



Tennessee Valley Authority, Post Office Box 2000, Decatur, Alabama 35609-2000

March 16, 2001

10 CFR Part 50, App E

U.S. Nuclear Regulatory Commission  
ATTN: Document Control Desk  
Washington, D.C. 20555-0001

Gentleman:

In the Matter of	)	Docket Nos. 50-259
Tennessee Valley Authority	)	50-260
		50-296

**BROWNS FERRY NUCLEAR PLANT (BFN) - UNITS 1, 2, and 3  
EMERGENCY PLAN IMPLEMENTING PROCEDURE (EPIP) REVISIONS**

TVA is submitting this notification in accordance with the requirements of 10 CFR Part 50, Appendix E, Section V, to provide NRC with the following EPIP revisions: (1) EPIP Index, EPIP-6, Revision 21, EPIP-7, Revision 19, EPIP-10, Revision 21, EPIP-13, Revision 8, and EPIP-17, Revision 25. The EPIP revision date for these changes is February 26, 2001.

The enclosed information is being sent by certified mail. The signed receipt signifies that you have received this information. If you have any questions, please telephone me at (256) 729-2636.

Sincerely,

  
T. E. Abney

Manager of Licensing  
and Industry Affairs

AC45

U.S. Nuclear Regulatory Commission

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March 16, 2001

cc (Enclosure):

NRC Resident Inspector (Enclosure provided by  
Browns Ferry Nuclear Plant BFN Document Control Unit)  
10833 Shaw Road  
Athens, Alabama 35611

Mr. Paul E. Fredrickson (2 Enclosures)  
U.S. Nuclear Regulatory Commission  
Region II  
Sam Nunn Atlanta Federal Center  
61 Forsyth Street SW, Suite 23T85  
Atlanta, Georgia 30303-8931

Mr. William O. Long, Senior Project Manager (w/o Enclosure)  
U.S. Nuclear Regulatory Commission  
One White Flint, North  
11555 Rockville Pike  
Rockville, Maryland 20852

ENCLOSURE  
TENNESSEE VALLEY AUTHORITY  
BROWNS FERRY NUCLEAR PLANT  
UNITS 1, 2, AND 3

EMERGENCY PLAN IMPLEMENTING PROCEDURES (EPIP)  
EPIP -6, -7, -10, -13, and -17

(SEE ATTACHED)

GENERAL REVISIONS

GENERIC FILING INSTRUCTIONS

FILE DOCUMENTS AS FOLLOWS:

PAGES TO BE REMOVED

EPIP INDEX (ALL)

EPIP-6 REVISION 20A (ALL)

EPIP-7 REVISION 18A (ALL)

EPIP-10 REVISION 20 (ALL)

EPIP-13 REVISION 7 (ALL)

EPIP-17 REVISION 24A (ALL)

PAGES TO BE INSERTED

EPIP INDEX (ALL)

EPIP-6 REVISION 21 (ALL)

EPIP-7 REVISION 19 (ALL)

EPIP-10 REVISION 21 (ALL)

EPIP-13 REVISION 8 (ALL)

EPIP-17 REVISION 25 (ALL)

Browns Ferry Nuclear Plant  
Curator Procedures Folder Screen  
status=ACTIVE ProcType=EPIP Doc Type=PROCEDURE  
Sorted by Type

Page 1  
pg101  
02/26/01

Unit	Proc Type	Proc Number	Doc Type	Title	Fold Doc	Stat Stat	Group Section	Reason Admin Hold	Remarks	Rev
0	EPIP	EPIP-1/SECTION I	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			029
0	EPIP	EPIP-1/SECTION II-1.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER		PAGE 18 WILL NOT PRINT ALL CHARACTERS (WILL NEED TO PRINT SEPARATELY )	029A
0	EPIP	EPIP-1/SECTION II-2.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			028
0	EPIP	EPIP-1/SECTION II-3.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			029
0	EPIP	EPIP-1/SECTION II-4.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			028B
0	EPIP	EPIP-1/SECTION II-5.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			029
0	EPIP	EPIP-1/SECTION II-6.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			029
0	EPIP	EPIP-1/SECTION II-7.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			028
0	EPIP	EPIP-1/SECTION II-8.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			029
0	EPIP	EPIP-1/SECTION III-1.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			029
0	EPIP	EPIP-1/SECTION III-2.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			028
0	EPIP	EPIP-1/SECTION III-3.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			029
0	EPIP	EPIP-1/SECTION III-4.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			028B
0	EPIP	EPIP-1/SECTION III-5.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			029
0	EPIP	EPIP-1/SECTION III-6.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE		OTHER			029

Browns Ferry Nuclear Plant  
Curator Procedures Folder Screen  
status=ACTIVE ProcType=EPIP Doc Type=PROCEDURE  
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Unit	Proc Type	Proc Number	Doc Type	Title	Fold Stat	Group	Reason		Rev
					Doc	Stat	Section	Admin Hold Remarks	
0	EPIP	EPIP-1/SECTION III-7.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE	OTHER			028
0	EPIP	EPIP-1/SECTION III-8.0	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE	OTHER			029
0	EPIP	EPIP-1/TOC	PROCEDURE	EMERGENCY PLAN CLASSIFICATION LOGIC	ACTIVE	OTHER			029A
0	EPIP	EPIP-10	PROCEDURE	MEDICAL EMERGENCY PROCEDURE	ACTIVE	OTHER			021
0	EPIP	EPIP-11	PROCEDURE	SECURITY AND ACCESS CONTROL	ACTIVE	OTHER			008A
0	EPIP	EPIP-13	PROCEDURE	RADIOCHEMICAL LABORATORY PROCEDURE	ACTIVE	OTHER			008
0	EPIP	EPIP-14	PROCEDURE	RADIOLOGICAL CONTROL PROCEDURES	ACTIVE	OTHER			015
0	EPIP	EPIP-15	PROCEDURE	EMERGENCY EXPOSURE	ACTIVE	OTHER			006A
0	EPIP	EPIP-16	PROCEDURE	TERMINATION AND RECOVERY PROCEDURE	ACTIVE	OTHER			004
0	EPIP	EPIP-17	PROCEDURE	EMERGENCY EQUIPMENT AND SUPPLIES (INVENTORY AND OPERABILITY PROCEDURE)	ACTIVE	OTHER			025
0	EPIP	EPIP-2	PROCEDURE	NOTIFICATION OF UNUSUAL EVENT	ACTIVE	OTHER		TONY FELTMAN EXT. 3666	021B
0	EPIP	EPIP-20	PROCEDURE	PLANT DATA	ACTIVE	OTHER			009
0	EPIP	EPIP-21	PROCEDURE	FIRE EMERGENCY PROCEDURE	ACTIVE	OTHER			003
0	EPIP	EPIP-3	PROCEDURE	ALERT	ACTIVE	OTHER		TONY FELTMAN, 3666	024B
0	EPIP	EPIP-4	PROCEDURE	SITE AREA EMERGENCY	ACTIVE	OTHER		TONY FELTMAN, X3666,	023B
0	EPIP	EPIP-5	PROCEDURE	GENERAL EMERGENCY	ACTIVE	OTHER		TONY FELTMAN, X3666	028B

Browns Ferry Nuclear Plant  
 Curator Procedures Folder Screen  
 status=ACTIVE ProcType=EPIP Doc Type=PROCEDURE  
 Sorted by Type

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Unit	Proc Type	Proc Number	Doc Type	Title	Fold Stat	Group	Reason	Rev
					Doc Stat	Section	Admin Hold Remarks	
0	EPIP	EPIP-6	PROCEDURE	ACTIVATION AND OPERATION OF THE	ACTIVE	OTHER		021
				TECHNICAL SUPPORT CENTER (TSC)	ACTIVE	REP		
0	EPIP	EPIP-7	PROCEDURE	ACTIVATION AND OPERATION OF THE	ACTIVE	OTHER		019
				OPERATIONS SUPPORT CENTER (OSC)	ACTIVE	REP		
0	EPIP	EPIP-8	PROCEDURE	PERSONNEL ACCOUNTABILITY AND	ACTIVE	OTHER		012
				EVACUATION	ACTIVE	REP		

Browns Ferry Nuclear Plant  
 Curator Procedures Folder Screen  
 status=ACTIVE ProcType=EPIP Doc Type=PROCEDURE  
 Sorted by Type

Page 4  
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Unit	Proc Type	Proc Number	Doc Type	Title	Fold Doc	Stat Stat	Group Section	Reason Admin Hold	Remarks	Rev
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Curator Procedures Issued

Proc Type	Count
EPIP	34
Total	34

Total records selected: 34

\* \* \* E N D O F R E P O R T \* \* \*



**TENNESSEE VALLEY AUTHORITY**

**BROWNS FERRY NUCLEAR PLANT**

**EMERGENCY PLAN IMPLEMENTING PROCEDURE**

**EPIP-6**

**ACTIVATION AND OPERATION OF THE  
TECHNICAL SUPPORT CENTER (TSC)**

**REVISION 21**

PREPARED BY: TIM CORNELIUS

PHONE: 2038

RESPONSIBLE ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: GILBERT LITTLE

DATE: 02/13/2001

EFFECTIVE DATE: 02/26/2001

**LEVEL OF USE: REFERENCE USE**

**QUALITY-RELATED**

## REVISION LOG

Procedure Number: EPIP-6

Revision Number: 21

Pages Affected: 1, 3, 4, 5, 8, 9, 16, 21, 19-26

Pagination Pages: NONE

Description of Change:

- IC-25 This change is being conducted to revise the listing of TSC/OSC personnel necessary for meeting staffing requirements to declare the TSC Operational, remove information regarding the EP Call Out List, now contained in EPIP 17, revise the contingency section regarding the use of procedures, and human factors checklists to clarify responsibilities. Additionally this revision will remove the Technical Assessor #3 position from the ERO staff.
- Page 1 - Remove information concerning the EP Call Out List. The information is now contained in EPIP-17.
- Page 1 - This change removed the contingency for the use of procedures during declared radiological emergencies. Information contain use of procedures during emergencies are contained in SPP 2.2 and OPDP-1.
- Page 3 - Deleted the Technical Assessor #3 Checklist, Human Factored Attachment A title, and Re-lettered attachments.
- Page 4 - Human factored title of Attachment A.
- Page 5 - Revised listing of personnel required for the operational declaration of the TSC.
- Page 8 - Revised Operations checklist to more clearly identify the NRC Coordinator as the spokesperson for NRC communications within the site organization.
- Page 9 - Revised to update CECC Title Changes.
- Page 16 - Added information to responsibility section of the TSC Communicator checklist to more clearly identify responsibility of board writer.
- Page 21 - Revised to clarify responsibility of the Site VP regarding interface with news media.
- Page 19 - Removed Attachment N "Technical Assessor #3 Checklist".
- Pages 19-26 - Re-Lettered Attachments

## ACTIVATION AND OPERATION OF THE TECHNICAL SUPPORT CENTER (TSC)

### 1.0 PURPOSE

The purpose of this procedure is to describe the activation of the Technical Support Center (TSC), and provide for TSC operation once it has been staffed. The TSC is staffed during an ALERT, SITE AREA EMERGENCY, or GENERAL EMERGENCY.

### 2.0 SCOPE

This procedure covers the emergency response from the TSC to support the shift operations staff during a radiological emergency, and direct the onsite response to the emergency.

### 3.0 INSTRUCTIONS

3.1 The TSC will be staffed by qualified members reporting to the TSC upon hearing the Site Accountability Alarm, Plant Public Address System, activation of the Automated Paging System (APS) or upon being called for duty by the Unit 1, Unit Operator.

3.2 Required Actions for activation and operation of the TSC.

- All members of the TSC staff complete the appropriate attachment for your position.

3.3 Other Information

- A list of emergency organizational telephone numbers are contained in the Radiological Emergency Notification Directory (REND).

3.4 Contingencies

3.4.1 NRC order - The NRC role onsite is to observe, advise, and concur with licensee decisions and actions. If a situation arises where the NRC wants an action taken regarding plant operation that TVA does not agree with, the SED shall require the NRC to sign a written order directing TVA to take the action before the SED will comply.

