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To: Secretary, U.S. Nuclear Regulatory Commission

ATTN: Rulemakings and Adjudications Staff

c/o Caylee Kenny, Office of Nuclear Material Safety and Safeguards

Docket ID: NRC-2025-1140 | RIN 3150-AL47

Subject: C-10 Research & Education Foundation Comment on Proposed Rule “Reforming and Modernizing the NRC’s Radiation Protection Framework” (91 FR 43456; Docket No. NRC-2025-1140; RIN 3150-AL47)

1. Introduction and Standing

My name is Sarah Abramson. I am the Executive Director of the C-10 Research and Education Foundation (C-10), a nonpartisan 501(c)(3) public advocacy group serving the nearly 180,000 people living within the 10-mile emergency planning zone of the Seabrook Station nuclear reactor. C-10 operates three programs in pursuit of public and environmental health and safety: (1) real-time radiological air monitoring under contract with the Massachusetts Department of Public Health; (2) outreach and education to local residents on radiological emergency preparedness; and (3) research and advocacy on public health outcomes related to our local nuclear power plant.

C-10 submitted comments on July 24, 2025 following the NRC’s public meeting on Executive Order 14300, Section 5(b) (Appendix A) warning that the Commission appeared to be laying the groundwork to relax the radiation protection framework that governs Seabrook and every other NRC-licensed facility. The proposed rule now before the Commission confirms that concern was well founded. C-10 remains opposed to any rule change that would relax occupational dose limits, weaken public dose protections, or increase radiation exposure to the general public from nuclear energy production activities, and we submit this comment in that context, with specific attention to the proposed elimination of ALARA (As Low As Reasonably Achievable) and the shift toward determinate, threshold-based dose management.

2. The Proposed Rule Confirms C-10’s Prior Concerns: This Is a Reversal of the NRC’s 2021 Denial, Not a Neutral Technical Update

In its 2021 denial of the petitions for rulemaking seeking to discontinue LNT (Linear No Threshold) and remove ALARA, the NRC found “scientific uncertainty and no compelling evidence as to whether the hormesis concept is valid for application to radiation protection requirements” (86 FR 45923). The current proposed rule does not claim new scientific evidence overturns that finding — the preamble itself states that “no consensus-supported, regulation-ready alternative model to the LNT model exists at this time” and that the NRC “reaffirms its position that the linear dose response model is the most appropriate available consensus model.” Yet, notwithstanding that reaffirmation of the science, the proposed rule would still eliminate ALARA terminology entirely from 10 CFR Chapter I and replace it with a “graded approach to dose management” built on determinate dose thresholds below the regulatory limits.

This is a policy change dressed as a clarification. If the underlying science has not changed since 2021, the Commission should explain — in a way that withstands scrutiny — why an approach it found insufficiently justified four years ago is now being adopted through the back door of “terminology” and “implementation”

reform. C-10 urges the NRC to treat this rulemaking with the same rigor it applied in 2021 and to make clear, in its response to comments, exactly what has changed other than the change in Administration policy direction reflected in E.O. 14300.

3. The Proposed Elimination of ALARA and Shift to Determinate Thresholds Is a Substantive Weakening of Protection, Not a Restoration of “Original Intent”

The proposed rule frames the removal of ALARA as a return to the “original intent” of the principle — arguing that ALARA has become an unbounded, subjective mandate for continuous dose reduction. C-10 disputes that this justifies wholesale elimination of the term and the optimization principle it embodies. Specifically, the proposed rule would:

