

2012 Scientific Advisory Committee Meeting  
Anthony's at Columbia Point, Richland, WA  
September 7 - 8, 2012

## 2011 SAC Recommendations and 2012 Overview



**Sergei Y. Tolmachev, Ph.D.**

*USTUR Director*

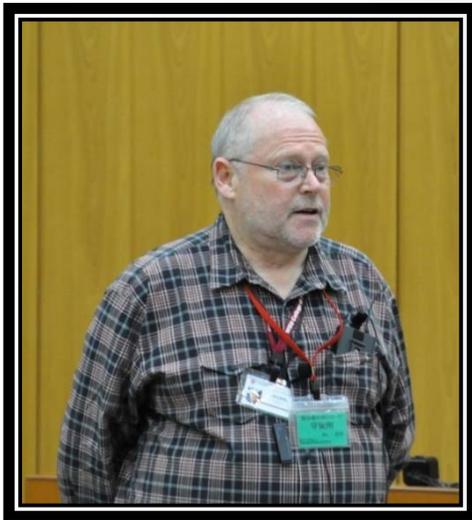
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*“Learning from Plutonium  
and Uranium Workers”*

## July 20, 2011

- 2011 Scientific Advisory Committee Meeting



Anthony Clive James  
(May 14, 1943 – July 20, 2011)



## USTUR Core Functions (DOE)

- Accepting and processing future Registrant donations.
- Completing radiochemical analysis of previous Registrant donations.
- Completing the development and population of USTUR databases.



## 2011 SAC's Recommendations

- Following the 2011 Annual Meeting, the SAC made 10 specific recommendations/comments.



## Recommendation #1

- The USTUR needs to focus DPTA research on the possible effectiveness of removing Pu from the liver.



# Collaboration with Karlsruhe Institute of Technology

Dr. Bastian Breustedt



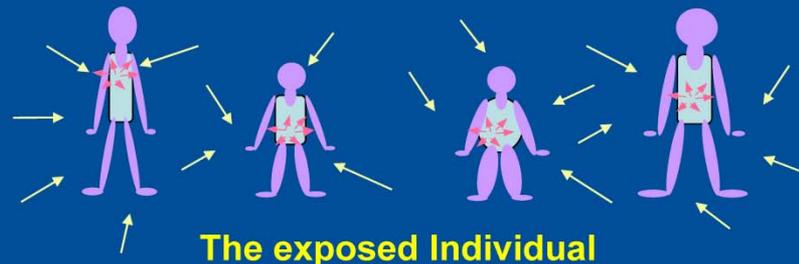
# Research on Chelation Therapy



## Biokinetic modeling of chelation therapy for Am-241 USTUR Case 0846

Bastian Breustedt (KIT) Stacey L. McCord (USTUR) Sergei Y. Tolmachev (USTUR)

Institute for nuclear waste disposal



KIT – Universität des Landes Baden-Württemberg und  
nationales Forschungszentrum in der Helmholtz-Gemeinschaft

[www.kit.edu](http://www.kit.edu)



## Recommendation #2

- Biokinetic modeling support may be needed in order to address the use of data and medical management issues. This specifically involves maintaining professional contact with Dr. Alan Birchall, U.K., to conduct biokinetic modeling of USTUR data.



## **New Faculty/SOLO Project**

Dr. Maia Avtandilashvili

Dr. Alan Birchall



## New USTUR Member

- Dr. Maia Avtandilashvili (Research Associate)
  - ✓ PhD from Idaho State University (2011)
  - ✓ Standardization of Exposure Records and Bioassay Data – Health Physics Database
  - ✓ USTUR Case Analysis (IMBA)



## HPA/SOLO Project

- Grant from Health Protection Agency (UK) “*to quantify the fraction of the initial deposited activity which is still retained in the upper airways due to binding ( $f_b$ ), taking account of particle transport from the deep lung; and characterize the deposited activity in terms of its particulate or diffuse nature in bronchial epithelium, lung parenchyma and lymph nodes.*”
- Period: October 1, 2012 – July 30, 2013.
- Budget: €16,000 (\$20,992) – Funded.



## Recommendation #3

- Care needs to be given to time prioritization so that USTUR staff do not “burn out,” and in order to continue the quality work that the USTUR is currently conducting.



# Tasks Prioritizations

Maia Avtandilashvili, Stacey McCord  
Sergei Tolmachev



## Recommendation #4

- The USTUR should continue the emphasis on recruiting new donors. *New donors would increase the number of available subjects and provide fresh tissues that can be preserved in different ways to obtain the best possible data.*



# What is the Mechanism?

Stacey McCord/Sergei Tolmachev



## Opportunities to Recruit

- Contact through DOE.
- Professional communications.
- Communication with ‘inactive’ Registrants.
- Publishing information in Homesteader’s newsletter(s).



## New Registrants in 2011 - 2012

- Case 0820 (whole-body) - through DOE.
- Case 0587 (partial-body) - 'reactivation'.
- ✓ *In contact with Savannah River Site Dosimetry Group to recruit potential Registrant with  $^{238}\text{Pu}$  wound.*



## Recommendation #5

- The goal of the Registries should continue to be expanded beyond solely radionuclide exposures by evaluating effects from chemicals, asbestos, beryllium, and smoking to give support to what the USTUR is doing.



