

1 BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

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3 IN THE MATTER OF:

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5 WATER QUALITY STANDARDS AND)

6 EFFLUENT LIMITATIONS FOR)

7 THE CHICAGO AREA WATERWAY)

8 SYSTEM AND THE LOWER)

9 DES PLAINES RIVER:) No. R08-9

10 PROPOSED AMENDMENTS TO)

11 35 Ill. Adm. Code Parts)

12 301, 302, 303 and 304)

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15 REPORT OF PROCEEDINGS had before the
16 ILLINOIS POLLUTION CONTROL BOARD held on September
17 24, 2008, at 9:00 o'clock a.m. at the Thompson
18 Center, Room-2-025, Chicago, Illinois.

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1 A P P E A R A N C E S:

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4 MR. TANNER GIRARD, Member

5 MR. THOMAS E. JOHNSON, Member

6 MR. NICHOLAS E. MELAS, Member

7 MR. ANAND RAO, Senior Environmental Scientist

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1 CHAIRMAN TIPSORD: Good morning.
2 My name is Marie Tipsord, and I'm the Board
3 hearing officer in this proceeding, water quality
4 standards and effluent limitations for the Chicago
5 are waterway systems and lower Des Plaines River,
6 proposed amendments 35-11 Admn Code, 301, 302,
7 303. And 304. Docket number R08-9.

8 I'll introduce the panel this
9 morning. To my immediate right is Dr. Tanner
10 Girard, the lead Board member assigned this
11 matter. To his immediate right is Board member
12 Nicolas Melas, and Board member Andrea Moore will
13 be joining us shortly. To my far left is Board
14 member Thomas Johnson and to my immediate left is
15 Anand Rao of our technical staff. I think that's
16 all of us here today. This is day two of the
17 fifth set of day of hearings to be held in this
18 proceeding. We're going to continue with the
19 District's testimony this morning and continued
20 with Dr. Dorevitch and questioning by the IEPA.

21 With that, Dr. Dorevitch, I will
22 remind you that you are still sworn in.

23 MS. WILLIAMS: Good morning,
24 Dr. Dorevitch. Please let me know right away if

1 you can't hear me because I had some issues with
2 that yesterday.

3 CHAIRMAN TIPSORD: That's why we
4 moved you closer.

5 MS. WILLIAMS: We'll start off
6 easily hopefully this morning with, it will be a
7 housekeeping question. I want to turn to question
8 12 of our pre-filed question. And that question
9 is, you testified that public comment 63 is from
10 Daniel Woltering of WERF. Did you mean to say
11 public comment number 66?

12 THE WITNESS: Yes.

13 MS. WILLIAMS: Question 13, I
14 believe you talked about this yesterday, what
15 water is the CHEERS study looking at for the
16 general use recreators group? I know you
17 mentioned Lake Michigan and Skokie lagoons
18 yesterday. Are there others?

19 THE WITNESS: There are.

20 MS. WILLIAMS: Can you name them?

21 THE WITNESS: Tampeer Lake, Busse
22 Lake, Crystal Lake, Fox River.

23 CHAIRMAN TIPSORD: You are going to
24 have to speak up. We can't hear you at the end of

1 the table.

2 THE WITNESS: Tampeer lake, Busse
3 Lake, Crystal Lake, in addition to the Skokie
4 lagoons and Lake Michigan.

5 MS. WILLIAMS: And obviously you are
6 referring to portions of the Des Plaines River
7 that are not part of this study area that we are
8 looking at in this rule making?

9 THE WITNESS: I'm referring to
10 northern portions of the Des Plaines River, not
11 downstream of the confluence with the CAWS system.

12 MS. WILLIAMS: Good. Thank you.

13 MR. ANDES: If I can follow-up just
14 to expand on that a little bit.

15 Dr. Dorevitch, in terms of the
16 Lake, you are looking at a series of locations
17 along Lake Michigan, right?

18 THE WITNESS: Correct.

19 MR. ANDES: Do you want to lay those
20 out?

21 THE WITNESS: Sure. At Lake
22 Michigan we recruit people and make water quality
23 measurements at 63rd Street, Montrose Beach,
24 Montrose Harbor, Leon Beach, Diversey Harbor,

1 Fullerton Avenue, and -- by Northerly Island. I
2 forgot the name of the designation for that beach,
3 but -- I think Burnham Harbor -- no, not Burnham
4 Harbor -- but at Northerly Island, at that site.

5 MS. WILLIAMS: Can you explain for
6 us why you feel that the CHEERS study will "in
7 several respects surpass USEPA's ongoing research
8 about primary contact recreation known as the
9 National Epidemiological and Environmental
10 Assessment of Recreational Water or the NEAR
11 Study?

12 THE WITNESS: Well, I don't mean to
13 be criticizing the NEAR Study. We have the
14 advantage of being able to develop the CHEER Study
15 after the NEAR Study was piloted, developed,
16 launched, papers published. So we had the
17 opportunity to in some respects make additional
18 types of water quality measurements and health
19 measurements that they aren't making. The
20 published papers that have come out of the NEAR
21 Study have focused on enterococci and bacteroides
22 in water samples measured by quantitative PCR
23 measurements. We looked at a broader array of
24 indicators, pathogen indicators, such as e-coli

1 and enterococci by culture, coliphages,
2 malspecific and somatic and colophage stereotypes.
3 We also measured pathogens in the water, such as
4 girardia, cryptosporidium and neurovirus.

5 Second, the NEAR Study --

6 MS. WILLIAMS: Wait, let's stop
7 there before we get to the next point to make sure
8 I understand your first point.

9 So when you are referring to
10 looking in a broader array of indicators, and then
11 I believe you also said we look at more pathogens
12 in the water?

13 THE WITNESS: We looked at
14 pathogens, right.

15 MS. WILLIAMS: Explain to me, are
16 you talking about the ambient monitoring or are
17 you talking about the testing that's performed by
18 people who are there or both?

19 THE WITNESS: I'm talking about the
20 research team going out and collecting water
21 samples.

22 MS. WILLIAMS: Okay. So in the NEAR
23 Study the research team is only collecting --

24 THE WITNESS: I don't think they

1 are collecting pathogens, samples of pathogens
2 analyses, and the pathogens indicators that they
3 study are more limited. We study more indicators.

4 MS. WILLIAMS: Okay. Go ahead. Can
5 you finish then with your second point?

6 THE WITNESS: Sure. The second
7 point, the NEAR Study like most other studies of
8 water recreation, rely on questionnaire data to
9 determine if somebody gets sick. We do that as
10 well, but in addition we attempt to collect
11 clinical specimens from people who have gotten
12 sick and to identify pathogens. So that is
13 something that the NEAR Study doesn't do.

14 Third, in the NEAR Study,
15 telephone contact is made between days 10 and 12
16 and participants are interviewed about their
17 health status. We follow people on day two, day
18 five and day 21 post-recreation or post-enrollment
19 in recreation. So we're following them for a
20 longer time period, which may make it possible for
21 us to identify symptoms that develop late,
22 potentially due to infections by giardia or
23 cryptosporidium which have longer incubation
24 periods. And because we're contacting folks three

1 times, we may be getting more accurate information
2 about what happens in the initial days as well.

3 Fourth, the NEAR Study recruits
4 family units and interviews family units, whereas
5 we recruit and interview individuals. So although
6 a parent may be asked questions about the health
7 of their small children, in general each person is
8 reporting their own health, and I think that may
9 be an advantage. I am not sure how many parents
10 of teens really know their child's bowel habits,
11 let's say. So in that respect I think we may be
12 getting more valid measures of development of
13 symptoms and the timing of symptoms. So that's
14 what I meant. I didn't mean it as a criticism of
15 the NEAR Study.

16 MS. WILLIAMS: That's very helpful,
17 Thank you.

18 Question 15 is referring to some
19 testimony at the bottom of page 6. And I ask, can
20 you point to a citation that supports the idea
21 that U.S. EPA places considerable weight on
22 epidemiological studies when establishing
23 environmental standards?

24 THE WITNESS: Well, in terms of

1 water and air, it seems that the EPA does that.
2 In 1976 the EPA, U.S. EPA proposed water quality
3 criteria, and that was based solely on
4 epidemiologic studies.

5 MR. ANDES: We actually provided a
6 copy of that document yesterday. The 1986
7 Bacteria Criteria Document.

8 THE WITNESS: I'm sorry if I said --

9 MS. WILLIAMS: I thought he said '76.

10 THE WITNESS: Yes, there was an
11 initial study based on the studies of Stevenson in
12 the 1950's. In 1986 new recreational water
13 quality standards were proposed, again based upon
14 epidemiologic studies. This time the EPA studies
15 by Dufour and Cavelli again in the late 70's.
16 Again, even though there were other types of water
17 quality research done at that point, it was
18 strictly the epidemiologic studies that were
19 considered. In 2000 under the Beach Act, again,
20 the EPA initiated epidemiologic studies. In 2004
21 the EPA published a recreational water quality
22 rule again, and this was based on the 1986
23 standard which was based on epidemiologic studies.
24 Last month --

1 MS. WILLIAMS: Just to clarify,
2 that's a draft, correct? That's the draft rule
3 that you are referring to in 2004 or are you
4 referring to something else?

5 THE WITNESS: I believe in
6 November 2004 all states that hadn't already
7 adopted the 1986 criteria or other criteria, I
8 think there are 35 coastal states and great lake
9 states and up to that point 21 had not yet adopted
10 the 1986 criteria, and in November of 2004 they
11 essentially, that was made law.

12 MS. WILLIAMS: Under the Beach Act?

13 THE WITNESS: Yes.

14 And last month the U.S. EPA and
15 the National Resources Defense Council reached a
16 settlement agreement, again, emphasizing the
17 completion of epidemiologic studies, the support
18 of ongoing epidemiologic studies. And even in the
19 1986 standards, it doesn't use the term only
20 epidemiologic studies count, but it called for --
21 the document reviewed work to date in that area
22 and stated that prior to the proposal there were
23 limitations and studies of association between
24 health and water quality were limited. So that

1 wasn't called an epidemiologic study, but that's
2 what they were asking for and that's what the EPA
3 did.

4 MS. WILLIAMS: So your conclusion is
5 based upon what they had and what they relied upon
6 developing?

7 THE WITNESS: Yes, I think it sort
8 of speaks for itself that although there are risk
9 assessments and pure microbial studies, it's the
10 epidemiologic studies that seem to be the basis
11 for the water quality standards.

12 MS. WILLIAMS: As far as you know,
13 they haven't relied on risk assessment as a
14 significant factor in developing their criteria to
15 date?

16 THE WITNESS: For the -- I mean,
17 it's really the 1986 standards that became the
18 2004 standards, and those were based on
19 epidemiologic studies.

20 CHAIRMAN TIPSORD: Excuse me,
21 Mr. Harley, you have a follow-up?

22 MR, HARLEY: Dr. Dorevitch, my name
23 is Keith Harley. I represent the Southeast
24 Environmental Task Force. Excited to see you

1 again.

2 Dr. Dorevitch, while we are on
3 the topic of the role of public health studies,
4 epidemiological studies and the development of
5 rule making or regulatory standards, I don't
6 believe we've had anyone in the record yet
7 describe the concept of the Cautionary Principle.
8 Are you familiar with the Precautionary Principle?

9 THE WITNESS: I'm familiar with the
10 term, sure.

11 MR, HARLEY: Could you describe for
12 the record what the Precautionary Principle is?

13 THE WITNESS: Well, I'm not really
14 prepared to articulate in real specificity what it
15 is, but I think in general terms it's a matter of
16 playing things safe that, let's say, a new
17 chemical comes into use, should it be widely used
18 before there's substantial testing that goes on
19 or should we take the precaution of saying, it may
20 be harmful, let's first determine what the health
21 risks are. So it's the view that play it safe
22 rather than assume everything is benign, something
23 along those lines.

24 MR. HARLEY: Another hypothetical.

1 If you are familiar with this, are you familiar
2 with any situations where the Precautionary
3 Principle has been applied in regulatory activity
4 where you have already the presence of more
5 toxins in the environment and also receptors,
6 human receptors?

7 THE WITNESS: I'm not -- I don't
8 really know the answer to that. I mean, no, I
9 don't know about how the Precautionary Principle
10 might have been applied in regulations -- in
11 those, you know, in that setting that you are
12 describing.

13 MR. HARLEY: So to be absolutely
14 clear about your answer, you are not familiar of
15 any instance in which the Precautionary Principle
16 has been applied in regulatory activity where you
17 have both the presence of pollutants or toxins in
18 the environment and receptors?

19 THE WITNESS: I'm not sure exactly
20 what you mean. I mean, in terms of water quality
21 and air quality standards. Is there a way you can
22 make your question more specific because I'm not
23 sure what you mean?

24 MR. HARLEY: In your pre-filed

1 testimony you describe that you have extensive
2 knowledge of rule making regulatory activity on
3 both air and water side?

4 THE WITNESS: I'm not sure I said I
5 have extensive experience in that, but I'm talking
6 about how the EPA has used epidemiologic studies
7 as the basis for regulation for both water and
8 air.

9 CHAIRMAN TIPSORD: That's U.S. EPA?

10 THE WITNESS: U.S. EPA, right. I
11 mean, are you asking about how does the EPA create
12 safety factors to be more protective? I mean, I
13 don't recall regulation where the term
14 Precautionary Principle is applied saying that --
15 I'm not familiar with that.

16 MR. HARLEY: Thank you.

17 CHAIRMAN TIPSORD: Ms. Alexander, do
18 you have a follow-up?

19 MS. ALEXANDER: This is Ann
20 Alexander from the Natural Resource Defense
21 Council. I want to follow-up with the settlement
22 agreement with the Natural Resources Defense
23 Council.

24 Have you read that settlement

1 agreement, Dr. Dorevitch?

2 THE WITNESS: Yes.

3 MS. ALEXANDER: Are you aware of
4 anything in the settlement agreement that
5 explicitly requires that U.S. EPA rely on the
6 results of any one epi study in setting its
7 standards?

8 THE WITNESS: No, the agreement
9 called for the EPA to complete the ongoing
10 epidemiologic study to support the epidemiologic
11 study at Avalon, California, but it didn't
12 explicitly say only one epidemiologic study counts
13 and it requires it for regulation.

14 MS. ALEXANDER: And it required also
15 that EPA review existing epidemiological studies,
16 correct?

17 THE WITNESS: I believe so, but I
18 don't have the document in front of me, but I
19 believe it said that, yes.

20 CHAIRMAN TIPSORD: For the record,
21 is this Exhibit 58 that we're discussing?

22 MS. ALEXANDER: Yes, it's
23 Exhibit 58.

24 CHAIRMAN TIPSORD: I just want to be

1 clear that that is part of the record. So it's
2 Exhibit 58. I apologize for interrupting.

3 MS. ALEXANDER: And it further
4 requires before the promulgation of these
5 regulations that the EPA will convene a scientific
6 expert workshop to review the epidemiological
7 study as part of the decision making process,
8 correct?

9 THE WITNESS: Like I said, I don't
10 have the document in front of me, but that sounds
11 right.

12 MS. ALEXANDER: Okay, thank you.

13 CHAIRMAN TIPSORD: Ms. Williams?

14 MS. WILLIAMS: I believe yesterday
15 you testified that you had reviewed the
16 probabilistic Microbial Risk Assessment that was
17 performed by the District; is that correct?