3.4.2 Evacuation - Relocate TSC to second level of office building. (Plant Manager's Office Area)

#### **4.0 LONG TERM OPERATION**

- 4.1** Long-term operation will be put into effect during an Alert, Site Area Emergency, or General Emergency which exists or is projected to exist for more than 12 hours.
- 4.2** The SED will notify the CECC of the decision to begin long-term operation.
- 4.3** Meal periods will be scheduled at the request of the SED.
- 4.4** Sleeping facilities will be established as necessary in the second floor of the Plant Administrative Building (outside the gatehouse). Nuclear Security (NS) Supervisor will provide access control. (If radiological or other conditions do not permit this area to be used, provisions will be made through the CECC for near-site lodging, or for other sleeping area onsite.)
- 4.5** The Operations Lunch Room in the control bay at Elevation 3C will serve as an assembly room for meetings, etc. The plant assembly room can also be used if additional space is needed and radiological conditions exist.
- 4.6** Additional personnel will be called in at the request of the SED to provide coverage or to ensure 12-hour or shorter shifts in the TSC.
- 4.7** The SED, through the OSC Director, will establish 12-hour (or shorter) shifts for their craft personnel onsite and call in additional personnel as necessary.
- 4.8** Following the immediate actions required for mitigating the accident, the need for additional actions for long-term operation should be appraised. Actions required for long-term operation shall include evaluation of the following:
  - Diesel Generator fuel oil levels and usage rates
  - Containment Atmosphere Dilution nitrogen tank level
  - Reactor Building basement (and other Class I structures) for water accumulation
  - Standby Gas Treatment filter/charcoal replacement needs

**5.0 ATTACHMENTS**

Attachment A - Initial Activation of TSC

Attachment B - Site Emergency Director Checklist

Attachment C - Operations Manager Checklist

Attachment D - RADCON Manager Checklist

Attachment E - Technical Assessment Manager Checklist

Attachment F - Maintenance Manager Checklist

Attachment G - Chemistry Manager Checklist

Attachment H - Nuclear Security Manager Checklist

Attachment I - Emergency Preparedness Manager Checklist

Attachment J - NRC Coordinator Checklist

Attachment K - TSC Communicator Checklist

Attachment L - Technical Assessor # 1 (Reactor Engineer) Checklist

Attachment M - Technical Assessor # 2 (I&C Engineer) Checklist

Attachment N - Operations Specialist Checklist

Attachment O - Assistant RADCON Manager Checklist

Attachment P - Site Vice President Checklist

Attachment Q - Status Board Writer Checklist

Attachment R - Technical Assessment Team Leader Checklist

Attachment S - Site Engineering Manager Checklist

Attachment T - Control Room Communicator Checklist

Attachment U - Technical Support Center Clerk Checklist

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**ATTACHMENT A**  
**(Page 1 of 1)**  
**INITIAL ACTIVATION OF TSC**

**Initials/Time**

**Initial TSC Activation**

- /             Swipe into Accountability Card Reader.
- /             Sign the Operations Accountability Log Sheet.
- /             Unlock TSC.
- /             Unlock TSC Supply Cabinet. (Key in SHIFT MANAGER Key Box.)
- /             Post and Maintain Plant conditions on affected Unit Status Board. (Obtain updates from control room personnel.)
- Emergency Classification
- Initiating Conditions
- Current unit status.

**NOTE:** Remain in TSC, until initial personnel arrive to man the TSC, report to SHIFT MANAGER for assigned duties.

---

**ATTACHMENT B**  
**(Page 1 of 3)**  
**SITE EMERGENCY DIRECTOR CHECKLIST**

**NOTE:** (I) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

- |                               |  |
|-------------------------------|--|
| <u>      </u> / <u>      </u> | Swipe into Accountability Card Reader.   |
| <u>      </u> / <u>      </u> | Sign TSC Accountability Log Sheet.   |
| <u>      </u> / <u>      </u> | Sign in on the Staffing Board.   |
| <u>      </u> / <u>      </u> | Obtain complete turnover from the SHIFT MANAGER / SED (in the Control Room).   |
|                               | <ul style="list-style-type: none"><li>• Obtain copy of the SHIFT MANAGER / SED Log.</li></ul>  |
| <u>      </u> / <u>      </u> | Verify the TSC and OSC are ready for operation (when the following positions are staffed): <ul style="list-style-type: none"><li>• Site Emergency Director</li><li>• Radcon Manager</li><li>• Operations Manager or Operations Specialist</li><li>• Technical Assessment Manager<ul style="list-style-type: none"><li>or</li><li>Technical Assessment Team Leader</li><li>or</li><li>All of the or following:<ul style="list-style-type: none"><li>Technical Assessor # 1</li><li>OSC Mechanical Engineer</li><li>OSC Electrical Engineer</li></ul></li></ul></li><li>• OSC Director</li><li>• Electrical Supervisor</li><li>• Mechanical Supervisor</li><li>• Instrument and Control Supervisor</li><li>• Radcon Manager (on shift)</li></ul> |

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**ATTACHMENT B**  
**(Page 2 of 3)**  
**SITE EMERGENCY DIRECTOR CHECKLIST (Continued)**

**Initials/Time**

**Initial TSC Activation**

\_\_\_\_/\_\_\_\_

Assume responsibility as SED from SHIFT MANAGER/SED.

\_\_\_\_/\_\_\_\_

Make the following announcement over the Emergency Center P.A. System.

This is NAME, I have assumed the responsibility of the Site Emergency Director. I am declaring the TSC and OSC activated at TIME.

- This is an actual emergency (or exercise - if an exercise, we need to treat this exercise seriously as if it were a real emergency and take complete advantage of this exercise as a learning experience).
- Give plant status update.

\_\_\_\_/\_\_\_\_

Have a plant wide P.A. announcement made that you have assumed responsibility.

\_\_\_\_/\_\_\_\_

Establish communications with the CECC utilizing the direct ring-down phone or by dialing the director at 5-751-1614.

**NOTE:** (1) Maintain a log of activities and communications.



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**ATTACHMENT B**  
**(Page 3 of 3)**  
**SITE EMERGENCY DIRECTOR CHECKLIST (Continued)**

**Initial TSC Activation**

**Operational Responsibilities**

Follow appropriate EPIP steps for current Emergency Classification:

1. **EPIP-2**, "Notification of Unusual Event"
2. **EPIP-3**, "Alert"
3. **EPIP-4**, "Site Area Emergency"
4. **EPIP-5**, "General Emergency"

Directs onsite emergency accident mitigation activities.

Consult with CECC Director and Site Vice President on significant events and their related impacts.

Establish and maintain site priorities for accident mitigation.

Initiates onsite protective actions.

Turn over SED Log to TSC Clerk.

Coordinates accident mitigation actions with the NRC

Initiates long term 24-hour accident mitigation operations.

Responsible for the declaration of emergency classifications

Authorize Emergency Radiation Exposures (**EPIP-15**)

Makes final approval on entries into radiologically hazardous areas when Radcon recommends against entry.

**Periodic Requirements:**

1. Reevaluate the event by using **EPIP-1** at least every **TWO HOURS** or more frequently if conditions warrant.
2. Ensure update announcements to TSC and Control Room staffs (periodically and as conditions warrant).
3. Ensure update announcements to plant workers over P.A. System (periodically and as conditions warrant)
4. Ensure update status to OSC Director (periodically and as conditions warrant).
5. If CECC is not activated, make Protective Action Recommendations as needed.

When Severe Accident Management Guidelines are entered, assume decision maker duties (If Qualified).

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**ATTACHMENT C**  
**(Page 1 of 1)**  
**OPERATIONS MANAGER CHECKLIST**

**NOTE:** (1) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

<u>      </u> / <u>      </u>	Swipe into Accountability Card Reader.
<u>      </u> / <u>      </u>	Sign TSC Accountability Log Sheet.
<u>      </u> / <u>      </u>	Sign in on the Staffing Board.
<u>      </u> / <u>      </u>	Establish communications with the Shift Manager in the Control Room.
<u>      </u> / <u>      </u>	Establish communications with Operations OSC Manager in the OSC.
<u>      </u> / <u>      </u>	Assign knowledgeable individual (NRC Coordinator) to establish and maintain communications with the NRC via the Emergency Notification System (ENS) - as required.

**Operational Responsibilities**

Directs operational activities.

Performs damage assessment and recommends solutions and mitigating action for operational problems

Provide current update status from the Control Room to the SED and the TSC Staff.

Provide direction and control interface from the TSC to the Control Room.

Provide assistance to the SED as needed.

Provide status updates to the OSC Operations Manager.

Ensure the Unit Status Boards and Equipment Status Board are maintained.

Routinely update the SHIFT MANAGER and discuss priorities and status of OSC repair teams.

When Severe Accident Management Guidelines are entered assume evaluator duties (If Qualified)

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**ATTACHMENT D**  
**(Page 1 of 1)**  
**RADCON MANAGER CHECKLIST**

**NOTE:** (1) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

<u>      </u> / <u>      </u>	Swipe into Accountability Card Reader.
<u>      </u> / <u>      </u>	Sign TSC Accountability Log Sheet.
<u>      </u> / <u>      </u>	Sign in on the Staffing Board.
<u>      </u> / <u>      </u>	Establish communications with RADCON OSC Manager.
<u>      </u> / <u>      </u>	Establish communications with plant monitoring van (if dispatched and CEOC or CECC is not staffed).
<u>      </u> / <u>      </u>	Provide someone to communicate with NRC on the Health Physics Network (HPN) phone, as required.
<u>      </u> / <u>      </u>	Assign a RADCON Status Board writer.

**Operational Responsibilities**

Directs and/or performs assessment of inplant and onsite radiological conditions

Directs onsite RadCon activities.

Coordinates additional RadCon support with the CECC Radiological Assessment Manager.

Make recommendations for protective actions for onsite personnel.

Coordinates assessment of radiological conditions offsite with CECC Radiological Assessment Manager.

Makes final recommendation to SED for entries into radiological hazardous areas.

Collects and Provides plant radiological data to Emergency Facilities as applicable.

Provide assistance to the SED, as needed.

Provide status update to the SED.

Provide updates to the RADCON OSC Manager.

Ensure maintenance of the RADCON Status Maps/Boards in the TSC.

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**ATTACHMENT E**  
**(Page 1 of 1)**  
**TECHNICAL ASSESSMENT MANAGER CHECKLIST**

**NOTE:** (I) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

- |                               |  |
|-------------------------------|--|
| <u>      </u> / <u>      </u> | Swipe into Accountability Card Reader.   |
| <u>      </u> / <u>      </u> | Sign TSC Accountability Log Sheet.   |
| <u>      </u> / <u>      </u> | Sign in on the Staffing Board.   |
| <u>      </u> / <u>      </u> | Establish communication with the Technical Assessment Team Leader.   |
| <u>      </u> / <u>      </u> | Assign a Technical Assessment Team member as a TSC Board Writer.   |
| <u>      </u> / <u>      </u> | Direct the TSC communicator to begin Monitoring SPDS and support status board collection or begin completing applicable portions of <u>EPIP-20</u> , Plant Data if SPDS is inoperable. |

**Operation Responsibilities**

- Provide information, evaluations, and projects to the SED.
- Directs onsite effluent assessment.
- Keeps assessment team informed of plant status.
- Directs activities of the Technical Assessment Team.
- Communicate with the CECC Plant Assessment Manager.
- Coordinates assessment activities with the CECC plant assessment team.
- Ensures that Plant Status and Trend Boards are maintained.
- Projects future plant status based on present plant conditions.
- Provide assistance to the SED, as needed
- When Severe Accident Management Guidelines are entered assume evaluator duties (If Qualified).

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**ATTACHMENT F**  
**(Page 1 of 1)**  
**MAINTENANCE MANAGER CHECKLIST**

**NOTE:** (I) Maintain a log of all activities and communications.

**Initials/Time**

**Initial TSC Activation**

<u>      </u> / <u>      </u>	Swipe into Accountability Card Reader.
<u>      </u> / <u>      </u>	Sign TSC Accountability Log Sheet.
<u>      </u> / <u>      </u>	Sign in on the Staffing Board.
<u>      </u> / <u>      </u>	Establish Communication with OSC Team Manager, OSC Director and Assistant Director.
<u>      </u> / <u>      </u>	Obtain a turnover of damage assessment and repair activities.

**Operational Responsibilities**

Directs repairs and corrective actions.

Performs damage assessment

Directs activities of the Operation Support Center.

Make team assignments to OSC Team Manager.

Provide update OSC status to the SED.

Provide assistance to the SED as needed.

Provide status to the OSC Director

Ensure OSC and TSC status boards are consistent.

Provide TSC personnel with a debriefing summary for each returning OSC team.