- Remove the definition of “ALARA” from 10 CFR Part 20 entirely and replace it with a new defined term, “graded approach to dose management,” under which “progressively increasing radiation protection measures are required as prospective, or actual, radiation doses exceed determinate dose thresholds.” In practice, this converts an affirmative, continuous obligation to minimize dose whenever reasonably achievable into a static, threshold-triggered compliance exercise — protection only escalates once a numeric line is crossed, rather than being pursued proactively below it.
- Reserve to NRC guidance — not the codified regulation — the task of setting the actual determinate thresholds and corresponding protective measures. This shifts a core protective standard out of notice-and-comment rulemaking and into guidance documents that can be revised with far less public visibility or accountability.
- Explicitly state that, although the Commission considered establishing determinate dose limits for stochastic effects (in place of the probabilistic, no-threshold approach), it found that current science does not support such limits, given that a 2020 analysis referenced in the preamble suggests any stochastic threshold, if one exists at all, would not exceed 1 rem — far below the current 5 rem/year occupational limit. Having reached that conclusion, the Commission should not simultaneously be weakening the sub-limit management framework (ALARA/optimization) that has functioned as the primary real-world control on doses below that uncertain threshold.
- Introduce a “planned occupational dose limit extension” allowing individuals to exceed annual occupational dose limits as long as multi-year average limitations are maintained — a change that increases the ceiling on any individual year’s exposure for workers. This fallaciously implies that a worker whose multi-year average is below the new limit, is somehow safe from increased radiation-related harm.
- Introduce a new reporting threshold for occupational monitoring results and replace unplanned overexposure reporting for both public and occupational limits with a 5-year dose assessment — both of which reduce the frequency and immediacy with which exposures are documented and made available for regulatory and public scrutiny.
- Allow case-by-case variances in public dose limits and accessible dose rates, and introduce a revised threshold/constraint for radiological effluents, described in the preamble as providing “burden reduction and flexibilities for licensees.”
- Apply a 10-rem design-basis accident acceptance criterion in place of the existing “well within” and “small fraction of” qualitative standards used in Regulatory Guide 1.183 — replacing a precautionary margin-based standard with a fixed numeric ceiling.

C-10 recognizes that several of these changes are framed as optional or as not requiring existing licensees to alter current practice. However, an optional ceiling that licensees are not required to use nonetheless establishes a new, lower floor of required protection for any future licensee, license amendment, or facility that

chooses to rely on it. This includes at Seabrook Station, currently licensed to operate until 2050, approaches renewal-related decisions as soon as 2030. C-10 urges the NRC to retain ALARA as a codified, affirmative optimization requirement in the regulatory text itself, not merely as a guidance-level implementation detail beneath a determinate threshold.

4. The Draft Regulatory Analysis Confirms This Is a Cost-Driven Rulemaking, Not a Safety-Driven One

The NRC's own draft regulatory analysis projects annual cost savings of approximately \$9.53 million to industry, \$244,000 to Agreement States, and \$704,000 to the NRC itself, with no corresponding quantified public health benefit. C-10 does not object to efficient regulation, but a rule whose stated purpose is cost savings to industry and regulators — achieved principally by removing an affirmative dose-minimization obligation and reducing reporting and monitoring requirements — should not be characterized in the preamble as maintaining, let alone improving, protection of public health and safety. We ask the NRC to disclose, in a form the public can evaluate, the specific reporting, inspection, and monitoring activities each affected licensee (including NextEra Energy Seabrook) currently performs that would no longer be required under this proposal, consistent with the transparency C-10 requested in its July 2025 comments (Appendix A) regarding the industry's undisclosed "wish list" of changes.

5. Cumulative and Community-Level Radiation Dose Remains Unaddressed

This proposed rule, like the current framework, continues to regulate dose limits facility-by-facility and source-by-source. It does not establish any mechanism for aggregating cumulative radiation dose received by a single community from multiple co-located or nearby radiological sources — a gap that is particularly acute for Seacoast New Hampshire communities situated near both Seabrook Station and the Portsmouth Naval Shipyard. Any move toward higher determinate thresholds, extended multi-year occupational averaging, or reduced monitoring and reporting frequency makes this cumulative-dose blind spot more consequential, not less. C-10 urges the NRC to address cumulative community dose assessment as part of this rulemaking, or at minimum to commit to a companion process for doing so before finalizing changes that reduce monitoring granularity.

6. Vulnerable Populations and Consent

As C-10 stated in its July 2025 comments (Appendix A), risk assessments must be based on the most vulnerable populations — including a developing fetus, whether gestating in a worker or in a member of the public living near a reactor — not on adult male reference cohorts. The proposed shift toward determinate, threshold-triggered protective measures does not describe how differential vulnerability across age, sex, and developmental stage will be reflected in the specific numeric thresholds that NRC guidance would set beneath the regulatory limits. Nor does it revisit the essential distinction between a patient's informed consent to elevated medical radiation exposure and the absence of any such consent among members of the public living near a licensed facility. C-10 asks the NRC to clarify, before finalizing this rule, how the graded approach to dose management will protect the most at-risk populations at least as robustly as the current ALARA requirement, and to confirm that determinate thresholds will not be set using adult-male-only reference data.