18 THE WITNESS: Performed for the
19 District by Geosyntec, yes.

20 CHAIRMAN TIPSORD: Excuse me, again
21 for the record that's Exhibit 71, I believe?

22 MS. WILLIAMS: I think that's
23 correct.

24 Did you rely on that study at

1 all in developing your methodology for the CHEERS
2 study?

3 THE WITNESS: No.

4 MS. WILLIAMS: I'm going to jump
5 ahead to question 23 just because I think it
6 flows. There's a quote in your testimony that
7 "The conduct of an epidemiological and risk
8 assessment in tandem is unusual and this
9 opportunity to evaluate the strength and
10 limitations of risk assessment methods is one
11 reason there's considerable national interest in
12 applying the final result of this research to the
13 development of water quality regulations." Could
14 you explain, just explain the statement a little
15 bit. I think that will be helpful.

16 THE WITNESS: Well, there are many
17 risk assessments, but there are very few
18 epidemiologic studies. Epidemiologic studies are
19 very costly, time intensive, labor intensive, and
20 I think yesterday we reviewed the -- or at least
21 mentioned a handful of studies that have been
22 done, and there are many risk assessments which
23 involve using mathematical models that can rely on
24 epidemiologic studies for their inputs.

1 MS. WILLIAMS: So let me see if this
2 is correct. So in theory after your study is
3 completed, would you envision it would be helpful
4 to rerun these models with new inputs and verify
5 the results?

6 THE WITNESS: I think that may be
7 helpful.

8 MS. WILLIAMS: And what do you think
9 that would be helpful to show?

10 THE WITNESS: Well, I don't think
11 it's a matter so much of showing anything, but I
12 think that so little is known about incidental
13 contact recreation that assumptions have to be
14 made in developing the risk assessment models, and
15 at the completion of our study some of the
16 assumptions will be shown to be over, right on
17 target or too conservative or not conservative
18 enough. So I think that it may help produce
19 results, not just in this setting, but in other
20 settings about incidental contact recreation based
21 on actual observations of hundreds of people.

22 MS. WILLIAMS: Can you specify
23 inputs to that model that could be tweaked as a
24 result of the epidemiological study you are doing?

1 THE WITNESS: I think -- well, the
2 inputs include things like distribution of
3 recreational activities, duration of recreational
4 activities, the frequency of -- I believe
5 frequency of swallowing water or capsizing. And
6 those are areas that we'll have information about.
7 Some aspects, such as the dose response -- let me
8 back up.

9 I used the term yesterday dose
10 response to mean something like concentration of
11 microbes in the water as a predictor of health
12 risks. In the risk assessment, they use dose
13 response to mean how many cysts of giardia does
14 somebody have to swallow before the probability of
15 infection goes up. That's something that the
16 researching, that the CHEERS research study won't
17 be able to help with their input. How many
18 neuroviruses in the water does somebody have to
19 swallow before they get sick again. That's not
20 something that the CHEERS study will be able to
21 reduce uncertainties.

22 MS. WILLIAMS: Do you feel that the
23 certainties of the science on the dose response
24 inputs are good now or is more research needed in

1 that area as well?

2 THE WITNESS: I couldn't comment on
3 that. I mean, I haven't gone through that
4 literature about risk assessment regarding, you
5 know, that kind of information, how many cysts or
6 how many virus particles does somebody have to
7 swallow. So I don't know if their assumptions are
8 state of the science or more conservative or less
9 or guesswork, I don't know.

10 MS. WILLIAMS: If you were going to
11 rerun a risk assessment model, using some of the
12 results of your study, would you think that it
13 should also include ambient data that you've
14 collected?

15 THE WITNESS: It could. It could.

16 MS. WILLIAMS: Can you think of
17 anything else?

18 MR. ANDES: Anything else in his
19 study that should be used in rechecking the risk
20 assessment?

21 MS. WILLIAMS: Correct. Or any
22 other input, right, that could be rechecked using
23 outputs of his study.

24 MR. ANDES: Beyond water quality

1 data assumptions.

2 MS. WILLIAMS: I'm just asking if
3 there's anything he may have left out of his
4 answer.

5 THE WITNESS: No, I think those
6 would be the ones, the recreational data, the sort
7 of behavioral data, the water quality data.

8 MS. WILLIAMS: But the information
9 you are developing about actually getting sick
10 can't be used with this model?

11 THE WITNESS: No, it couldn't. The
12 model could be compared to our results, but that
13 isn't really an input to the model. That's sort
14 of the final product of the risk assessment model.

15 MS. WILLIAMS: Thank you.

16 MR. ANDES: Let me clarify that.
17 You wouldn't take numbers of people getting sick
18 in an epidemiologic study and then plunk that into
19 a risk assessment -- am I correct that the risk
20 assessment gets to the same end goal but in a
21 different way?

22 THE WITNESS: Correct.

23 MS. WILLIAMS: And if the numbers
24 don't match, that indicates that the problem is

1 with the model, correct?

2 THE WITNESS: Well, it could be that
3 one is wrong or both are wrong. I think the
4 epidemiological study involves directly measuring
5 something as opposed to modeling it. So you can
6 call it my bias as an epidemiologist, but I would
7 look at that as an opportunity to review the
8 assessment, the assumptions that went into the
9 model of the risk assessment and to see if there
10 were any systematic errors in the epidemiologic
11 study that produced a result that's, you know,
12 discordant with what was found by the risk
13 assessment.

14 MS. WILLIAMS: I'll go back now to
15 question 16, which states, when you testify
16 regarding methods of ingestion on page 6, you
17 indicate that capsizing or falling into the water
18 is an unlikely event. Can you tell me what you
19 mean by that or what you base that on?

20 THE WITNESS: I base that on my own
21 observations from working in the field, especially
22 last season, and interviewing people. It's not
23 based on analysis of the data. That question will
24 be answered, but it seems quite uncommon.

1 CHAIRMAN TIPSORD: Mr. Harley, you
2 have a follow-up question?

3 MR. HARLEY: In terms of your
4 observations, what years are we talking about for
5 your observations of users of the CAWS?

6 THE WITNESS: 2007 and 2008.

7 MR. HARLEY: And I believe you
8 testified yesterday that the users that you will
9 be following as part of your study will be 2007,
10 2008 and 2009?

11 THE WITNESS: Yes.

12 MR. HARLEY: In terms of the results
13 of your study, will they be predicted in terms of
14 what will happen in 2012 in terms of the types of
15 uses of the CAWS?

16 THE WITNESS: If the uses are the
17 same and the water quality is the same and the
18 behavior of the people using the water is the
19 same, yes.

20 MR. HARLEY: But what if any one of
21 those three things is not true? What if the uses
22 of the water are different in 2012?

23 THE WITNESS: You know, there could
24 be any permutation of more use and less risky

1 behavioral or more risky behavior or increases in
2 -- improvement of water quality in some areas and
3 worsening in others, changes in rain fall
4 patterns. So I couldn't tell you if in 2012 rates
5 of illness may be higher, lower or the same, but
6 it's conceivable that conditions can change and it
7 could lead to different rates of illness in the
8 future.

9 MR. HARLEY: And that would be true
10 for every year subsequent to the completion of
11 your study?

12 THE WITNESS: It would be true
13 subsequent to the completion of any
14 epidemiological study, that the NEAR Study is
15 doing things right now on the Golf Coast and in
16 Rhode Island, and next year at those same places
17 they are not going to be out there doing that
18 study, but the assumption is that dramatic changes
19 aren't going to happen. And we can't continually
20 conduct surveillance like this so that the
21 findings should be generally applicable to future
22 years, unless there are major changes, especially
23 changes all in the same direction.

24 MR. ANDES: If I can follow-up on

1 that for a minute. A couple questions, Dr.
2 Dorevitch. If you predict rates of illness, if
3 you see rates of illness say per thousand
4 recreators in the results from the epi study,
5 would more people being on the water change the
6 rate of illness?

7 THE WITNESS: More people being on
8 the water may change the number of illnesses, but
9 more people by itself shouldn't have an impact on
10 the rate of illnesses.

11 MR. ANDES: And are the current EPA
12 criteria for bacteria based on studies done in the
13 80's?

14 THE WITNESS: 70's and -- yes.

15 MR. ANDES: So those are generally
16 felt to be relevant beyond just the immediate year
17 they are done?

18 THE WITNESS: Yes, they are not
19 considered to be the final word, but, right, the
20 standards aren't updated every year based on 1987
21 data and 1988 data. The 1986 standard or criteria
22 has held.

23 CHAIRMAN TIPSORD: Dr. Dorevitch,
24 you are talking to Mr. Andes and not the rest of

1 us.

2 THE WITNESS: I'm sorry. Where did
3 you lose me?

4 CHAIRMAN TIPSORD: Just, you were
5 trailing off. Go ahead where you were at.

6 THE WITNESS: The assumption is that
7 1986 data are going to be relevant in 1987 and
8 1988, and I believe that would be true for our
9 results as well.

10 CHAIRMAN TIPSORD: Mr. Harley, go
11 ahead, and then Ms. Alexander.

12 MR. HARLEY: So that your testimony
13 is clear on this, you mentioned, I believe, three
14 important variables that could change over time,
15 that might change the assessment that you are
16 doing now. One was that the uses of the water
17 could change; is that correct?

18 THE WITNESS: That is correct.

19 MR. HARLEY: The water quality could
20 change?

21 THE WITNESS: Correct.

22 MR. HARLEY: Meteorological
23 conditions could vary?

24 THE WITNESS: Yes.

1 MR. HARLEY: I have one question and
2 then I'll turn it over to others. You mentioned
3 in your pre-filed testimony that you do have
4 experience participating in other rule making
5 regulatory activity; is that correct?

6 THE WITNESS: That's correct.

7 MR. HARLEY: In the context of this
8 regulatory activity, do you know if this
9 regulatory activity is designed to protect actual
10 uses only, today's uses only?

11 THE WITNESS: I believe that the
12 standard a would have three components, one would
13 be a use designation, one would be a water quality
14 criteria, a measurement to protect those uses, and
15 a third would be a plan to make, to keep the water
16 quality at an acceptable level. So the use that's
17 designated may be the same as current uses or it
18 may be different.

19 MR. HARLEY: Let me be absolutely
20 specific then in terms of what I'm asking, which
21 would be a first. Are potential uses of the
22 Chicago area waterways relevant to this rule
23 making activity?

24 THE WITNESS: I think that we're

1 trying to answer a question about incidental
2 contact recreation, not scuba diving, say, so
3 whether or not scuba diving is a potential future
4 use, it's beyond the scope of what can be studied.

5 MR. ANDES: If I can follow-up on
6 that. Is scuba diving one of the designated uses
7 in this proposal? Let me ask more generally. Is
8 primary contact recreation one of the proposed
9 uses for this water in the IEPA rules?

10 THE WITNESS: No, it's not.

11 MR. ANDES: Thank you.

12 CHAIRMAN TIPSORD: Ms. Alexander?

13 MS. ALEXANDER: Just a quick
14 follow-up on that last exchange. I understand
15 that you are saying the potential increased use
16 for scuba diving, for instance, you don't believe
17 is relevant, correct?

18 THE WITNESS: Correct.

19 MS. ALEXANDER: But do you believe
20 that potential increased use for more high contact
21 types of secondary contact activity, such as
22 kayaking is relevant?

23 THE WITNESS: If it turns out that
24 kayaking is a riskier activity than say fishing

1 and there in the future there would be more
2 kayaking, then that could change the overall
3 picture of use.

4 MS. ALEXANDER: Or riskier than say
5 power boating?

6 THE WITNESS: Any activity of higher
7 or lower risk could increase or decrease which
8 would have an impact on overall risks.

9 MS. ALEXANDER: You testified in
10 response to one of Mr. Andes' questions, I
11 believe, that if the number of users on the CAWS
12 went up, that might increase the number of
13 illnesses but not the rate of illnesses; is that
14 correct?

15 THE WITNESS: Yes.

16 MS. ALEXANDER: However, would it
17 not be the case that if the increase were not
18 across the board in every activity, such that the
19 percentages stayed the same but there was a
20 significant increase in an activity that lets
21 hypothesize such as kayaking resulted in a higher
22 rate of illness because people were more likely to
23 get wet and fall in the water, would that not
24 increase also the rate of illness?

1 THE WITNESS: Like I said, any
2 changes can happen in the distribution of
3 different activities. Some higher risks. Some
4 lower risks. If it turns out there are
5 differences in risk, those could be increases or
6 decreases, and that could change the rate in
7 either direction. So, yes, that is possible.

8 MS. ALEXANDER: So just to summarize
9 if, for instance, there were going to be new boat
10 launches going in, increased uses of boat launches
11 and they were going to be used for activity such
12 as kyacking which we'll designate as a higher
13 risk, that could change the rate of illness?

14 THE WITNESS: That could change the
15 rate of illness. I don't know if kayaking is
16 going to increase the rate or lower the rate, but
17 it could change it.

18 CHAIRMAN TIPSORD: Ms. Meyers-Glen?

19 MS. MEYERS-GLEN: You mentioned
20 there were three factors which could alter --
21 basically when Mr. Harley asked you about factors
22 which can alter pollution, you had mentioned that
23 uses of water could change, water quality could
24 change and meteorological conditions could vary.

1 Are you familiar with Tunnel and Reservoir Program
2 or TARP?

3 THE WITNESS: Yes.

4 MS. MEYERS-GLEN: And once the
5 completion of TARP -- are you familiar with the
6 completion of TARP that the estimates by the
7 District state that 98 percent of CSO in the
8 Chicago area waterways --

9 MR. ANDES: I don't know that. That
10 statement hasn't been offered.

11 MS. MEYERS-GLEN: Are you familiar
12 as to how much TARP is supposed to remove CSOs
13 when completed?

14 THE WITNESS: I don't know the exact
15 number. I don't know the number. I don't know
16 the percent of CSOs that are predicted to be
17 produced.

18 MS. MEYERS-GLEN: As far as the
19 completion of TARP, would that be another factor
20 which could vary the rate of illness?

21 THE WITNESS: It could.

22 MR. ANDES: If I could follow-up on
23 that. Would it be your sense that the completion
24 of TARP would improve water quality and therefore

1 decrease the overall rate of illness?

2 THE WITNESS: If it did in fact
3 result in less frequent CSOs or smaller volume
4 CSOs and less pathogens entering the waterway,
5 yes, I would think that specifically, especially
6 on days following a CSO event or heavy rain fall,
7 it would improve -- it would lead to relatively
8 improved water quality and a lower rate of
9 illness.

10 MR. ANDES: So that would be a lower
11 rate of illness than you would have observed in
12 your EPI study?

13 THE WITNESS: It could be that way,
14 yes.

15 MS. MEYERS-GLEN: On dry water days
16 when approximately one hundred percent or up to
17 one hundred percent of the water flowing from the
18 CAWS is from effluent, would that still be the
19 case?

20 THE WITNESS: I was under the
21 impression that it was 70 percent of the flow is
22 effluent, not 100 percent. But would it still be
23 the case that CSOs, that the completion of TARP is
24 going to change water quality on dry weather days,

1 is that the question?

