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Department of Energy Seeks to Eliminate Radiation Protections Requiring Controls "As Low As Reasonably Achievable"

Santa Fe, NM – An internal Department of Energy (DOE) memorandum eliminates worker and public radiation protection rules known "As Low As Reasonably Achievable" (ALARA). This fundamental departure from decades of accepted health physics practices is being promoted by senior DOE political appointees with little background in health or radiation control. It is marked as "URGENCY: High" under the auspices of the DOE Deputy Secretary, the Under Secretary for Science, and the Administrator of the National Nuclear Security Administration. The memorandum awaits the final signature of DOE Secretary Chris Wright.

The memo's stated goal is to:

"...remove the ALARA principle from all DOE directives and regulations, including DOE Order 458.1, Radiation Protection of the Public and the Environment, NE [Office of Nuclear Energy] Order 458.1, Radiation Protection of the Public, and, upon completion of the rulemaking process, 10 CFR [Code of Federal Regulations] 835, Occupational Radiation Protection." ¹

It follows the playbook of the Heritage Foundation's *Project 2025*, which called for:

"Set[ting] clear radiation exposure and protection standards by eliminating ALARA ("as low as reasonably achievable") as a regulatory principle and setting clear standards according to radiological risk and dose rather than arbitrary objectives." ²

Contrary to Project 2025's assertion that ALARA is just "arbitrary objectives," the U.S. Occupational Safety and Health Administration declares it to be:

"...the cornerstone principle of radiation safety, emphasizing that radiation exposure should be minimized to the lowest possible levels while still allowing essential tasks to be performed. This principle applies everywhere radiation is present, including medical, industrial, nuclear, and research settings... ALARA is not just a recommendation—it is a legal and ethical requirement in radiation-related industries."

The elimination of ALARA protections is likely to increase radiation exposures to workers and weaken cleanup standards at contaminated sites where DOE has binding legal requirements with the impacted states (e.g., Los Alamos Lab, NM; Hanford Nuclear Reservation, WA; and West Valley Demonstration Project, NY), as well as DOE Legacy Management sites where residual contamination remains after completion of claimed "cleanup" (e.g., Rocky Flats, CO and Weldon Spring, MO).

DOE's memo purports to remove red tape constraining construction of new nuclear power plants, which inevitably experience huge cost overruns at ratepayers' expense because of the

inherent economic problems with nuclear power. However, because DOE's primary mission is expanding nuclear weapons production, the elimination of ALARA protections will hit workers and nearby communities by allowing higher worker and public doses.

Two pertinent examples are the expanding production of plutonium "pit" bomb cores at the Los Alamos Lab and future pit production at the Savannah River Site in South Carolina. At the same time, the independent Defense Nuclear Facilities Safety Board's role of nuclear safety oversight is being crippled by the Trump Administration's refusal to nominate candidates to the Board. Moreover, DOE's termination of ALARA rules can even downgrade international radiation protection standards because the Department provides staff and training for the United Nations' International Atomic Energy Agency.

DOE's high-level memorandum relies heavily upon a recent study by its Idaho National Laboratory.⁴ According to the memo, the INL Report concluded:

"The balance of available scientific evidence indicates that annual dose rates of 5,000 mrem or less have not been shown to result in detectable increases in adverse health outcomes across diverse human populations and exposure scenarios. Furthermore, substantial evidence suggests that even 10,000 mrem/year may maintain a reasonable safety margin based on available epidemiological and radiobiological data."

This is highly debatable (see comments by an independent epidemiologist below). By way of comparison, a standard chest X-ray is around 10 millirem (mrem) and an average annual radiation dose from all sources (including natural) to any one individual in the United States is around 600 mrem.⁵ The INL report begins to rationalize public radioactive doses that are up to 16 times higher.

The Idaho National Laboratory is where DOE extracted weapons grade uranium from spent reactor fuel for warhead production, resulting in significant ground water contamination and "temporary" storage of liquid high-level waste now estimated to cost billions of dollars to stabilize. Nevertheless, according to INL Director John Wagner, the Idaho National Laboratory Report specifically recommends:

- Eliminating all ALARA requirements and limits below the 5,000 mrem occupational dose limit in order to reduce "unnecessary economic burdens."
- Multiplying five-fold the allowed public radioactive dose limit from 100 mrem per year to 500 mrem per year.
- Supporting ongoing research on low-dose radiation effects to "further refine scientific understanding and regulatory approaches."

