



Conference of Radiation Control Program Directors, Inc.

NEWSBRIEF

www.crcpd.org

A Partnership Dedicated to Radiation Protection December 2018

Message from Chairperson Karen Beckley, MPA, MS

I hope everyone had a happy holiday season! It is hard to believe that another year has gone by.

This month I had the opportunity to attend the International Atomic Energy Agency (IAEA) Conference on the Security of Radioactive Material. There were over 1000 participants from 100 “States.” **I found it interesting that our concerns in the United States of America regarding our radiation control programs and the aging leadership were echoed internationally.** There is significant concern for ensuring that there is a trained staff to take the reins of the Programs to ensure the safety and security of radioactive materials.



In addition, in discussions that I had with developing countries, they expressed concern for the source recovery program stating that as fast as legacy sources are retrieved, newer sources are smuggled in, and there is no method to track these sources. Since manufacturers spend significant dollars on training, why doesn't it make sense to put a tracking device on all sources? Interesting discussion.

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Message from Chairperson *(continued)*

IAEA International Code of Conduct Standards for Drinking Water and Vegetables

*“Please let
the Board
know if
you are
interested in
participating
in a working
group on this
issue.”*

Karen Beckley

Future Activities - *continued*

As we move forward, there will be a need for international working groups to address concerns regarding the IAEA international code of conduct standards for drinking water and vegetables after a radiological event. Please let the Board know if you are interested in participating in a working group on this issue.

Next month the Board will be meeting with our federal partners. Please let any of us know if you have issues that you would like to be raised with U.S. Food and Drug Administration (USFDA), U.S. Nuclear Regulatory Commission (USNRC), U.S. Department of Energy (USDOE), U.S. Environmental Protection Agency (USEPA), or U.S. Federal Emergency Management Agency (USFEMA).

Happy New Year!



Greetings from Your Executive Director



Ruth E. McBurney, CHP

Being Thankful

“First, a big thanks to all the wonderful volunteers we have that devote their time and expertise to service on CRCPD working groups.”

Ruth E. McBurney

Thanksgiving in December

As we near the end of 2018, the last couple of months seem to fly by, with the holiday seasons starting in November or before, notably Thanksgiving. **I am therefore taking this opportunity to be thankful for the supporters of CRCPD through the last 50 years, and those that continue to contribute to the strides that CRCPD is making to improvements in radiation protection.**

First, a big thanks to all the wonderful volunteers we have that devote their time and expertise to service on CRCPD working groups. Most of the work that we accomplish in the organization could not be completed without the dedicated radiation control professionals who volunteer for these tasks. And there continue to be more opportunities to serve! We recently received a grant from the Centers for Disease Control and Prevention (CDC) through their Radiation Studies Branch. **Take a look at the Call for Volunteers (elsewhere in this issue) for the projects included in the grant and consider an area for volunteering to serve on one of the working groups.**

This year, as in years past, we are grateful for the supporters of CRCPD: federal partners and donor organizations that provide funding for projects and conferences that are important to the ongoing of CRCPD and our ability to provide consensus standards, guidance, information, assistance to states and licensees, and networking opportunities among members and other professionals in the radiation protection arena. A recent example of a great partnership project is the Nationwide Evaluation of X-Ray Trends (NEXT). A webinar was conducted by the H-4 Committee on NEXT in mid-October at USFDA facilities, with funding from the American College of Radiology (ACR) to make it happen. This webinar, which is now available on our website, will enable state radiation control staff to gather information and measurements in chiropractic facilities for analysis through the NEXT program. Another great partnership is the USDOE Source Collection and Threat Reduction Program (SCATR). We are currently coordinating with USDOE National Nuclear Security Administration (NNSA) as well as the USNRC to collect disused sources in Puerto Rico.

Executive Director

Greetings *(continued)*
**Sue Smith
Retirement**

“We value her great service and her role of ‘memory keeper’ for CRCPD, and I personally am grateful for the time I have had the privilege to work with Sue these past 12 years in the Office of the Executive Director.”