2 MS. MEYERS-GLEN: That is correct.

3 THE WITNESS: I think that the TARP
4 is about protecting water quality following rain
5 events.

6 MS. MEYERS-GLEN: So just to be
7 clear then, so that would not effect dry weather
8 days, is that correct?

9 THE WITNESS: Dry weather days in
10 the sense after a heavy rain fall CSO's -- my
11 understanding is that there are two kinds of CSOs,
12 that there are the passive CSOs which happen in
13 over hours or a day following a heavy rainy event,
14 and then there are active CSOs where pumping
15 station activity can go on for a week or more
16 following heavy rain fall. So those days may be
17 dry. But the effects of the CSO may still be
18 felt. So I don't want to get into splitting hairs
19 about what is dry, but it's not just days where
20 there's no rain that are dry from the CSO
21 perspective. It's number of days following heavy
22 rain fall.

23 MS. MEYERS-GLEN: However we're
24 defining dry weather, however, there will be days

1 where the CSOs are not going to be the same kind
2 of factor when there is no rain event
3 contributing, correct?

4 THE WITNESS: Correct.

5 CHAIRMAN TIPSORD: Ms. Williams, I
6 think we're back to you.

7 MS. WILLIAMS: I guess I'll
8 follow-up on this area before I go back. So in
9 your opinion, just generally, no hair splitting
10 here, do you believe less pathogens in the water
11 will result in less illnesses to people?

12 THE WITNESS: I think the study will
13 end up giving us an answer to that, but there
14 haven't been incidental contact studies that have
15 shown that, and even the larger studies like the
16 NEAR Study didn't measure pathogens. So, you
17 know, I think we could say a little bit more about
18 indicators in health risk, but our work will be
19 some of the first large scale studies of pathogens
20 as predictors of rates of illness.

21 CHAIRMAN TIPSORD: Mr. Harley, you
22 have a follow-up?

23 MR. HARLEY: Or on that very point.
24 On page 2 of your pre-filed testimony, you reflect

1 on the fact that there are few studies that have
2 been completed on the issue of recreation and
3 limited contact recreation, and a quote from your
4 pre-filed testimony is that, "We are just
5 beginning to develop the scientific data that will
6 help define what regulatory measures are
7 appropriate for protecting the health of the
8 public." Is that your testimony still today?

9 THE WITNESS: Yes.

10 MR. HARLEY: In light of the fact
11 that we don't have a significant body of research,
12 why shouldn't the precautionary principle apply in
13 this rule making?

14 THE WITNESS: Are you asking me to
15 interpret the Clean Water Act?

16 MR. HARLEY: No, I'm asking your
17 opinion as a medical doctor and a public health
18 specialist.

19 THE WITNESS: I think we have some
20 sources of information already about whether
21 there's an unacceptable health risk now. There
22 are thousands of people who use the waterways.
23 There is some surveillance system for disease
24 outbreaks, and I myself have interviewed study

1 participants who say they've used the waterways a
2 hundred times a year and have not gotten sick. So
3 that doesn't mean that there's no risk. It means,
4 I think, that we do have an opportunity to study
5 risk. I think to say that we should shut down all
6 recreation would be premature in that it isn't
7 based on any data.

8 MR. HARLEY: To quote from your
9 pre-filed testimony, "No studies have been done in
10 the U.S. -- no studies have been done in the U.S.
11 on limited contact recreation activity." Again
12 page 2 of your prefiled testimony. How does your
13 limited study, your limited observation of your
14 study provide the basis for the conclusion that
15 there is no health risk from human exposure to
16 pathogens in the CAWS?

17 THE WITNESS: I'm not saying there's
18 no human health risks to exposure to pathogens in
19 the CAWS. I'm saying that we should find that
20 out. I think if we're going to have recreation on
21 the CAWS or no recreation on the CAWS, we should
22 know what the risks are or if public health
23 measures, disinfection, other procedures are going
24 to be instituted, I think it's important to start

1 out with knowing what are the risks. So like I
2 said before about Precautionary Principle, a new
3 chemical is introduced, it would be important to
4 know what are the health risks of that chemical
5 and not to say we cannot have new chemicals, let's
6 evaluate with it, and that's what we're doing.
7 This is a little different in that recreation has
8 been ongoing, and now we're saying it's
9 continuing, let's find out what the health risks
10 are.

11 CHAIRMAN TIPSORD: Ms. Williams?

12 MS. WILLIAMS: I'd like to go back
13 to your answer to my last question because I'm not
14 sure I understood it. So when I asked if less
15 pathogens in the water would result in lower
16 illnesses, I think you said we don't really know
17 but we know more about indicators. Can you please
18 explain that?

19 THE WITNESS: I'm talking about
20 epidemiologic studies and the epidemiologic
21 studies that have identified measures of water
22 quality as predictors of illness rates have
23 focused on indicators. The NEAR Study focusing on
24 enterococci measured by the QPCR method. In other

1 primary contact research in the United Kingdom,
2 controlled trials of swimming versus not swimming,
3 again, it's indicators that have been studied. So
4 I'm not saying pathogens are good for you or
5 anything like that. I'm saying the literature is
6 relatively silent on that matter.

7 MS. WILLIAMS: But it's the
8 pathogens that make you sick, correct?

9 THE WITNESS: It's the pathogens as
10 well as -- it may be chemicals in the water. It
11 may be water contact itself is causing some skin
12 breakdown and skin symptoms. So it's not
13 exclusively the pathogens that cause symptoms, but
14 pathogens make people sick.

15 MS. WILLIAMS: We spent a lot of
16 time last week discussing or two weeks ago
17 discussing that although it's indicators that have
18 been used in the epidemiological studies, the link
19 between indicators and illness is not a good one;
20 Would you agree with that statement?

21 THE WITNESS: I'm not sure what "a
22 good one" means.

23 MS. WILLIAMS: That there's a
24 correlation or that it's reliable.

1 THE WITNESS: In the NEAR Study,
2 indicators were shown to predict rates of illness.

3 MS. WILLIAMS: And which indicators?

4 THE WITNESS: Enterococci measured
5 by culture and enterococci measured by QPCR, but
6 when they used both in the same model, it was the
7 enterococci by QPCR that was the better predictor.

8 MS. WILLIAMS: And did they look at
9 e-coli and fecal chloroforms?

10 THE WITNESS: They didn't report
11 that. They did look at bacteroides initially, but
12 they had high rates of undetectable, below the
13 limit of quantitation, and they didn't report that
14 in their later work. Now that's the NEAR Study.

15 There was another study by
16 Pullford in 2007 which didn't find a relationship
17 between microbial measures of water quality and
18 health risk. So it's not across the board that
19 indicators are good predictors, but in the papers
20 published by the NEAR Study, they were.

21 MS. WILLIAMS: I think I'm just a
22 little surprised by that answer primarily because
23 of the testimony previously from Dr. Gerba. I
24 don't think that was what he testified when he was

1 asked these questions. Are you familiar with his
2 answers to those questions?

3 THE WITNESS: No.

4 MS. WILLIAMS: Let's go back to my
5 pre-filed questions. I think number 18 was sort
6 of discussed yesterday, but I'd like you to answer
7 for me, has U.S. EPA reviewed the methodology and
8 preliminary data from the CHEERS study?

9 THE WITNESS: The U.S. EPA as an
10 organization has not. When the study was on the
11 drawing board still, I met with Mr. Efram King,
12 the Director of the Office of Science and
13 Technology within the EPA Office of Water, and
14 several of his staff were in the conference room
15 and several were on the phone, several folks from
16 the EPA's Office For Research and Development were
17 on the phone, and we discussed the protocol in
18 draft form for the CHEERS research study and got
19 feedback from Mr. King and other participants in
20 those conversations. Two U.S. EPA staff are on
21 our peer review committee that has reviewed our
22 initial proposal and our summary of the 2007
23 season, and I remain in touch with them through
24 conference calls and will continue having the peer

1 review group evaluate progress to date. So in
2 that respect individuals from relevant branches of
3 the EPA have had opportunities to comment on it,
4 but I don't have an official EPA seal of approval
5 saying, go to it, it looks good.

6 MS. WILLIAMS: How did you -- as far
7 as the comments that they made, how did you deal
8 with those comments?

9 THE WITNESS: Well, the comments
10 were generally supportive. There were suggestions
11 that came up that have been incorporated into the
12 design of the study. People from Dr. King's
13 office commented on coliphages being a potentially
14 useful indicator, pathogen indicator to measure
15 that was not part of our original research plan,
16 and at that point that was incorporated into the
17 study and we do measurements for coliphages so --

18 MS. WILLIAMS: Were there some
19 discussions that you just felt were not
20 appropriate to incorporate into the design?

21 THE WITNESS: Are you talking about
22 specifically from Mr. King and that meeting or
23 other comments along the way at peer review
24 meetings or --

1 MS. WILLIAMS: Specifically at that
2 meeting I guess at that point.

3 THE WITNESS: No, there wasn't
4 anything that was not acceptable or not doable.

5 MS. WILLIAMS: And the other
6 comments will be addressed through a peer review
7 process -- when you said outside of that, comments
8 received outside of that, I assume you are saying
9 is part of the peer review process?

10 THE WITNESS: Right, correct.

11 MS. WILLIAMS: And the study will be
12 peer reviewed when it's completed as well?

13 THE WITNESS: It is peer reviewed.
14 It remains peer reviewed, and at the time that we
15 have results and they would be submitted for
16 publication in peer review journals, that would be
17 another level of review. And certainly our peer
18 review group would absolutely review our results
19 before they are final.

20 MR. ANDES: Before you move on, if I
21 can follow-up, and let me go back for a minute to
22 the discussion about the NEAR Study, as well as
23 Pullford. If I can characterize your testimony
24 accurately, you talk about the NEAR study

1 indicating possible connections between certain
2 indicators and rates of illness. The Pullford
3 Study, on the other hand, did not indicate such a
4 connection?

5 THE WITNESS: Correct.

6 MR. ANDES: Those are both as to
7 primary recreation, am I right?

8 THE WITNESS: Yes.

9 MR. ANDES: Am I correct in terms of
10 studies we have discussed regarding incidental
11 contact recreation, which were the two Futrell
12 Studies and the Lee Study, two of them which dealt
13 with white water canoeing indicated some rate of
14 illness, correct?

15 THE WITNESS: Yes -- well, the Lee
16 Study, they all -- Lee and Futrell '92 reported
17 rates of illness. Futrell '94 did not report
18 rates of illness.

19 MR. ANDES: And Futrell '94 dealt
20 with other types of --

21 THE WITNESS: Canoeing, marathon
22 canoeing -- Futrell '94 dealt with canoe marathons
23 and rowing regattas. Lee '97 and Lee '92 dealt
24 with white water slaloming and canoeing.

1 MR. ANDES: So the Futrell '94 study
2 did not afford a higher level of illness, correct?

3 THE WITNESS: Correct.

4 MR. ANDES: The Lee study had a
5 report of significant rate of illness, but had no
6 control group to compare it to, am I correct on
7 that?

8 THE WITNESS: Yes.

9 MR. ANDES: Those are the incidental
10 recreational contact studies that you've referred
11 to?

12 THE WITNESS: Yes.

13 MR. ANDES: As opposed to the NEAR
14 Study, Pullford, and other studies that are primary
15 contact recreation?

16 THE WITNESS: Correct.

17 CHAIRMAN TIPSORD: Since this is a
18 new transcript, those are all part of the record
19 as exhibits and have been marked the last couple
20 days and several days.

21 MS. WILLIAMS: Dr. Dorevitch, I
22 think when Mr. Harley was asking you questions,
23 and in other lines of questioning, you've
24 testified that we really don't know what the risks

1 are from incidental contact recreation and we need
2 to find those out. Does that sound like an
3 accurate paraphrasing of your testimony?

4 THE WITNESS: Yes, we don't know
5 what they are in this setting for sure.

6 MS. WILLIAMS: Based on some of
7 those responses, I really want to ask you about a
8 particular statement in your testimony that I find
9 troubling and not really in line what I've heard
10 from you here in person. On page 8 you say, and
11 this is from question 20, "Our preliminary
12 observation suggests no danger to the health of
13 the population of limited contact recreators on
14 the CAWS."

15 MR. ANDES: I'm sorry, what page was
16 that?

17 MS. WILLIAMS: Eight.

18 MR. ANDES: And you are claiming
19 that is somehow inconsistent with what he said?
20 Would you like to elaborate on that?

21 MS. WILLIAMS: I'd like him to
22 explain the definitiveness of this statement
23 relative to his previous answers.

24 THE WITNESS: Well, what I was

1 talking about, I think I said that I was referring
2 to a preliminary analysis of the 2007 data, and I
3 said that that preliminary analysis didn't
4 identify differences in rates of gastrointestinal
5 symptoms in participants among the three groups.
6 That's only 811 people were in that data set, and
7 that's less than ten percent of our total. So I
8 don't mean to say anything conclusive that limited
9 contact recreation or incidental contact
10 recreation is risk free.

11 MS. WILLIAMS: You don't mean to say
12 that you are comfortable today to say you know
13 it's safe?

14 THE WITNESS: I don't think anybody
15 knows what the health risks are of incidental
16 contact recreation on the CAWS. I think what I
17 was saying is that, it's a little bit like what I
18 was saying about the outbreaks. Outbreaks haven't
19 been identified. The absence of known outbreaks
20 doesn't prove that there's no risk. Likewise had
21 the preliminary analysis from 2007 shown a very
22 high risk in one group relevant to the other two,
23 that would be concerning. That's not what was
24 observed. It doesn't mean that there isn't a

1 risk, but at that point I hadn't identified any
2 increased risk. I'm not saying that there is no
3 increased risk. It's entirely possible that one
4 of the groups is going to have higher rates than
5 one of the others, but that didn't show up in the
6 2007 preliminary data. And I think this is
7 consistent with what I'm saying, that conducting
8 the study, completing the study, getting to the
9 answers will tell us, are the risks increased,
10 what is that increase and how does it compare to
11 other groups.

12 MS. WILLIAMS: And there's certainly
13 with only 10 percent of the study participants to
14 reach that conclusion yet one way or another?

15 THE WITNESS: Yes, unless there were
16 a very, very high risk, it wouldn't be detected in
17 ten percent of a sample.

18 CHAIRMAN TIPSORD: Ms. Alexander,
19 you had a follow-up?

20 MS. ALEXANDER: Yes, I had a
21 follow-up on this question in the sample size. Am
22 a correct in understanding that it's your
23 testimony that a sample size of 811 people, which
24 is approximately a little less than ten percent of

1 your total, is insufficient to produce
2 statistically reliable data at this point?

3 THE WITNESS: It's insufficient to
4 test the hypothesis that recreation on the CAWS is
5 a different risk than recreation in one of the
6 other two groups.

7 MS. ALEXANDER: And that would be
8 because the number of people sampled so far is too
9 small; you have to get up to your total number
10 which I believe was 9333?

11 THE WITNESS: 9330, yes.

12 MS. ALEXANDER: How did you arrive
13 at that number 9330?

14 THE WITNESS: There's a statistical
15 method called sample size power calculation, and
16 there's a statistician who is part of the research
17 team, and the statistician and I developed that
18 based on certain assumptions. We assumed that 15
19 percent of the people would drop out along the
20 way, and it turns out that less than one percent
21 of the people dropped out along the way. So we
22 probably have more statistical power. We'll
23 probably be able to say more than we thought we
24 would once we get to that number.