Communicate with the Assistant OSC director on matters concerning equipment and/or plant assessments.

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**ATTACHMENT G**  
**(Page 1 of 1)**  
**CHEMISTRY MANAGER CHECKLIST**

**NOTE:** (1) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

____/____	Swipe into Accountability Card Reader.
____/____	Sign TSC Accountability Log Sheet.
____/____	Sign in on the Staffing Board.
____/____	Establish communication with the Chemistry Manager in the OSC.
____/____	Establish communication with the CECC Rad Assessment Coordinator.
____/____	Confirm the Emergency Data Information System is in operation.

**Operational Responsibilities**

Coordinates assessment of radioactive effluents with CECC Plant Assessment Team.

Collect Meteorological Data.

Maintain Release Status Board (jointly with RADCON).

Provide direction of Post Accident Sampling Activities.

**NOTE:** Ensure that plant configurations that are prerequisite to performing sampling have been completed prior to requesting a sample. The three hour time requirement begins upon a sample request, however, a request to prepare a team for sampling does not initiate the clock. Sampling teams should not be assigned a tracking number until the team is officially requested.

Provide assistance to the SED as needed

Provide status updates to the SED.

Directs activities of the radiochemical laboratory and provides status update to the Chemistry Manager in the OSC.

Determines impact of incident on environment, radwaste, various effluent treatment systems

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**ATTACHMENT H**  
**(Page 1 of 1)**  
**NUCLEAR SECURITY MANAGER CHECKLIST**

**NOTE:** (I) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

- |             |   |
|-------------|---|
| ____ / ____ | Swipe into Accountability Card Reader.  |
| ____ / ____ | Sign TSC Accountability Log Sheet.  |
| ____ / ____ | Sign in on the Staffing Board.  |
| ____ / ____ | Obtain status of site accountability.   |
| ____ / ____ | Ensure accountability status is reported to the SED within 30 minutes of initiating accountability.   |
| ____ / ____ | Assist in organizing search teams if needed.  |
| ____ / ____ | Restrict access to the protected area except for personnel whose name appears on the Emergency Access List or as authorized by the SED.   |
| ____ / ____ | Close all site access control points, which control personnel entering or leaving the site. Only personnel authorized by the Emergency Access List or the SED will be allowed to enter.                                       |
| ____ / ____ | When SAE or GE level emergencies have been declared no personnel except those who have; (1) been authorized by the SED, (2) accounted for by Nuclear Security and, (3) monitored by RADCON will be allowed to leave the site. |

**Operational Responsibilities**

Directs activities of Nuclear Security personnel.  
Controls Access to Site and Control Rooms.  
Reports on site accountability / evacuation as defined in BFN-EPIP's.  
Provide update status to Security Shift Supervisors.  
Provide update status to SED.  
Provide assistance to SED as needed.

---

**ATTACHMENT I**  
**(Page 1 of 1)**  
**EMERGENCY PREPAREDNESS MANAGER CHECKLIST**

**NOTE:** (I) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

____ / ____	Swipe into Accountability Card Reader.
____ / ____	Sign TSC Accountability Log Sheet.
____ / ____	Sign in on the Staffing Board.
____ / ____	Call Clerical Support personnel.
____ / ____	Confirm all TSC and OSC positions are filled and SED informed. (Notify the Unit 1, Unit Operator when TSC and OSC are staffed)
____ / ____	Correct any activation problems.
____ / ____	Confirm all "Initial TSC Activation" items are completed for all TSC positions.

**Operational Responsibilities**

Advises SED regarding overall radiological emergency plan, use of implementing procedures, emergency equipment availability, and coordination with CECC.

Confirms site emergency centers are operating properly.

Provide assistance to the SED as needed.

Deactivation of the TSC

- Collect all logs and information forms from all staff members in the TSC.
- Place the TSC in a ready state.



---

**ATTACHMENT J**  
**(Page 1 of 1)**  
**NRC COORDINATOR CHECKLIST**

**NOTE:** (l) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

\_\_\_\_/\_\_\_\_ Swipe into Accountability Card Reader.

\_\_\_\_/\_\_\_\_ Sign TSC Accountability Log Sheet.

\_\_\_\_/\_\_\_\_ Sign in on the Staffing Board.

**Operational Responsibilities**

Acts as primary liaison with onsite NRC personnel.

Update NRC Personnel on plant status.

Provide information requests from NRC to TSC personnel.

---

**ATTACHMENT K**  
**(Page 1 of 1)**  
**TSC COMMUNICATOR CHECKLIST**

**Initials/Time**

**Initial TSC Activation**

\_\_\_\_/\_\_\_\_ Swipe into Accountability Card Reader.

\_\_\_\_/\_\_\_\_ Sign TSC Accountability Log Sheet.

\_\_\_\_/\_\_\_\_ Sign in on Staffing Board

\_\_\_\_/\_\_\_\_ Ensure operability of SPDS in the TSC.

**Operational Responsibilities**

Maintain the Main SPDS terminal in the TSC in support of staff needs.

Support the status board writers in maintaining parameter and parameter trend board information.

Provides information from the control room to the Technical Assessment team as needed.

If SPDS is inoperable or becomes inoperable then, completes plant data sheets, Attachment 1, 2, or 3 of EPIP-20 every one-half hour or more frequently if required.

If assigned as a TSC Status Board Writer follow these instructions:

- Monitor communications via the operations party line
- Maintain the following status boards
  - Affected Unit
  - Trend Boards Technical
  - Assessment Parameter

---

**ATTACHMENT L**  
**(Page 1 of 1)**  
**TECHNICAL ASSESSOR # 1 CHECKLIST**  
**(REACTOR ENGINEER)**

**NOTE: (I)** Maintain a log of activities and communications.

Initials/Time

Initial TSC Activation

- /            Swipe into Accountability Card Reader.
- /            Sign TSC Accountability Log Sheet.
- /            Sign in on Staffing Board.
- /            Obtain needed documents and set up in the Technical Assessment Team Area.

**Operational Responsibilities**

Completes trend graphs as needed.

Provides the TSC staff and CECC Plant Assessment Team with current assessments on plant conditions.

Project future plant status based on current conditions.

Provide Technical Support as needed.

When Severe Accident Management Guidelines are entered report to the TSC and assume evaluator duties (If Qualified).

---

**ATTACHMENT M**  
**(Page 1 of 1)**  
**TECHNICAL ASSESSOR # 2 CHECKLIST**  
**(INSTRUMENTATION AND CONTROL ENGINEER )**

**NOTE:** (I) Maintain a log of activities and communications.

Initials/Time

Initial TSC Activation

- |                  |   |
|------------------|---|
| <u>    /    </u> | Swipe into Accountability Card Reader.                                    |
| <u>    /    </u> | Sign TSC Accountability Log Sheet.  |
| <u>    /    </u> | Sign in on Staffing Board.  |
| <u>    /    </u> | Obtain needed documents and set up in the Technical Assessment Team Area. |

**Operational Responsibilities**

Completes trend graphs as needed.

Provides the TSC staff and CECC Plant Assessment Team with current assessments on plant conditions.

Project future plant status based on current conditions.

Provide Technical Support as needed.

When Severe Accident Management Guidelines are entered report to the TSC and assume evaluator duties (If Qualified).

---

**ATTACHMENT N**  
**(Page 1 of 1)**  
**OPERATIONS SPECIALIST CHECKLIST**

**NOTE:** (I) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

____ / ____	Swipe into Accountability Card Reader.
____ / ____	Sign TSC Accountability Log Sheet.
____ / ____	Sign in on Staffing Board.
____ / ____	Establish communications with Control Room Communicator in the Control Room and OSC Operations Manager via party line.

**Operational Responsibilities**

Provides operational knowledge for status evaluation of plant systems.

Provides advice regarding technical specifications, system response, safety limits, etc..

Assists in development of recommended solutions to developing problems.

Provide plant data to the TSC Staff and to the Shift Manager. (Use party line)

Provide Assistance to the SED as needed.

When Severe Accident Management Guidelines are entered assume evaluator duties (If Qualified).

---

**ATTACHMENT O**  
**(Page 1 of 1)**  
**ASSISTANT RADCON MANAGER CHECKLIST**

**NOTE:** (I) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

- |             |   |
|-------------|---|
| ____ / ____ | Swipe into Accountability Card Reader.                              |
| ____ / ____ | Sign TSC Accountability Log Sheet.                                  |
| ____ / ____ | Sign in on Staffing Board.  |
| ____ / ____ | Begin providing information for the TSC RADCON Status Board writer. |

**Operational Responsibilities**

Provide Radiological Data to the RADCON Manager.

Assist the Chemistry Manager in maintaining the Release Status Board.

---

**ATTACHMENT P**  
**(Page 1 of 1)**  
**SITE VICE PRESIDENT CHECKLIST**

**NOTE:** (I) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

\_\_\_\_ / \_\_\_\_\_ Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_\_ Sign TSC Accountability Log Sheet.

\_\_\_\_ / \_\_\_\_\_ Sign in on Staffing Board.

**Operational Responsibilities**

Provides TVA policy direction to the Site Emergency Director (SED).

Directs the site resources to support the SED in the accident mitigation activities.

Interface with News Media through the Information Officer.

Assist the SED as needed.

At his discretion, may provide interface at the appropriate offsite location on the overall site response activities with; State and local agencies, NRC region/corporate, and Joint Information Center.

Provide direct interface on overall site response activities with NRC, FEMA, or other Federal organizations responding to the site.

Provides direct interface on overall site response activities with the CECC Director and onsite media.

Provides support to the other emergency operation centers as necessary.

---

**ATTACHMENT Q**  
**(Page 1 of 1)**  
**STATUS BOARD WRITER CHECKLIST**  
**(Unit/Equipment Boards)**

**Initials/Time**

**Initial TSC Activation**

\_\_\_\_/\_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_/\_\_\_\_

Sign TSC Accountability Log Sheet.

\_\_\_\_/\_\_\_\_

Sign in on Staffing Board.

\_\_\_\_/\_\_\_\_

Establish communications with OSC status Board writers.

**Operational Responsibilities**

Maintain the following Status Boards:

- Equipment Problems
- Unaffected Unit
- Team Tracking



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---

**ATTACHMENT R**  
**(Page 1 of 1)**  
**TECHNICAL ASSESSMENT TEAM LEADER CHECKLIST**

**NOTE:** (I) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

____ / ____	Swipe into Accountability Card Reader.
____ / ____	Sign the TSC Accountability Log Sheet.
____ / ____	Sign in on the Staffing Board.
____ / ____	Report to Technical Assessment Team Area.
____ / ____	Establish communications with the Plant Assessment Team in the CECC.
____ / ____	Assign a technical assessor position to monitor the operation communication bridge.

**Operational Responsibilities**

Performs systems assessment as directed by Technical Assessment Manager.

Determines condition of Reactor and Nuclear Fuel

Acts as Plant Assessment Team Leader

Provide updated information to the Plant Assessment Team.

Provide detailed technical assessments and recommendations to the TSC.

When Severe Accident Management Guidelines are entered remain in technical assessment team area and assume evaluator duties (If Qualified).

---

**ATTACHMENT S**  
**(Page 1 of 1)**  
**SITE ENGINEERING MANAGER CHECKLIST**

**NOTE:** (l) Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

<u>      /      </u>	Swipe into Accountability Card Reader.
<u>      /      </u>	Sign the TSC Accountability Log Sheet.
<u>      /      </u>	Sign in on the Staffing Board.
<u>      /      </u>	Report to the Technical Assessment Team Area.

**Operational Responsibilities**

Serves as the primary interface with Engineering.

Serve as a member of the Technical Assessment Team.

Provide Engineering Support to TSC.

---

ATTACHMENT T  
(Page 1 of 1)  
CONTROL ROOM COMMUNICATOR CHECKLIST

**Initials/Time**

**Initial TSC Activation**

- \_\_\_\_ / \_\_\_\_ Swipe into Accountability Card Reader.
- \_\_\_\_ / \_\_\_\_ Sign the TSC Accountability Log Sheet.
- \_\_\_\_ / \_\_\_\_ Sign in on the Staffing Board.
- \_\_\_\_ / \_\_\_\_ Report to the affected Unit Control Room.
- \_\_\_\_ / \_\_\_\_ Establish Communications with the Operations Specialist (use party line).

**Operational Responsibilities**

Provide updated plant parameters and status over the telephone to the Operations Specialist, Technical Assessment team areas and OSC operations personnel

When Severe Accident Management Guidelines are entered remain in the control room and assume evaluator duties (If Qualified).