Ruth E. McBurney

Thanksgiving in December *- continued*

Thanks to all the allies we have that are working on common issues, such as the National Alliance for Radiation Readiness (emergency response); the Image Gently Alliance (medical imaging of children); and the Radon Leaders Workgroup. I recently attended a meeting of the Radon Leaders, and this group of organizations concerned with lung cancer and indoor radon is making progress toward meeting goals in the National Radon Action Plan.

I am also grateful for the memories of long-time members, friends and colleagues, who have passed on this year.

Last but certainly not least, I want to extend a special thanks to Sue Smith, our Executive Office Manager, who will be retiring at the end of January. We value her great service and her role of “memory keeper” for CRCPD, and I personally am grateful for the time I have had the privilege to work with Sue these past 12 years in the Office of the Executive Director (OED). We will still be able to see Sue around (maybe even at the Annual Conference in May), since she has graciously agreed to come back under contract as needed and volunteer some of her time in the office.

To all of you, I wish you a very happy holiday season and the very best wishes for the coming year!



ROSS in Emergency Response

How to Deploy a Radiological Operations Support Specialist into Your State's Radiation Emergency Response

by Jeff Semancik (CT) and Angela Leek (IA)

Everything you wanted to know about how to deploy a Radiological Operations Support Specialist (ROSS) into your state's Radiation Emergency Response (REP) but were afraid to ask...

Following any significant radiological emergency, the communication and interpretation of key incident data to decision makers is crucial to ensuring rapid activation and effective utilization of emergency response resources. **In response to nuclear power plant (NPP) emergencies, the demand for subject matter expertise to answer specific questions about radiation, the environment, modeling of the hazard, data and risk management, public protective actions, and other scientific and technical issues often exceeds the resources available from the state and county radiation control programs.** The Radiological Operations Support Specialist (ROSS) is a mutual aid Subject Matter Expert (SME) available to provide guidance to any level of the response organization on these topics. The ROSS can gather, organize, synthesize, document, and distribute incident and resource information for the purpose of improving situational awareness at all levels of an incident management (IM) situation. **The ROSS provides the expertise necessary to clearly explain the implications of modeling, measurement, and analysis methods as well as, health risks and hazards existing during a radiological incident.**

Integrating a new resource into your IM response structure can seem overwhelming, especially in an evaluated environment. It's not so scary – and, in fact, it is crucial to exercise the deployment and use of the ROSS within your response framework. **It is up to us (Radiation Control Program Directors and members) to support and grow the ROSS so they can be integrated effectively into our own state and local jurisdictions.** When properly deployed, ROSS assets represent critical force multipliers that you can leverage to improve performance and effectiveness of your state's radiological emergency preparedness (REP) organization.

ROSS have been used in national level exercises over the past few years, but recently two states have piloted the integration of the ROSS into their state's REP exercises for NPP response. Just as they would in response to a real emergency, the state radiation control program directors identified the need and coordinated the integration of ROSS during two recent REP exercises in Connecticut and Iowa. **This tested the entire process of ROSS integration from the ROSS resource request through Federal Emergency Management Agency (FEMA) to funding for the ROSS deployment to developing the plan for and supporting the integration of the ROSS into the designated response location.**

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How to Deploy a Radiological Operations Support Specialist into Your State's Radiation Emergency Response - *continued*

ROSS in Emergency Response

In Connecticut, the ROSS was deployed within the state Emergency Operations Center (EOC) with the technical radiation assessment cadre. In Iowa, the ROSS was deployed to a local county EOC to serve as support to the local agencies and facilitate communications of radiological information within the local EOC as well as between that location and the technical radiation assessment cadre at the state EOC.

Here's what we learned...

Incorporating ROSS into Radiation Emergency planning provides a simple and cost effective enhancement to preparedness. Training and maintaining a large cadre of radiation SMEs in your jurisdiction can be expensive and time consuming. With limited state budgets, ROSS offers an effective and flexible alternative to leverage additional radiological SMEs where necessary in your organization. Each ROSS comes trained and prepared to assist. Because they volunteer their time, deployment costs are limited to travel and expenses. The cost of a ROSS to support both a rehearsal and exercise was less than \$1100. For the Connecticut and Iowa exercises, this expense was budgeted from REP funds. Moreover, if local/regional ROSS are used, this cost could be even less.