1 Another assumption is rates of
2 illness in the background group, the unexposed
3 group, and that came from the rates of illness
4 among the unexposed beach goers within the NEAR
5 Study. That in the -- at a Lake Michigan Beach
6 and a Lake Erie Beach about 50 to 75 people per
7 thousand got sick who were nonswimmers. So that
8 of one of the bases we used to determine -- that's
9 one of the inputs that goes into a sample size
10 calculation.

11 MS. ALEXANDER: You testified
12 yesterday that the overall purpose of the study is
13 to assess risks of all uses on the CAWS, is that
14 correct, as they are currently occurring?

15 THE WITNESS: I'm not sure I said
16 all uses as they are currently occurring.

17 MS. ALEXANDER: But essentially
18 risks of use of the CAWS, including multiple
19 activities I should say.

20 THE WITNESS: That subset of
21 activity that fall into our definition of
22 incidental contact.

23 MS. ALEXANDER: Now, if one were to
24 decide to conduct an epidemiological study of just

1 one of those activities, say for instance one
2 wanted to conduct a study to determine a risk,
3 specifically of kyacking and not of the other
4 activity, would you also need a sample size of
5 9330 or might you use a different sample size?

6 THE WITNESS: You would use 9330.

7 MS. ALEXANDER: Okay. Thank you.

8 MS. DEXTER: Jessica Dexter with the
9 Environmental Law Policy Center. Would you say
10 that based upon your, based on your observations
11 that there are more recreators on the CAWS this
12 year than you saw last year?

13 THE WITNESS: It's a little hard to
14 know for sure because last year the study began on
15 August 4th, so sort of past the midpoint of the
16 summer. Whereas this year we began in April. So
17 we've certainly enrolled many more people. At
18 some locations I think use is higher. I can think
19 of one particular location where use seems to be
20 lower, but at North Avenue on the west side of the
21 turning basin use is higher. I don't know how
22 much angling took place on the main stem last
23 year, but this year there are a number of events.
24 So some places it's higher. It seems at the

1 Skokie Rowing Center there's less activity. There
2 may be less at Worth and Alsip this year. These
3 are just impressions. It's not definitive. But
4 we do collect the kind of data that would allow us
5 to compare year to year changes in use by
6 location.

7 MR. ANDES: I'd like to follow-up
8 going back to the size of the study. As I
9 understand it right now, you don't know which
10 particular uses might have more or less exposure?

11 THE WITNESS: Right.

12 MR. ANDES: That's one of the issues
13 that the study will help determine?

14 THE WITNESS: Correct.

15 MR. ANDES: So at this point does it
16 make sense to look at all uses and gather
17 information about them all or would you highlight
18 one and collect information only about that one?

19 THE WITNESS: Well, I wouldn't zero
20 in on any one at this point. I think the question
21 that we're trying to address is about the risks of
22 current uses. So since there are multiple current
23 uses, we enroll people doing a variety, and I'm
24 not starting with any assumptions that one

1 activity is more or less risky than the others.

2 So, no, I don't think it would be wise if we had
3 restricted it to one particular recreation
4 activity.

5 MR. ANDES: If you ended up finding
6 that there were particular issues as to one or
7 another of those activities, there's certainly the
8 opportunity for further assessment of that issue,
9 which could actually include going back as the
10 Illinois EPA identified and rerunning the risk
11 assessment model with the new inputs that you
12 would have provided, correct?

13 THE WITNESS: I think that our
14 inputs would be useful for future risk
15 assessments, yes.

16 MR. ANDES: Thank you.

17 MS. WILLIAMS: Dr. Dorevitch, did
18 you just testify that the NEAR Study found 50 to
19 75 illnesses in the nonexposed group?

20 THE WITNESS: It varied by beach,
21 but that ballpark of about 75 per thousand
22 nonswimmers got sick.

23 MS. WILLIAMS: I guess what's
24 confusing me or what I want to understand a little

1 bit better is, that seems like a pretty wide
2 variation, 25 per one thousand given what we're
3 trying to find out in your study. Do you think
4 it's a range? Do you think there was enough
5 information in the NEAR study to say 75?

6 THE WITNESS: Well, that wasn't the
7 only --

8 MS. WILLIAMS: I want to understand
9 what the -- I don't want to say margin of error.
10 That's not the right terminology, but what is the
11 variability?

12 THE WITNESS: Variability? Well,
13 that wasn't the only data source I looked at. I
14 looked at studies of vaccine safety where
15 thousands of people will get a vaccine and
16 thousands of people will get a placebo, and they
17 track symptoms as a way of monitoring side effects
18 that follow vaccination. So I looked at rates of
19 gastrointestinal symptoms among the people who got
20 placebos, and that came out, again, about the
21 same. That was about 50 per thousand.

22 Looking at the NEAR data is better
23 because our questions -- our questionnaires come
24 from their questionnaires. So the way you ask the

1 question has a lot to do with the results you get
2 and -- so to keep this in apples to apples
3 comparison, I relied more heavily on the NEAR
4 Study rate of illness in unexposed, than say the
5 vaccine trials where they assessed development of
6 symptoms in a different way. But there is
7 variability. Even within the NEAR Study they had
8 rates of -- they would go to the same beach
9 multiple times, and on some days the unexposed
10 rate was 50 per thousand, and other days it was
11 100 per thousand. So this bounces around. There
12 isn't a -- I can't think of a better way to
13 predict what rates of illness will be in our
14 unexposed group, other than the NEAR Study
15 unexposed group where they use essentially the
16 same questionnaire to determine the same
17 information.

18 MS. WILLIAMS: But you'll rely on
19 the actual rates that you find in developing the
20 the NEAR Study?

21 THE WITNESS: Of course.

22 MS. WILLIAMS: And at this point in
23 your primarily results are you finding an
24 increased risk to recreators generally over the

1 control group?

2 THE WITNESS: Well, we don't really
3 call any of them control. There's an unexposed
4 group, a general use group, and a CAWS group, and
5 that preliminary analysis of only less than ten
6 percent of the data showed equivalent rates.

7 MR. ANDES: Equivalent rates between
8 the unexposed group and the CAWS?

9 THE WITNESS: All three groups.

10 MR. ANDES: And the general use.

11 THE WITNESS: All three groups.

12 Again, I don't mean to say that we won't find
13 differences or there aren't differences, but just
14 checking to make sure that we're not sitting on an
15 epidemic of really high rates in one group, I
16 don't see that so far. I don't see anything that
17 looks like that.

18 MS. WILLIAMS: But when you say
19 epidemiologic, you mean the same as an outbreak?

20 THE WITNESS: I mean, a big public
21 health problem. I mean an outbreak, an
22 epidemiologic, higher number of disease than
23 expected, yes.

24 MS. WILLIAMS: Number 22, can you

1 explain the statement, "Preliminary analysis of
2 2007 data shows that the assumption regarding the
3 duration of various recreational activities were
4 quite accurate"?

5 THE WITNESS: I can, and you might
6 not be surprised that I have a handout again.

7 MR. ANDES: No chart, just handouts.

8 CHAIRMAN TIPSORD: Darn, an hour and
9 a half in before our first exhibit.

10 MR. ANDES: We overdosed on them
11 yesterday.

12 CHAIRMAN TIPSORD: I've been handed
13 a color chart, plural, stapled together with QMRA
14 at the top. If there's no objection, we'll mark
15 this as Exhibit 111. Seeing none, it's
16 Exhibit 111.

17 (Document marked as Exhibit
18 111 for identification.)

19 THE WITNESS: So if I can walk you
20 through it. These are comparisons of some of the
21 assessment, some of the assumptions that went into
22 the risk assessment which are things that we've
23 observed in the CHEERS study. Again, not all of
24 the inputs into the risk assessment model can be

1 validated or refuted in the CHEERS study, but they
2 did make certain assumptions about durations of
3 recreational activity. I have on this handout on
4 the top half the risk assessment assumption about
5 the duration of specific recreational activities,
6 and on the bottom half what we observed in CHEERS.

7 What we have observed in CHEERS
8 though, this is not limited to CAWS recreation.
9 This would be from both the CAWS group and the
10 general use group, and what I meant when I said
11 that the assumptions were accurate, looking at the
12 first page, it says "pleasure boating." In the
13 risk assessment, they assumed a minimum duration
14 of one hour. The most typical duration would be
15 four hours, and the maximum would be eight hours.
16 What we observed is that the minimum duration was
17 one hour. The most frequent was four hours. The
18 maximum was 11 hours. So this is pretty similar
19 form -- this is similar to the triangle that they
20 have in terms of the ends of the triangle and the
21 peak of that triangle. For canoeing, the risk
22 assessment -- this is now the back side of that
23 first page -- for canoeing in the risk assessment,
24 they assumed a minimum of one hour, a mode of two

1 talking out loud.

2 THE WITNESS: But we have some
3 observations about the duration of kayaking. So
4 what I said, that assumptions were accurate or if
5 anything a little conservative, it's about
6 duration of specific recreational categories, and
7 I don't mean to make it more than that, but that's
8 the comparison.

9 MS. WILLIAMS: My understanding, and
10 this may be incorrect, is that kayaking and
11 canoeing were treated the same. And the risk
12 assessment shows there is a difference one way or
13 another.

14 THE WITNESS: That's a possibility.
15 Well, they both seem to be different than boating,
16 than say motor boating. They both seem to be
17 shorter duration activities, but it looks like --
18 oh, I'm sorry, I skipped fishing.

19 MS. WILLIAMS: No, no, you said
20 that.

21 MR. ANDES: If canoeing and
22 kayaking is the same, which I believe is right of
23 the risk assessment, if you look at the canoeing
24 distribution assessment and applied to kayaking

1 what would be your conclusion?

2 THE WITNESS: Well, they assumed a
3 mode of two hours, our most frequent duration of
4 kayaking was three hours. So we observed
5 something a little bit longer in duration. They
6 assumed a maximum of five hours. We observed
7 kayakers that went all the way between hours
8 seven and eight. So it looks triangular. It does
9 have sort of -- it's not an isometric triangle.
10 Sort of the tail leads to the right, but for
11 kayaking, think we observed longer duration of
12 activity than canoeing, and they may be two
13 different animals that have different durations
14 that the shape of the canoeing triangle from the
15 risk assessment looks similar to -- I mean, it
16 looks similar to what we see for kayaking, but for
17 canoeing we see shorter durations.

18 MR. ANDES: So in terms of canoeing,
19 they in fact assume a fair number of expeditions
20 are three hours or longer, and yours indicates
21 that the bulk are two to three hours, between two
22 and three hours, very little after that; am I
23 correct?

24 THE WITNESS: For canoeing, and I'm

1 sorry, for kayaking, right.

2 MR. ANDES: Beyond three hours,
3 their distribution assumes a fair number, a fair
4 part of their distribution is after three hours?

5 THE WITNESS: Right, and for
6 canoeing that's even more true that they assume
7 longer durations than we observed.

8 MR. ANDES: Thank you.

9 MS. WILLIAMS: I understand these
10 are very preliminary?

11 THE WITNESS: Yes.

12 MS. WILLIAMS: Would you think
13 though one thing your study might be able to show
14 is whether the risk assessment model should treat
15 those two activities differently?

16 THE WITNESS: Yes.

17 MS. WILLIAMS: I think I understand
18 number 24, but maybe I should explain it. When
19 you identify the participants recruited for
20 CHEERS, are they all different people or could the
21 same individual be included multiple times?

22 THE WITNESS: The same individual
23 could be included multiple times.

24 MS. WILLIAMS: And could you explain

1 the duration, distribution for that, how long in
2 between?

3 THE WITNESS: Somebody who enrolled
4 is followed for 21 days. Once somebody completes
5 their final day 21 phone call, which may only
6 happen on day 22 or 23 if we can't reach them on
7 day 21, they are able to re-enroll.

8 MS. WILLIAMS: And will there be a
9 way to tell at the end exactly how many
10 individuals are included?

11 THE WITNESS: Yes.

12 MS. WILLIAMS: There will be a
13 tracking of whether it's 8000 or something in
14 distinct individuals somewhere in this?

15 THE WITNESS: Yes, we'll be able to
16 tell that.

17 MS. WILLIAMS: On page 8 you state,
18 "Well, inconsistencies between our observations
19 and those of the UAA regarding the frequency of
20 specific recreational activities and the
21 distinction between uses and users are likely due
22 to different methodologies." Could you explain
23 what you are referring to here?

24 THE WITNESS: Well, what I'm

1 referring to is a comparison of our use survey,
2 not the refusal tally, not the people who we
3 approach to enroll but don't enroll, but when our
4 staff are out there tallying how many people are
5 launching, are beginning new recreational
6 activity, the summary of that information gives --
7 paints a different picture of use of the CAWS than
8 what was in the UAA report. Specifically there
9 seems to be more fishing and boating especially
10 noted on the north branch in the UAA than what we
11 observed, and we're doing it different ways. I
12 don't have a real clear picture of how the UAA
13 process worked for tallying use, but it seems to
14 me that fishing is less common, especially on the
15 north branch in relation to other activities, and
16 the north shore channel in relation to other
17 activities and motorboating, again, is a lower
18 percent of recreational activity on the north
19 branch than what was summarized in the UAA report.

20 MR. ANDES: So if I'm clear, you
21 found more fishing, less power boating?

22 THE WITNESS: We found less fishing
23 and less power boating.

24 MR. ANDES: Okay, I'm sorry.

1 THE WITNESS: We found more,
2 relatively more canoeing, kayaking and rowing.

3 MS. WILLIAMS: And I think you are
4 being very polite in your references to the UAA
5 because I'm not sure there was a methodology that
6 was trying to very accurately give numbers to
7 users as opposed to identifying that the use was
8 occurring.

9 THE WITNESS: Yes, I can tell that
10 there were two approaches. There was a going out
11 and counting people approach, and there was a
12 getting information from boat launches, license
13 fees, kayak vendor receipts, things like that.
14 But I know that our method is fairly rigorous in
15 protocol driven, and I can evaluate the strengths
16 and limitations of that method. I couldn't say
17 that about the UAA.

18 MS. WILLIAMS: And that's really
19 more what my question is getting at. What are the
20 some of the strengths -- I mean, I am not sure I
21 understand your methodology exactly.

22 THE WITNESS: Our methodology is
23 that a person, at locations where we conduct the
24 research study where we are enrolling study

1 participants and sampling water, a member of the
2 research team is the use survey person. That's
3 their job for the day or for several hours and
4 they can rotate. And they have a clipboard, and
5 there's a chart where they tally new uses. In
6 other words, somebody passing by on a boat isn't a
7 new use. Somebody launching a boat is a new use.
8 Three people going out in one boat is three uses.
9 Not one. We don't count people who are returning.
10 We don't want to count the same person twice. So
11 if we count somebody when they launch, we don't
12 count when they return. So I think that it's a
13 pretty good way of estimating use, new uses at a
14 location per unit of time. It's not a
15 comprehensive rereview of everything that's going
16 on all over the waterways. But, you know, I kind
17 of know what my measurements are at the end of the
18 day.

19 MS. WILLIAMS: And I think you've
20 explained what my question 28 was asking. In your
21 testimony I think it implied or in the letter
22 attached to your testimony, I'm sorry, it implied
23 that the same person was enrolling new
24 participants as was also counting recreators, and

1 to me that seemed like a lot?