---

**ATTACHMENT U**  
**(Page 1 of 1)**  
**TECHNICAL SUPPORT CENTER CLERK CHECKLIST**

NOTE: Maintain a log of activities and communications.

**Initials/Time**

**Initial TSC Activation**

____ / ____	Swipe into Accountability Card Reader.
____ / ____	Sign the TSC Accountability Log Sheet.
____ / ____	Sign in on the Staffing Board.
____ / ____	Check the operability of the copy machine.

**Operational Responsibilities**

Maintain log of events.

Answer telephones.

Operate facsimile machine.

Other duties as assigned by the Site Emergency Director.

Provide clerical support to the TSC Staff.

Maintain official SED Log

**LAST PAGE**

**TENNESSEE VALLEY AUTHORITY**

**BROWNS FERRY NUCLEAR PLANT**

**EMERGENCY PLAN IMPLEMENTING PROCEDURE**

**EPIP-7**

**ACTIVATION AND OPERATION OF THE  
OPERATIONS SUPPORT CENTER (OSC)**

**REVISION 19**

PREPARED BY: TIM CORNELIUS

PHONE: 2038

RESPONSIBLE ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: GILBER V. LITTLE

DATE: 02/13/2001

EFFECTIVE DATE: 02/26/2001

**LEVEL OF USE: REFERENCE USE**

**QUALITY-RELATED**

## REVISION LOG

Procedure Number: EPIP-7

Revision Number: 19

Pages Affected: 5,6,29

Pagination Pages: All

Description of Change:

- IC-22 This revision is being conducted to correct minor changes to the procedure.
  - Page 5 - is being revised to correct page of attachment
  - Page 6 - is being conducted remove a note referring to operations support, establishing the OSC initially.
  - Page 29 - is being revised to update the OSC layout.

## 1.0 PURPOSE

- 1.1 The purpose of this procedure is to describe the activities of the Operations Support Center (OSC) and the assessment and repair activities during a radiological emergency.

## 2.0 Scope

- 2.1 The procedure covers the emergency response from the OSC during an ALERT, SITE AREA EMERGENCY, or GENERAL EMERGENCY.

## 3.0 INSTRUCTIONS

- 3.1 The OSC will be staffed by qualified members reporting to the OSC and staging area upon hearing the Site Accountability Alarm, Plant Public Address System, upon activation of the Automated Paging System (APS), or upon being called for duty by the Unit 1, Unit Operator.

**NOTE:** Refer to EPIP-8, Personnel Accountability and Evacuation.

- 3.2 The OSC is located in two locations.

- The OSC is located on elevation 580' Service Building.
- The OSC staging area located on elevation 565' of the Service Building Maintenance Lunch Room area.

**NOTE:** If necessary to evacuate the OSC, relocate to the second level of the Plant Office Building (Plant Manager's Office area).

### **3.0 INSTRUCTIONS (CONTINUED)**

#### **3.3 Operation of The OSC**

- 3.3.1** Normal plant maintenance procedures will be followed whenever possible. Should a situation arise where normal procedures would be inappropriate, maintenance will be performed as determined by the SED. If a situation is encountered in the field that threatens the safety of any team member, the Team Leader shall take appropriate action to prevent injury.

#### **3.4 Required Actions for Activation and Operation of the OSC**

- 3.4.1** All members of the OSC staff complete the appropriate attachment for your position.

### **4.0 LONG-TERM OPERATION**

- 4.1** Upon receiving information from the TSC that emergency operation is expected to extend past 12 hours, the OSC Director will arrange to set up shift rotations.

**NOTE:** Calling in additional personnel may be necessary.



---

## 5.0 Attachments

Attachment A -	Team Tracking Form
Attachment B -	OSC Director Checklist
Attachment C -	RADCON OSC Manager Checklist
Attachment D -	Fire Protection OSC Manager Checklist
Attachment E -	Chemistry OSC Manager Checklist
Attachment F -	Operations OSC Manager Checklist
Attachment G -	Instrumentation and Controls OSC Supervisor Checklist
Attachment H -	Mechanical OSC Supervisor Checklist
Attachment I -	Electrical OSC Supervisor Checklist
Attachment J -	RADCON Lab Supervisor Checklist
Attachment K -	Fire Protection Shift Captain Checklist
Attachment L -	Chemistry Lab Supervisor Checklist
Attachment M -	OSC Engineer's Check List
Attachment N -	OSC Staging Area Manager
Attachment O -	Assistant OSC Director
Attachment P -	OSC Clerk Checklist
Attachment Q -	Status Board Writer
Attachment R -	OSC Team Manager
Attachment S -	Materials Coordinator
Attachment T -	OSC Planners Checklist
Attachment U -	OSC Document Control Checklist
Attachment V -	OSC Configuration

ATTACHMENT A (Page 1 of 2)  
**TEAM TRACKING FORM**

TEAM DESIGNATOR (A, B, C, etc.) \_\_\_\_\_ TEAM PRIORITY (NA, 1, 2, 3, etc.) \_\_\_\_\_

<b>Team Manager</b>  _____ / _____ <i>Initials      Time</i>	<b>Team Task:</b> _____ _____ _____ <b>Associated TSC Priority:</b> _____ <b>Task Location: UNIT</b> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> Common <input type="checkbox"/> Reactor Bldg., Elev. _____ <input type="checkbox"/> Control Bay, Elev. _____ <input type="checkbox"/> Diesel Bldg., Elev. _____ <input type="checkbox"/> Turbine Bldg., Elev. _____ <input type="checkbox"/> OTHER (Be Specific) _____ Elev. _____
<b>Assist. Director</b>  _____ / _____ <i>Initials      Time</i>	<b>Responsible Section:</b> <input type="checkbox"/> Electrical <input type="checkbox"/> I&C <input type="checkbox"/> RADCON <input type="checkbox"/> Mechanical <input type="checkbox"/> Operations <input type="checkbox"/> Fire/Medical <input type="checkbox"/> OTHER (Be Specific) _____ <input type="checkbox"/> <b>OSC Center Announcement:</b> Let me have your attention. Team ( <i>Use Designator</i> ) has been requested from the TSC to ( <i>Describe Task</i> ). ( <i>Section Rep</i> ) has been assigned to plan this task.
<b>Section Rep</b>  _____ / _____ <i>Initials      Time</i>	<b>Team Members</b> <b>Team Leader</b> _____ <b>Section:</b> _____ _____ <b>Section:</b> _____ _____ <b>Section:</b> _____ _____ <b>Section:</b> _____ _____ <b>Section:</b> _____ <b>Briefing Checklist</b> <input type="checkbox"/> Description of Problem <input type="checkbox"/> Key(s) Needed for Task <input type="checkbox"/> Effected System Status <input type="checkbox"/> Hazards to/from Work Site <input type="checkbox"/> Procedures to be Used <input type="checkbox"/> Safety Evaluation <input type="checkbox"/> Drawings to be Used <input type="checkbox"/> Operations Support <input type="checkbox"/> Tools/Equipment Needed <input type="checkbox"/> RADCON Support <input type="checkbox"/> Clearances Needed <input type="checkbox"/> RWP Required/Brief <input type="checkbox"/> Route to/from Work Site <input type="checkbox"/> Return as a team for De-Briefing <b>Communications:</b> <input type="checkbox"/> Hand-Held Radio, Channel- _____ <input type="checkbox"/> Telephone, provide OSC Number- _____ <input type="checkbox"/> Other- _____
<b>RADCON</b> _____ / _____ <i>Initials      Time</i>	<b>RWP Utilized</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, RWP# _____ <b>Emergency Exposures Utilized</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes Approval Required, EPIP 15) <b>Potassium Iodine Utilized</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes Approval Required, EPIP 14)
<b>OSC Director</b> _____ / _____ <i>Initials      Time</i>	<b>Final Approval By OSC Director</b> <input type="checkbox"/> <b>OSC Center Announcement:</b> "Is there any reason that Team ( <i>Use Designator</i> ) should not be released at this time".

ATTACHMENT A (Page 2 of 2)  
**TEAM TRACKING FORM**

TEAM DESIGNATOR (A, B, C, etc.) \_\_\_\_\_ TEAM PRIORITY (NA, 1, 2, 3, etc.) \_\_\_\_\_

<p><b>Section Rep</b> _____/_____ <i>Initials      Time</i></p>	<p><b>De-Briefing Summary Information</b></p> <p><input type="checkbox"/> Assignment Completed <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> CANCELLED</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> Equipment Status "As Left":</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> Hazards Encountered (Actual or Potential)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> Equipment Clearance Status</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> Unusual Sounds, Additional Radiological Information, Other Task Applicable Information</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>DE-BRIEFING CLOSURE</b></p> <p><input type="checkbox"/> Inform OSC Director of Team De-Briefing Summary</p> <p><input type="checkbox"/> Direct Personnel to OSC STAGING AREA or Other</p> <p><input type="checkbox"/> Update OSC Team Tracking Board</p>
<p><b>OSC Director</b> _____/_____ <i>Initials      Time</i></p>	<p><input type="checkbox"/> TSC Notified. Team results provided to the TSC Maintenance Manager</p>

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ATTACHMENT B (Page 1 of 3)  
**OSC DIRECTOR CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign the OSC Accountability Log Sheet.

\_\_\_\_ / \_\_\_\_

Sign in on the staffing board.

\_\_\_\_ / \_\_\_\_

Set up the OSC (assign any available personnel to assist)

- Configure OSC area an arrangement similar to EPIP-7, Attachment V
- Clear tables
- Ensure telephones are in proper location and operating.
- Open OSC supply cabinet
- Place notebooks in the proper position in the OSC.
- Obtain needed documents

\_\_\_\_ / \_\_\_\_

Inform the SHIFT MANAGER/SED of your location and status

\_\_\_\_ Unit 1 2191/2192

\_\_\_\_ Unit 2 2291/2292

\_\_\_\_ Unit 3 2391/2392

\_\_\_\_ / \_\_\_\_

Establish communication with the Maintenance Manager (TSC) (phone # 3766).

\_\_\_\_ / \_\_\_\_

Establish communication with the OSC Staging Area Manager (phone # 2244).

\_\_\_\_ / \_\_\_\_

Confirm the OSC is staffed (Notify the Maintenance Manager) (phone # 3766).

---

---

ATTACHMENT B (Page 2 of 3)  
OSC DIRECTOR CHECKLIST (Continued)

Initials/Time

Initial OSC Activation (Continued)

\_\_\_\_\_/\_\_\_\_

Make the following remarks prior to activating the OSC.

**This is an actual emergency (or exercise - if an exercise, we need to treat this exercise seriously as if it were a real emergency and take complete advantage of this exercise as a learning experience).**

**Be Professional**

- **Keep legible logs of all your activities.**
- **Be clear and precise in transfer of information.**
- **Make sure you are accurate with units as data are transferred.**
- **Keep noise level down as low as possible.**

\_\_\_\_\_/\_\_\_\_

Ensure that the Team Manager:

- ☐ Tracks any team(s) dispatched prior to OSC activation.
- ☐ Form initial response teams (see note below).

**Operational Responsibilities**

Provide Maintenance Manager with a debriefing summary for each returning repair/damage team.

Direct OSC activities through the Assistant OSC Director.

Communication with the SED as needed to ensure effective performance of the OSC.

Approve the dispatching of all teams.

Provide updates to the OSC personnel.

---

ATTACHMENT B (Page 3 of 3)  
**OSC DIRECTOR CHECKLIST (Continued)**

**Operational Responsibilities (Continued)**

Provide updates to the OSC staging area personnel (approximately every one-half hour or as conditions warrant).

Ensure that all teams returning from assigned tasks are debriefed utilizing Attachment A of this procedure.

**NOTE:** Initial response teams are as a minimum:

1. One Medical Emergency/Fire Response Team
2. Two RADCON Survey Teams.
3. One Post Accident Sampling Team.
4. Two repair teams (each consists of at least one Mechanical, one Electrical, one Operations, and one RADCON)
5. Turbine Building el. 565' Tool Room.