State response procedures incorporated guidance for requesting and activating ROSS as necessary. As a request for assistance, cadre management was handled by the FEMA-ROSS steering committee who identified and selected an appropriate ROSS to support the exercise and drill. We used this as a sole source justification to develop a simple, two-page scope of work document/contract.

REP Nuclear Power Plant Exercises provide valuable experiential learning to both the ROSS and Emergency Management (EM) Organizations. These recent exercises helped us work through how to best integrate ROSS into our emergency response organizations. We developed integration packages to familiarize the ROSS with our facilities, software tools, organizational roles, statutory responsibilities, and decision making protocols. In Iowa, we worked with the county EOC team to brief them and help them understand that the ROSS was their resource and liaison to the state, not a state radiation resource being planted in the local jurisdiction – a role that is nuanced over each jurisdiction. While these preparatory briefings helped, the real value was provided within the context of the rehearsal drills which proved critical to the success of the exercises in both Iowa and Connecticut. Since the ROSS is new to many in the REP community, the rehearsal environment provided the opportunity to identify REP needs

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How to Deploy a Radiological Operations Support Specialist into Your State's Radiation Emergency Response - *continued*

ROSS in Emergency Response

for radiological expertise and use the ROSS to fill them. During the rehearsal drills and exercises the ROSS learned through practical implementation about the states and how to best integrate into the local response organization. Moreover, ROSS participation in exercises provides the opportunity to introduce new ideas, radiation expertise, tools available, and fresh perspectives (RadResponder visualization at local EOC, federal assets, etc.).

Socializing ROSS into the broader EM community reinforces ROSS capabilities and value in preparedness and response. A key element in successfully using ROSS in your REP is to socialize the concept and capabilities to the EM community that will benefit the most from their assistance. As the state radiation control program directors, we worked to add context to the concept of ROSS through constant reinforcement during planning meetings and training sessions in order to get responders and state and local EM personnel used to the idea of the ROSS position and aware of what ROSS can do. We also prepared and supported the assigned ROSS to integrate properly and ensure a successful fit into their assigned REP organization. Each time a ROSS integrates into an organization it makes it easier for the officials to know how to use them as well as for the ROSS to know how to fit in – regardless if it is the same ROSS or not. Because of the potential consequences associated with a graded exercise, it was crucial to use the same individual in the Iowa and Connecticut rehearsal and evaluated exercises to get buy in from EM officials, for consistency, and to maximize performance. Once REP officials experienced what ROSS could do during the rehearsal, they wanted them to do even more and were already asking for more ROSS in future exercises!

As the state radiation control program directors for these exercises, we both agree the process wasn't that difficult and it significantly improved the overall performance of our response organizations. We demonstrated how a ROSS can be used to enhance the response even in an evaluated exercise setting. The ROSS did not cause any questions or issues with evaluators in their determination of Offsite Response Organization (ORO) criteria demonstration. In fact, the after-action reports for both exercise noted that the ROSS was as an asset to the emergency response organizations. We hope that we are making it even easier by sharing these best practices and lessons learned.

Jeff Semancik, Director, Radiation Division,
Connecticut Department of Energy and
Environmental Protection

Angela Leek, Bureau Chief, Bureau of
Radiological Health, ADPER & EH Division,
Iowa Department of Public Health



ICRP Special Liaisons Organization Meeting

by Dave Allard, Past Chairperson

ICRP Special Liaisons

In line with objects outlined in the International Commission on Radiological Protection's (ICRP) Strategic Plan, in 2012 they announced an initiative to expand formal relations with organizations relevant to the ICRP's mandate. **At the time, ICRP invited organizations with an interest in radiological protection to apply**

for Special Liaison Organization (SLO) status. Over the years the ICRP has maintained strong and mutually beneficial relations with a number of organizations; these include:

- CRCPD;
- International Atomic Energy Agency (IAEA);
- International Agency for Research on Cancer (IARC)
- International Commission on Radiation Units and Measurements (ICRU);
- International Electrotechnical Commission (IEC)
- International Labour Organisation (ILO);
- International Organization for Standardization (ISO);
- International Radiation Protection Association (IRPA);
- National Council on Radiation Protection and Measurements (NCRP);
- Organisation for Economic Co-operation and Development (OECD) Nuclear Energy Agency (NEA);
- United Nations Scientific Committee on the Effects of Atomic Radiation (UNSCEAR); and
- World Health Organisation (WHO).