7. Recommendations

- Retain the codified ALARA/optimization requirement in the regulatory text of 10 CFR Part 20, rather than eliminating it in favor of a guidance-level graded approach to dose management.
- If the Commission proceeds with a graded approach, codify the determinate thresholds and required protective measures directly in the regulation — not solely in guidance — so that changes to these thresholds remain subject to notice-and-comment rulemaking.

- Publish, for public comment, the specific determinate threshold values under consideration (including any reconsideration of the 100 mrem-type consequence thresholds discussed in industry presentations) before finalizing the rule.
- Preserve current reporting frequency and monitoring requirements for occupational and public dose, rather than moving to 5-year dose assessments and reduced reporting thresholds.
- Provide a transparent, licensee-specific accounting of activities that would no longer be required under this rule, including at Seabrook Station.
- Initiate a parallel process to address cumulative community-level radiation dose from multiple co-located sources.
- Ensure any revised thresholds are derived using the most radiosensitive populations — including the developing fetus and children — as the protective baseline.

8. Conclusion

C-10 continues to urge the NRC to retain LNT as the basis for its radiation protection standards and to retain ALARA — as a codified, affirmative optimization requirement — rather than replacing it with a guidance-driven, determinate-threshold framework whose principal documented effect is cost savings to licensees and regulators. Executive Order 14300 directs the NRC to reconsider these standards; it does not require the NRC to relax them, and the Commission’s own preamble acknowledges that the underlying science has not shifted since its 2021 denial of similar proposals. The American public living near Seabrook Station and other nuclear facilities is relying on the NRC to resolve implementation concerns about ALARA without abandoning the principle itself, and to make any change to a public-safety standard through fully transparent, codified rulemaking rather than through downstream guidance.

Kindly,

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C-10 Research & Education Foundation. (2025, July 24). Public Comment following July 16, 2025 Public Meeting on Executive Order 14300 Section 5(b) — Reconsidering the NRC’s Radiation Protection Framework. Appendix A, below.

NRC Draft Regulatory Analysis for the Proposed Rule: Reforming and Modernizing the NRC’s Radiation Protection Framework (Docket NRC-2025-1140).

APPENDIX A

July 24, 2025

via electronic mail

To: David Garmon, david.garmon@nrc.gov
Ed Miller, ed.miller@nrc.gov

Subject: C-10 Research & Education Foundation Public Comment following July 16, 2025 Public Meeting on Executive Order 14300 Section 5(b) – Reconsidering the NRC’s Radiation Protection Framework

1. Introduction, standing as member of public living near Nuclear Reactor:

My name is Sarah Abramson, I am the Executive Director of the C-10 Research and Education Foundation, a public advocacy group serving the nearly 180,000 people living within the 10-mile evacuation emergency planning zone of the Seabrook Station nuclear reactor. We are a nonpartisan 501(c)(3) nonprofit providing three programs in our local community in pursuit of public and environmental health and safety: 1) real-time radiological monitoring of the air under contract with the Massachusetts Department of Public Health, 2) outreach and education to local residents about radiological emergency preparedness, and 3) research and advocacy efforts focused on improving public health outcomes related to our local nuclear power plant. I am opposed to any relaxation of the radiation protection regulatory framework that would cause increased occupational dose limits or increased radiation exposure to the general public from nuclear energy production activities.