**NOTE:** If AREA is determined to be not habitable by Radcon discontinue this team #5.

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---

ATTACHMENT C (Page 1 of 2)  
**RADCON OSC MANAGER CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial Activation of the OSC**

<u>      </u> / <u>      </u>	Swipe into Accountability Card Reader.
<u>      </u> / <u>      </u>	Sign the OSC Accountability Log Sheet.
<u>      </u> / <u>      </u>	Sign in on the staffing board.
<u>      </u> / <u>      </u>	Establish communication with the RADCON Manager in the TSC.
<u>      </u> / <u>      </u>	Establish communication with the RADCON Lab Supervisor.
<u>      </u> / <u>      </u>	Ensure adequate RADCON staff available for OSC support.
<u>      </u> / <u>      </u>	Assign a RADCON Technician to the MERT.
<u>      </u> / <u>      </u>	Assign a RADCON status board writer.
<u>      </u> / <u>      </u>	Complete "Team Tracking Forms" (Attachment A) for all RADCON personnel dispatched prior to the OSC activation and give to the Assistant OSC Director.

**Operational Responsibilities**

Direct RADCON personnel in the RADCON lab.

Ensure all RADCON teams are dispatched through the OSC.

Provide assistance to the OSC Director, as needed.

Ensure as applicable that teams have RADCON coverage.

Brief the OSC Director of RADCON status.

Brief the RADCON Superintendent in the TSC on status.

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ATTACHMENT C (Page 2 of 2)  
**RADCON OSC MANAGER CHECKLIST (Continued)**

**Operational Responsibilities (Continued)**

Complete and update "Team Tracking Forms" (Attachment A) for RADCON teams you are assigned.

Ensure that all predressed OSC staging area teams are issued proper dosimetry and have been evaluated for radiological access (i.e. watch list)

Ensure technical briefing to OSC teams of radiological conditions prior to dispatch.



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ATTACHMENT D (Page 1 of 1)  
**FIRE PROTECTION OSC MANAGER CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign the OSC Accountability Log Sheet.

\_\_\_\_ / \_\_\_\_

Sign in on the staffing board.

\_\_\_\_ / \_\_\_\_

Establish communications with the Site Fire Protection Shift Captain and staff.

\_\_\_\_ / \_\_\_\_

Complete "Team Tracking Forms" (Attachment A) for all Fire Protection Personnel dispatched prior to OSC activation and give to the Assistant OSC Director.

**Operational Responsibilities**

When possible allow Staging Area Fire Protection personnel to assist team in donning SCBAs.

Provide and coordinate site Fire Protection resources as necessary to support the OSC Director.

Assist in technical briefings of OSC teams as necessary.

Provide evaluations and projections on emergency air supplies.

Complete and update "Team Tracking Forms" (Attachment A) for MERT and fire fighting teams you are assigned.

Provide industrial safety support to the OSC Director as needed.

Brief teams on industrial hazards as needed.

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ATTACHMENT E (Page 1 of 1)  
**CHEMISTRY OSC MANAGER CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial Activation of the OSC**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign the OSC Accountability Log Sheet.

\_\_\_\_ / \_\_\_\_

Sign in on the staffing board.

\_\_\_\_ / \_\_\_\_

Establish communication with the Chemistry Lab Personnel. If no Chemistry Shift Supervisor is available in the lab, appoint a lead technician and call in the next shift Chemistry Supervisor.

\_\_\_\_ / \_\_\_\_

Ensure adequate Chemistry staff is available to support the OSC.

\_\_\_\_ / \_\_\_\_

Complete "Team Tracking Forms" (Attachment A) for all Chemistry Personnel dispatched prior to OSC activation, and give to the Assistant OSC Director.

**Operational Responsibilities**

Direct Chemistry assignments in the Chemistry lab.

Ensure all Chemistry teams are dispatched through the OSC.

Provide assistance to the OSC Director as needed.

Brief the OSC Director of Chemistry status.

Complete and update "Team Tracking Forms" (Attachment A) for Chemistry teams you are assigned.

Obtain necessary post accident samples (as directed by the OSC Director). The three hour time requirement begins upon a sample requested by the SED, however, a request to prepare a team for sampling does not start the time period. Sampling teams should not be assigned a tracking number until the sample is officially requested.

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ATTACHMENT F (Page 1 of 1)  
**OPERATIONS OSC MANAGER CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign in on the staffing board.

\_\_\_\_ / \_\_\_\_

Notify the OSC Director and Shift Manager (affected unit Control Room) upon arrival to the OSC.

\_\_\_\_ / \_\_\_\_

Establish communications with the Operations Communicator utilizing the operations communications bridge.

\_\_\_\_ / \_\_\_\_

Establish communications with supporting OSC Operations personnel (staging area).

\_\_\_\_ / \_\_\_\_

Complete "Team Tracking Forms" (Attachment A) for all Operations Personnel dispatched prior to OSC activation, and give to the Assistant OSC Director. (EOI Activities)

**Operational Responsibilities**

Provide and coordinate operations personnel to support the OSC Director.

Provide operations support to OSC teams that are dispatched into the field.

Perform any operations actions that may be required while in the field.

Keeps the SHIFT MANAGER apprised of OSC team activities while in the field.

Complete and update "Team Tracking Forms" (Attachment A) for Operations teams you are assigned.

Ensure the responsiveness of EOI field teams.

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ATTACHMENT G (Page 1 of 1)  
**INSTRUMENT AND CONTROL (I&C) SUPERVISOR CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_\_/\_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_\_/\_\_\_\_

Sign the OSC Accountability Log Sheet.

\_\_\_\_\_/\_\_\_\_

Sign in on the staffing board.

\_\_\_\_\_/\_\_\_\_

Notify the OSC Director upon arrival.

\_\_\_\_\_/\_\_\_\_

Establish communications with the supporting OSC I&C staff (staging area)

\_\_\_\_\_/\_\_\_\_

Complete "Team Tracking Forms" (Attachment A) for all I&C Personnel dispatched prior to OSC activation and give to the Assistant OSC Director.

**Operational Responsibilities**

Provide and coordinate I&C resources necessary to support the OSC Director and teams.

Provide technical assistance with I&C problems.

Perform damage and repair assessments.

Assist in technical briefings of OSC teams as necessary.

Complete and update "Team Tracking Forms" (Attachment A) for I&C teams you are assigned.

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ATTACHMENT H (Page 1 of 1)  
**MECHANICAL OSC SUPERVISOR CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign the OSC Accountability Log Sheet.

\_\_\_\_ / \_\_\_\_

Sign in on the staffing board.

\_\_\_\_ / \_\_\_\_

Notify OSC Director upon arrival.

\_\_\_\_ / \_\_\_\_

Establish communications with appropriate supporting OSC Mechanical staff (Staging Area).

\_\_\_\_ / \_\_\_\_

Complete "Team Tracking Forms" (Attachment A) for all Mechanical Personnel dispatched prior to OSC activation and give to the Assistant OSC Director.

**Operational Responsibilities**

Provide and coordinate Mechanical Maintenance resources necessary to support OSC Director and teams.

Provide technical assistance with mechanical system problems.

Perform damage and repair assessments.

Assist in technical briefings of OSC teams as necessary.

Complete and update "Team Tracking Forms" (Attachment A) for mechanical maintenance teams you are assigned.

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ATTACHMENT I (Page 1 of 1)  
**ELECTRICAL OSC SUPERVISOR CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_\_/\_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_\_/\_\_\_\_

Sign the OSC Accountability Log Sheet.

\_\_\_\_\_/\_\_\_\_

Sign in on the staffing board.

\_\_\_\_\_/\_\_\_\_

Notify OSC Director upon arrival.

\_\_\_\_\_/\_\_\_\_

Establish communications with appropriate supporting OSC Electrical staff (staging area).

\_\_\_\_\_/\_\_\_\_

Complete "Team Tracking Forms" (Attachment A) for all Electrical Personnel dispatched prior to OSC activation.

**Operational Responsibilities**

Provide and coordinate Electrical Maintenance resources necessary to support OSC Director and teams.

Provide technical assistance with electrical system problems.

Perform damage and repair assessments.

Assist in technical briefings of OSC teams as necessary.

Complete and update "Team Tracking Forms" (Attachment A) for Electrical Maintenance teams you are assigned.

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ATTACHMENT J (Page 1 of 1)  
**RADCON LAB SUPERVISOR (RADCON LAB) CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign RADCON lab Accountability Log Sheet

\_\_\_\_ / \_\_\_\_

Establish communications with appropriate supporting RADCON Lab staff.

**Operational Responsibilities**

Provide and coordinate RADCON personnel necessary to support the OSC teams.

Maintains an interface with the OSC RADCON Manager related to the radiological conditions in the plant.

Ensure that adequate dosimetry is maintained for OSC teams.

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ATTACHMENT K (Page 1 of 1)  
**FIRE PROTECTION SHIFT CAPTAIN (STAGING AREA) CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_/\_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_/\_\_\_\_

Sign the OSC staging area Accountability Log Sheet.

\_\_\_\_/\_\_\_\_

Ensure all ESTS sign the OSC Staging area Accountability Log Sheet.

\_\_\_\_/\_\_\_\_

Notify Fire Protection Manager (OSC) upon arrival.

\_\_\_\_/\_\_\_\_

Establish communications with the site Fire Protection staff.

**Operational Responsibilities**

Monitor status of site Fire Protection/Life Safety systems and keep OSC Fire Protection Manager apprised.

Acts as Medical Emergency Response Team (MERT) Leader if EPIP-10 is implemented.

Keeps Fire Protection OSC Manager apprised as to status of emergency air supplies.

Directs the Fire Protection staff's activities when required to dispatch into the field for fire, medical, or other necessary support.



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ATTACHMENT L (Page 1 of 1)  
**CHEMISTRY LAB SUPERVISOR (CHEMISTRY LAB) CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_\_  
/

Swipe into Accountability Card Reader.

\_\_\_\_\_  
/

Sign the Chemistry Lab Accountability Log Sheets

\_\_\_\_\_  
/

Ensure the condensate oxygen injection system has been isolated if installed on the affected unit.

\_\_\_\_\_  
/

Establish communications with appropriate supporting Chemistry staff.

\_\_\_\_\_  
/

Ensure dose-rate monitoring instruments are functioning properly.

\_\_\_\_\_  
/

Have on-duty technicians review emergency sampling/analysis procedures and prepare for implementation.

**Operational Responsibilities**

Provide and coordinate Chemistry Lab necessary to support the OSC teams.

Assist in technical briefings of OSC teams as necessary.

Obtain necessary post accident samples and performs analysis of samples (as directed by the OSC Director). The three hour time requirement begins upon a sample request by the SED, however, a request to prepare a team for sampling does not start the time period. Sampling teams should not be assigned a tracking number until the sample is officially requested.

Maintains an interface with the Chemistry OSC Manager and provides results of sample analysis in a timely manner.

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ATTACHMENT M (Page 1 of 1)  
**OSC ENGINEER'S CHECKLIST**  
**(ELECTRICAL - MECHANICAL - INSTRUMENTATION AND CONTROLS)**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign the OSC Accountability Log Sheet.

\_\_\_\_ / \_\_\_\_

Sign in on the staffing board.

**Operational Responsibilities**

Provide engineering support to the OSC staff.

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ATTACHMENT N (Page 1 of 1)  
**OSC STAGING AREA MANAGER**

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign the OSC Staging Area Accountability Log Sheet.

\_\_\_\_ / \_\_\_\_

Assign a foreman to set up the OSC staging area, include the following:

- ☐ Ensure all personnel in the OSC staging area card into the Accountability Card Reader.
- ☐ Ensure all personnel in the OSC staging area sign the Accountability Log Sheet.
- ☐ Unlock Supply Cabinet
- ☐ Install the OSC Staging Area Telephones.

**Operational Responsibilities**

Maintain control in the OSC staging area

Assemble personnel and direct them to the OSC when requested.

Ensure adequate man-power exist in the OSC staging area. (i.e. Radcon, AUO's, Electrical, etc. personnel)

Inform OSC manager of all time delays in team assembly.

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ATTACHMENT O (Page 1 of 1)  
**ASSISTANT OSC DIRECTOR CHECKLIST**

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_\_/\_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_\_/\_\_\_\_

Sign the OSC Accountability Log Sheet.

\_\_\_\_\_/\_\_\_\_

Sign in on the staffing board.

\_\_\_\_\_/\_\_\_\_

Call Maintenance Planner.

\_\_\_\_\_/\_\_\_\_

Collect any completed Team Tracking Forms from OSC managers and route to OSC Team Manager.

**Operational Responsibilities**

Ensure status boards are kept current.

Assign tasks to appropriate OSC managers when directed by OSC Team Manager.

