual contact will be made to determine whether the individual has had any illnesses or physical examinations during the year, and to obtain additional medical records as they appear to relate to the radiation exposure.

Participation in the follow-up program is totally voluntary and individuals may stop their participation at any time. The medical information obtained during participation is covered by legal constraints, to protect the identity and privacy of living participants. Any expenses involved in providing medical records to the follow-up program are borne by the DOE long-term medical study program and not the individual. Any expenses for either short- or long-term medical care of the individual are the responsibility of the program participant and not the responsibility of DOE, Oak Ridge Institute for Science and Education, or REAC/TS.



Medical Consultant Name: _____ Date: ____/____/____  Signature: _____	Report
Licensee Name: _____ No. _____ Facility Name: _____  Individual's Identification No.: _____  Incident Date: ____/____/____  Individual's/Patient's Physician Name and address: _____ _____ _____ _____	License
Individuals Contacted During Investigation: _____ (Name and Title) _____ _____ _____ _____	
Records Reviewed: (General Description)	



Estimated Dose to Individual or Target Organ: \_\_\_\_\_

Probable Error Associated with Estimation: \_\_\_\_\_

Prescribed Dose (Medical Misadministration Only): \_\_\_\_\_

Method Used to Calculate Dose: \_\_\_\_\_

Description of Incident:

Assessment of probable deterministic effects of the radiation exposure on the individual:



Briefly describe the current medical condition of the exposed individual:

Was individual or individual's physician informed of DOE Long-Term  
Medical Study Program?

Y            N

If yes, would the individual like to be included in the Program?

Y            N



NRC FORM 148  
(2-95)  
NRCMD 10.1

U.S. NUCLEAR REGULATORY COMMISSION

UNIT (OC use only)

## VOUCHER FOR PROFESSIONAL SERVICES

## INSTRUCTIONS

This form shall be completed by all NRC consultants for claiming compensation for official authorized personnel services. A signed original and two copies shall be submitted to the NRC office authorizing the service.

TO: U. S. Nuclear Regulatory Commission			FROM: NAME OF CLAIMANT		
ATTENTION: NRC OFFICE AUTHORIZING THIS SERVICE			STREET ADDRESS		
			CITY	STATE	ZIP CODE
CITY	STATE	ZIP CODE	SOCIAL SECURITY NUMBER		

DESCRIPTION OF CLAIM  
(All blocks must be completed)

CONTRACT:	NUMBER	DATE	AMOUNT CLAIMED	
PERIOD COVERED (Dates)	FROM	TO	DOLLARS	CENTS
SERVICES PERFORMED (Itemize on reverse)	NUMBER OF DAYS	PER DAY @ \$		
	NUMBER OF HOURS	PER HOUR @ \$		
RETIRED ANNUITANT	YES NO	TOTAL AMOUNT CLAIMED		

## CERTIFICATION

I CERTIFY that the above account is accurate and true in all respects; that my statement of services correctly sets forth the services on official business; that the payment therefor has not been received; and that no compensation for any of the time shown above is payable from or will be claimed from any other source of the Federal Government or its cost-reimbursable contractors.

## OFFICE OF THE CONTROLLER USE ONLY

DIFFERENCE

AMOUNT  
VERIFIED  
CORRECT

SIGNATURE - CLAIMANT

DATE

SIGNATURE

DATE

## APPROVAL

I CERTIFY that the above claim is accurate; that the above services were officially requested and performed; and that the expenses claimed are authorized.

SIGNATURE - APPROVING OFFICER

DATE

## METHOD OF PAYMENT

(Claimant -- Check one block)

The Government Management Reform Act of 1994 requires agencies to use Direct Deposit via Electronic Funds Transfer as the method for making recurring Federal wage and salary payments.

☐ DIRECT DEPOSIT FORM SF 1199A ATTACHED☐ DIRECT DEPOSIT FORM PREVIOUSLY SUBMITTED☐ TREASURY CHECK (For one-time payments only)



[illegible]

## PRIVACY ACT STATEMENT

Pursuant to 5 U.S.C. 552a(a)(3), enacted into law by section 3 of the Privacy Act of 1974 (Public Law 93-579), the following statement is furnished to individuals who supply information to the Nuclear Regulatory Commission on NRC Form 148. This information is maintained in a system of records designated as NRC-21 and described at 58 *Federal Register* 36468 (July 7, 1993); or the most recent *Federal Register* Document Room, Guitman Building, 2120 L Street NW, Lower Level, Washington, D.C.

1. AUTHORITY: 21 U.S.C. 718, 1114, 3325, 3511 (1988); Executive Order 9397 dated November 22, 1943.

2. **PRINCIPAL PURPOSE(S):** information entered on this form is used to estimate payment for authorized blame for compensation of services rendered by government consultants.

3. ROUTINE USES. Information on this form is used for transmittal to the U.S. Treasury for payment. It may also be disclosed to the IRS, state and local taxing authorities, Social Security Administration, labor unions, insurance carriers, OPM, or charitable institutions concerning any authorized withholdings or deductions. Information may be disclosed to an appropriate Federal, State, local, or Foreign agency in the event the information indicates a violation or potential violation of law and in the course of an administrative or judicial proceeding. In addition, the information may be transferred to an appropriate Federal, State, local and Foreign agency to the extent relevant and necessary for an NRC decision about you.

or to the extent relevant and necessary for that agency's decision about you. Information from this form may also be disclosed, in the course of discovery under a protective order issued by a court of competent jurisdiction, and in presenting evidence, to a Congressional office to respond to their inquiry made at your request, or to NRC-paid experts, consultants, and others under contract with the NRC, on a need-to-know basis.

4. WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON ON INDIVIDUAL OF NOT PROVIDING INFORMATION: It is voluntary that you furnish the requested information. If the information is not furnished, you may be denied an identification badge and access to NRC controlled areas.

6. SYSTEM MANAGER AND ADDRESS:  
Chief, Payroll Branch  
Division of Accounting and Finance  
Office of the Controller  
U.S. Nuclear Regulatory Commission  
Washington, DC 20555 0001



95)  
 (CAND 14.1  
 caption to SF 1012  
 approved by NARS 10-81

## TRAVEL VOUCHER (PART 1)

FOLLOW INSTRUCTIONS ON REVERSE OF FORM SET

NAME (Last, First, Middle Initial)

OFFICE TELEPHONE

MAILING ADDRESS (Include ZIP Code)

OFFICIAL DUTY STATION (City and State)

10. RESIDENCE (City and State)

11. TYPE OF TRAVEL	12. METHOD OF PAYMENT	13. AIRLINE ACCOMMODATIONS	14. LEAVE TAKEN	15. COMPARATIVE TRAVEL
CONUS/DOMESTIC	CHECK	FIRST CLASS	ANNUAL	
NONFOREIGN OUTSIDE CONUS	CASH (NTE \$100)	OTHER PREMIUM CLASS	SICK	
FOREIGN	ELECTRONIC FUNDS TRANSFER	FREE UPGRADE	OTHER	
COS		NON-CONTRACT		

5. TRANSPORTATION METHOD OF PAYMENT  
 QTR/GTS ACCT/GOVT ISSUED CARD/CASH  
 (Identify below)

17. CARRIER

18. TRANSPORTATION  
 QTR OR TICKET  
 NUMBER

19. AMOUNT

20. EXPENSES CLAIMED  
 (FROM NRC FORM 64A OR NRC FORM 64B)  
 EXPENSES AMOUNT CLAIMED

A. SUBSISTENCE AND OTHER EXPENSES

B. PLANE, TRAIN, BUS (PAID BY TRAVELER)

C. REGISTRATION FEE

D. TOTAL CLAIM

24. TRAVEL ADVANCE

TOTAL ADVANCE  
 RECEIVED  
 (Traveler Must Complete)

FOR EXAMINER USE

AMOUNT TO BE APPLIED

BALANCE DUE

NET TO TRAVELER

27. EXAMINER'S ADJUSTMENTS

EXAMINED BY

DATE

25. I CERTIFY THAT THIS VOUCHER IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT PAYMENT OR CREDIT HAS NOT BEEN RECEIVED BY ME.

SIGNATURE - TRAVELER \*

DATE

26. THIS VOUCHER IS APPROVED. LONG DISTANCE TELEPHONE CALLS, IF ANY, ARE CERTIFIED AS NECESSARY IN THE INTEREST OF THE GOVERNMENT.

SIGNATURE - APPROVING OFFICIAL \*\*

DATE

8. TRAVELER DESIGNATION

DESIGNATE \_\_\_\_\_ TO RECEIVE CASH PAYMENT OF THIS TRAVEL VOUCHER. I ACCEPT RESPONSIBILITY FOR THE PAYMENT ONCE THE IMPREST FUND CASHIER PROPERLY DISBURSES THE CASH TO MY DESIGNEE.

SIGNATURE - TRAVELER

DATE

28. CASH PAYMENT OF TRAVEL VOUCHER (For Cashier Use)

RECEIVED CASH IN  
 THE AMOUNT OF: \$

FOR

SIGNATURE

DATE

NRC BADGE NUMBER

30. THIS VOUCHER IS CERTIFIED CORRECT AND  
 PROPER FOR PAYMENT

SIGNATURE - AUTHORIZED CERTIFYING OFFICER

DATE

31. ACCOUNTING CLASSIFICATION (For Division of Accounting and Finance Use)

A. COST	B. PURPOSE CODE	C. BFY	D. COST ORGANIZATION CODE	E. JOB CODE	F. (2110-S) SUBSISTENCE AND OTHER	G. (2120-D) COMMON CARRIER	H. (235C-U) REGISTRATION FEE	I. TOTAL
DOMESTIC								
FOREIGN								

\* Fraudulent Claim - Falsification of an item in an expense account works a forfeiture of the Claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment of not more than 5 years or both (18 U.S.C. 287, id. 1001)

\*\* If long distance telephone calls are included, the Approving Official must have been authorized in writing by the head of the Department or Agency to so certify (31 U.S.C. 660a).



(12-83)  
NRCHD 14.1  
Exception to SF 1012  
Approved by NARS 10-81

TRAVEL VOUCHER (PART 2)  
SCHEDULE OF EXPENSES AND AMOUNT CLAIMED  
FOLLOW INSTRUCTIONS ON REVERSE OF FORM SET

NAME	AUTHORIZATION NO	DEPART FROM OFFICE		
		DATE (MM/DD/YY)	TIME	
				A.M.
			P.M.	

[illegible]

SEE REVERSE OF PAYEE COPY  
FOR PRIVACY ACT STATEMENT  
NRC FORM 64A (12-93)

**GRAND TOTAL** (Amount to be shown in Item 20.D, Part 1)

ORIGINAL