# Collaboration with Laval University

Prof. Dominic Larivière



# Beryllium Detection by ICP-MS

Anal Bioanal Chem (2012) 403:409–418  
DOI 10.1007/s00216-012-5837-6

ORIGINAL PAPER

## Detection of beryllium in digested autopsy tissues by inductively coupled plasma mass spectrometry using a high matrix interface configuration

Dominic Larivière · Mélodie Tremblay ·  
Myriam Durand-Jézéquel · Sergei Tolmachev

Limit of Detection = 3 pg g<sup>-1</sup>

**Table 3** Concentration of Be in digestate and wet tissues from several USTUR cases measured by ICP-MS—see attached tables

| Tissue/organ description | Donation type | Time of exposure <sup>a</sup> , y | Weight, g |          | <sup>9</sup> Be concentration |                             |  |
|--------------------------|---------------|-----------------------------------|-----------|----------|-------------------------------|-----------------------------|--|
|                          |               |                                   | Tissue    | Solution | Solution, pg g <sup>-1</sup>  | Tissue, µg kg <sup>-1</sup> |  |
| Case 0262                |               |                                   |           |          |                               |                             |  |
| Lung (L)                 | WB            | 8                                 | 433.5     | 400.1    | 227±7                         | 0.210±0.006                 |  |
| LN Peribronchial         |               |                                   | 18.1      | 300.0    | 373±4                         | 6.18±0.07                   |  |
| Femur (R) MS             |               |                                   | 155.8     | 600.0    | 4±1                           | 0.015±0.003                 |  |
| Case 0425                |               |                                   |           |          |                               |                             |  |
| LN Hilar                 | WB            | 23                                | 6.5       | 177.1    | 300±3                         | 8.17±0.08                   |  |
| Femur (R) MS             |               |                                   | 95.4      | 507.2    | 19±1                          | 0.101±0.005                 |  |
| Case 0706                |               |                                   |           |          |                               |                             |  |
| Lung (R)                 | WB            | 6                                 | 389.7     | 1075.6   | 1326±6                        | 3.66±0.02                   |  |
| LN Pulmonary             |               |                                   | 2.1       | 325.0    | 382±2                         | 59.11±0.3                   |  |
| Hair                     |               |                                   | 14.8      | 232.8    | 18.4±0.4                      | 0.289±0.005                 |  |
| Femur (R) MS             |               |                                   | 133.7     | 653.9    | 825±4                         | 4.03±0.02                   |  |
| Case 0720                |               |                                   |           |          |                               |                             |  |
| Lung (R)                 | WB            | 23                                | 606.1     | 500.0    | 126±2                         | 0.104±0.002                 |  |
| LN Hilar (R)             |               |                                   | 4.0       | 427.3    | 969±16                        | 103.5±1.7                   |  |
| LN Paratrechial          |               |                                   | 6.9       | 100.0    | 4928±54                       | 71.4±0.8                    |  |
| Femur (R) MS             |               |                                   | 124.3     | 558.5    | 21±1                          | 0.094±0.004                 |  |
| Case 0744                |               |                                   |           |          |                               |                             |  |
| Lung (R)                 | WB            | 3                                 | 60.3      | 166.2    | 9.0±0.1                       | 0.025±0.001                 |  |
| LN Pulmonary             |               |                                   | 1.4       | 250.0    | 1427±17                       | 255±3                       |  |
| Femur (R) MS             |               |                                   | 155.6     | 813.9    | 19±4                          | 0.10±0.02                   |  |
| Case 0817                |               |                                   |           |          |                               |                             |  |
| Lung (R)                 | PB            | 38                                | 313.0     | 997.2    | 25.6±1.5                      | 0.082±0.005                 |  |
| Femur (R) MS             |               |                                   | 162.6     | 933.1    | 27.7±1.3                      | 0.159±0.007                 |  |
| Case 1002                |               |                                   |           |          |                               |                             |  |
| Femur (R) MS             | WB            | 27                                | 146.7     | 600.0    | 8±1                           | 0.033±0.004                 |  |

R right side, L left side; MS middle shaft; WB whole body; PB partial body

<sup>a</sup> Self-reported years of exposure



# Beryllium in Human Body



USTUR-0340-12A

Beryllium in a Human Body: USTUR 0706 Case Study

Sergei Y. Tolmachev<sup>†</sup>, Stacey L. McComish<sup>†</sup> and Dominic Larivière<sup>‡</sup>

<sup>†</sup>U.S. Transuranium & Uranium Registries, Washington State University, Richland, USA

<sup>‡</sup>Department of Chemistry, Laval University, Quebec, Canada

In order to study the distribution and biokinetics of beryllium (Be) in a human body, Be concentrations were measured in autopsy tissue samples taken from a USTUR whole-body donor (Registrant). The Registrant self-reported chronic exposure to Be for 6 years during his work within the U.S. DOE complex. Beryllium was analyzed in 114 acid-digested tissue samples by inductively coupled plasma mass spectrometry (ICP-MS) using a high matrix interface configuration. With an ICP-MS detection limit of  $0.003 \mu\text{g kg}^{-1}$  of solution, Be was measured in 100 digested tissue samples (acid solutions). The Be concentration in human tissues ranged from  $0.007$  (brain) to  $50.8$  (pulmonary lymph node)  $\mu\text{g kg}^{-1}$  of wet tissue. The Be concentrations in the lung, liver, and skeleton were found to be  $3.65 \pm 0.02$ ,  $10.2 \pm 0.1$  and  $2.84 \pm 0.01 \mu\text{g kg}^{-1}$ , respectively. It was found that Be in human body primarily accumulated in the skeleton, followed by deposition in the liver and lungs. The lung:liver:skeleton ratio of total Be content in the organs was estimated to be 1:4:7. Currently, the USTUR retains frozen tissues and acid solutions from additional 5 whole-body donors who were potentially exposed to Be in the workplace.