2. NRC recently already reviewed the LNT and ALARA Principles of its Regulatory Framework, and in 2021 denied hormesis as being neither valid nor compelling:

I would like to echo comments made by many, including Dr. Ed Lyman from Union of Concerned Scientists, during the public comment period at the end of the July 16, 2025 meeting, and reiterate: a proposal to relax radiation protection regulations was very recently adjudicated and denied in 2021, a decision which Chairman Wright (then Commissioner) supported. His opinion letter on July 2, 2021 ([ML21187A117](#)) stated: “I agree with the staff’s determination that the Linear, No Threshold (LNT) model continues to provide a reasonable basis for 10 CFR Part 20. As discussed in the paper, the LNT model is premised upon the findings and recommendations of national and international authoritative scientific bodies that have expertise in radiation protection and continue to support the model.” When the NRC is considering all of the arguments presented to it during this current regulatory review, it must separate those technical facts presented that are new and have not yet been heard or adjudicated from those that are recycled and that have already been denied by the NRC in 2021. In its denial, the NRC stated “There is scientific uncertainty and no compelling evidence as to whether the hormesis concept is valid for application to radiation protection requirements” ([86 FR 45923, 2021](#)).

Should the NRC arrive at any different conclusion, the public will interpret this dangerous course reversal as being driven purely by industry and political will, not gold-standard science. We cannot, with a straight face, purport that all of the presentations and viewpoints presented at the July 16, 2025 meeting are equally credible. I urge the NRC to do what you did well 4 years ago: Make public-safety-focused decisions based only upon credible evidence.

The opening NRC presentation given by Michael Franovich included a comment which implied that it may be unnecessary to monitor occupational dose exposure in certain settings that currently require monitoring because the level is so low it is sometimes undetectable ([ML25196A090](#)). I heard this as a thinly veiled supporting argument that low-level radiation is not a health concern, and I took it to imply that current monitoring regimes are superfluous. First, I would say that this may be more of an indictment on the low sensitivity of thermoluminescent dosimeters (TLD) or film badges that I believe are widely used for occupational dose monitoring. We could consider that better monitoring technology is needed, such leveraging technology used in real-time radiation

probes used in environmental monitoring, which would likely report higher and more accurate radiation values. If regulatory changes result in occupational doses not being measured and recorded in certain settings, or if there is a lessening of environmental radiological monitoring efforts, how could we possibly understand correlative or causal links between radiation exposure and health impacts?

Second, I was taken aback at what I interpreted as bias from this NRC presenter, which is uncharacteristic of most of the NRC public meetings I have attended. This includes an NRC slide that presents hormesis as equally valid next to the LNT principle, with oral commentary from the NRC presenter Michael Franovich that hormesis is supported by several studies. This is a stance that contradicts the 2021 PFR denial and is not aligned with any NRC webpage or NRC authored document that I could find. It is understandable that the NRC must comply with an Executive Order to explore this topic even though it has already been recently reviewed and denied, but the order does not mean that the NRC should or can abdicate its authority and responsibility to act as an objective safety regulator for the nuclear industry, exercising expert judgment based on credible, technical facts only. I urge the NRC to let the external proponents make their cases on their own, and approach this topic with the objectivity and public-safety focus that it deserves.

3. NRC must be transparent with how radiation protection activities in the industry would change if the Radiation Protection Framework is relaxed, including Probabilistic Risk Assessment and Cost-Benefit-Analysis that weighs health harms against industry profits, and make that information available to the public:

The NRC must evaluate what specific changes nuclear reactors will make in order to perform the requisite probabilistic risk assessment and cost-benefit analysis. In the absence of transparency on what the NRC and licensees plan to actually change in terms of activities related to radiation safety, it is impossible to expect public buy-in. It feels as though deals are being done in the dark, and it is imperative that the NRC share with the public those specific examples from the nuclear reactor and fuel cycle industries on what burdens they are facing that would otherwise be lifted with changed radiation protection rules. The only Nuclear Reactor Licensee presentation in the July 16, 2025 meeting came from the industry lobbying group Nuclear Energy Institute (NEI), though it contained no specific examples of desired changes in activities or current burdens faced with the existing framework. As shown by some of the other public comments provided at the end of the meeting, and echoed by what I am hearing from my own constituents living near Seabrook Station, this raises serious questions for the public citizens who are afraid of real harm that could come to themselves, or to their neighbors who work at local nuclear reactor sites. Questions like: Will new nuclear reactors be constructed with weaker radiation control engineering in areas such as reactor containment and radiation monitoring? Will licensees abandon certain clean-up directives such as the several active tritium and super-saline plumes from nuclear reactor cooling ponds that are either already infiltrating drinking water or threatening to? Will there be a decrease in the quality of PPE and dose monitoring for workers entering radioactive areas? Will high-level waste storage casks be made even thinner than they are today? Respectfully, the NRC cannot move forward with any changes without completing a proper probabilistic risk assessment, which must include the consideration of these and all possible consequences.