In late October it was my honor to represent the CRCPD at the ICRP 2018 SLO Meeting in Stockholm. The SLO meeting was being held in conjunction with the 90th meeting of the ICRP and ICRU.

Prior to the SLO meeting, ICRP leadership and staff select and send participants two or three topics that will be the focus of the meeting. Participants are asked to provide input and be ready to discuss these focus areas. **Last year the focus was on the research needed to support the system of radiological protection, and what ethical values need consideration by the Commission to inform radiological**

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ICRP Special Liaisons Organization Meeting - *continued*

ICRP Special Liaisons

protection and risk management.

This year the discussions were to focus on “the system of radiological protection, and areas needing further consideration.” Topics of discussion included:

- low dose and low dose rate effects;
- individual response to radiation;
- dose limitation and optimization;
- exposure situations (i.e., existing, planned and emergency);
- protecting children; and
- protecting the environment.

As various SLOs presented feedback, most echoed the need to continue low dose and dose rate research; in particular as it related to the linear non-threshold (LNT) construct for worker and public protection, and how to address reasonableness with ALARA. Additionally, many SLOs asked the ICRP to refrain from further updates to the quantities and standards currently in place via *ICRP Publication 103*, as many countries are just now implementing these through the IAEA’s Basic Safety Standards. As we all know, our situation in the U.S. is even more complicated with current regulatory standards based on ICRP 2, 26/30, and 60. Given the USNRC recently suspending the update of *10CFR20* using *ICRP 103*, this situation may persist for some time. I expect the SLO meeting summary to be finalized in early 2019.

It was also my pleasure to attend the two-day ICRP ICRU 90th Meeting held right after the SLO meeting. The intent of the meeting was to celebrate this amazing milestone, with presentations on the history of the two organizations and individuals who helped shape the evolution of radiation protection standards and quantities/units. Topics covered included:

- finding common ground between science, ethics, and experience;
- role of Nordic countries in the development of radiological protection;
- opportunities in radiation medicine;

ICRP Special Liaisons Organization Meeting - *continued*

ICRP Special Liaisons

- second primary cancer induction after radiotherapy;
- individual radio-sensitivity;
- risks at low doses and challenges for the next decades;
- trends in society on perception of risk;
- radon radiation protection in the world today;
- protection of the environment; and
- future perspectives on radiological protection.

All the presentations were webcast during the meeting with recordings currently available to view online. All of the talks are worth the time to review; you may see at:

- Day 1: <https://www.youtube.com/watch?v=EwTgYn7X6no>
- Day 2: <https://www.youtube.com/watch?v=xSl1TnaY3HM>



ICRP Special Liaisons Organization Meeting Participants [left to right]: B. Lorenz, G. Frija, J. Harrison, S. Romanov, J-F. Lecomte, K. Petrova, T. Schnieder, H. Vandenhove, T. Lazo, K. Held, W. Harris, D. Cool, K. Applegate, M. Perez, C. Clement, C. Cousins, D. Laurier, R. Coates, M. Ermacora, D. Allard, W. Rühm, S. Bouffler, J. Lochard, K. Cho, F. Shannoun, M. Kai. (Photo by ICRP)



Reports of Diagnostic X-ray Assembly Now Reported Electronically to USFDA and States

—Update to State Contacts Needed—

Report of Assembly Form USFDA 2579

Manufacturers of diagnostic x-ray systems intended for human use are still required to file reports of assembly upon installation of a certifiable system or component(s), but the U.S. Food and Drug Administration (USFDA) will no longer be collecting paper copies of the reports for distribution to state radiation control programs.

The report of assembly (Form USFDA 2579) represents the assemblers certification that the system or component(s) are of the type called for by the Standard (i.e., certified), have been assembled according to the instructions provided by the manufacturer, and meets the requirements of the applicable Federal standards contained in *21 CFR 1020.30* through *1020.33*. Reports must be filed with USFDA's Center for Devices and Radiological Health (CDRH) within 15 days of completion of the assembly. Copies must also be provided to State agencies and the purchaser.

