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Reply to Thomas

Harley, Naomi

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[Health physics. 2014;106\(3\):430-430. \(http://sfx.med.nyu.edu/sfxlcl3?issn=1538-5159&date=2014&volume=106&spage=430&epage=430\)](http://sfx.med.nyu.edu/sfxlcl3?issn=1538-5159&date=2014&volume=106&spage=430&epage=430) DOI: (<http://dx.doi.org/>)

COMMENT ON THE RESULTS OF THE LONG-TERM ESTIMATION OF THE NON-EQUILIBRIUM FACTOR F=0.75 REPLY

Harley, Naomi

ISI:000337514800014

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[Radiation protection dosimetry. 2014;231-234. \(http://sfx.med.nyu.edu/sfxlcl3?issn=0144-8420&date=2014&volume=&spage=231&epage=234\)](http://sfx.med.nyu.edu/sfxlcl3?issn=0144-8420&date=2014&volume=&spage=231&epage=234) DOI: [10.1093/rpd/ncu085](http://dx.doi.org/10.1093/rpd/ncu085) (<http://dx.doi.org/10.1093/rpd/ncu085>)

RADON WATER TO AIR TRANSFER MEASURED IN A BATHROOM IN AN ENERGY-EFFICIENT HOME WITH A PRIVATE WELL

Harley, Naomi H; Chittaporn, Passaporn; Cook, Gordon B; Fisenne, Isabel M

Monthly measurements of radon in kitchen and bath tap water along with indoor air concentrations were made from 1994 to 1996 in an energy-efficient home with a private well. The well supplies all water to the home. The radon in cold and hot kitchen water averaged 69 ± 2 and 52 ± 2 Bq l⁻¹, respectively. Radon in cold and hot water from the bath/shower room shower head averaged 60 ± 1 and 38 ± 2 Bq l⁻¹, respectively, whereas hot water collected in the shower at the tub base averaged 5 ± 1 Bq l⁻¹ or a 92 % radon loss to air. While the calculated transfer factor of 1/10 000, i.e. radon concentration in air to radon in water, conventionally applies to the whole house, measurements for the specific water release during showering in a bathroom exhibit a larger transfer factor of 1/2300, due to smaller room volume.

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Radon and Thoron in the Environment

Chapter by: Harley, Naomi H

in: *Aerosols handbook : measurement, dosimetry, and health effects* by Ruzer, Lev S.; Harley, Naomi H (Eds)

Boca Raton : Taylor & Francis, 2013

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Aerosols handbook : measurement, dosimetry, and health effects

Ruzer, Lev S; Harley, Naomi H

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[Radiation protection dosimetry. 2012;152\(1-3\):14-17. \(http://sfx.med.nyu.edu/sfxlcl3?issn=0144-8420&date=2012&volume=152&spage=14&epage=17\)](http://sfx.med.nyu.edu/sfxlcl3?issn=0144-8420&date=2012&volume=152&spage=14&epage=17) DOI: [10.1093/rpd/ncs214 \(http://dx.doi.org/10.1093/rpd/ncs214\)](http://dx.doi.org/10.1093/rpd/ncs214)

Attempted validation of ICRP 30 and ICRP 66 respiratory models

Harley, N H; Fisenne, I M; Robbins, E S

The validation of human biological models for inhaled radionuclides is nearly impossible. Requirements for validation are: (1) the measurement of the relevant human tissue data and (2) valid exposure measurements over the interval known to apply to tissue uptake. Two lung models, ICRP 30((1)) and ICRP 66((2)), are widely used to estimate lung doses following acute occupational or environmental exposure. Both ICRP 30 and 66 lung models are structured to estimate acute rather than chronic exposure. Two sets of human tissue measurements are available: (210)Po accumulated in tissue from inhaled cigarettes and ingested in diet and airborne global fallout (239,240)Pu accumulated in the lungs from inhalation. The human tissue measurements include pulmonary and bronchial tissue in smokers, ex-smokers and non-smokers analysed radiochemically for (210)Po, and pulmonary, bronchial and lymph nodes analysed for (239,240)Pu in lung

tissue collected by the New York City Medical Examiner from 1972 to 1974. Both ICRP 30 and 66 models were included in a programme to accommodate chronic uptake. Neither lung model accurately described the estimated tissue concentrations but was within a factor of 2 from measurements. ICRP 66 was the exception and consistently overestimated the bronchial concentrations probably because of its assumption of an overly long 23-d clearance half-time in the bronchi and bronchioles.

