

§ 79.67

verified diagnosis of primary renal cancer.)

(e) A claimant or beneficiary may submit any of the following forms of medical documentation in support of a claim that the claimant contracted primary renal cancer. Such documentation will be most useful where it contains an explicit statement of diagnosis or such other information or data from which the appropriate authorities at the National Cancer Institute can make a diagnosis to a reasonable degree of medical certainty:

- (1) Pathology report of tissue biopsy or resection;
- (2) Autopsy report;
- (3) One of the following summary medical reports:
 - (i) Physician summary report;
 - (ii) Hospital discharge summary report;
 - (iii) Operative report;
 - (iv) Radiotherapy summary report;or
- (v) Medical oncology summary or consultation report;
- (4) Report of one of the following radiology examinations:
 - (i) Computerized tomography (CT) scan;
 - (ii) Magnetic resonance imaging (MRI); or
 - (5) Death certificate, provided that it is signed by a physician at the time of death.

§ 79.67 Proof of chronic renal disease.

(a) In determining whether a claimant developed chronic renal disease following pertinent employment as an ore transporter, the Assistant Director shall resolve all reasonable doubt in favor of the claimant. A conclusion that a claimant developed chronic renal disease must be supported by medical documentation.

(b) A claimant or beneficiary may submit any of the following forms of medical documentation in support of a claim that the claimant contracted chronic renal disease.

- (1) Pathology report of tissue biopsy;
- (2) If laboratory or radiographic tests exist:
 - (i) Abnormal plasma creatinine values;
 - (ii) Abnormal glomerular filtration rate (by either measured creatinine or

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iothalamate clearance or calculated by MDRD equation); and

(iii) Renal tubular dysfunction as evidenced by:

- (A) Glycosuria in the absence of diabetes mellitus;
- (B) Proteinuria less than one gram daily without other known etiology; or
- (C) Hyperphosphaturia, aminoaciduria, B-2 microglobulinuria or alkaline phosphaturia or other marker of proximal tubular injury; or
- (iv) Radiographic evidence of chronic renal disease;
 - (3) Autopsy report;
 - (4) Physician summary report;
 - (5) Hospital discharge summary report;
 - (6) Hospital admitting report; or
 - (7) Death certificate, provided that it is signed by a physician at the time of death.

Subpart H—Procedures

§ 79.70 Attorney General's delegation of authority.

(a) An Assistant Director within the Constitutional and Specialized Torts Staff, Torts Branch, Civil Division, shall be assigned to manage the Radiation Exposure Compensation Program and issue a decision on each claim filed under the Act, and otherwise act on behalf of the Attorney General in all other matters relating to the administration of the Program, except for rule-making authority. The Assistant Director may delegate any of his or her responsibilities under the regulations in this part to an attorney working under the supervision of the Assistant Director.

(b) The Assistant Attorney General, Civil Division, shall designate an Appeals Officer to act on appeals from the Assistant Director's decisions.

§ 79.71 Filing of claims.

(a) All claims for compensation under the Act must be in writing and submitted on a standard claim form designated by the Assistant Director for the filing of compensation claims. Except as specifically provided in this part, the claimant or eligible surviving beneficiary must furnish the medical documentation required by this part with his or her standard form. Except