# Collaboration with Tetra Tech Sciences

Dr. Herman Gibb



## Mesothelioma Study

- A grant proposal titled: “Proportionate Mortality Ratio Analysis of the United States Transuranium and Uranium Registries” was submitted to DOE.
- The requested budget was \$52,105. The grant was not funded.
- The work was still carried out by USTUR and Tetra Tech Sciences personnel.
- Results will be presented by Dr. Herman Gibb.



## Recommendation #6

- A Data Quality Objective (DQO) document needs to be prepared to address how laboratories (outside and inside the Registries) will be required to report data as well as minimum quality assurance (QA) requirements and documentation.



## Recommendation #7

- An emphasis for future direction should be on cellular and molecular radiobiology using fresh tissue samples to investigate gene expression or other effects in exposed workers.



## **Collaboration with PNNL**

Mr. Chris Nielsen

Dr. William Morgan



# Immunohistochemistry and Real-Time PCR Analysis

- Analysis - to determine genetic and inflammatory response pathways following plutonium exposure:
  - ✓ Possible pathways - tissue injury, apoptosis, and gene expression modifications.
- Immunohistochemistry - to characterize lung lesions, visualize interstitial fibrosis, and other pathology.
- RT-PCR - to quantify the expression of chemokine/cytokine regulatory genes thought to be involved in inflammation and carcinogenesis:
  - ✓ BCL-2, CASP-3, FASL, IL4, IL8 and TGF $\beta$ -1.