Keep the OSC Director informed of task status.

Ensure the responsiveness of all personnel assigned to assemble and dispatch field teams.

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ATTACHMENT P (Page 1 of 1)  
**OSC CLERK CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign the Accountability Log Sheet.

\_\_\_\_ / \_\_\_\_

Sign in on the staffing board.

**Operational Responsibilities**

Maintain a log for the OSC Director.

Provide clerical support for the OSC and OSC Staging Area.

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ATTACHMENT Q (Page 1 of 1)  
**STATUS BOARD WRITER CHECKLIST**

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_/\_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_/\_\_\_\_

Sign OSC Accountability Log Sheet.

\_\_\_\_/\_\_\_\_

Sign in on Staffing Board.

**Operational Responsibilities**

Maintain the following Status Boards (As assigned)

- Affected Unit
- Equipment Problems
- Team Tracking

Obtain up-to-date plant data from the OSC Operations Communicator.

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ATTACHMENT R (Page 1 of 1)  
**OSC TEAM MANAGER**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

<u>      /      </u>	Swipe into Accountability Card Reader.
<u>      /      </u>	Sign the Accountability Log Sheet.
<u>      /      </u>	Sign in on Staffing Board.
<u>      /      </u>	Track any team(s) dispatched prior to the OSC activation.
<u>      /      </u>	Establish communications with the TSC maintenance manager (#3766).

**Operational Responsibilities**

Initiate team Tracking Forms as requested by TSC Maintenance manager and forward to Assistant OSC Director upon acknowledgment by the OSC director.

Ensure that the team tracking board is consistent and accurate and that the information is being transferred in a timely manner to the TSC team tracking board writer.

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ATTACHMENT S (Page 1 of 1)  
**MATERIALS COORDINATOR**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

____ / ____	Swipe into Accountability Card Reader.
____ / ____	Sign the Accountability Log Sheet.
____ / ____	Sign in on Staffing Board.
____ / ____	Track activities conducted prior to the OSC activation and report to director.
____ / ____	Establish communications with Power Stores representative at Extension #2608.

**Operational Responsibilities**

Provide and coordinate material support resources necessary to support the Operation Support Center.

Provide technical assistance as applicable in regards to material acquisition, substitution, and availability.



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ATTACHMENT T (Page 1 of 1)  
**OSC PLANNERS CHECKLIST**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign the Accountability Log Sheet.

\_\_\_\_ / \_\_\_\_

Sign in on the staffing board.

**Operational Responsibilities**

Provide support to the OSC Staff as applicable.

Support in the Planning and briefing preparation for OSC Team

Complete and update "Team Tracking Forms" for teams you are assigned

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ATTACHMENT U (Page 1 of 1)  
**OSC DOCUMENT CONTROL**

**NOTE:** Maintain a log of activities and communications.

**Initials/Time**

**Initial OSC Activation**

\_\_\_\_ / \_\_\_\_

Swipe into Accountability Card Reader.

\_\_\_\_ / \_\_\_\_

Sign the Accountability Log Sheet.

\_\_\_\_ / \_\_\_\_

Sign in on the staffing board.

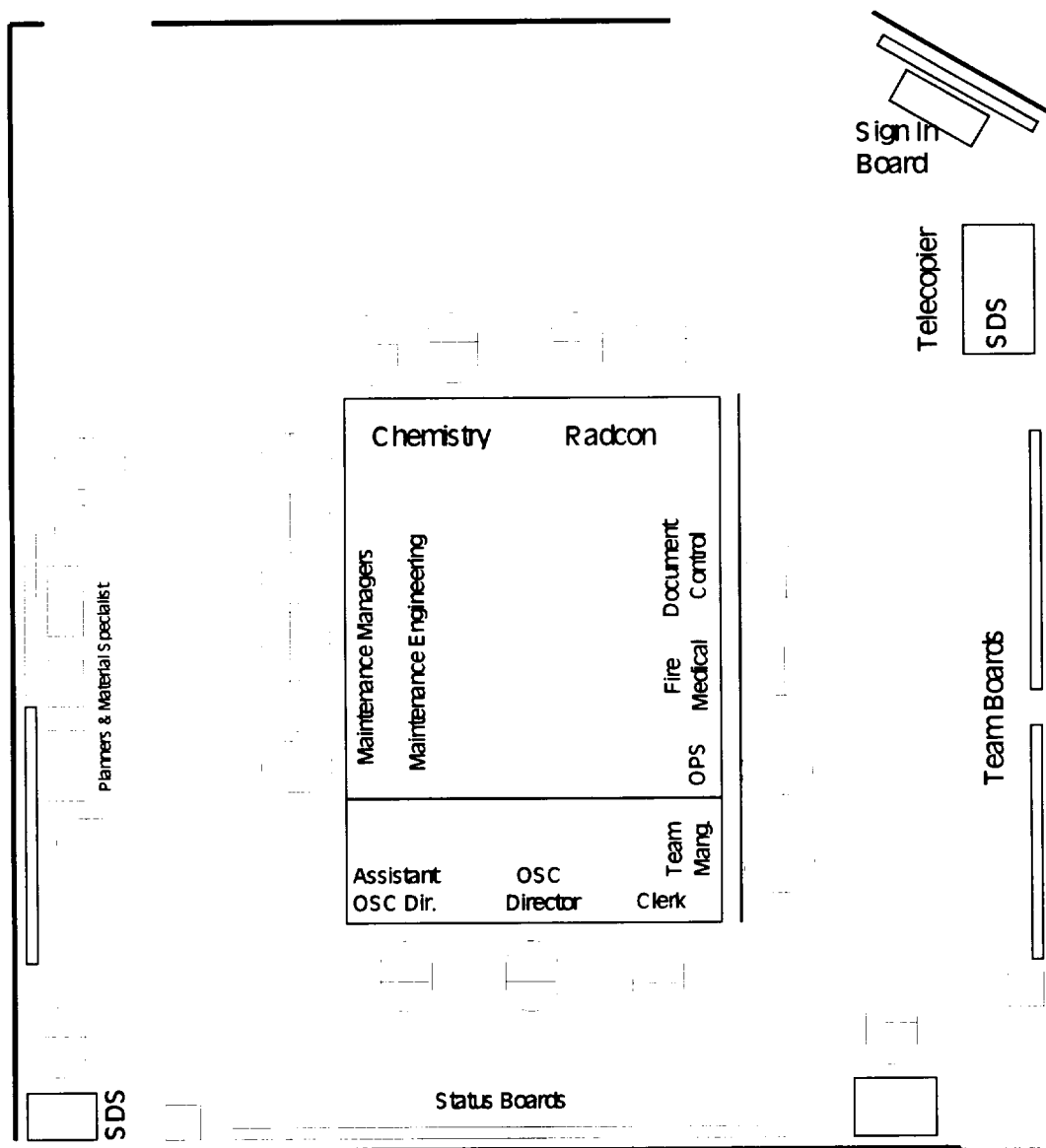
**Operational Responsibilities**

Provide document control support for the OSC and OSC Staging Area.

Ensure that documents/drawings are maintained as utilized by OSC members.

Ensure timely availability of procedures and drawings as requested by OSC members.

ATTACHMENT V (Page 1 of 1)  
OSC CONFIGURATION



**TENNESSEE VALLEY AUTHORITY**

**BROWNS FERRY NUCLEAR PLANT**

**EMERGENCY PLAN IMPLEMENTING PROCEDURE**

**EPIP-10**

**MEDICAL EMERGENCY PROCEDURE**

**REVISION 21**

PREPARED BY: T. W. CORNELIUS

PHONE: 2038

RESPONSIBLE ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: GILBERT V. LITTLE

DATE: 02/13/2001

EFFECTIVE DATE: 02/26/2001

**LEVEL OF USE: REFERENCE USE**

**QUALITY-RELATED**

## REVISION LOG

Procedure Number: EPIP-10

Revision Number 21

Pages Affected: 5

Description of Change:

IC - 22            Revised page 5, to include as a step the notification of the Operations Duty Specialist when ambulance responses are used.

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## MEDICAL EMERGENCY PROCEDURE

### 1.0 PURPOSE

To provide timely response to medical emergencies at Browns Ferry.

### 2.0 SCOPE

This procedure applies to Medical Emergency response for both radioactively contaminated and non-radioactively contaminated injured individuals.

### 3.0 INSTRUCTIONS

#### 3.1 Initial Notification by Unit Operator

3.1.1 Upon receiving a Medical Emergency call, the Control Room Unit Operator will:

- Obtain Name of caller.
- Obtain Location of medical emergency.
- Obtain Type of medical emergency.
- Obtain Number of People involved.
- Obtain Telephone Number from caller.

3.1.2 If not activated, activate the plant medical/fire alarm. Announce medical emergency location over the plant public address (PA) system, repeating at regular intervals to alert the Medical Emergency Response Team (MERT) to the location until instructed otherwise by Shift Manager or Unit Supervisor .

3.1.3 Notify the Fire Protection Personnel using the Operations/Fire Protection Radio.

3.1.4 Notify the Shift Manager of the emergency.

3.1.4.1 The MERT consist of the following:

- Incident Commander (as defined in FPP)
- Medical/Fire Operation Personnel
- RADCON Personnel (if location of emergency is in a Radiological Controlled Area)
- Nuclear Security Personnel
- Health Services (as requested)
- Level II Responders (as defined in FPP)

---

## 3.0 INSTRUCTIONS (CONTINUED)

### 3.2 The Shift Manager will:

1. **Dispatch** Unit Supervisor or designee to the scene to act as Incident Commander.
2. **Establish and Maintain** communication with the Unit Supervisor.
3. **Notify** the nurse on duty (if requested by the MERT Leader).

### 3.3 The Incident Commander will:

1. **Ensure** and **Maintain** the MERT Team's passage route.
2. **Ensure** that the Shift Manager is keep knowledgeable of the situation.
3. **Request** the Shift Manager to obtain ambulance as needed.
4. **Establish** radio communication with the Shift Manager.
5. **Ensure** that plant operations do not impose any hazardous conditions on the injured or Medical Response Team.

### 3.4 The Medical/Fire Operations Personnel will:

1. **Provide** medical emergency supplies to the location of the emergency.
2. **Provide** emergency medical assistance to injured personnel.
3. **Transport** injured personnel as required.
4. **Communicate** applicable support recommendations to the Incident Commander.

### 3.5 The Radiological Control Personnel will:

**Assist** the medical/fire operations team personnel concerning

- Radiological Protection
- Radiological Protective measures
- Control of Contamination
- As requested

### 3.6 The Nuclear Security Services Personnel will:

1. **Ensure** crowd control.
2. **Assist** the Incident Commander.

**3.0 INSTRUCTIONS (CONTINUED)**

**3.7 The Medical Services Personnel will when requested:**

**Respond** to medical emergencies to support and assist the Incident Commander.

**3.8 The Level II Responders will:**

1. **Report** to fire equipment cages in the Turbine Building elevation 557'.
2. **Establish** radio or telephone contact with the Incident Commander.
3. **Ensure** emergency equipment is ready for use.
4. **Direct** the movement of equipment to the emergency scene.

**3.9** All members of the Medical Emergency Response Team proceed to the scene upon hearing the announcement or as directed by the MERT Leader.

**3.10 Transport Offsite (If Required)**

**NOTE:** If patient is not contaminated/irradiated, transport to Athens-Limestone Hospital, unless otherwise directed. If patient is contaminated/irradiated, only transport to hospitals listed below:

- Decatur General Hospital (see Attachment D)
- Huntsville Hospital (see Attachment E)

**3.10.1** Shift Manager calls for an ambulance from outside ambulance service, if requested by MERT Leader or Incident Commander.

**NOTE:** See Attachment F for Medical Emergency telephone numbers.

**3.10.2** Shift Manager complete Attachment A and provide information to receiving hospital. Forward completed Attachment A to the REP Manager to be filed.

**3.10.3** Attachments D, and E give directions to various hospitals.



### **3.0 INSTRUCTIONS (CONTINUED)**

**3.11** If contamination/irradiation is suspected, RADCON personnel will accompany ambulance, and furnish radiological services as requested.

#### **3.12 Follow-Up**

**3.12.1** EMT/RADCON makes follow-up call to hospital from the ambulance to give/receive additional information concerning patient's condition and estimated time of arrival.