2 THE WITNESS: No, it isn't that
3 way. The priority of the staff is to interview
4 and recruit study participants. So if let's say a
5 group goes out kayaking and twenty people come
6 back at once, we're not going make them wait in
7 line so the use survey can be done. The use
8 survey person would be pulled and would do
9 interviews and we would have missing data during
10 those intervals when no data is collected. We
11 wouldn't assume that no people are launching, no
12 observations are made. That generally doesn't
13 happen though. That's unusual.

14 We also obtain information from
15 organizers of events such as Friends of the
16 Chicago River Flat Water Classic, the Dragon Boat
17 Races, the Mid-America Canoe Marathon. Just
18 different activities where it isn't always easy to
19 count all the people, but the organizers generally
20 have information about the number of people who
21 participated in an event.

22 MS. WILLIAMS: Okay, I think that
23 helps. So when I asked how do they count
24 recreators while simultaneously signing up

1 participants, is the answer they stop counting?

2 THE WITNESS: Yes. They tally
3 every ten minutes. So if they start at
4 10:00 a.m., at 10:10 they will write down the
5 number of people who began using the waterway
6 during that ten-minute interval. So if somebody
7 is interviewing a study participant during that
8 time, that ten-minute block would be empty and we
9 wouldn't know.

10 MS. WILLIAMS: And if you are
11 counting from 10:00 to 10:10 and you've kind of
12 got seven or eight people, say you have eight
13 people and it's 10:07, do you discount that loss
14 because he wasn't able to complete the ten minutes
15 or do you take the numbers that were --

16 THE WITNESS: I think we have to --
17 I don't know if that's come up, but I think it
18 would be tricky unless they kept very accurate
19 time of when they stopped and sort of prorate it
20 as a seventy-percent of a block, I think we
21 probably just consider the entire block missing.

22 MS. WILLIAMS: I don't think I have
23 any other questions for Dr. Dorevitch.

24 CHAIRMAN TIPSORD: Mr. Harley?

1 MR. HARLEY: Could an individual who
2 is exposed by pathogens by the CAWS be
3 asymptomatic and transmit the disease to others?

4 THE WITNESS: That's theoretically
5 possible.

6 MR. HARLEY: How would that happen?

7 THE WITNESS: Just like you said. A
8 person who is asymptomatic with an infection
9 transmits it to another person. Usually we are
10 talking about intentional illness. It's the
11 fecal-oral route. I think I was in the room when
12 Dr. Gerba explicitly explained a little bit more
13 about fecal-oral transmission, but if they didn't
14 wash their hands carefully after going to the
15 bathroom, they could spread the infection to
16 another person, whether they are symptomatic or
17 not symptomatic.

18 MR. HARLEY: In your epidemiological
19 study, are you looking at the universe of the
20 exposed individuals or are you really focusing on
21 the users of the waterway?

22 THE WITNESS: We're only able to
23 study people who enroll in the research. So if
24 there's a user who not a study participant, I

1 don't know if they've gotten sick if that's what
2 you mean.

3 MR. HARLEY: So it's possible that
4 there are individuals who are experiencing
5 secondary exposures who are not being assessed in
6 your study?

7 THE WITNESS: Yes. I think we
8 talked about this yesterday, that we do ask
9 questions about ill family contacts, other people
10 in the family who may have gotten sick. But the
11 study is not designed to be able to -- the study
12 is not designed to establish secondary attack
13 rates, rates of illness that you are describing.

14 MR. ANDES: If I can follow-up on
15 that. Is it your understanding that the Geosyntec
16 Risk Assessment Report did deal with secondary
17 attack rates?

18 THE WITNESS: They did, but our
19 study is based on the NEAR Study, which does not
20 do that, and so we don't do that either.

21 MR. ANDES: So let me ask then,
22 would it be productive to look at risk assessment
23 and the epidemiological study together perhaps to
24 get a full picture of what the potential risk is,

1 particularly since they look at things in
2 different ways.

3 THE WITNESS: I think it's good to
4 look at both. I'm not exactly sure how we put it
5 all together to get a comprehensive picture of
6 secondary attack rates, but it's two different
7 ways of handling -- you could just add it
8 together, but you might want to look at both to
9 give you a fuller perspective. Yes, it would be
10 worth looking at.

11 MR. HARLEY: So the record is clear,
12 as part of your study, secondary attack rates or
13 secondary disease occurrences were not something
14 that you assessed beyond the immediate family?

15 THE WITNESS: That is correct. Just
16 like the other cohort studies of primary contact
17 recreation in the U.S., we're not doing that
18 either.

19 MR. HARLEY: One other question that
20 I have for you is, is it as focus of your study
21 not only -- let me strike that.

22 Does your study assess the
23 likelihood of an outbreak?

24 THE WITNESS: Our study --

1 MR. ANDES: How are you using
2 outbreak?

3 MR. HARLEY: In the way that he
4 described it in his testimony yesterday.

5 THE WITNESS: Our study is focusing
6 on the development of illness. There's endemic
7 disease and epidemic disease. Endemic disease are
8 sort of the background rate of illness. Epidemic
9 disease is a greater than expected number of
10 cases. Our study is looking at endemic disease.
11 Is there a certain percent of the population with
12 water exposure who has a higher background rate
13 than the unexposed group. On top of that, it's
14 conceivable that an epidemic could occur. If ten
15 percent of the people have GI symptoms in their
16 unexposed group and 11 percent have symptoms in
17 the two water exposed groups, and one day at a
18 particular launch for people doing a specific
19 activity, we see a rate of 20 per hundred, we see
20 a rate of 20, that would sound like an epidemic
21 superimposed on this endemic rate slightly above
22 the unexposed population's rate.

23 MR. HARLEY: But your study is not
24 focused on the risk of epidemic outbreak; your

1 study is focused on endemic occurrence?

2 THE WITNESS: It's much harder to
3 track endemic rates than epidemic. So we're
4 certainly able to identify higher than expected
5 rates within our study. We're able to evaluate
6 day-to-day rates as well.

7 CHAIRMAN TIPSORD: Ms. Alexander?

8 MS. ALEXANDER: Yes, I have a few
9 general follow-ups.

10 Dr. Dorevitch, would you say
11 there are some types of risk that are more
12 conducive to being studied through epidemiological
13 study than others?

14 THE WITNESS: Well, something that
15 is easily measurable is easier to study than
16 something not measurable. I'm not sure what you
17 mean.

18 MS. ALEXANDER: Well, perhaps I can
19 clarify. Would you say that frequently occurring
20 behavior or occurrences are easier to assess
21 through epidemiological study than infrequent
22 occurrences?

23 THE WITNESS: Well, infrequent
24 things are harder to count, but if you are talking

1 about the risk of infrequent things, it would
2 depend. If there's a very high risk, it may be
3 easier to study in a smaller number of people than
4 a very subtle risk in a larger sample of people.

5 MS. ALEXANDER: Well, just to take
6 as a hypothetical, if you are conducting a one
7 year, two or three year epi study, a broadly
8 defined a public health risk study, it would be
9 easier to study, for instance, automobile traffic
10 deaths than airplane deaths, right, because you
11 have more autos on the street, more frequent
12 occurrences, you might not ever have an airplane
13 crash during that period, right?

14 THE WITNESS: That's right.

15 MS. ALEXANDER: But you wouldn't
16 want to conclude from the fact that there was no
17 airplane crash that there's no risk to air travel
18 just that it couldn't be studied effectively in a
19 three-year epi study because there haven't been
20 enough crashes to assess in that time frame,
21 correct?

22 THE WITNESS: If there were no
23 crashes in that time frame, you could say there
24 were no crashes.

1 MR. ANDES: If I can follow-up on
2 that for a moment. If there were a high number
3 of airplane flights during that time period but
4 no crashes, couldn't you reach conclusions that
5 airplane travel is generally safe because there
6 were no crashes?

7 THE WITNESS: The rate you would
8 observe would be zero. So that's information --
9 it doesn't mean that there was no information
10 obtained by studying it. There were no crashes,
11 and there were car crashes, and there's something
12 to be said there.

13 MS. ALEXANDER: But you probably
14 wouldn't conclude from that data that there zero
15 airplane crashes in one or two or three years that
16 the risk of airplane travel was zero?

17 THE WITNESS: Well, statistics never
18 talk about zero, but things approach zero. And
19 based on the three-year period, one thing that you
20 could do is you could say, well, there were a
21 million airplane flights and zero crashes; there
22 were 20,000-car crashes and 200,000,000 vehicles.
23 You could say had there been one crash of an
24 airplane, what would the rate have been. And

1 there are statistical tests that could be done to
2 say given that period of observation, what do we
3 think had that study been conducted multiple
4 times, multiples years what the difference in
5 rates would have been. So zero car crashes
6 doesn't mean zero information. That's actually
7 helpful information.

8 MS. ALEXANDER: Well, bringing this
9 back to the CAWS, is it fair to say that
10 incidental contact recreation in the CAWS overall
11 was fairly conducive to an epidemiological study
12 in the sense that it happens reasonably frequently
13 and you could enroll some reasonable number of
14 participants?

15 THE WITNESS: I don't know if there
16 is a lot about the study that's easy, but there
17 are thousands of people who use the CAWS and we
18 are able to enroll them and follow them over time.

19 MS. ALEXANDER: Would it also be
20 fair to say that the risk of more infrequent
21 occurrences on the CAWS, and I would use as an
22 example a child falling out of a boat near an
23 outfall would not be as conducive to epi study,
24 just as the airplane crashes would be; would that

1 be correct?

2 THE WITNESS: I didn't say the
3 airplane crashes were, that such a study is not
4 helpful. It sounds like you've introduced a very
5 substantial statement about car crashes are common
6 and airplane crashes are rare. I think if we are
7 talking about a child falling out of a boat by an
8 outfall that I agree that sounds like something
9 that would be very rare. The study isn't actually
10 designed to make those kinds of observations.
11 Child falling out of boat, yes. Falling out of
12 boat by outfall, that isn't something specifically
13 we would record. But if it isn't observed or
14 isn't observed frequently, that would suggest that
15 it doesn't occur commonly.

16 MS. ALEXANDER: But that would not
17 lead to a conclusion that there were in fact no
18 risks associated with a child falling out of the
19 boat, particularly if it was near an outfall, is
20 that correct? Just that it doesn't occur
21 frequently?

22 THE WITNESS: Just that I wouldn't
23 say that planes never crash.

24 MS. ALEXANDER: Okay, thank you.

1 CHAIRMAN TIPSORD: Anything further
2 for Dr. Dorevitch?

3 Thank you very much. We
4 appreciate your testimony. And with that we will
5 take a ten-minute break and come back and start
6 with Suzanne O'Connell.

7 (Whereupon a brief recess was
8 taken, after which the
9 following proceedings were
10 had:)

11 CHAIRMAN TIPSORD: We're back on the
12 record. Welcome, Ms. O'Connell.

13 Can we have Ms. O'Connell sworn
14 in.

15 SUZANNE O'CONNELL
16 having been first duly sworn, was examined and
17 testified as follows:

18 CHAIRMAN TIPSORD: If we can have a
19 copy of her testimony, we'll enter it into the
20 record. Thank you very much. And I will enter
21 the pre-filed testimony of Suzanne O'Connell, if
22 there's no objection. Seeing none, here is
23 Exhibit 126789.

24 And I believe the IEPA is the

1 first of the group with questions.

2 MS. DIERS: Good morning,
3 Ms. O'Connell. My name is Stefanie Diers and I'll
4 be asking you questions on behalf of the IEPA.

5 I'm going to begin with question one
6 on our pre-filed testimony.

7 Are the figures the most current
8 information available concerning the number of
9 CSOs in the CAWS and lower Des Plaines River?

10 THE WITNESS: Yes, to my knowledge.

11 MS. DIERS: And I believe the
12 information was 2005, 2006 and 2007; is that
13 correct?

14 THE WITNESS: That's correct.

15 MS. DIERS: Do you have any
16 information thus far for 2008 on the two CSOs?

17 THE WITNESS: On the two CSOs.

18 MS. WILLIAMS: In 2008 any of the
19 CSOs.

20 THE WITNESS: We submit a report
21 quarterly to the IEPA so we do have data.

22 CHAIRMAN TIPSORD: Ms. O'Connell,
23 you are going to have to speak up.

24 THE WITNESS: We do keep a record

1 and we submit them to the IEPA on a quarterly
2 basis. So far this year we've submitted, for
3 January through March quarter, we submitted a
4 report in May, and then for the second quarter we
5 submitted that report in August. And so we'll be
6 submitting another one in November for the third,
7 and next February for the fourth quarter of 2008.
8 So we do have some data.

9 MR. ANDES: If I can interrupt here
10 for a moment. One thing we do have as a handout
11 and as a chart is the attachment which shows the
12 locations of the combined sewer overflow points.
13 So if that's okay, we can put that up and pass out
14 copies.

15 CHAIRMAN TIPSORD: And that's the
16 attachment to Ms. O'Connell's testimony?

17 MR. ANDES: Yes.

18 CHAIRMAN TIPSORD: We won't enter
19 that as a separate Exhibit.

20 MS. DIERS: How many overflows are
21 expected to occur after the completion of TARP?

22 THE WITNESS: I don't know.

23 MS. DIERS: No. 3, how many times
24 does an average CSO discharge per year?

1 THE WITNESS: Well, I'm not sure
2 what you would call an average CSO. I'm not sure
3 that there is such a thing so that's difficult to
4 say. There's many variables involved in the CSO.

5 MS. WILLIAMS: Can you explain some
6 of those many variables you are referring to in
7 the CSOs?

8 THE WITNESS: Well, it's the
9 duration of the rainfall, the intensity of the
10 rainfall, the distribution of the storm that's
11 occurring and that can vary greatly.

12 MS. DIERS: Finally, with question
13 four, do you know how many of the overflows you
14 mentioned on page 2 of your pre-filed testimony
15 occurred during the recreational season proposed
16 by IEPA?

17 THE WITNESS: Yes. In 2005 there
18 were a total of 33 days that had CSO activity, and
19 22 of those days occurred during the recreation
20 season. In 2006 there were 55 days out of the 65
21 that had CSO activity occur in recreation season,
22 and in 2007 there were 37 out of the total of
23 42 days that occurred in the recreation season.

24 MS. DEXTER: Jessica Dexter with the

1 Environmental Law Policy Center, do you know how
2 many of those days might have happened
3 consecutively?

4 THE WITNESS: Offhand, no, but I
5 seem to have track of when those occurred, yes.

6 MEMBER GIRARD: Can I ask a quick
7 follow-up. Can you point to your testimony where
8 you define recreation period or tell us what you
9 refer to as the recreation period?

10 THE WITNESS: I don't think it's in
11 my report, but my understanding is in the draft
12 regulation. It's March 1st through November 30th.

13 MEMBER GIRARD: Thank you.

14 CHAIRMAN TIPSORD: We'll turn it to
15 The Environmental Law and Policy Center.

16 MR. ETTINGER: This is Albert
17 Ettinger. I'm going to move down here. It's a
18 little hard to be heard from the end of the table.

19 Let the record show that, first
20 of all, I'm wearing my Bavarian jacket in honor of
21 our Eastern River Restoration project and October
22 Fest.