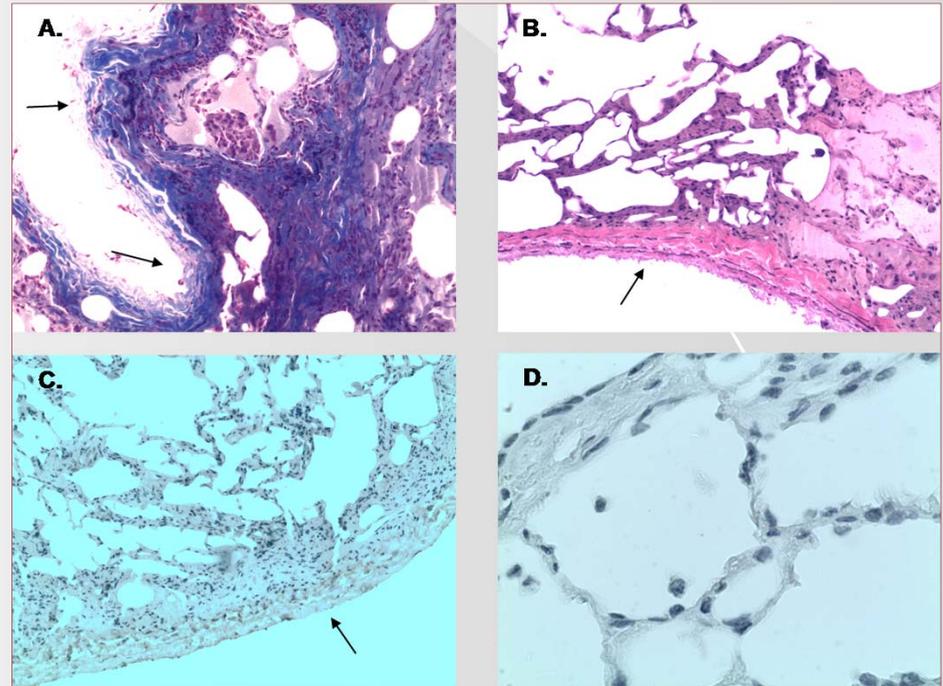
# Immunohistochemistry of Lungs

**A.** Trichrome staining collagen fiber increased in sub-pleural regions.

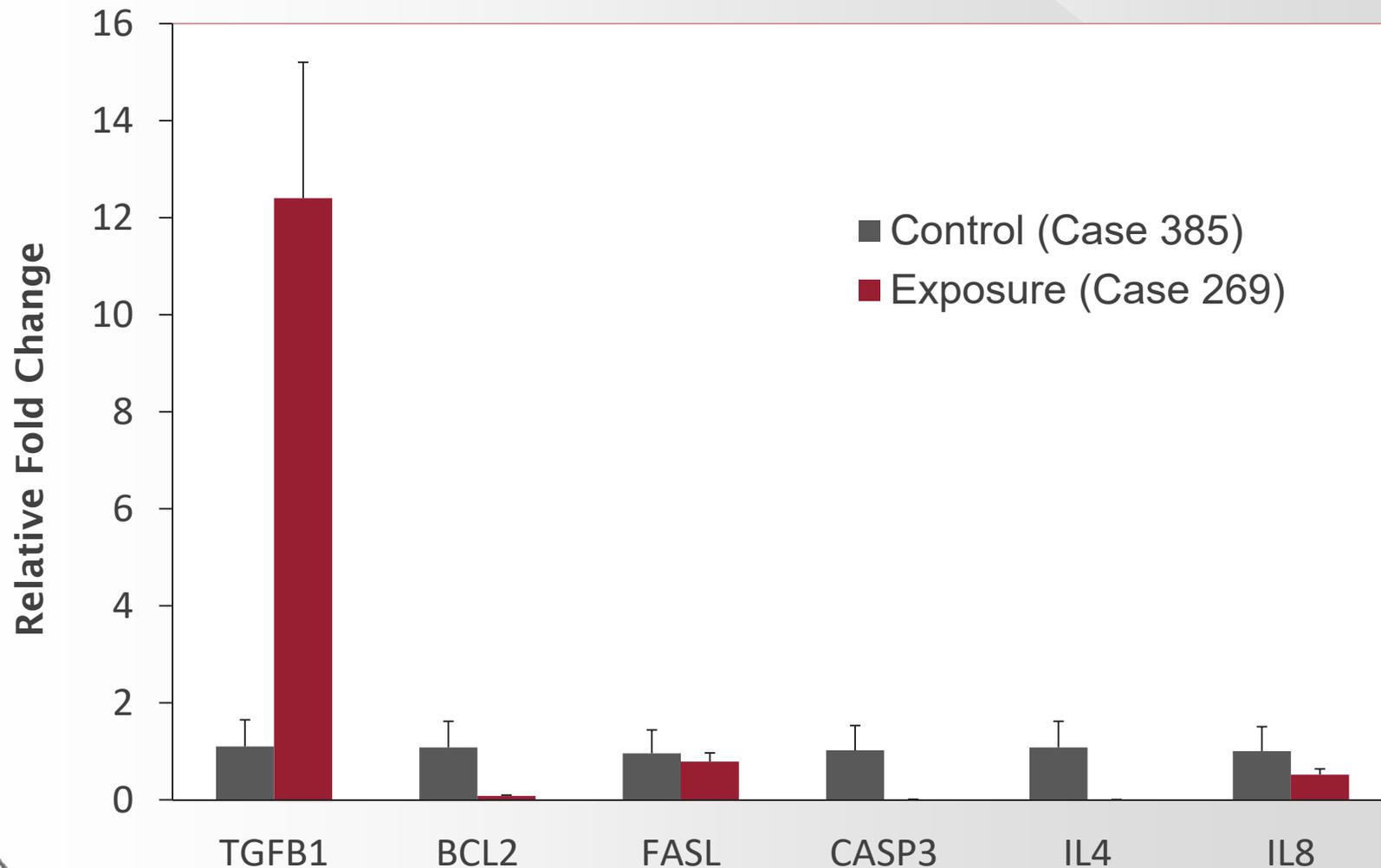
**B.** Elastic staining for elastic fibers. Increases in elastic fiber in areas of visceral pleural and arterial walls.

**C.** TGF $\beta$ 1 antibody staining. TGF $\beta$ 1 signaling indicated in brown. TGF $\beta$ 1 receptors are overexpressed under pleural pulmonary parenchyma, regions of interstitial fibrosis, and epithelium cells of AI.

**D.** TGF $\beta$ 1 antibody staining in control human lung tissue. Negative expression of TGF $\beta$ 1.



# Quantification of Apoptosis and Cytokine Regulatory Genes



## Recommendation #8

- DOE and WSU should continue working on a documented arrangement for long-term storage and ownership of samples.  
*Resolution of this matter would free the USTUR from concern over such issues.*



# Who Owns the Materials?

Sergei Tolmachev/ Joey Zhou



## Recommendation #9

- A plan for the long-term disposition of digested samples needs to be developed. This plan needs to consider future research needs and investigate options for disposal.



# Full Inventory of NHRTR

Sergei Tolmachev/Stacey McCord

## Storage Area: Acid Solutions



10,000+ dissolved tissue samples are available for future research



# Repackaging of Acid Solutions



Re-packaging shelter



Inside the shelter



Corrugate plastic box



Absorbent mat



Paraffin wax-sealed bottles



Ready to be boxed



# THEMIS Inventory and Storage



Electronic inventory of the acid samples



New storage area



## Recommendation #10

- External dosimetry and other compiled data need to be maintained in the database.



# Improvement of the Health Physics Database Interface

Stacey L. McCord



# New Features - External Dose

**United States Transuranium and Uranium Registries**

Case No: **0785** **Find Case**

Admin Medical Rad Chem **Health Physics** Clinical Pathology Next of Kin

### Bioassay Summary

| Monitoring Type | Count |
|-----------------|-------|
|                 |       |
|                 |       |
|                 |       |

OLD Health Physics Database Case Entry Summary

**Lifetime and Yearly External Dose**

### Detailed Data

|            |          |
|------------|----------|
| Urine      | Feces    |
| Blood      | Skeleton |
| Lung       | Liver    |
| Wound      | WBC      |
| All Data   |          |
| Enter Data |          |

Notes:

Intake Type: **Mixed: Inhalation(s)/Wound(s)**

### External Data for PMR/PCMR Study (Gibb et al.)

This data was collected for and used in a collaborative study between Tetra Tech Sciences and the USTUR during 2010-11. As such, it does not include registrants who deceased after mid-2010.