To my surprise, on July 23, 2025 I found on the NRC ADAMS public document database record of a meeting on July 18, 2025—occurring just two days after the public meeting on July 16 between NRC and the industry, “Hybrid Workshop to Support Comprehensive Review of Radiation Safety Cornerstones in Reactor Oversight Process” ([ML25199A046](#)). As of the date of this letter, there is no meeting summary of that 7/18 meeting to refer to, but I have been able to view the PowerPoint presentations given by the NRC titled “Hybrid Workshop to Support Comprehensive Review of Radiation Safety Cornerstones in Reactor Oversight Process” ([ML25199A022](#)) and given by industry interest group Nuclear Energy Institute (NEI) titled “Industry Perspectives on Comprehensive Review of Radiation Safety Strategic Performance Area” ([ML25199A021](#)). Because I became aware of that meeting after it occurred, I unfortunately could not attend, and I understand that there was little to no participation from general members of the public in that 7/18 meeting, which is a stark contrast from the over 750 attendees at the 7/16/2025 meeting for which this comment is written. I believe this is due to a difference in how, when, and where

the meetings were advertised, and feel much of NEI's 7/18/25 presentation information belonged in the more well-attended 7/16/25 meeting. I urge the NRC to avoid bifurcating meetings moving forward. This is not only inefficient, but is also perceived as an effort to minimize public involvement when more detailed and controversial details are being offered by industry leaders.

The content of the July 18, 2025 NEI presentation "*Industry Perspectives on Comprehensive Review of Radiation Safety Strategic Performance Area*" ([ML25199A021](#)) makes explicit proposals on regulatory changes such as: the NRC should reconsider its application of ALARA principles, the NRC should set determinate limits for More-than-Minor (MTM) citations of excessive occupational dose exposure events, and licensees should be permitted to implement voluntary rather than required groundwater inspection programs (screenshots of relevant slides 9, 12, and 13 are copied below for reference). All three of these would be a deprecation in assurance of safety for those living near a nuclear reactor, those working at a reactor site, and those dedicated NRC resident inspectors assigned to each commercial reactor. I urge the NRC to resist the fallacy that any of these proposed changes makes nuclear power more efficient while also preserving health and safety. I believe such changes only serve to avoid reporting, repairing, and compensating communities for harm to their personal health or to public environmental resources, and put reactor employees at greater risk of receiving excessive radiation exposures.

Potential Public Radiation Safety Low-Level Data Examples

NEI

3) Environmental (REMP) & Effluent (RETS) Programs

- Walkdowns of effluent radiation monitors and REMP sampling sites remain important, but should be scheduled outside of outages, or aligned with calibration of safety significant monitors.
- Much of REMP and RETS program inspection scope can be completed remotely, since these inspections involve a lot of data and document reviews.
- Voluntary Groundwater Protection Initiative Reports can help inform whether groundwater program inspections are warranted.
- Data Sources
 - Several missed environmental or effluent samples
 - Significant calculation errors
 - Extended periods when required effluent/REMP equipment is out of service without compensatory measures during releases
 - Anomalous environmental dosimetry results
 - Several abnormal releases
- Inspection Requirements to Review: IPs 71124.06 & 71124.07

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Reevaluating More-than-Minor (MTM) Thresholds

NEI

- Reassess MTM examples in IMC 0612, Appendix E to ensure alignment with a risk-informed approach that reflects radiological and program risk-significance.
- Consider reasonable consequence thresholds (*e.g.*, 100 mrem) where appropriate that are reflective of a programmatic barrier being ineffective.
- Provide appropriate credit for industry's use of electronic dosimetry, including consideration of defining that indications from electronic dosimetry are licensee-identified instead of self-revealing.
- Improve clarity and predictability of MTM determinations to promote consistent dispositioning of issues.