23 And my first question is, are
24 there CSO discharges that discharge into Lake

1 Michigan?

2 THE WITNESS: I am not aware of any
3 within the District's jurisdiction.

4 MR. ETTINGER: Do you know OF any
5 that are within or near the City of Chicago?

6 THE WITNESS: Well, the City is in
7 our jurisdiction.

8 MR. ANDES: She's not talking about
9 Milwaukee.

10 MR. ETTINGER: Okay, good. Looking
11 at this map, which I gather was attached to your
12 testimony, I see a couple points here that appear
13 to discharge to Grand Calumet. Are those above or
14 below the O'Brien Lochs.

15 THE WITNESS: The Grand Calumet is
16 below the O'Brien Lochs.

17 MR. ETTINGER: Are there any
18 discharges into the Calumet River below the
19 O'Brien Lochs?

20 THE WITNESS: Below?

21 MR. ETTINGER: On the lake side of
22 the O'Brien Lochs.

23 THE WITNESS: We have two pump
24 stations.

1 MR. ETTINGER: And they have CSO
2 discharges?

3 THE WITNESS: Yes.

4 MR. ETTINGER: Mr. Andes and I
5 discussed the second question, and I guess we were
6 just going to have you or he make a statement as
7 to what the data was rather than me try to do it
8 through examination.

9 THE WITNESS: Well, the data is the
10 data that we do submit to the IEPA on a quarterly
11 basis. So it's any monitored CSO that has
12 discharged, we log it and send the information to
13 the IEPA.

14 MR. ETTINGER: Do you do that as to
15 the both CSOs and the City's CSOs?

16 THE WITNESS: All monitored CSOs no
17 matter who they are.

18 MR. ETTINGER: That's within your
19 jurisdiction?

20 THE WITNESS: Yes.

21 MR. ETTINGER: But not Milwaukee?

22 THE WITNESS: Not Milwaukee.

23 MR. ETTINGER: Thank you. We can
24 get those from either you or IEPA? Are they

1 discharge monitoring reports or what do you call
2 them?

3 THE WITNESS: It's a quarterly CSO
4 monitoring report. It's submitted separately from
5 the DNRs.

6 CHAIRMAN TIPSORD: Anything further
7 for Ms. O'Connell? Thank you very much, Ms.
8 O'Connell. We'll move on to Dr. Rijal, if I'm
9 pronouncing that correctly?

10 Can we have her sworn in, please.

11 GEETA RIJAL
12 having been first duly sworn, was examined and
13 testified as follows:

14 CHAIRMAN TIPSORD: And if we have a
15 copy of her testimony.

16 MR. ANDES: We do. Since when with
17 attachments it's a, I believe, 886 pages we have
18 that on disk.

19 CHAIRMAN TIPSORD: Okay. If there's
20 no objection, I will mark Dr. Rijal's testimony as
21 Exhibit 133 with the CD Rom attachment as part of
22 that Exhibit. Seeing none, it's Exhibit 113. And
23 I believe we start with Ms. Alexander.

24

1 EXAMINATION

2 MS. ALEXANDER: Good morning,
3 Dr. Rijal. I'm Anne Alexander with the Natural
4 Resource Defense Council, and I have just a couple
5 preliminary questions before I start with the
6 pre-filed questions.

7 Did you have any involvement
8 with the preparation or review of the Microbial
9 Risk Assessment document that's at issue?

10 THE WITNESS: What do you mean by
11 involvement?

12 MS. ALEXANDER: I'm referring to the
13 document prepared by Geosyntec in connection with
14 this rule making.

15 THE WITNESS: I was involved
16 starting from the request of the proposal stage
17 and we had reviewed the proposals and finally the
18 project was awarded to Geosyntec, and we had
19 followed up with interim report until the end of
20 the final report.

21 MS. ALEXANDER: Were you involved in
22 any manner -- once Geosyntec was awarded the
23 contract, were you involved in any manner in the
24 substance of the study either in terms of review

1 or commenting on drafts or commenting on
2 procedures and protocols, methodologies or
3 anything like that?

4 THE WITNESS: No, because the
5 Geosyntec advisory team, panel, was in there. So
6 we based it on their final comments and their
7 study design. So we didn't comment on the
8 methodology they selected for the study. And at
9 that time to be correct, I was not -- I was not
10 the head, section head of the microbiology
11 section. There were supervisors at the upper
12 management level. And we participated in terms of
13 the scientific methodology they were proposing in
14 the study. We were involved in that. There was
15 some discussions, but there were no written
16 comments exchanged.

17 MS. ALEXANDER: What was the nature
18 of the discussions? Was there any disagreement
19 concerning methodologies and protocols?

20 THE WITNESS: If I recall, based on
21 my involvement during that, I don't recall any
22 disagreement.

23 MS. ALEXANDER: And have you
24 reviewed the final Microbial Risk Assessment?

1 THE WITNESS: Yes, I have.

2 MS. ALEXANDER: Have you reviewed
3 any of the correspondence between the districts
4 and/or Geosyntec and the United States
5 Environmental Protection Agency.

6 THE WITNESS: Yes, I was.

7 MS. ALEXANDER: Were you involved in
8 any manner in responding to that?

9 THE WITNESS: What do you mean
10 involvement in responding? Because we received
11 the response and comments from EPA, and the
12 Geosyntec team you know prepared the comments and
13 we sent those comments to EPA.

14 MS. ALEXANDER: My question is were
15 you in any way substantively involved in preparing
16 the substance of those comments or did you merely
17 pass them along to U.S. EPA?

18 THE WITNESS: Just passed it along
19 to the EPA.

20 MS. ALEXANDER: Now, regarding the
21 two District reports that are addressed in your
22 pre-filed testimony, who if anyone at the District
23 worked with you on preparation of those?

24 THE WITNESS: Which report are you

1 referring to?

2 MS. ALEXANDER: Referring to
3 District Report No. 2003-20, which is cited
4 starting on page 2 of your pre-filed testimony and
5 District Report No. 2007-79 cited starting at
6 page 3 of your testimony.

7 THE WITNESS: So you want me to list
8 all of the authors of this report?

9 MS. ALEXANDER: Are there a lot?

10 THE WITNESS: Well, I can just go,
11 to begin with the first report which is 2003-20, I
12 was the primary author, and we had a
13 biostatistician Zenal Abadin, Dr. Zamuda and
14 Bernard Sawyer, and another report --

15 MS. WILLIAMS: Can we just stop for a
16 second. Is that the same as attachment 3 to your
17 testimony?

18 THE WITNESS: Yes, I believe.

19 MS. ALEXANDER: I don't know that
20 there's any point reading into the record the
21 names of a lot of people who are listed on a
22 document. Is there a specific place that you are
23 looking on the study document itself that's in the
24 record already?

1 THE WITNESS: Oh, okay, no, I
2 thought you wanted me to name all those people who
3 were involved in the studies.

4 MS. ALEXANDER: Yes, I am looking.
5 All I have is a PDF page unfortunately. But I see
6 that you have listed a biostatistician, a
7 microbiologist and an assistant director of
8 research and development. I should rephrase the
9 question not to waste the room's time.

10 Were any people of those listed
11 on the documents involved in the preparation of
12 these studies? Anyone at the district or
13 otherwise?

14 THE WITNESS: Well, involvement does
15 involve the labs that did do that phase. So we
16 did acknowledge them. But the report is -- based
17 on the report prepared, these were the people that
18 were involved in the completion of this project.

19 MS. ALEXANDER: Turning to the
20 pre-filed questions. Question No. 1, which is
21 regarding District Report No. 2003-20, based on
22 sampling conducted in 2002, am I correct that the
23 sampling essentially compared fecal chloroform
24 levels at a monitoring location on the Des Plaines

1 River with level at the monitoring location
2 downstream of the Stickney Plant?

3 THE WITNESS: Yes.

4 MS. ALEXANDER: And were the fecal
5 chloroform levels at the Des Plaines River site
6 found to be higher in levels than the Sanitary and
7 Ship Canal site?

8 THE WITNESS: Yes.

9 MS. ALEXANDER: How many miles
10 downstream of the Stickney Plant was the
11 monitoring location of the Sanitary and Ship
12 Canal?

13 THE WITNESS: The sampling location
14 at the Sanitary Ship Canal is approximately
15 25 miles downstream of the Stickney plant.

16 MS. ALEXANDER: Why did you choose a
17 location so far downstream? What was the
18 scientific purpose in selecting that?

19 THE WITNESS: Because I was told to.

20 MS. ALEXANDER: By?

21 THE WITNESS: I'm just -- if you
22 have time, I'm going to give you what triggered
23 the study because of -- and there is a follow-up
24 question I think we have like why did you conduct

1 the study when there was no rule making, so I'm
2 going answer it also right now. That Stakeholder
3 Committee Meeting which was established I believe
4 in 2002 and the District went into agreement with
5 the Agency and with the IEPA consultants. This
6 was the discussions on the issue raised for use of
7 day-to-day analysis on the CAWS, and there were
8 several meeting, summary meetings reports that we
9 didn't attend, but we got the meeting minutes and
10 the issue raised in that meeting was to meet the
11 water quality standards to achieve water quality
12 standards for the lower Des Plaines River. And
13 this is in the meeting minutes of the May 16,
14 2002 -- I have that -- and I do have also the
15 agreement letter which was addressed -- where the
16 discussion about Lake Michigan -- not Lake
17 Michigan -- the lower Des Plaines River water
18 quality standard was discussed. And on that basis
19 we decided to select -- because the lower
20 Des Plaines River is below the confluence of the
21 Des Plaines River and the Chicago Sanitary Ship
22 Canal location where we sampled the Lockport
23 location.

24 So in order to achieve the water

1 quality standards at the lower Des Plaines River,
2 we wanted to understand the microbiology of the
3 fecal chloroform levels at these two locations to
4 see whether it is -- the district is the primary
5 source of FC burden at the lower Des Plaines
6 River. So that factor was used as one of the
7 issues that we would like to address before the
8 rule making.

9 MS. ALEXANDER: So the focus in other
10 words in a sense was the lower Des Plaines River?

11 THE WITNESS: Yes.

12 MS. ALEXANDER: Not anything in the
13 CAWS per se?

14 THE WITNESS: During that time, yes.

15 MS. ALEXANDER: You reference two
16 documents, the meeting minutes of May 16, 2002 and
17 the agreement letter. Are those marked as
18 exhibits yet? I don't believe they are.

19 CHAIRMAN TIPSORD: The meeting
20 minutes are Exhibit 36. They are the minutes from
21 lower Des Plaines and CAWS that the Agency
22 provided during their testimony. And I believe
23 those are meeting minutes from all of the
24 meetings.

1 MS. ALEXANDER: Okay.

2 THE WITNESS: Yes, I have the
3 agreement letter here. This is December 8, 2002
4 from Mr. Lanyard to Mr. Rab, and this statement of
5 understanding was between IEPA and the District on
6 use of intermittent analysis of Chicago area
7 waterways.

8 MR. ANDES: I think that the point
9 there is simply that that was the agreement under
10 which the District performed various studies. It
11 doesn't refer to specifically the study.
12 Everything was done consistent with that letter.

13 THE WITNESS: Yes.

14 MS. ALEXANDER: Okay. So in other
15 words, nothing from this study reached any
16 results, any conclusions regarding fecal coliform
17 levels closer to the Stickney plant; is that
18 correct?

19 THE WITNESS: This study was
20 basically comparing FC levels at the two sampling
21 locations.

22 MR. ANDES: Fecal coliform.

23 THE WITNESS: Fecal coliforms only.

24 MR. ANDES: The other two locations

1 were?

2 THE WITNESS: One was the Des
3 Plaines River which is above -- before the
4 Lockport, and another one is the Chicago Sanitary
5 and Ship Canal. It's not the same location, but
6 it's the location where we collect our ambient
7 water quality samples.

8 MS. ALEXANDER: Now, regarding
9 District -- this is pre-filed question two --
10 regarding District Report No. 2007-79, which was
11 commenced in 2004, in which you found that
12 measurable rainfall in the period March through
13 November on various years occurred between 33 and
14 46 percent of the calendar days approximately. My
15 question is, I'm altering the pre-filed question
16 just a bit based on previous testimony, but what
17 did you count as a measurable rainfall day? Was
18 that only the days that it actually rained or was
19 that the days that it rained plus days in which
20 water quality may have been influenced by that
21 rain?

22 THE WITNESS: The table that is
23 described in that report is based on, we have
24 rainfall gauge -- you know, the measurable

1 rainfall that was monitored by grading stations by
2 the District. And so if there was any measurable
3 rainfall for the year, the entire year recorded in
4 that report and that report also includes the rain
5 all within the recreational season, that's May to
6 October too. So it includes any measurable amount
7 of rainfall that was recorded by the rain gauge
8 station by the district, yes.

9 MS. ALEXANDER: Now, in the context
10 to this particular study, did you make any effort
11 to quantify the concept that's been referred to in
12 these proceedings as wet weather days? In other
13 words, this idea of days on which rainfall
14 actually occurs, plus days on which the levels of
15 discharge indicator bacteria are influenced by
16 those days?

17 THE WITNESS: Well, as you know the
18 other expert witness testified earlier, you know,
19 the wet weather influence is just not the day when
20 it rains. It doesn't end the same day. Then the
21 next day if it is dry, there is no measurable
22 rainfall recorded actually by the rain gauge
23 station, but the influence of the rainfall event
24 lasts longer.

1 MS. ALEXANDER: And my question is,
2 did you make any effort in the context of this
3 study to quantify the number of days in which that
4 lingering influence was there? In other words,
5 total days of rainfall plus influence?

6 THE WITNESS: We in the report that
7 we are referring to, 2007-79, we had fecal
8 coliform data from 2004 to 2006. We collected the
9 data, and whenever there was a heavy rain, the
10 criteria was that when the heavy rain or any storm
11 occurred, that it exceeded the capacity of the
12 TARP and there was an active discharge from the
13 pumping station of the District, then we will
14 follow the monitoring of fecal chloroform density
15 for three days. So we do have to that extent
16 fecal coliform distribution data.

17 MS. ALEXANDER: And I guess my
18 question is a little more specific than that.
19 Given that, I understand the raw data that you say
20 you followed for three days after rainfall
21 prompting one of these events, did you ever
22 attempt for any given years than to total up the
23 number of days in which either rain fell or there
24 was this lingering influence such as you can say

1 on, you know, 65 days were wet weather days under
2 that definition or 45 percent of the days, that
3 kind of thing?

4 THE WITNESS: Well, we have the
5 rainfall -- influence of the rainfalls. We did
6 evaluate that. And approximately the rainfall
7 days that occurs each year is about 145 days. So
8 the wet weather effect comes to 145 days each
9 year. This is approximate again. This is based
10 on the rainfall measured by the rain gauge
11 station. Now, if you factor in the influence of
12 rainfall events, which lasts longer than the rain
13 day, the first rain day, then you will have two
14 more days following the rain event. So if you
15 factor that in, say even one day post the rain
16 event, 145 plus 145, it's about 290 days. It's
17 more than 60 to 70 percent of -- you will see the
18 effect of the rainfall event.

19 MS. ALEXANDER: But of course you
20 wouldn't do that because not all of the rain --
21 because some of the rainy days occurred
22 consecutively, right? In other words, if it rains
23 for seven days straight, then you have seven days
24 of rain, plus three days under your scenario where

1 you have the lingering effect, right? You don't
2 have seven plus, you know, three, three additional
3 days for each of those seven days, correct?