Case No: **0785** Dose Quantity: Pen  
 Lifetime Dose, mSv: 29.65 Source: Yrly Dose Rpts

| Year | Dose     |
|------|----------|
| 1956 | 1.05E+00 |
| 1957 | 2.80E+00 |
| 1958 | 0.00E+00 |
| 1959 | 2.00E-01 |
| 1960 | 0.00E+00 |
| 1961 | 1.00E-01 |
| 1962 | 2.50E-01 |
| 1963 | 6.50E-01 |
| 1964 | 4.50E-01 |
| 1965 | 2.62E+00 |
| 1966 | 5.40E+00 |
| 1967 | 0.00E+00 |
| 1968 | 2.40E-01 |
| 1969 | 0.00E+00 |
| 1970 | 1.60E-01 |
| 1971 | 1.66E+00 |
| 1972 | 1.79E+00 |
| 1973 | 1.03E+00 |
| 1974 | 5.49E+00 |
| 1975 | 2.01E+00 |
| 1976 | 1.00E-01 |
| 1977 | 9.90E-01 |
| 1978 | 7.00E-02 |
| 1979 | 1.40E-01 |
| 1980 | 0.00E+00 |

Notes:

Pen = G + N

The measurements used in this study reflected three types of whole body radiation: gamma, x-ray, and neutron. When doses from these three types of radiation were individually available, the external dose was calculated using the sum: gamma + 35% x-ray + neutron. When a registrant's dose record contained only a single combined dose, the combined dose was used without modification. Dose that was not recorded by the worksite, such as missed neutron dose, was not accounted for. Both lifetime and annual external radiation doses were summarized for each Registrant.

The results of this study will be published in the American Journal of Public Health:  
 Gibb H., Fulcher K., Nagarajan S., McCord S., Hoffman H., Fallhian N.A., Tolmachev S. A PMR and PCMR Analysis of Radiation and Mesothelioma in the United States Transuranium and Uranium Registries. American Journal of Public Health. (Accepted for publication, 2012)

# New Features – Chemical Exposure

The screenshot shows the USTUR PCMR External interface. The main window displays the 'United States Transuranium and Uranium Registries' for Case No. 0785. The 'Intake Type' is 'Mixed: Inhalation(s)/Wound(s)' and the 'Contaminant(s)' is 'Pu-239'. The 'Chemical Exposure' tab is highlighted with a red box. A red arrow points from this tab to a detailed view of the 'CHEMICAL EXPOSURE' section on the right.

**CHEMICAL EXPOSURE**

|                       |   | From     | To         |
|-----------------------|---|----------|------------|
| Beryllium             | Y | 1/1/1956 | 12/31/1988 |
| Chlorinate Solvents   | Y | 1/1/1956 | 12/31/1988 |
| Other Toxic chemicals | Y | 1/1/1956 | 12/31/1988 |
| Asbestos              | Y | 1/1/1956 | 12/31/1988 |
| Benzene, Toluene      | Y | 1/1/1956 | 12/31/1988 |

Self-reported work with, work around, or exposure to chemicals taken from USTUR questionnaires. A questionnaire was completed at intake and in 5-y intervals after intake.

**ASBESTOS RISK**

**Elevated Risk?** Y

**Classification Code:** 1-A

**Detailed Risk Information** Self-reported work with or exposure to Asbestos

This assessment of elevated risk for asbestos exposure is the product of an epidemiology study conducted with Herman Gibb, Tetra Tech Sciences, in 2010-11. Cases were classified as at an elevated risk or at low risk based upon self-reported "work with," "work around," or "exposure to" asbestos and beryllium. Further assessment of risk was conducted by determining if the Registrant had ever worked in an 'at-risk' occupation (e.g. plumber or electrician). At-risk occupations were identified primarily from Peto et al. 2009.



# New Features – Asbestos Risk

USTUR PCMR External **Chemical Exposure**

**CHEMICAL EXPOSURE**

|                       |   | From     | To         |
|-----------------------|---|----------|------------|
| Beryllium             | Y | 1/1/1956 | 12/31/1988 |
| Chlorinate Solvents   | Y | 1/1/1956 | 12/31/1988 |
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USTUR PCMR External Chemical Exposure **Chemical Exposure**

**ASBESTOS RISK**

Elevated Risk?  Y 0785

Classification Code: 1-A ? Self-reported work with or exposure to Asbestos

Occupations:

Work Areas:

This assessment of elevated risk for asbestos exposure is the product of an epidemiology study conducted with Herman Gibb, Tetra Tech Sciences, in 2010-11. Cases were classified as at an elevated risk or at low risk based upon self-reported "work with," "work around," or "exposure to" asbestos and beryllium. Further assessment of risk was conducted by determining if the Registrant had ever worked in an 'at-risk' occupation (e.g. plumber or electrician). At-risk occupations were identified primarily from Peto et al. 2009.

Basis:

Edit Record



# 2012 Activities Overview



## From McCord to McComish



*July 14, 2012, Tri-Cities  
Our Congratulations to Stacey and Colin!*



## 2012 Overview

- Management and Operation
- In-house Radiochemistry
- Intramural Research Project
- Extramural Collaborations
- Professional Activities/Services
- Presentations/Publications



# Management Changes

- Department of Energy Changes
  - ✓ New 5-y grant cycle: April 2, 2013 – March 31 2017 (FY2013 – 2017). FY2012 was 6 months.
  - ✓ Starting in FY2013, granted funds are directly allocated from DOE HQ in DC to the WSU/COP instead of being routed through the DOE Consolidated Business Center in Cincinnati.
- College of Pharmacy Changes
  - ✓ Non-departmental research units are reporting through the College's Associate Dean of Graduate Education and Scholarships.