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Refining Radiation Safety Significance Determination Processes (SDPs)



- Reassess the SDPs as needed, to align with any outcomes of the NRC's ongoing wholesale rulemaking effort.
- Ensure the SDP outcomes appropriately reflect risk significance and consistency.
- Reevaluate the need for the ALARA work planning and controls portion of the Occupational Radiation Safety SDP.
 - Significantly ineffective work controls are already demonstrated by actual or substantial potential for overexposures, which the SDP currently reflects with appropriate risk significance.
- Consider further clarifying criteria for dispositioning findings involving:
 - Substantial potential for overexposure
 - Compromised ability to assess dose

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4. Safe radiation levels vary among the population:

To properly protect the public, the NRC must protect the most vulnerable and at-risk as the baseline, which ensures all populations are protected. A developing fetus, whether gestating in a plant worker or in the populations around commercial and government nuclear sites, should be the basis upon which all risk should be measured; they are not an insignificant portion of the population. Basing risk assessments on adult men is completely inadequate. Thus, I would propose that since you are reviewing this framework, you consider lowering the allowed radiation dose, knowing that gender, age, and other individual factors lead to variable risk profiles for workers. You should adopt the lowest level for the most at-risk to ensure you are protecting all of the occupational population, as well ensuring that emissions limits adequately protect the public.

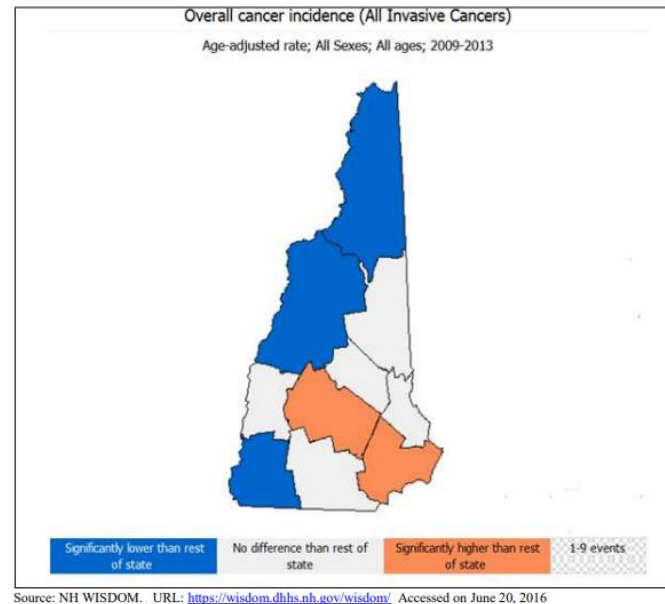
In the scenario that limits are increased, it is imperative that monitoring be left untouched, if not increased or made more sophisticated. As one presenter pointed out, the Clean Air Act can be a useful analogy, as well as the concept of “Best Available Control Technology” (BACT), which the NRC could adopt as part of its review as it pertains to real-time radiological monitoring at reactor sites and in the surrounding communities. Without continued vigilance in recording occupational dose and environmental emission monitoring data, increased rates in cancers will be written off as random bad luck.

5. More investment is needed from NRC in studying effects of Low-Level Radiation on populations near Nuclear Reactors:

It is important to recall that in 2015 the NRC cancelled a planned National Academies of Science (NAS) study on cancer incidence in populations residing near nuclear reactors, citing the NAS estimate of 3 years and \$8 million as being “too long and too expensive.” ([NRC, 2024](#)). Had that study been done, the NRC might have already received robust and unbiased data to swiftly make a determination on the effects of low-level radiation on large populations. Thus, I am encouraged to hear of Dr. Brenner’s study as outlined in his presentation at the July 16, 2025 meeting titled “Regulatory Dose Limits: Significance of Additional Data Sets and New Analysis Techniques” ([ML25195A136](#)), and urge the NRC to properly incorporate that novel causal study into this regulatory review. This 2-year regulatory review timeline shown during the NRC presentation is sure to cost far more than \$8 million. Those concerned about waste, fraud, and abuse should take note of what investments the NRC could have made in the NAS study or collaborations elsewhere that could have perhaps avoided this frivolous review.

