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ATSDR Questions for Camp Lejeune Water Department

July 2, 1993

Water Treatment Department

1. How far back do you keep records?
2. Are any records computerized?
3. Can we get a full inventory of supply wells that were operational in 1982,
 - new wells that were added since then, and
 - wells that have been taken off-line?
4. How many water systems are currently on-line?
 - 1 - Holcomb Boulevard System
 - 2 - Courthouse Bay System
 - 3 - Rifle Range System
 - 4 - Onslow System
 - 5 - Marine Corps Air Station System
 - 6 - Hadnot Point System
 - 7 - Montford Point (off line since 86)
 - [8 - Tarawa Terrace (off-line)]
5. Is the water interconnected by a circuit of pipes or is the water pumped to a holding water tank prior to distribution?
6. Is water from each well routinely sampled?
7. Is the blended water routinely sampled? Prior to treatment or after?
8. How is the water treated? What additives are used? chlorine, fluoride, water softener, filtered, how and why?
9. How many wells supply each water system?
10. Where exactly are they located? Map?
11. Since children are more sensitive to certain contaminants, ATSDR needs information on which water system services which residential areas and other area such as schools, office buildings, industrial buildings, playgrounds, etc. Distribution map?
 - Generally, what amount of water was used per day by each system (distributed)?
12. What is the procedure that is followed when contamination is detected? Are wells taken off-line or formally closed?
13. When contamination is detected in a supply well, how often would that well be re-tested?
14. Would any well distribute more water than any other, or are they all mixed with equal parts. (Do they have equal flow/pump rates?)
15. Do you keep a log or complaint record of anyone who called to complain about various water problems. For instance, ATSDR was told that an officer's wife complained of a gasoline smell in her tap. ATSDR understood that this lead to testing of the residential tap water which ultimately helped identify contamination at Hadnot Point Water System.
16. What kind of communication system is set up if contamination is detected in a well, or in pooled water awaiting distribution?
Is there a weekly report, monthly report, or an official memo from the Water Department to the Installation Restoration Program?
17. What kind of contingency plan goes into effect when contamination is detected in a system or well?

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18. What department would have sampled and tested tap water from any location, residence or other? Who would have tap water data? We need all tap water data including: dates sampled, number of samples collected, sample holding times, what analysis performed, detection limits, and sampling results.
19. How was groundwater contamination detected at the Rifle Range? Were any wells formally closed, taken off-line?

Tarawa Terrace

20. When was water contamination discovered? Month? Year?
21. Was contamination first detected in wells or in the system? We need the data.
22. When was the water system or well(s) taken off-line or closed permanently? Month? Year? How long after water samples were taken?
23. What was sampled? the pooled water supply, the well(s), or the tap water in individual homes? Can we get the data?
24. How many wells at Tarawa Terrace were contaminated?
25. Is the whole water system closed, taken off-line or just those contaminated wells?

Hadnot Point

26. When was well # 602 taken off-line? How often is it re-tested?
27. Are there two different Hadnot Point systems? one much smaller than the other?
28. Has any remediation occurred to date, or is it still in the planning stages?
29. Was floating product detected at well # 602 or was that another well? A monitoring well or supply well?

Lead Study

30. Was lead detected in supply wells, tap water, or in the water systems? Has any sampling been performed on the drinking water fountains?
31. When, where, and how was lead contamination detected? We need all data from this study.
32. Was residential tap water tested?
33. What was done once contamination was detected?
34. Who sampled water for this survey?
35. Are you aware of any blood lead monitoring of military dependents (children)?

Other

36. Does any water on-base come from the county water system? Is all on-base water handled through the base?
37. Have there been any complaints about water quality from residents?
38. What was the earliest date that water analysis was performed for chemical contaminants, either monitoring well, supply well, or tap water?

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ATSDR Public Health Assessments

ATSDR developed this fact sheet to provide information about its Public Health Assessments — a term that can be confusing. A Public Health Assessment is not the same thing as a medical exam or a community health study. It can sometimes lead to those things, as well as other public health activities. ATSDR hopes this fact sheet is helpful to you in understanding what a Public Health Assessment is. You may have questions the fact sheet doesn't answer or need more information about ATSDR and its activities. A contact person is listed at the end of the fact sheet.

What is ATSDR?

ATSDR is the **Agency for Toxic Substances and Disease Registry**, a federal public health agency. ATSDR is part of the Public Health Service in the U.S. Department of Health and Human Services. ATSDR is not a regulatory agency like the U.S. Environmental Protection Agency. Created by Superfund legislation in 1980, ATSDR's mission is to **prevent or mitigate adverse human health effects and diminished quality of life resulting from exposure to hazardous substances in the environment**. Through its programs — including surveillance, registries, health studies, environmental health education, and applied substance-specific research — and by working with other federal, state, and local government agencies, ATSDR acts to protect public health.



What is a Public Health Assessment?

An ATSDR Public Health Assessment reviews available information about hazardous substances at a site and evaluates whether exposure to them might cause any harm to people. ATSDR conducts a Public Health Assessment for every site on or proposed for the National Priorities List (the NPL, also known as the Superfund list).

Public Health Assessments consider —

- what the levels (or “concentrations”) of hazardous substances are
- whether people might be exposed to contamination and how (through “exposure pathways” such as breathing air, drinking or contacting water, contacting or eating soil, or eating food)
- what harm the substances might cause to people (or the contaminants’ “toxicity”)
- whether working or living nearby might affect people’s health
- other dangers to people, such as unsafe buildings, abandoned mine shafts, or other physical hazards

To make those determinations, ATSDR looks at three primary sources of information—

- **environmental data**, such as information available on the contaminants and how people could come in contact with them
- **health data**, including available information on community-wide rates of illness, diseases, and death compared with national and state rates
- **community concerns**, such as reports from the public about how the site affects their health or quality of life

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How Are Public Health Assessments Used?

ATSDR's Public Health Assessments identify health studies or other public health actions — such as community environmental health education — that might be needed. They advise federal, state, and local agencies on actions to prevent or reduce people's exposure to hazardous substances.

How Is the Community Involved in a Public Health Assessment?

The community plays a key role in a Public Health Assessment and any activity that may follow. Throughout the Public Health Assessment, ATSDR talks with people living or working near the site — action groups, local leaders, and health professionals, among other community members — about what they know about the site and their site-related health concerns. Community health concerns are addressed in every Public Health Assessment for every site.

Two-way communication between the public and ATSDR is vital to every Public Health Assessment. For that reason, ATSDR has many ways to give and receive information and involve the community in its activities, such as —

- **Public Availability Sessions** where community members can meet individually with ATSDR staff.
- **Public Meetings** so community members can express ideas in a larger forum.
- **Community Assistance Panels**, or CAPs, which work to inform ATSDR about community concerns and health information and, in turn, to inform the community about ATSDR activities and the status of the Public Health Assessment.
- **Other communication channels**, such as contact with local community groups, political leaders, and health professionals, as well as articles in local newspapers and stories on television and radio stations.
- Before the Public Health Assessment is finished, it is available in the community during the **Public Comment Period**. The Public Comment Period lets the community tell ATSDR how well the Public Health Assessment addresses their concerns. To provide information back to the community, ATSDR responds to public comments in the final Public Health Assessment.

Fact sheets are available on Public Health Advisories, Health Consultations, Community Assistance Panels, and other ATSDR activities. If you want to know more about ATSDR, or if you have health concerns or information to share about ways people might have been or might now be exposed to hazardous substances, please contact the person listed below.

For more information, call or write:

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