USFDA is providing the manufacturers contact information for State agencies through the CRCPD website. They are directed to the map of radiation control programs (<https://www.crcpd.org/mpage/Map>) and to select the relevant state. (If the pop-up information block includes "State Medical Contacts," select it and then select the "Form 2579" tab.)

It is therefore important that the appropriate information for the Form 2579 contact is correct under your State's program, in order for the right division or person to receive this information. Check on the appropriate state on the map and go to Medical Contacts under the director's information. One will be for H-38 Events and one will be for 2579s.

If either of these contacts needs to be added or updated on the site, send the correct information to Bruce Hirschler at bhirschler@crcpd.org in the Office of the Executive Director.



The Nuclear Regulatory Commission is Seeking Your Input on its Evaluation of Training and Experience for Authorized Users

The U.S. Nuclear Regulatory Commission (USNRC) is evaluating its regulations for training and experience (T&E) required for a physician to become an authorized user for medical uses under *Subpart E, "Unsealed Byproduct Material—Written Directive Required,"* of *Title 10 of the Code of Federal Regulations (10 CFR) Part 35, "Medical Use of Byproduct Material."*

On October 29, 2018, the USNRC published a series of questions on T&E in the *Federal Register*, the daily journal of the Federal government that contains government agency rules, proposed rules, and public notices. With the publication of these questions, the USNRC opened a three-month public comment period seeking feedback on whether there is a need to change its T&E regulations under Subpart E of 10 CFR Part 35.

The T&E requirements in *Subpart E of 10 CFR Part 35* provide three ways that a physician can currently be authorized to administer unsealed byproduct materials or radiopharmaceuticals requiring a written directive:

1. A physician can be certified by a medical specialty board, whose certification process is recognized by the USNRC or an Agreement State.
2. A physician can complete a structured educational program and supervised work experience under an alternate pathway. The 700 hours required for authorization under this alternate pathway consists of a minimum of 200 hours of classroom and laboratory training and 500 hours of supervised work experience.
3. A physician can be authorized if previously identified as an authorized user on a USNRC or Agreement State license or permit (i.e., grandfathered).

The USNRC staff is considering whether another pathway should be created or if the alternate pathway should be revised. Specifically, the staff is evaluating: (1) whether it makes sense to establish tailored T&E requirements for different categories of radiopharmaceuticals; (2) how those categories should be determined (such as by risks posed by groups of radionuclides or by delivery method); (3) what the appropriate T&E requirements would be for each category; and (4) whether those requirements should be based on hours of training and experience, or focused more on competency.

The USNRC encourages all individuals and organizations interested in the T&E evaluation to read the *Federal Register* notice and submit written comments on the notice using the Federal rulemaking Web site, <https://www.Regulations.gov>. On [Regulations.gov](https://www.Regulations.gov), search for Docket Number NRC-2018-0230. ***The deadline for submitting comments is January 29, 2019.***

The USNRC is also holding four public meetings where it will accept oral comments. The meetings will be accessible for remote participation and are scheduled for November 14 and December 11, 2018, and January 10 and January 22, 2019. The USNRC's public meeting page has participation details: <https://www.nrc.gov/pmns/mtg>. **Contact Sarah Lopas, Project Manager in the USNRC's Office of Nuclear Material Safety and Safeguards for questions about the T&E evaluation: Sarah.Lopas@nrc.gov and (301) 415-6360.**



Call for Volunteers for Working Groups

The following are initiatives of CRCPD under the recently-awarded Centers for Disease Control and Prevention (CDC) grant. We will need to establish several new working groups to accomplish some of the tasks in the Scope of Work. Volunteers are needed in the following areas:

- **Planning and Conducting a Technologically Enhanced Naturally Occurring Radioactive Materials (TENORM) Workshop**
- **Respiratory Protection Needs**
- **Train the Trainer Workshop**

A description of each initiative follows.