It seemed that all presenters agreed that there is a gap that could be filled by properly exploring the cancer rates for nuclear reactor host communities, especially children. The communities lying closest to Seabrook Station in New Hampshire, such as Stratham, NH, where I live, have “significantly higher rates of cancer” than all other parts of the state (DHHS, 2016, Figure 6 below), according to reports from the State of New Hampshire Department of Health and Human Services (NH DHHS). A 2016 report describes how the New Hampshire State Cancer Registry (NHSCR) keeps records of cancer rates across the state, the purpose of which is in part “to provide an informational resource for the investigation of cancer and its causes” (DHHS, 2016). Yet, NH DHHS, like most states, has done no study to date on cancer incidence as it relates to proximity to, and length of residence near, the Seabrook Station nuclear reactor and/or Portsmouth Naval Shipyard.

Figure 6: Overall age-adjusted cancer incidence rates among NH residents by county diagnosed between 2009 and 2013



Another example is the 2017 Seacoast NH Pediatric Cancer Cluster study, which sought to better understand Rye, NH’s highest-in-the-nation rates for a specific, rare, childhood cancer (NH DHHS, 2017). When the study’s report was initially published in 2016, there was no consideration of the proximity to Seabrook Station and the Portsmouth Naval Shipyard and associated estimated additional radiation dose received. In response to exhaustive public advocacy, NH DHHS simply expanded the geographic area and surveyed participants to ask whether they resided near Seabrook Station—which is not very useful in determining the lack or presence of causal links between radiation and this cancer cluster. It represents a missed opportunity to incorporate the role of nuclear reactors’ radiological emissions in any meaningful way and, again, leaving questions from members of the public like me, to ask, why is there a perceived political and industry opposition to studying cancer incidence in populations near nuclear reactors?

Opponents of the LNT who complain that there is no robust causal data cannot at the same time block efforts to study whether that causation does or does not exist.

6. Some arguments for more nuanced radiation protection in certain non-reactor settings make sense, but do not warrant sweeping regulatory changes that would apply to reactors:

The carveouts that I heard in the July 16, 2025 meeting, such as medical applications, or optimization of radiation monitoring by state agencies, sound like individual sectors that could benefit from more nuanced guidance from NRC on their particular applications. However, these in no way compel me to believe that it is justified to relax regulatory requirements broadly. I implore the NRC to give credibility to these presenters who were careful to use specific anecdotes to illustrate that exceptions are necessary when there is a public health benefit, but in no way

made a strong case to change the entire rule. Those presentations are not transferable and do not make the case for how radiation protection regulations can be safely loosened in the context of commercial nuclear power, military, and fuel cycle settings.

7. Consent must be considered:

We also must not lose focus on the concept of consent, and—referring to the earlier medical example—we must recognize the right of the individual patient to choose a higher radiation exposure risk in order to discover or treat a cancerous lesion that is more likely than radiation to kill them. The NRC must reject any comparison of that patient’s choice, with the risk to a nonconsenting baby in the womb of a nonconsenting woman living near a nuclear reactor. A member of the public living near a reactor, mining site, or fuel enrichment facility, has not provided consent to receive any radiation associated with that activity, let alone a level of radiation above what the most credible science compels us to do: limit exposure to the highest reasonable extent. The White House Executive Order from May 23, 2025 “Ordering the Reform of the Nuclear Regulatory Commission” calls upon the NRC to **review** [not a mandate to change] the radiation protection framework to facilitate nuclear power **while preserving safety** ([2025, Trump White House](#)).

8. Conclusion, I Urge the NRC to Retain its Implementation of LNT and ALARA Principles:

We, the American People, are relying on the NRC, as the authority on nuclear safety, to convey your knowledge and expertise to the President and to resist influence from any external stakeholders who would ask you to suspend your understanding of radiation safety in favor of an alternative narrative not rooted in facts but rather that appears to be based in a profit motive. It is a fallacy that facts about known radiation safety risks must be distorted in order for the nuclear industry to survive. The work to strike a balance falls to you, the regulator. That responsibility does not include lending credibility to non-credible hypotheses nor dismissal of well-established and internationally recognized scientific evidence supporting the LNT and ALARA principles.

Kindly,



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