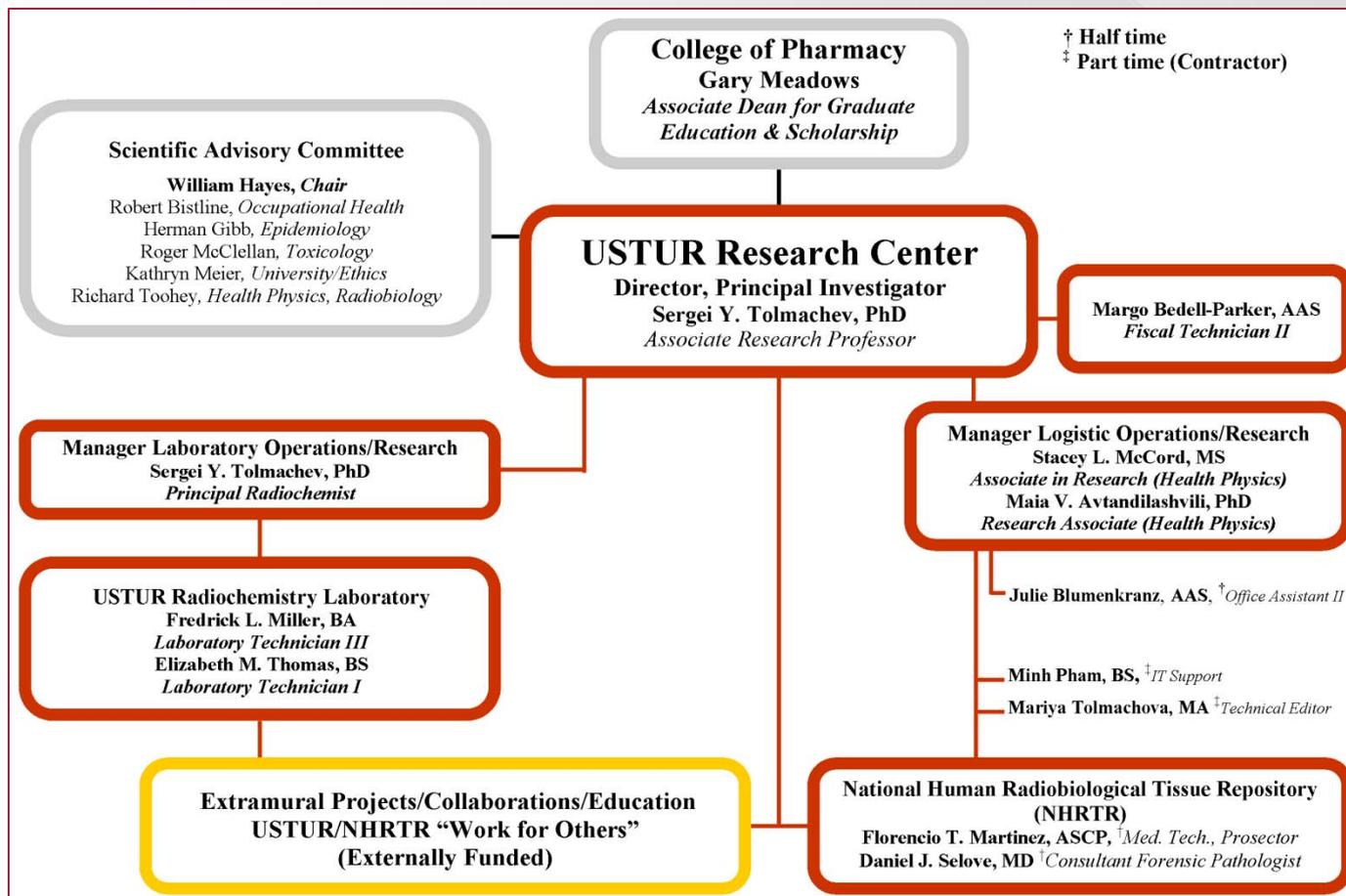


## FY2013 – 2017 Grant Proposal

- New 5-y grant proposal to manage and operate the USTUR was submitted to DOE/HS-13.
- Period: April 1, 2012 – March 31, 2017 (FY2013 – 2017)
- Requested budget: \$6,048,665.
- The FY2013 – 2017 requested budget was almost the same as that proposed for FY2010 – 2015: \$6,016,096.
- Revised FY2013 – 2017 budget: \$4,500,000



# USTUR Organization Structure



# In-House Radiochemistry

- Personnel:
  - ✓ New Lab Tech I Elizabeth M. Thomas
  - ✓ Total, FTE 2 (EMT, FLM)
- Activities:
  - ✓ Tissue sample ashing/digestion/dissolution (microwave/hot-block)
  - ✓ Optimization of electrodeposition procedure
  - ✓ Updating of SOPs
  - ✓ Upgrading  $\alpha$ -spectrometry system
  - ✓ Actinide Analysis by ICP-MS at NAU



# Improvements in Sample Preparation



**RRMC 2012**  
Fort Collins, Colorado  
October 29 - November 2, 2012

## USTUR-0339-12A

### **Application of Microwave-Assisted Techniques for Human Tissue Samples Preparation for Actinide Analysis**

F. L. Miller, E. M. Thomas, S. Y. Tolmachev

United States Transuranium and Uranium Registries, College of Pharmacy,  
Washington State University, 1845 Terminal Drive 201, Richland, WA 99354, USA

This paper describes the application of microwave-assisted drying and digestion procedures using an Anton Paar Multiwave 3000 microwave system (MW3000), equipped with a Rotor DRY1 (RD1) for drying, and a Rotor 8 (R8) for digestion.