Planning and Conducting a Technologically Enhanced Naturally Occurring Radioactive Materials (TENORM) Workshop

CRCPD will collaborate with state, local, national and international organizations, including the National Council on Radiation Protection (NCRP), the International Atomic Energy Agency (IAEA), the Health Physics Society (HPS), and the International Commission on Radiation Protection (ICRP), in convening a meeting to identify priority issues related to the handling and disposal of TENORM generated during some industrial processes and measures that can be taken to improve protection of workers and members of the public. This meeting will be held in conjunction with an international conference on naturally occurring radioactive material being held in the United States, in order to attract more international and national participation. CRCPD will provide logistical support for planning and executing the meeting as well as providing proceedings and outcomes from the meeting. There are plans to video-tape the workshop for viewing by those unable to participate in person.

Gary Forsee (IL) has agreed to chair this working group, and we have a couple of people also lined up to serve, but we need a few more to round out the group. Since the workshop will be in September 2019, the task force needs to start work right away.

Respiratory Protection Needs

This will be a new working group in the HS/ER Council, specifically to provide identification of respiratory protection needs for emergency workers that are not first responders. These include those in public health that would be operating a Community Reception Center or a shelter; bus drivers assisting with evacuations; public works staff assisting with debris removal after a radiological incident, etc. A working group of CRCPD members with

Call for Volunteers for Working Groups - continued

expertise and interest in emergency response and respiratory protection will be formed, and resource individuals with expertise in radiation protection (including respiratory protection), local public health, and decommissioning, as well as resources from several federal agencies, will also be invited to participate on the working group. Although there is already clear guidance on the use of respiratory protection for the first responder community (e.g., fire, HAZMAT) and those whose duties normally involve exposure to radioactive material, practical and efficient respiratory protection identification and guidance should be established and provided to local health departments and other groups involved in local response.

Contact Jeff Day, Chair of the HS/ER Council at jsday@ph.lacounty.gov or the OED if you would like to be involved in this effort.

Train the Trainer Workshop

CRCPD will identify the greatest training needs of state and local public health staff in the area of basic radiation protection, and plan training sessions that will fill those needs. Many state and local public health agencies do not have knowledgeable or trained staff in basic radiation protection of the public. This need has become more evident as they work on their radiological emergency preparedness plans. In addition to specific training described below, CRCPD will work with state and local public health organizations to determine other training needs and address them similarly.

One such area identified for training is for the public health role of population monitoring during a radiological emergency. Some state and local public health officials have indicated they are not comfortable performing these activities and need training in radiation and assistance in this effort.

CRCPD will use working groups to develop training materials specific for public health staff that can be delivered using Train the Trainer workshops and/or web-based training modules/videos. CRCPD will also plan, execute and host a series of regional Train the Trainer workshops (depending on the level of interest) and invite local health departments that are involved in planning for radiological emergencies to participate, with the understanding that the people attending would be able to train others in population monitoring or other areas for which basic radiation protection training is found to be needed.

Contact Jeff Day, Chair of the HS/ER Council at jsday@ph.lacounty.gov or the OED if you would like to be involved in working on the Train the Trainer Workshop.



Call for News

Call for News

Would you like to share some information about your work, or some project or issue that you're involved in?

CRCPD is interested in what you are doing and would like to share your knowledge and experiences with other CRCPD members through a feature article in the ***Newsbrief***.

If you would like to submit an article, please contact Ruth McBurney (rmcburney@crcpd.org) suggesting a topic you'd like to present.

The ***Newsbrief*** is published six times a year, in even numbered months. Deadline for submission is the 15th of the month of publication.

We welcome your news and photographs, too, if you'd like to share.



CRCPD Board of Directors

<i>Board position</i>	<i>Name</i>	<i>State</i>	<i>Work Phone</i>	<i>E-mail address</i>
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Member-at-Large.....	Jeff Day.....	LA Co./CA.....	213/351-7387.....	jsday@ph.lacounty.gov
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Homeland Security/Emergency Response Council	Jeff Day (LA Co./CA) 213/351-7387 jsday@ph.lacounty.gov
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The Newsbrief is written to address the needs of all radiation control program personnel. Readers are encouraged to contribute newsworthy or informative items for the Newsbrief, with neither charges nor stipends for the items that are selected. News of state radiation control programs is especially sought.

Articles should be sent to CRCPD, Attn: Sue Smith, 1030 Burlington Lane, Suite 4B, Frankfort, KY 40601 (fax: 502/227-7862; email: <ssmith@crcpd.org>. The deadline for contributions is the 15th of the month before an issue is to be published.

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