**3.12.2** Shift Manager is responsible for any further notifications per EPIP-2 through EPIP-5.

#### **3.13 TVA Notification**

**3.13.1** The Fire Brigade Leader, or designee, should notify BFN Industrial Safety, if someone is ill or injured to the extent they require ambulance transportation to a hospital

**3.13.2** RADCON should notify the TVA Physician Representative (refer to the REND, Section K) any time TVA personnel are suspected of receiving radiation exposure in excess of the recommended TVA occupational exposure limits.

### **4.0 ATTACHMENTS**

Attachment A - Medical Emergency Notification Form (SHIFT MANAGER)

Attachment B - Patient Care Guidelines

Attachment C - Procedure for Cytogenetics Blood Studies By REAC/TS

Attachment D - Typical Layout of Decatur General Hospital

Attachment E - Typical Layout of Huntsville Hospital

Attachment F - Medical Emergency Telephone Numbers

ATTACHMENT A  
(Page 1 of 1)  
MEDICAL EMERGENCY NOTIFICATION FORM

Reported By (Shift Manager / Unit Supervisor) \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Time of Injury \_\_\_\_\_

Hospital \_\_\_\_\_

Individual Contacted \_\_\_\_\_

Time Contacted \_\_\_\_\_ Total number of Victims \_\_\_\_\_

Victim(s) Name	Condition	Type of Injury
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The Victim(s) is: (Check all that apply, or list the number of victims for each)

- ☐ Not a Radiation Accident Victim  
☐ Potentially Contaminated (Survey incomplete due to injuries)  
☐ Contaminated with radioactive material  
☐ Irradiated (over-exposed) whole body dose is \_\_\_\_\_ Rem

If Contaminated, are levels known at this time? ☐ Yes ☐ No

- If yes provide the following information.

Level of Contamination \_\_\_\_\_ (CPM) or (MRAD/Hr) - Circle one

Type of Contamination ☐ Alpha, ☐ Beta, or ☐ Beta/Gamma

Is Internal Contamination Expected? ☐ Yes ☐ No

- If yes: By ☐ Inhalation, ☐ Open Wounds, ☐ Ingestion, or ☐ Other

Isotopes:

- ☐ Isotopes are unknown at this time.  
☐ Isotopes are known and are as follows:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Estimated Time of Arrival, (If Known) ETA = \_\_\_\_\_

**Operations Duty Specialist Notification**

Notify the Operations Duty Specialist (751-1700) of all offsite ambulance responses, regardless of emergency or non-emergency requests.

---

ATTACHMENT B

(Page 1 of 3)

**PATIENT CARE GUIDELINES**

**1.0 GENERAL**

- 1.1 First aid and emergency medical care should be provided for onsite to preserve life and to minimize injury and suffering.
- 1.2 The Medical Emergency Response Team (MERT) will take appropriate action as directed by the Team Leader.
- 1.3 The nurse should assist from outside any contamination zone unless the medical condition of the patient necessitates her/his presence.
- 1.4 A doctor should be consulted when further professional attention is needed.
- 1.5 The care of persons known or suspected to be associated with radiation exposure or contamination will be coordinated with the RADCON representative. The essential aims of the MERT-RADCON team are:
  - a. Minimize the injury and further radiation exposure to the victim.
  - b. Protect attending personnel from excessive and unnecessary radiation exposure.
  - c. Control spread of radioactivity contamination.
  - d. Assess and document the patient's radiological exposure.
  - e. Immediate lifesaving and disability limiting procedures will take precedence over noncritical decontamination and dosimetry assessment procedures.
- 1.6 Coordinate, the care, disposition, and reporting of all injuries known or suspected to be associated with excess levels of radiation exposure or contamination with the CECC, when staffed.

**2.0 NONCONTAMINATED - NONIRRADIATED**

When it is known that the patient is not contaminated and has not been overexposed to radiation, advise the patient, ambulance crew, receiving hospital, and attending physician of the absence of Radiological Complications.

ATTACHMENT B  
(Page 2 of 3)  
PATIENT CARE GUIDELINES

**3.0 IRRADIATED-NONCONTAMINATED**

- 3.1 Remove the victim from further exposure providing only essential first aid in the process, then direct attention to medical care of other physical injuries.
- 3.2 Medical care of the radiation exposure is governed by the medical status of the patient and the findings of the RADCON representative. The treatment of illness or physical injury takes precedence over treatment for radiation exposure.
- 3.3 Individuals who have received an acute total body radiation exposure greater than 5 Rem should have hematological studies performed to detect chromosomal aberrations or other changes in blood constituent. REACTS can provide this service and should be contacted by the attending physician.
- 3.4 Advise all involved personnel of radiological conditions.

**4.0 CONTAMINATED PATIENTS**

- 4.1 The patient should be given initial emergency care by the medical emergency response team. All decontamination that the medical status of the patient will allow should be accomplished. The appropriate sequence of care must be determined on an individual basis by the medical-RADCON team. The injured person will be transported and treated in one of two ways:
  - a. If the person is severely injured, they may be transported directly to Huntsville Hospital or Decatur General Hospital. Every reasonable effort should be made to reduce the radioactive contamination level to less than 0.5 rem per hour at one foot. Spread of contamination may be minimized by removing the patient's excess clothing and wrapping him in a sheet, as his injuries permit.
  - b. In cases of less severe injuries, the patient will be sent to the personnel decontamination facility in the service building (or radwaste building, if stretcher bound) treated in the emergency treatment area or transferred to Huntsville Hospital or Decatur General Hospital.

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ATTACHMENT B  
(Page 3 of 3)  
PATIENT CARE GUIDELINES

**4.0 CONTAMINATED PATIENTS (Continued)**

- 4.2** The RADCON representative will collect, identify, label, and analyze all biological specimens as required and deemed necessary. He will obtain the injured person's personal dosimetry and replace with equivalent dosimetry if appropriate.
- 4.3** The RADCON group will control contamination during transportation to the receiving hospital.
- 4.4** Advise all involved personnel of Radiological conditions.

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ATTACHMENT C  
PROCEDURE FOR CYTOGENETICS BLOOD STUDIES BY REAC/TS

TVA has an agreement with the Radiation Emergency Assistance Center/Training Site (REAC/TS) Cytogenetics Laboratory for support services including a white blood cell (lymphocyte) culture for dose assessment of whole-body exposures to ionizing radiation.

Upon the order of a physician, and in coordination with a health physicist, REAC/TS shall be contacted to request and coordinate the shipment and return of a blood sample kit. This kit contains all necessary collection, shipping, and instruction materials. The kit is provided by REAC/TS to promote optimal test results by use of controlled sample handling materials.

**KEY INFORMATION ON CYTOGENETIC BLOOD STUDIES:**

**WHEN:** Upon the order of a responsible physician, with verification that known or suspected ionizing radiation exposure (acute whole-body) exceeds 5 REM.

**FREQUENCY:** Once, unless directed otherwise by REAC/TS or physician.

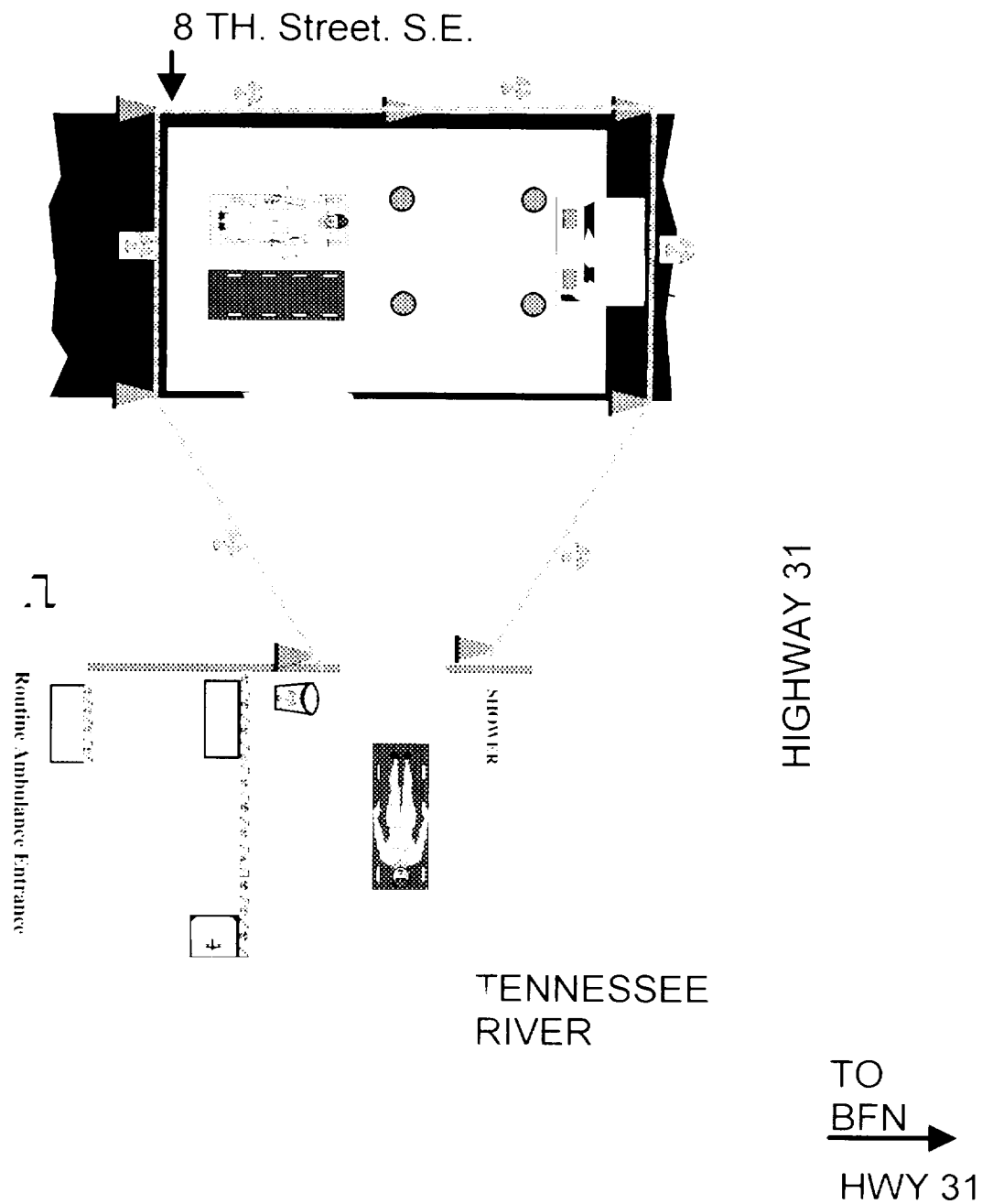
**TO REQUEST KIT:** Attending physician should contact:  
REAC/TS, attention Cytogenetics Laboratory

**COORDINATE RESULTS WITH:**

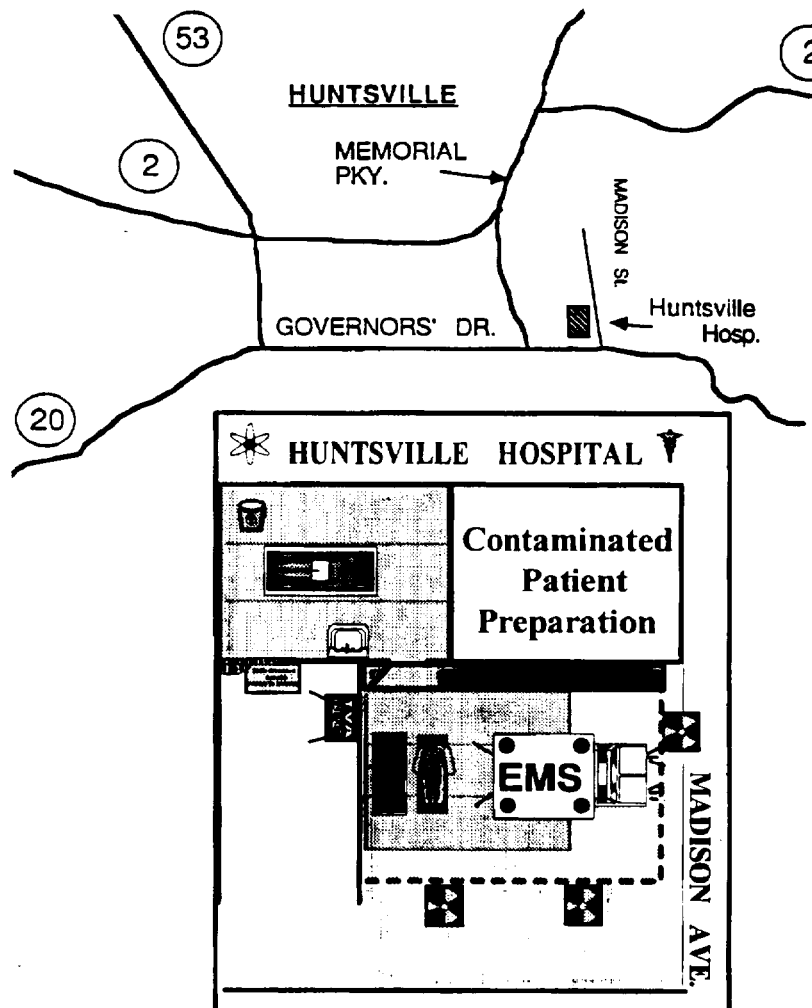
TVA Physician Representative  
(refer to REND, Section K)

**SHIPMENT:** Refer to instruction sheet in REAC/TS kit. Kit is designed as return shipping container, complete with chemical ice pack. REAC/TS recommends air shipment; however, undelayed method of shipment by TVA services may be considered if coordinated with REAC/TS.