# 'Best Bone' Project

WASHINGTON STATE  
UNIVERSITY  
*World Class. Face to Face.*

Slide 1

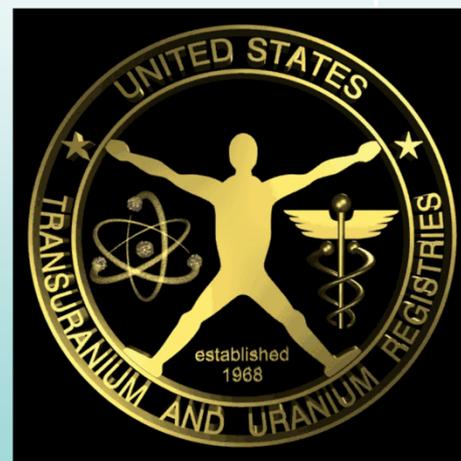
European Radiation Dosimetry Group  
(EURADOS) WG7 Plenary Meeting  
Gent, Belgium, 14-16 September, 2011

## From Single Bone Analysis to Total Skeleton Content

S.Y. Tolmachev & A.C. James

*U.S. Transuranium and Uranium  
Registries, 1845 Terminal Drive  
Suite 201, Richland, WA 99354*

[stolmachev@tricity.wsu.edu](mailto:stolmachev@tricity.wsu.edu)



*"Learning from Plutonium and  
Uranium Workers"*



## Goal – Task – Benefits

- Goal: *Precise estimation of skeleton content based on a limited number of bone analyses (partial-body donor, biopsy.)*
- Task: *Define the ‘best bone’ (or group of bones) for the estimation of total actinide content in the skeleton.*
- Benefits: *Reduction of uncertainties when estimation actinide content from partial-body analyses. Optimization (reduction) of number of bone samples in whole-body analysis.*



## Whole- vs Partial-Body Analysis

| Type         | Skeleton | Number of Samples  |          |
|--------------|----------|--------------------|----------|
|              |          | Collected          | Analyzed |
| Whole Body   | Axial    | 110                | 62       |
|              | Limbs    | 70                 | 50       |
| Partial Body | Total    | 5 - 7 <sup>†</sup> | 5 - 7    |

† - ribs, clavicle, patella, sternum, vertebrae, femur (MS)



## It Is Not a New Task

- McInroy *et al* (1985, HPJ): *analysis of half of the skeleton. Single case analysis.*
- Lynch *et al* (1988, J. Radiol. Prot.): *defined a group of bones as the best representative of the total skeletal content. Analysis based on 4 whole-body cases.*
- Filipy *et al* (2003, HPJ): *least squares regression analysis based on data from 8 whole-body cases.*



## Methodology and Criteria

- Ratio = 
$$\frac{\text{Individual Bone Concentration}}{\text{Total Skeletal Concentration}}$$
- 'Best bone' = 
$$\frac{C_{\text{bone}}, \text{ Bq kg}^{-1}}{C_{\text{skeleton}}, \text{ Bq kg}^{-1}} \rightarrow 1 \pm (\text{TPU} \rightarrow \text{min})$$



# Preliminary Results

| Case | Age, y    | Osteo-<br>porotic | Primary<br>Nuclide | Cbone /Cskeleton |               |               |               |               | Variability<br>by Case |
|------|-----------|-------------------|--------------------|------------------|---------------|---------------|---------------|---------------|------------------------|
|      |           |                   |                    | Ribs             | Stern.        | Vert.         | Patella       | Clavic.       |                        |
| 0193 | 62        |                   | <sup>239</sup> Pu  | 0.77             | 1.24          | 1.10          | 1.21          | 1.04          | 1.07±0.19              |
| 0208 | 69        |                   | <sup>239</sup> Pu  | 0.74             | 1.29          | 0.62          | 1.24          | 1.00          | 0.98±0.30              |
| 0212 | 56        | no                | <sup>239</sup> Pu  | 0.74             | 1.03          | 0.75          | 2.06          | 1.18          | 1.15±0.54              |
| 0213 | 68        | no                | <sup>239</sup> Pu  | 0.86             | 1.18          | 1.06          | 1.42          | 0.87          | 1.08±0.23              |
| 0242 | 77        |                   | <sup>239</sup> Pu  | 0.68             | 0.95          | 0.78          | 1.28          | 1.05          | 0.95±0.23              |
| 0259 | 55        | no                | <sup>238</sup> Pu  | 0.64             | 0.65          | 0.63          | 1.66          | 0.81          | 0.88±0.44              |
| 0425 | 83        | no                | <sup>239</sup> Pu  | 1.61             | 1.10          | 1.46          | 0.51          | 0.99          | 1.13±0.43              |
| 0679 | 72        | yes               | <sup>239</sup> Pu  | 1.29             | 0.62          | 1.13          | -----         | 1.04          | 1.02±0.29              |
| 0720 | 84        | yes               | <sup>239</sup> Pu  | 0.70             | 0.71          | 1.16          | 0.91          | 1.22          | 0.94±0.24              |
| 0744 | 67        | no                | <sup>239</sup> Pu  | 1.2              | -----         | 0.98          | 1.27          | 1.00          | 1.11±0.14              |
| 0269 | 79        | yes               | <sup>239</sup> Pu  | 0.91             | 1.01          | 1.01          | 1.16          | 1.05          | 1.03±0.09              |
| 0682 | 71        | no                | <sup>238</sup> Pu  | 1.09             | 0.80          | 1.23          | 1.41          | 0.67          | 1.04±0.30              |
| 12   | 70<br>±10 | all               | Pu                 | 0.94<br>±0.30    | 0.96<br>±0.24 | 0.99<br>±0.25 | 1.28<br>±0.39 | 0.99<br>±0.15 | Variability<br>by Bone |



## Work in Progress

- Revision of radiochemistry data (skeleton) for 16 whole body cases.
- Calculation of weighted-average actinide skeletal concentration,  $C_{\text{skeleton}}$ , Bq kg<sup>-1</sup>.
- Calculation of <sup>238,239</sup>Pu activity ratio (R)  $C_{\text{bone}} / C_{\text{skeleton}}$  for 6 bones: *rib, clavicle, patella, sternum, vertebrae, femur (MS)*.
- Calculation of 95% CI for R values.