4 THE WITNESS: You know, the
5 evaluation to the extent that we compared our
6 results with the risk assessment, what they found
7 in 2006, the true dry weather was approximately
8 85 percent time of the year. So when we looked
9 into that, it comes out pretty close to what we
10 are extrapolating based on we didn't actually look
11 at the the consecutive days that it rained, and
12 then the dry weather period. But it comes out to
13 be more than 50 to 60 percent that we will see the
14 effect of rain events.

15 MS. ALEXANDER: Now, in choosing
16 when to look at this lingering event, am I correct
17 in understanding that you didn't look at the
18 lingering effect after every single rainfall
19 event, but only after those that caused a
20 discharge of some sort?

21 THE WITNESS: No, that's not
22 correct.

23 MS. ALEXANDER: So did you -- help
24 me understand, did you actually measure the

1 lingering effect after every rainfall event
2 regardless of whether there was a discharge or did
3 you simply did you make an assumption regarding
4 whether there would be a lingering effect?

5 THE WITNESS: It's not an
6 assumption. We said that whenever there is a
7 heavy rain that will exceed the capacity of the
8 District TARP and there will an active discharge
9 from the pumping station, we will be sampling
10 three days consecutively after that rain event.

11 MS. ALEXANDER: What about a light
12 rain that would not prompt a discharge?

13 THE WITNESS: We do have data for
14 those events too.

15 MS. ALEXANDER: But as I understood
16 from your report, there were some rain events
17 which in fact did not result in a discharge?

18 THE WITNESS: Yes.

19 MS. ALEXANDER: What was the basis
20 for the decision to sample for three days
21 following an event?

22 THE WITNESS: The decision is, I was
23 going to refer to our sampling design, because you
24 know we are the lab people. We also have to work

1 it out with our sampling personnel who go out and
2 do the sampling. And if you owe -- I'm referring
3 this to Report No. 2007-79.

4 CHAIRMAN TIPSORD: Which attachment
5 is that to your testimony, please?

6 THE WITNESS: I believe it's
7 attachment 5. Yes, I'm going to this page because
8 I don't remember the days when they collected the
9 samples. So it was the north area station. It
10 was, the sample was collected on the first Tuesday
11 and second Mondays of each month.

12 CHAIRMAN TIPSORD: Excuse me,
13 Dr. Rijal, what page are you reading from?

14 THE WITNESS: Page 3.

15 CHAIRMAN TIPSORD: Go ahead.

16 THE WITNESS: So at the north area
17 stations on the first Tuesday and the second
18 Monday of each month the sample was collected for
19 fecal coliform, and at the south area station the
20 third Tuesday and the fourth Monday of each month.
21 And the samples were not collected during weekends
22 and holidays because of the overtime incurred. So
23 if you look at the data, we do have following the
24 rain event, the three days, but if it falls on the

1 weekend, we don't have the fecal chloroform data
2 for that day.

3 MS. ALEXANDER: So you sampled
4 regularly on the dates that you cited, and then in
5 addition to that, except on weekends, for three
6 days after an event?

7 THE WITNESS: Yes.

8 MS. ALEXANDER: My question is, what
9 is the basis for choosing three days? Why not
10 four? Why not two?

11 THE WITNESS: Well, it was basically
12 because to avoid overtime. If you have to give
13 overtime to the staff, this was an expensive
14 two-year project. But we did cover that also for
15 certain heavy rain events. We did have samples
16 for that. But there are studies that show the
17 die-off effect which lasts -- there was one
18 study -- I don't recall bacteria by USGS, and they
19 found that there is a lingering effect for almost
20 72 hours after the rain event. So we factored
21 that in, and we decided to select three days.
22 Like the day one is the rain event, and then the
23 first day and the second day we did the sampling.

24 MS. ALEXANDER: And you sampled for

1 these three days following a heavy rain event,
2 correct?

3 THE WITNESS: Yes.

4 MS. ALEXANDER: But not other rain
5 events?

6 THE WITNESS: When we analyzed all
7 the data, we found that there was a light rain
8 event period that was which, the light rain here
9 which fell into .1-inches of rainfall to less than
10 .5 inches of rainfall, and we have the data for
11 some of those events which followed for two days
12 post a light rain event.

13 MS. ALEXANDER: But you didn't
14 deliberately go out and sample for three days
15 anything other than heavy rain, correct?

16 THE WITNESS: Yes.

17 MS. ALEXANDER: Okay. Does your
18 data contain any comparison in the context of this
19 sampling after a heavy rainfall event of the
20 levels before and after the first flush of
21 indicator bacteria?

22 THE WITNESS: I would like you to
23 explain. I know what is first flush, but I want
24 you to explain what you mean by first flush in

1 context to this large watershed in the Chicago
2 area.

3 MS. ALEXANDER: Well, then, I mean,
4 I think it would be better if you gave me how you
5 understand the first flush, and I'll tell you if
6 it's consistent.

7 THE WITNESS: Well, as Susan pointed
8 out earlier, the intensity, the first flush
9 depends on the intensity of the rainfall, the
10 duration of the rainfall, and the maximum volume
11 of, you know, rainfall needed to produce a first
12 flush will rarely -- and it was not asserted in
13 this report because we did not see -- look at the
14 levels of fecal chloroforms with the inclement of
15 rainfall events, which if he had done that, we
16 will get inclement rainfall event changes in the
17 rainfall levels which we did not do it. I would
18 also like to point out that it's going to be
19 difficult to determine the first flush because it
20 will depend upon again the intervals between the
21 storm event, the dry period, and the duration of
22 rainfall and also the characteristics of the
23 drainage basin area too.

24 MS. ALEXANDER: I'm afraid I missed

1 a word in there. Did you say incremental rain
2 event? I didn't quite catch that.

3 THE WITNESS: Yes.

4 MS. ALEXANDER: What do you mean by
5 incremental rain event?

6 THE WITNESS: An incremental rain
7 event is like -- it started out in Des Plaines and
8 then you follow the rain event and measure as the
9 day progresses, you get increased rainfall and how
10 much of the rain sets, what is the duration and
11 intensity that will vary.

12 MS. ALEXANDER: Okay. So am I
13 correct in understanding that it's not always
14 clear when, you know, what constitutes the first
15 flush or when it occurs?

16 THE WITNESS: The first flush, it's
17 my understanding -- I'm not an engineer, but it
18 does get captured in the District jurisdiction and
19 gets treated.

20 MS. ALEXANDER: Now, turning to
21 pre-filed question four. This is regarding the
22 conclusion in the 2004 study that levels of fecal
23 chloroform indicator bacteria in the CAWS upstream
24 of the waste water treatment plants frequently

1 exceed the proposed IEPA discharge standard of 400
2 colony forming units per 400 millimeters. What is
3 the significance of that comparison in your
4 understanding?

5 THE WITNESS: The significance of
6 this comparison here is to indicate that the
7 effluent limits of 400 fecal chloroforms is not
8 justified when a higher number is introduced into
9 the CAWS from upstream and other contributory
10 loads. So the measure that is mentioned here, the
11 400, is not reflective of water quality
12 microbiological water quality in the CAWS.

13 MS. ALEXANDER: Do you have an
14 understanding of what level of fecal chloroform
15 indicator bacteria are generally found in the
16 effluent from the District's waste water treatment
17 plants at issue here being North Side, Calumet and
18 Stickney?

19 THE WITNESS: Yes, I do. And I give
20 you exact, it would not be accurate. So I'm going
21 to give you an approximate range. That it would
22 be 10,000 to 200,000 colony forming units per 100
23 million, but on average it's between 10,000 to
24 40,000 or 50,000 CFUs per 100 million.

1 MS. ALEXANDER: So in other words,
2 the numbers coming out of the effluent are
3 essentially higher than 400 and in many cases
4 higher than what's found upstream, is that
5 correct? Not in every case, but in many cases.

6 THE WITNESS: What do you mean by
7 many cases?

8 MS. ALEXANDER: The levels in the
9 down -- in the effluent are at least during dry
10 weather -- are generally higher than the levels in
11 the upstream area, not influenced by backwash?

12 THE WITNESS: I will not answer that
13 question because, again, the question of dry
14 weather, what you consider dry weather, we do have
15 -- we do see effects of rainfall which lingers
16 following dry weather. So there are times we see
17 high levels of fecal chloroform which are higher
18 than 400 CFU per hundred million in the upstream
19 location, and also in the contributory loads,
20 which is discharged into the CAWS.

21 MS. ALEXANDER: Allow me to define
22 my terms then. By dry weather, I am referencing a
23 period of time in which no rain is occurring and
24 there is no lingering influence as it's generally

1 been defined by Geosyntec in your study period of
2 three days. Dry weather being that, would it be
3 fair to say that generally the plant effluent has
4 higher levels of fecal chloroform bacteria than
5 are in the upstream portion?

6 THE WITNESS: Yes.

7 MS. ALEXANDER: So would it also be
8 fair to say that if you impose the 400 colony
9 forming unit limits, you are going to reduce the
10 amount of these indicator bacteria at least that
11 are going into the downstream portion of the
12 river?

13 THE WITNESS: My answer is, no,
14 because, again, the upstream location, it
15 fluctuates the FC loading that's coming in. It's
16 higher than the 400 FC limits that is proposed for
17 the effluent limit. So it is -- the levels are
18 higher also in the upstream locations.

19 MS. ALEXANDER: Isn't it a fact that
20 if the plant effluent is 10,000 and you impose a
21 limit on that and you lower it to 400, that you
22 are going to be putting fewer fecal chloroforms
23 indicators overall into the river?

24 THE WITNESS: Just for fecal

1 indicators?

2 MS. ALEXANDER: Yes, we are just
3 talking about indicators right now because that's
4 the subject of your study.

5 THE WITNESS: Yes, that's the
6 subject of my study.

7 MR. ANDES: If I can follow-up on
8 that. Dr. Rijal, and we can talk about some
9 figures in your report, but can you talk to me
10 about the comparison of the upstream levels and
11 not the effluent, but the downstream levels,
12 downstream of the discharges from the District and
13 how those compare in terms of how -- are the
14 levels upstream and the levels downstream
15 sometimes in the same --

16 THE WITNESS: They are sometimes in
17 the same -- you asked generally there are -- there
18 are times when they are the same.

19 MS. ALEXANDER: Are they more likely
20 to be the same during wet weather or dry weather,
21 and dry weather as defined moments ago.

22 THE WITNESS: Well, both during the
23 light rain events and during sometimes during the
24 wet events, it's usually the same.

1 MS. ALEXANDER: But when you say
2 it's the case that during dry weather, the levels
3 below the plant outfalls of fecal chloroform
4 indicators are likely to be higher than the levels
5 upstream?

6 THE WITNESS: Yes.

7 MR. ETTINGER: May I just interrupt
8 here. We've been discussing upstream and
9 downstream a lot. Have you studied the flow from
10 the North Side plant?

11 THE WITNESS: No.

12 MR. ANDES: Studied the flow in what
13 way?

14 MR. ETTINGER: Have you or do you
15 know whether water from the North Side plant
16 sometimes flows north as well as south from the
17 plant?

18 THE WITNESS: You mean backflow, is
19 that what you are saying?

20 MR. ETTINGER: Well, back is an
21 implication too. We know the plant discharges to
22 a channel which flows north-south, correct? And
23 and from north to south.

24 THE WITNESS: North to south.

1 MR. ETTINGER: The north shore
2 channel flows north-south?

3 THE WITNESS: Yes.

4 MR. ETTINGER: I'm asking have you
5 studied or do you know of a study that says
6 whether wet water from the North Side treatment
7 plant sometimes goes north from that plant as well
8 as south?

9 THE WITNESS: I don't know.

10 MR. ETTINGER: And do you know
11 whether water from that plant gets up to Oakton
12 Avenue?

13 THE WITNESS: It is my understanding
14 that there is a lake diversion and the water from
15 Lake Michigan is diverted and flows inland from
16 through the north shore channels to the Chicago
17 river and it flows down inland. So the chances of
18 flowing to the north direction is highly unlikely.

19 MR. ETTINGER: Do you know how often
20 that lake diversion is open?

21 MR. ANDES: Lately? A lot.

22 MR. ETTINGER: Well, not counting
23 the last two weeks.

24 THE WITNESS: There is a

1 discretionary diversion which flows --

2 MR. ETTINGER: I'm sorry, my
3 question was do you know how often the diversion
4 into the north shore channel is open?

5 THE WITNESS: I don't know.

6 MR. ETTINGER: Thank you. I'm done.

7 MS. ALEXANDER: I'd like to turn to
8 Figure 18 in the study we're discussing which is
9 on page 28. And we are back to, I think it was
10 your study was attachment 5 to Exhibit 113.

11 CHAIRMAN TIPSORD: Wait a minute.
12 The 2007 study? Is that the one we are talking
13 about still?

14 MS. ALEXANDER: Yes.

15 MR. ANDES: We actually have copies
16 of that chart if that would be helpful.

17 CHAIRMAN TIPSORD: So the 2007 study
18 is attachment 5.

19 MS. ALEXANDER: This is attachment 5
20 and this is Figure 18.

21 MR. ANDES: If I can mention, we do
22 have a few notations on this particular copy just
23 to make it clear where the locations were,
24 otherwise it's the figure from the report.

1 CHAIRMAN TIPSORD: Since there are
2 notations on it, I'm going to go ahead and mark it
3 as an exhibit. We'll mark this as Exhibit 114 if
4 there is no objection. Seeing none, this is
5 Exhibit 114.

6 MS. ALEXANDER: Now, looking in
7 particular at the top figure, this is subquestion
8 A, would it be fair to say that these show that
9 during wet weather, the level in fecal chloroform
10 in the CAWS increases somewhat downstream of the
11 waste water treatment plant outfalls?

12 THE WITNESS: Can I explain further?
13 That's not correct, and I'm going to provide
14 explanation to that.

15 MS. ALEXANDER: Okay.

16 THE WITNESS: Now, if you look at
17 this Figure 18, the top one, it gives you the
18 fecal coliform geometric mean concentration during
19 heavy rain day 1, day 2, day 3. And if you look
20 at the upstream location and the downstream fecal
21 coliform levels were higher both the day 1 and day
22 2. Both in the upstream and the downstream
23 location which I'm talking about, which is Foster,
24 which is 3.1 miles downstream, and also the

1 contributory, the Albany Avenue. If you look at
2 the numbers here, it's about 25,000 fecal coliform
3 -- colony forming units per hundred million. This
4 level, high level of FC is measured both under day
5 1 and day 2. And we see that the downstream
6 location at Wilson. There is an increase in the
7 FC level. And this increased level you see
8 downstream of the outfall only immediately after
9 the contributory input here. And that level
10 remains high until 6.6 miles downstream of the
11 locations.

12 MS. ALEXANDER: Perhaps I'm
13 misunderstanding you. You characterized my
14 question as incorrect, but it sounds like you
15 answered it yes, which is in fact the upstream
16 level, which is about 25 on the heavy rain day, is
17 lower than the levels downstream, and in
18 particular pointed out downstream of the
19 tributary, but that shoots up to 35,000 and
20 higher; is that correct, that's what's going on on
21 wet weather days? I'm sorry, I'll define that on
22 heavy rain days.

23 THE WITNESS: No, I'm trying to
24 provide a clarification to your statement there

1 that when we are comparing downstream locations,
2 the downstream of the outfall immediately
3 downstream, by Foster Avenue, the fecal coliform
4 levels are compared similar to the upstream
5 location here.