"Ongoing research on low-dose radiation effects" is aimed at the Linear No-Threshold principle, which maintains that **no dose of radiation is safe**. Related, ALARA is considered to be the global bedrock of radiation protection for nuclear workers and the public and is widely accepted as best practices by health physics professionals. Historically, more than 10,000 DOE workers have filed compensation claims for their occupational illnesses, which argues for strengthening, not weakening, occupational protection standards.

In parallel with DOE under Trump Executive Orders, the Nuclear Regulatory Commission (which oversees the nuclear energy industry) is questioning the Linear No-Threshold (LNT) principle. In recent written comment to the NRC, epidemiologist Joseph Mangano summarized decades of studies supporting LNT. His cited evidence includes:

- Studies of low-dose pelvic X-rays to pregnant women in the mid-1950s that concluded that a single X-ray would nearly double the risk of the child dying of cancer or leukemia by age ten.
- A 1990 study by the Committee on the Biological Effects of Ionizing Radiation (BEIR) that concluded that cancers and genetic damage increase with low-level radiation as a linear, non-threshold function of the dose. It included over 900 references that support LNT.
- A second BEIR study in 2005 that reiterated the risks of low-dose radiation exposures.
- A 2020 systematic review of 26 studies involving 91,000 individuals with solid cancers and 13,000 with leukemia that documented excess risks caused by low dose radiation.
- A 2023 study of 309,932 workers at nuclear plants in France, the United Kingdom, and the United States that found 28,089 had died of solid cancers with occupational doses well below Hiroshima and Nagasaki atomic bomb survivors. This suggests that the Linear No-Threshold model may actually underestimate the harmful effects of prolonged low radiation doses.⁶

Jay Coghlan, Director of Nuclear Watch New Mexico, concluded: "The Trump Administration is pumping taxpayers' money into the much hyped "nuclear renaissance," now in its third or fourth failed attempt, while cutting Medicaid for the poor and cutting taxes for the rich. But this time the corporate nuclear titans are being given a leg up by cutting nuclear safety protections for workers and the public, inevitably causing more illnesses. The good news is that fundamental market economics will eventually collapse the nuclear industry. However, one has to ask, at what safety costs to other sectors, such as the expanding production of nuclear weapons for the new arms race?"

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This press release will be available at https://nukewatch.org/doe-seeks-to-lower-radiation-protections-by-eliminating-alara/

Memorandum for the Secretary, DOE Deputy Secretary, Under Secretary for Science, NNSA Administrator, undated, available at https://nukewatch.org/doe-alara-memo

² Project 2025: Mandate for Leadership, the Heritage Foundation, 2023, https://static.heritage.org/project2025/2025_MandateForLeadership_FULL.pdf, PDF page 409, parentheses in the original.

³ ALARA: The Gold Standard in Radiation Safety, OSHA, 2025, https://oshacode.com/alara-the-gold-standard-in-radiation-safety, accessed 11/20/25, bolded emphases in the original.

⁴ Reevaluation of Radiation Protection Standards for Workers and the Public Based on Current Scientific Evidence, John Wagner et al, July 2025 (INL/RPT-25-85463), page 35. See Wagner's summary at https://www.linkedin.com/posts/john-wagner-b3822350_reevaluation-of-radiation-protection-standards-activity-7356357265299312641-2-kp

or the full Idaho National Laboratory Report at https://lnkd.in/grTYhq3G

⁵ See *Radiation Thermometer*, Centers for Disease Control and Prevention, January 2024, https://www.cdc.gov/radiation-emergencies/causes/radiation-thermometer.html, accessed 11/21/25

Written comment on Executive Order 14300 Section 5(b) on radiation dose-response with multiple references, epidemiologist Joseph Mangano, the <u>Radiation and Public Health Project</u>, July 23, 2025, https://nukewatch.org/mangano-Int-comments-to-nrc/