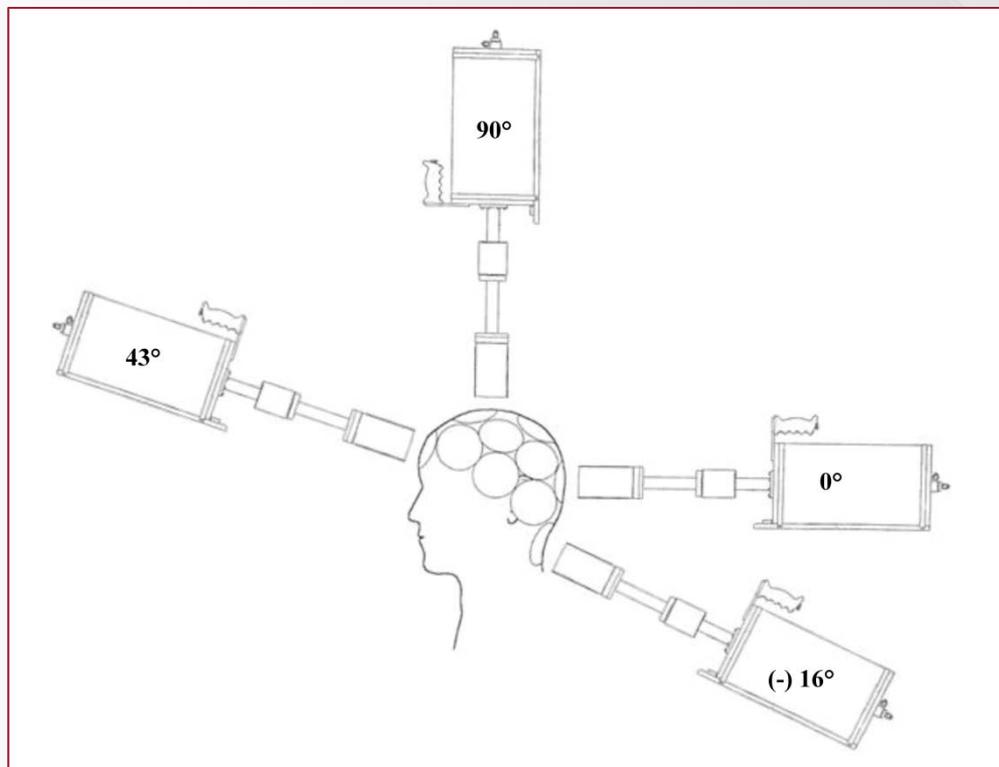


# European Radiation Dosimetry Group

- $^{241}\text{Am}$  Skull Measurements Intercomparison
- Coordinator:
  - ✓ Institute of Radiation Protection (Germany)
- Participants:
  - ✓ 13 in-vivo counting laboratories from 11 countries including USA, Canada and China.
- Phantoms used:
  - ✓ BfS Phantom (Germany) - artificial
  - ✓ SÚRO Phantom (Czech Republic) - artificial
  - ✓ USTUR Skull Phantom (USA) – ‘natural’



# In-Vivo Measurement Geometry



P. Nogueira (2012) "EURADOS <sup>241</sup>Am Skull Measurements Protocol"



## Visit of Russian Scientist

- July 16-20, 2012, the USTUR hosted Elena Burikova , the Head of the Radiochemistry Group at the Southern Urals Biophysics Institute (SUBI, Ozyorsk, Russia).
- Requested by Mr. Barrett N. Fountos (DOE Russian Health Studies Program) and sponsored by the Joint Coordinating Committee for Radiation Effects Research (JCCRER) Project 2.4.
- Specific interest in microwave (MW) tissue digestion and rapid actinide separation with extraction chromatography on a vacuum-box system (VBS).



# During the Visit



In the office



In the lab - separation on VBS



Informal gathering with the USTUR



In the lab - microwave digestion system



## Professional Activities/Services

- European Dosimetry Group (EURADOS) WG7 on Internal Dosimetry, *Member*
- Japanese Journal of Health Physics, *Editorial Board Member*
- WSU Graduate Certificate Program in Radiation Protection, *Advisory Board Member*
- WSU MS/PhD Graduate Committee, *Member*
- Department of Chemistry, Laval University (Canada), *Adjunct Professor*
- Radiation Protection Journal, *Ad-hoc Reviewer*



## Presentations 2011 - 2012

- Podium
  - ✓ Workshop on Sharing Data and Biomaterials from Radiation Science 1
  - ✓ 57<sup>th</sup> Annual Health Physics Society Meeting 2
- Poster
  - ✓ IRPA 13<sup>th</sup> International Congress 1
  - ✓ European Conference on X-Ray Spectrometry 1
  - ✓ 57<sup>th</sup> Annual Health Physics Society Meeting 2
  - ✓ COP Research & Scholarship Day 2



## Publications 2011 - 2012

- Peer-reviewed Journals - Published
  - ✓ Health Physics (0.92) 2
  - ✓ Analytical Bioanalytical Chemistry (3.78) 1
  - ✓ Environmental Radioactivity (1.34) 1
- Peer-reviewed Journals - Accepted
  - ✓ Health Physics 1
  - ✓ Cancer Research (7.86) 1
  - ✓ Am. J. of Public Health (3.93) 1