6 MS. ALEXANDER: All right. So then
7 to clarify my question, it appears what's going on
8 heavy rain day 1 is that the levels are about the
9 same until you get past the tributary, in which
10 case they go up?

11 THE WITNESS: Yes.

12 MS. ALEXANDER: Now let's look at
13 the dry days. Isn't it a fact that on the dry
14 days you start out with very low levels upstream.
15 You get a spike immediately downstream, and then
16 those levels steadily drop; is that correct?

17 THE WITNESS: It drops until it
18 passes the tributary, and then you see it
19 increases back.

20 MR. ETTINGER: I'm sorry. We are
21 having trouble seeing part of this. On your dry
22 days, this tributary, it's actually above -- it's
23 above the effluents with the north shore channel,
24 right?

1 THE WITNESS: Yeah, but that feeds,
2 this location here is upstream of the Lohan dam on
3 the north branch of the Chicago River.

4 MR. ETTINGER: And Wilson is below
5 that, right?

6 THE WITNESS: Wilson is below that.

7 MR. ETTINGER: So just looking at,
8 what we don't see as we see a dry day level at
9 Foster, which is it looks like around 9000 just
10 eyeballing it, and a level at Wilson which is
11 about 7000 just eyeballing it, but we can't really
12 tell what happens with the tributary there because
13 we don't have a chart right at that spot.

14 THE WITNESS: But we do have fecal
15 coliform levels there, and it is about 400 CFU's
16 per hundred million, right?

17 MR. ETTINGER: Right, on the dry
18 days, on the tributary according to that.

19 THE WITNESS: Right.

20 MR. ETTINGER: On the charts you are
21 presenting, we can't see a rise in the north
22 branch from that tributary, but you believe it
23 exists based on your measurements of the north
24 branch above the effluence?

1 THE WITNESS: And there is no, if
2 you look at it, there is no steady pattern of
3 decline here based on the distances here we
4 compared for the dry weather.

5 MR. ETTINGER: Well, there is a
6 steady decline if you look at one body of water
7 coming down from the sewage treatment plant, if
8 you look at Foster, Wilson, I can't read the next
9 one, Grand.

10 THE WITNESS: There is a decline.
11 There's not a steady decline is what my point is.

12 MR. ETTINGER: What is the one
13 that's 6.6? I can't read the writing in there.

14 THE WITNESS: That's Diversey.

15 MR. ETTINGER: If you look at
16 Foster, Wilson, Diversey and Grand, which is the
17 water that's all in one direction, you do see a
18 steady pattern of decline on this chart, don't
19 you?

20 MR. ANDES: You are talking
21 specifically during dry days?

22 MR. ETTINGER: That's right. I'm
23 just asking about dry days. I'm just saying there
24 you do see a steady pattern in the lower --

1 THE WITNESS: Well, based on those
2 distances we have, I think when we compare like at
3 the downstream location it was about 9010, then we
4 compared that to the level of 6000. I don't know
5 if that is significantly lower, but if you
6 compared the location from the 3.1 to the
7 10.7 miles downstream of the plant, then you see
8 there is a drop there. But the level is, you
9 know, there is a decline, but not a steady
10 decline.

11 MS. ALEXANDER: I'm sorry, help me
12 understand.

13 MR. ETTINGER: I'm sorry, I'm just --
14 We are trying to understand the chart here the way
15 we understand the way the water flows. Just
16 looking at your stations downstream from the North
17 Side plant, on dry days, the highest number is
18 Foster. The next highest number is Wilson. The
19 number after that is Diversey, and the number
20 after that is Grand, and each one drops in
21 comparison to the one above it?

22 THE WITNESS: Yes, it does.

23 MS. WILLIAMS: Just to follow-up,
24 the upstream number is the lowest of all, of all

1 the four that he named, upstream that number is
2 lower?

3 MR. ANDES: During dry days?

4 MS. WILLIAMS: Yes, during dry days.

5 THE WITNESS: Yes.

6 MR. ANDES: Not talking about the
7 other days?

8 MS. WILLIAMS: Correct.

9 THE WITNESS: Yes.

10 MS. ALEXANDER: Just to clarify,
11 where you indicate tributary here, this 3.3, are
12 you sampling in the river itself or are you
13 sampling in the tributary?

14 THE WITNESS: We are sampling on the
15 north branch of the Chicago river which is a
16 tributary to the CAWS.

17 MS. ALEXANDER: Okay. So you are
18 sampling on the north branch.

19 MR. ETTINGER: Can I just ask, do
20 you know what the sources of the fecal coliforms
21 are at the north branch?

22 THE WITNESS: There are diverse
23 sources.

24 MR. ETTINGER: Well, do you know

1 what they are?

2 THE WITNESS: Could be treated waste
3 water from effluents upstream, upstream could be
4 starting from, you know, the middle fork that
5 meets down at that location. There are other
6 environmental nonpoint sources. The sand, soil
7 run-off, wild animals, foul, and so they all
8 contribute to the levels.

9 MS. WILLIAMS: What about CSOs?

10 THE WITNESS: There could be CSOs.

11 MS. WILLIAMS: Do you know if
12 there's CSOs?

13 THE WITNESS: We have reported based
14 on the District reporting CSOs data only, yes.

15 MS. WILLIAMS: I'm sorry, I don't
16 understand.

17 MR. ANDES: And we are talking
18 about, this is the north branch?

19 MS. WILLIAMS: Outside the CAWS, are
20 there CSOs?

21 THE WITNESS: We know there are
22 CSOs.

23 MS. WILLIAMS: Thank you. That's
24 all I was asking.

1 While we are waiting, let me
2 just ask in follow-up. You mentioned that there
3 was a USGS study, and I'm not sure you could
4 recall the citation. Is that something you could
5 provide for the hearing, the USGS studies you
6 looked at for those days?

7 THE WITNESS: Yes, I could provide
8 that.

9 MR. ETTINGER: Could I ask one more
10 question about this chart while we are on it?
11 Just looking at Foster, just making sure I'm
12 reading this right, it indicates that dry weather
13 fecal coliform levels are higher than the heavy
14 rain day three levels; is that correct?

15 THE WITNESS: It is possible.

16 MR. ETTINGER: Well, that's what
17 your data shows.

18 THE WITNESS: Yes, that's what the
19 data is, yes.

20 MR. ETTINGER: Do you have any
21 understanding of why that might have happened?

22 THE WITNESS: Again, this level here
23 would be the level that you find in the -- see, if
24 you see at the driver, this would be the level

1 that you find in this location? FC levels.

2 MR. ETTINGER: So if I were paddling
3 around Foster, I'd be better off, if I was just
4 worried about fecal, three days after heavy rain
5 than I would be on a dry day?

6 MR. ANDES: The data say what the
7 data say.

8 THE WITNESS: I will not comment on
9 that.

10 MS. WILLIAMS: But could you comment
11 on whether it might indicate that the actual
12 impact on a wet weather day is less than three
13 days or less than the two days following the
14 rainfall that you measured.

15 THE WITNESS: To make a statement
16 here, you know the microbiology itself of the
17 water is more complex. It would change. So based
18 on the data here, the levels of fecal coliforms
19 levels are lower. The dry weather period as
20 compared in this study is lower than compared to
21 the rainfall period.

22 MR. ANDES: To follow-up. Is it
23 true that the levels in the first chart, the
24 levels of fecal coliform on heavy day 1 are orders

1 of magnitude above dry day numbers?

2 THE WITNESS: Yes.

3 MS. ALEXANDER: I think I'm finally
4 ready to clarify the tributary issue. Would I be
5 correct in understanding that the flow that
6 originates from the North Side plant into the
7 north shore channel doesn't flow into the
8 tributary where you sampled, correct?

9 THE WITNESS: No.

10 MS. ALEXANDER: So in other words,
11 the flow goes past the tributary, the tributary
12 goes flows in at that point. So what you are
13 really measuring is the flow that goes into the
14 flow that is coming from the north shore channel,
15 is that correct?

16 THE WITNESS: That is correct.

17 MS. ALEXANDER: If you exclude the
18 tributary, which is not in fact in that flow, you
19 would then have the pattern that I've described,
20 would you not, which is that there are low levels
21 of fecal coliform upstream, they spike to a little
22 below 10,000 immediately downstream and then
23 steadily drop, is that correct, excluding the
24 tributary which is not part of the flow?

1 THE WITNESS: But the rain event,
2 if you look at the rain levels, the Foster levels
3 -- the upstream levels, it's a continuous point
4 system. So even if you block the tributary, the
5 upstream, the levels of heavy rain period, you are
6 getting higher numbers than down stream.

7 MS. ALEXANDER: Excuse me. I'm
8 excluding heavy rain. I'm only talking about dry
9 days. Would you agree that excluding the
10 tributary, which is not part of the flow from the
11 discharge into the north shore channel from the
12 North Side plant, there is in fact a steady drop
13 after a spike immediately downstream of the plant?

14 MR. ANDES: So you are talking about
15 which -- you are talking about specifically the --
16 you are asking us to ignore the tributary and
17 ignore the heavy rain, day one, day two and day
18 three, and all only talk about dry days.

19 MS. ALEXANDER: Yes, I am talking
20 about the dry days and exclude the tributary which
21 is not part of the facility. Would you agree with
22 the statement?

23 MR. ANDES: But it's part of the
24 CAWS.

1 MS. WILLIAMS: What did you say, the
2 tributary?

3 THE WITNESS: It needs into it.

4 MS. WILLIAMS: Becomes part of the
5 CAWS.

6 THE WITNESS: Well, we have. We
7 didn't subtract that in our study here. The data
8 is what the data we have currently, and if you
9 even exclude, if you look at the FC levels during
10 the dry weather, it's like maybe in between two
11 times higher, the 400 levels, and the level here
12 when we compare at the location Foster Avenue
13 which is three miles downstream of the outfall to
14 the four miles, you know, when we compared these
15 two locations. There, it's not -- there's not a
16 steady design here.

17 MS. ALEXANDER: Well, hold on a
18 second. Let's look at the level of 3.3, which is
19 also an indication is Foster, would agree that on
20 the dry weather day, that level is higher than at
21 4.0, the bar goes higher on the chart, correct?

22 THE WITNESS: Yes, but how
23 significant higher is it.

24 MS. ALEXANDER: Well, that wasn't

1 the question. Would you agree it's higher?

2 THE WITNESS: No.

3 MS. ALEXANDER: Would you agree that
4 it's higher?

5 THE WITNESS: Higher to what level?

6 MS. ALEXANDER: At 3.1 to 4.0.

7 THE WITNESS: Compared to 4.00, it
8 going to be marginally higher.

9 MS. ALEXANDER: And would you also
10 agree that the level at the dry weather bar is
11 higher than the comparable bar at 6.6?

12 THE WITNESS: Yes, to the same my
13 answer previously it is the same here.

14 MR. ANDES: So if I can follow up
15 on that. So does that indicate during dry weather
16 days the levels of fecal coming from north side
17 are significantly attenuated as they go
18 downstream?

19 THE WITNESS: It looks like it. You
20 see a natural attenuation here.

21 MS. ALEXANDER: And would you agree
22 that there is roughly the same natural attenuation
23 for heavy rain day 3, again, including the
24 tributary, which is not part of the flow?

1 THE WITNESS: I didn't understand
2 your question.

3 MR. ANDES: And not day 1 or day 2,
4 only day 3?

5 MS. ALEXANDER: Only day 3 would you
6 agree that you see essentially the same pattern
7 for dry weather? In other words, relatively low
8 levels upstream, a spike immediately downstream,
9 followed by attenuation, excluding the tributary,
10 which is not part of the flow?

11 THE WITNESS: There is a decline,
12 but how significant it is, it's hard to say from
13 this figure here.

14 MS. ALEXANDER: Okay.

15 MR. ANDES: If I can follow-up on
16 that. Is it true that on heavy day 1 and heavy
17 day 2, there is no indication of steady decline?
18 In fact the levels go up significantly as you go
19 down the CAWS?

20 THE WITNESS: Yes, that's correct.

21 MR. ETTINGER: Can I ask a question.
22 Part of the problem here is we've got miles that
23 we're talking about and days. Have you ever
24 measured how many days it takes the water to go

1 down into miles?

2 THE WITNESS: How many days?

3 MR. ETTINGER: Yes, what's the flow
4 rate on a dry or a wet weather day; do you know?
5 Is there a drop in fecal in the water at the North
6 Side plant? How many days or hours does it take
7 to get to Grand?

8 THE WITNESS: The flow is -- it's
9 not a high flow. That's my understanding. But
10 it's flowing probably during May to October -- I
11 don't know. I'm not going to speculate any
12 numbers.

13 MR. ETTINGER: I'm not asking you to
14 speculate. I'm asking if you know what the flow
15 rate is so we can somehow chart this, and have a
16 better understanding of how long it takes water
17 discharged at a point to get to another point?

18 MR. ANDES: She doesn't know. That
19 information may be available for to us provide.

20 THE WITNESS: We can provide that
21 information.

22 MR. ETTINGER: Okay, thank you.

23 MS. ALEXANDER: Just a couple
24 follow-up questions from me. Did the 2007-79

1 study, attachment 5, draw any conclusions
2 regarding water quality improvement resulting from
3 disinfection during dry weather?

4 MR. ANDES: I'm sorry, which study?

5 MS. ALEXANDER: The study we've been
6 discussing of which Figure 18 is a part.

7 MR. ANDES: 2007.

8 MS. ALEXANDER: Yes, this is 2007.

9 MR. ANDES: Attachment 5.

10 THE WITNESS: We did not make any
11 conclusion for the dry weather, but we did report
12 that there is influence of the rain event which
13 lingers beyond the rain event and which extends to
14 the driver of the NVC, the elevated level of fecal
15 coliforms even during the dry weather period.

16 MS. ALEXANDER: And do you have an
17 understanding whether CSO events in the CAWS will
18 be reduced after TARP is completed?

19 THE WITNESS: I don't know.

20 MS. ALEXANDER: All right. That
21 concludes my questions.

22 MS. WILLIAMS: You don't know if
23 they'll go down?

24 THE WITNESS: What? The CSO

1 events?

2 MS. WILLIAMS: CSO events.

3 THE WITNESS: When the TARP will be
4 completed?

5 MS. WILLIAMS: Yes.

6 THE WITNESS: I don't know if it
7 will completely reduce the number of CSOs, I don't
8 know.

9 MS. WILLIAMS: But you know they
10 will go down?

11 THE WITNESS: They will go down,
12 yes.

13 CHAIRMAN TIPSORD: Ms. Alexander, if
14 you are done, we'll go ahead and take an hour for
15 lunch and we'll come back and start with the IEPA's
16 questions for Dr. Rijal.

17 (Whereupon a lunch recess was taken.)

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1 STATE OF ILLINOIS)

2) SS.

3 COUNTY OF C O O K)

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5 I, DENISE ANDRAS, being a Certified
6 Shorthand Reporter doing business in the City of
7 Des Plaines, Illinois, County of Cook, certify
8 that I reported in shorthand the proceedings had
9 at the foregoing hearing of the above-entitled
10 cause. And I certify that the foregoing is a true
11 and correct transcript of all my shorthand notes
12 so taken as aforesaid and contains all the
13 proceedings had at the said meeting of the
14 above-entitled cause.

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DENISE ANDRAS, CSR

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CSR NO. 084-0003437

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