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Health physics. 2012;102(4):468-9; author reply 469. (<http://sfx.med.nyu.edu/sfxlcl3?issn=0017-9078&date=2012&volume=102&spage=468&epage=9; author reply 469>) DOI: [10.1097/HP.0b013e3182438b1d](https://doi.org/10.1097/HP.0b013e3182438b1d) (<http://dx.doi.org/10.1097/HP.0b013e3182438b1d>)

Radiochemistry and Measurement of ²²⁶Ra in Human Bone

Harley, Naomi H; Fisenne, Isabel M

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Health physics. 2012;102(4):459-462. (<http://sfx.med.nyu.edu/sfxlcl3?issn=0017-9078&date=2012&volume=102&spage=459&epage=462>) DOI: [10.1097/HP.0b013e31823b54aa](https://doi.org/10.1097/HP.0b013e31823b54aa) (<http://dx.doi.org/10.1097/HP.0b013e31823b54aa>)

Long term measurements of indoor radon equilibrium factor

Harley, Naomi H; Chen, Jing; Chittaporn, Passaporn; Sorimachi, Atsuyuki; Tokonami, Shinji

ABSTRACT: To provide detailed information for bronchial dose estimates, aerosol particle size distributions, and radon gas concentration, measurements were made in six residential homes and three laboratory rooms in different office buildings in the city of Ottawa. In the literature, most particle size distribution measurements are taken with samplers operating for a few days at most. In this study, the particle size samplers collected the samples from 77 to 162 d. The equilibrium factor determined from the long-term measurements ranged from 0.6 to almost 1 with an average of 0.75. Even though radon concentrations were quite different between residential setting and office buildings, the average equilibrium factor was similar in the two different indoor environments. The results suggest that at least in some basements, if they were occupied, the radon dose would be about twice as high as normally estimated from the conventional F_{eq} value of 0.4.

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Health physics. 2012;102(4):419-424. (<http://sfx.med.nyu.edu/sfxlcl3?issn=0017-9078&date=2012&volume=102&spage=419&epage=424>) DOI: [10.1097/HP.0b013e31823ecd5c](https://doi.org/10.1097/HP.0b013e31823ecd5c) (<http://dx.doi.org/10.1097/HP.0b013e31823ecd5c>)

An intercomparison for nirs and nyu passive thoron gas detectors at nyu

Sorimachi, Atsuyuki; Ishikawa, Tetsuo; Tokonami, Shinji; Chittaporn, Passaporn; Harley, Naomi H

ABSTRACT: An intercomparison on thoron (Rn) measurement was carried out between National Institute of

Radiological Sciences, Japan (NIRS), and New York University School of Medicine, USA (NYU). The measurements of Rn concentration at NIRS and NYU were performed by using the scintillation cell method and the two-filter method, respectively, as the standard measurement method. Three types of alpha track detectors based on passive radon (Rn)-Rn discriminative measurement technique were used: Raduet and Radopot detectors were used at NIRS, and four-leaf detectors were used at NYU. In this study, the authors evaluated Rn concentration variation in terms of run for exposure, measurement method, and exposure chamber. The detectors were exposed to Rn gas with approximately 15 kBq m during the period from 0.75 to 3 d. As a result, the variation of each measurement method among these exposure runs was comparable to or less than that for the two-filter method. Agreement between the standard measurement methods of NIRS and NYU was observed to be about 10%, as is the case with the passive detectors. The Raduet detector showed a large variation in the detection response between the NIRS and NYU chambers, which could be related to different traceability.

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Radiation protection dosimetry. 2011;145(2-3):194-197. (<http://sfx.med.nyu.edu/sfxlcl3?issn=1742-3406&date=2011&volume=145&spage=194&epage=197>) DOI: [10.1093/rpd/ncr199](http://dx.doi.org/10.1093/rpd/ncr199) (<http://dx.doi.org/10.1093/rpd/ncr199>)

Residential radon remediation: performance over 17 years

Harley, Naomi H; Chittaporn, Passaporn; Marsicano, Anthony

An exploratory radon measurement in 1990 identified 190 Bq m⁻³ in the basement of a newly built home in Central New Jersey. Subsequently, the owner had a sub-slab remediation system installed in the basement, i.e. PVC duct through the basement floor connecting to an exhaust fan venting to the house roof. Sequential radon measurements began in 1992 using the NYU alpha-track detector. The homeowner wanted to insure the long-term durability of this remedial system. Seventeen years of measurements show the system functioned properly and reduced an established baseline concentration of 370 $\pm$ 8, 56 $\pm$ 1 and 67 $\pm$ 1 Bq m⁻³ for the basement, first and second floors, respectively, to an average of 19 $\pm$ 4, 13 $\pm$ 3 and 10 $\pm$ 0.1 Bq m⁻³. The last measurement, 2007-2008, with a newer NYU detector measured both (222)Rn (radon) and (220)Rn (thoron). The basement thoron concentration was 1.5 $\pm$ 0.9 Bq m⁻³ or about 8 % of the (222)Rn value

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