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DEFENSE HEALTH BOARD
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DEE 'J 2008

DHB

MEMORANDUM FOR: SURGEON GENERAL OF THE ARMY, LTG ERIC B.
SCI-IOOMAKER, MD, PHD

SUBJECT: Defense Health Board **Review of** the U.S. Army Center for Health Promotion and
Preventive Medicine Assessment **of** Sodium Dichromate Exposure at **Qarmat Ali**
Water Treatment Plant

EXECUTIVE SUMMARY

At the request **of** LTG Eric B. Schoomaker, the Surgeon General **of** the Army, the Defense Health Board (Dl **IB**) conducted an external **review of a** U.S. Army Center for Health Promotion and Preventive Medicine (USACHPPM) occupational and environmental health assessment conducted in 2003 at the **Qarmat Ali Water Treatment** Plant (WTP) in **Basra**, Iraq to address a potential sodium dichromate exposure to United States military service members. The **DHB** was asked to opine on whether the medical evaluations conducted by USACHPPM **were** comprehensive and appropriate to address the potential exposure **of** U.S. military and Department **of** Army civilian personnel to sodium dichromate, to identify lessons learned, and to provide recommendations for improving the Department's policies and procedures.

The **DHB** Military Occupational and Environmental Health and Medical Surveillance Subcommittee reviewed the classified final report, "Deployment Occupational and Environmental Health Survey and Operational Health Risk Assessment, **Qarmat Ali Industrial Water Treatment** Plant, **Basra**, Iraq" which included exposure, medical, epidemiologic, and health risk assessments, **as** well as information pertaining to health communication efforts undertaken by the USACHPPM Occupational and Environmental Health and Safety (OEHS) **Team**.

The Subcommittee found the risk assessment timely, comprehensive and appropriate for the potential risk posed to the service members. The comprehensive environmental health assessment including soil and air sampling conducted within weeks **of** first notification revealed minimal levels **of** Chromium (Cr) (**VI**).

Members **of** the Indiana National Guard, the cohort considered at highest risk, received medical assessments within approximately 30 days **of** last potential exposure and included biological monitoring for chromium exposure in whole blood, physical examination, medical history, and **a** several routine periodic **tests**. Whole blood chromium levels were consistent with published results for the general U.S. population, and were lower than those for groups with known occupational exposures.

Preventive measures were well-planned and satisfactorily executed. Risk communication efforts focused on service members and other stakeholders and employed multiple venues **and**

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Defense Health Board **Review of** the U.S. Army Center for Health Promotion and Preventive
Medicine Assessment of Sodium Dichromate Exposure at **Qarmat Ali Water Treatment** Plant -
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fonnants, including town hall meetings and **a** series of seven health risk communication fact
sheets.