ATTACHMENT D  
(Page 1 of 1)  
Typical Layout of Decatur Hospital



ATTACHMENT E  
(Page 1 of 1)  
Typical Layout of Huntsville Hospital





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ATTACHMENT F  
(Page 1 of 1)  
MEDICAL EMERGENCY TELEPHONE NUMBERS

**BROWNS FERRY**

- Medical Station 4747, 2700
- TVA Emergency Services/Ambulance Rescue 3513, 2491

**LOCAL AMBULANCE SERVICE**

- Athens-Limestone Hospital Ambulance Service 9-232-2525
- Athens, Alabama 9-233-9159

**HEAR SYSTEM FREQUENCY**

155.340MHz

**HOSPITALS**

- Athens - Limestone Hospital 9-233-9155
- Athens, Alabama 9-233-9151
  
- Decatur General Hospital 9-1-256-341-2174
- Decatur, Alabama 9-1-256-341-2175
- (Use only if other numbers are busy) 9-1-256-341-2000
  
- Huntsville, Hospital 9-1-256-517-8137
- Huntsville, Alabama 9-1-256-517-8139
- (Use only if other numbers are busy) 9-1-256-517-8020

**REAC/TS OAK RIDGE, TENNESSEE**

- Day Shift (8 a.m. - 4:30 p.m.) 9-1-865-576-3131
  
- After Hours 9-1-865-576-1005
- Ask for REAC/TS

**TVA-BFN-EMERGENCY VEHICLE CELLULAR PHONES**

- Huntsville Area Roamer Access 9-1-256-656-7626
- "Cellular One" Assistance Operator 9-1-800-333-4004
- BFN-Ambulance Cellular Phone 9-1-256-656-0137
- BFN-REP Truck #5 9-1-256-508-4872
- BFN-REP Truck #6 9-1-256-656-9623

LAST PAGE

**TENNESSEE VALLEY AUTHORITY**

**BROWNS FERRY NUCLEAR PLANT**

**EMERGENCY PLAN IMPLEMENTING PROCEDURE**

**EPIP-13**

**RADIOCHEMICAL LABORATORY PROCEDURE**

**REVISION 8**

**PREPARED BY: T. W. Cornelius**

**PHONE: 2038**

**RESPONSIBLE ORGANIZATION: EMERGENCY PREPAREDNESS**

**APPROVED BY: GILBERT V. LITTLE**

**DATE: 02/13/2001**

**EFFECTIVE DATE: 02/26/2001**

**LEVEL OF USE: REFERENCE USE**

**QUALITY-RELATED**

## REVISION LOG

Procedure Number: EPIP-13

Revision Number: 8

Pages Affected: 1-2

Pagination Pages: NONE

Description of Change:

IC-09 - This revision is being conducted to incorporate changes recommended by site chemistry during a requested procedure review. The revision removes the step for verifying assigned survey instruments, which are no longer being maintained in the laboratory.

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## RADIOCHEMICAL LABORATORY PROCEDURE

### 1.0 PURPOSE

This procedure provides guidance to Chemistry personnel during a Radiological Emergency.

### 2.0 SCOPE

This procedure outlines the actions to be followed by Radiochemical Laboratory Analysts (RLAs) and other chemistry personnel during a radiological emergency. This procedure describes those Radiochemical Laboratory actions required during an emergency involving radiochemical problems.

**NOTE:** Unit 1, Unit Operator will initiate EPIP-13 by calling the Radiochemical Laboratory Shift Supervisor/Lead Radiochemical Laboratory Analyst (LRLA).

### 3.0 INSTRUCTIONS

#### 3.1 Notification of Unusual Event

3.1.1 No offsite radiochemical problems are postulated during a NOTIFICATION OF UNUSUAL EVENT. This situation should not have any major impact on the Radiochemical Laboratory.

3.1.2 Although the lab will not automatically be called, should assistance be needed, RLAs will follow standard practices and procedures during any response work.

#### 3.2 Alert

3.2.1 Card into PREAS in the RADCON lab.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

3.2.2 RLAs report to the Radiochemical Lab Shift Supervisor/ LRLA.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

3.2.3 Prepare to implement 2/3-TI-331 Post Accident Sampling Procedure and CI-900 Analysis Procedures.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

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### 3.0 INSTRUCTIONS (CONTINUED)

#### 3.3 Site Area Emergency

3.3.1 Card into PREAS in the RADCON lab. If not previously conducted.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

3.3.2 RLAs report to the Radiochemical Lab Shift Supervisor/ LRLA.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

3.3.3 Prepare to implement 2/3-TI-331 Post Accident Sampling Procedure and CI-900 Analysis Procedures.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

#### 3.4 General Emergency

3.4.1 Card into PREAS in the RADCON lab. If not previously conducted.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

3.4.2 RLAs report to the Radiochemical Lab Shift Supervisor/ LRLA.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

3.4.3 Prepare to implement 2/3-TI-331 Post Accident Sampling Procedure and CI-900 Analysis Procedures.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

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### 3.0 INSTRUCTIONS (CONTINUED)

#### 3.5 Site Evacuation

3.5.1 RLAs proceed to lab, if habitable, report to Radiochemical Shift Supervisor/LRLA. If uninhabitable, report to a location determined by RADCON.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

3.5.2 Inform Chemistry OSC Manager of new location.

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
TIME

4.0 ATTACHMENTS  
None

LAST PAGE

TENNESSEE VALLEY AUTHORITY

BROWNS FERRY NUCLEAR PLANT

## EMERGENCY PLAN IMPLEMENTING PROCEDURE

EPIP-17

### **Emergency Equipment and Supplies (Inventory and Operability Procedure)**

REVISION 25

PREPARED BY: T. W. CORNELIUS

PHONE: 2038

RESPONSIBLE ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: GILBERT V. LITTLE

DATE: 02/13/2001

EFFECTIVE DATE: 02/26/2001

**LEVEL OF USE: REFERENCE USE**

QUALITY-RELATED

## REVISION LOG

PROCEDURE NUMBER: EPIP-17

REVISION NUMBER: 25

PAGES AFFECTED: 9,10,12,13,23,25,36

### DESCRIPTION OF CHANGES:

- IC-29 This revision is being conducted to update inventories and add inventory for Personnel Decontamination Treatment Area.
- Page 9 - revised to update attachment listing to add "Personnel Decontamination Treatment Area".
  - Page 10 - revised to add the frequency information concerning the "Personnel Decontamination Treatment Area".
  - Page 12 - revised to remove dosimetry from inventory listing.
  - Page 13 - revised to remove dosimetry from inventory listing.
  - Page 23 - revised to add satellite telephone to inventory listing and remove the words "Jack Only". telephone has been installed.
  - Page 25 - revised to remove the words "Jack Only". telephone has been installed.
  - Page 36 - revised to add the "Personnel Decontamination Treatment Area" attachment.



## 1.0 PURPOSE

The purpose of this procedure is to provide a listing of equipment and supplies, along with storage locations, available for emergency response during the activation of the Radiological Emergency Plan and Emergency Plan Implementing Procedures. This procedure will ensure the availability and readiness of emergency equipment at BFN through the performance of periodic inventories and operability checks.

## 2.0 SCOPE

This procedure provides information pertaining to equipment and supplies available for use during emergencies at the Browns Ferry Nuclear Plant. This procedure additionally provides instructions to personnel performing checks of equipment and supplies in regards to frequencies, responsibilities, acceptance and record management.

## 3.0 INSTRUCTIONS

### 3.1 Responsibilities and Frequency

- 3.1.1 Inventories and operability checks shall be conducted in accordance with frequencies provided in *Attachment 1*. In addition with this frequency schedule, special inventories shall be required when items or equipment maintained by this procedure have been affected by a drill, exercise or training. This special inventory shall be performed at a reasonable time following the activity. This special inventory may also be used as the routine inventory.
- 3.1.2 Conduct of inventories and operability checks shall be the responsibility of the organization provided in *Attachment 1*.
- 3.1.3 The Manager, Emergency Preparedness (EP), is responsible for ensuring the overall state of readiness of supplies and equipment identified in the procedure.

## **3.1 Responsibilities and Frequency (Continued)**

- 3.1.4** Individuals performing work within this procedure shall be familiar with all procedural guidance and testing requirements applicable to their assigned task. By initialing the item listing on the task form, the individual performing tasks within this procedure is responsible for ensuring the item is present, in the specified quantity and functional for its intended purpose.
- 3.1.5** Equipment inventories and operability of the site environmental monitoring vans shall be conducted in accordance with *ELCC-EP-9*. Routine and special inventory/operability checks involving the site environmental monitoring vans are the responsibility of RADCON. Training personnel will be responsible for inventory and operability checks following training activities.
- 3.1.6** Personnel performing inventories and operability checks shall ensure that upon completion of task, seals or locking devices are in place to ensure the integrity of the equipment or supplies. Areas requiring these measures are listed on *Attachment 2*.
- 3.1.7** Personnel conducting inventories and operability checks in accordance with this instruction will ensure that the latest revision of this procedure is utilized.
- 3.1.8** Definition for annual and quarterly shall be as noted in the Radiological Emergency Plan. Terms such as once every calendar quarter or month invokes that the task should be conducted within the timeframe of a physical quarter or month.

## **3.2 Records Management**

- 3.2.1** Personnel conducting tasks within this procedure will provide legible documentation of results on applicable forms.
- 3.2.2** Upon completion of applicable task(s), originals with signatures, shall be forwarded to the Manager, EP for review and concurrence. Originals should be forwarded as soon as possible, but no later than the end of the current quarter.

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### **3.1 Records Management(Continued)**

**3.2.3** The Manager, EP shall review all task forms and concur with results by signature.

**3.2.4** EP shall maintain all procedure records for a minimum retention period of 1 year. These records are considered NON-QA.

### **3.3 Task Deficiencies**

Deficient items as discussed within this procedure do not relate to those described in SPP 3.1, "Corrective Action Program". Any deficient item identified within this procedure which does meet the requirements of SPP 3.1 shall be documented in accordance with SPP 3.1.

**3.3.1** All task deficiencies shall be noted on the applicable task form.

**3.3.2** All task deficiencies shall be corrected as soon as possible. If circumstances do not allow prompt correction the Manager, EP, shall be notified. When deficiencies have been corrected, the applicable task form shall be signed.

**3.3.3** For failures of the, Emergency Telecommunications System (ETS) deficiencies will be reported immediately in accordance with the instructions provided on the applicable task form.

### **3.4 Specific Instructions for Inventories, Operability Checks, Administrative Checks and Reviews**

#### **3.4.1 SCBA's**

Self Contained Breathing Apparatus (SCBA) units are inventoried per this procedure for inventory purposes only. Inspections/equipment maintenance and operability checks are conducted in accordance with applicable Fire Protection Instructions.

#### **3.4.2 Radiological Control Instrumentation**

**3.4.2.1 On-Site** - Survey instrumentation, counting equipment, air samplers, dosimeters and other radiological control equipment listed on applicable forms are for inventory purposes only. Instrument readiness is a process of the on-site radiological control organization. As a function of this inventory calibration due dates and instrumentation physical appearance will be observed to help ensure operability.

**3.4.2.2 Off-Site** - Survey instrumentation and dosimeters referenced as offsite by this procedure are considered those maintained by EP at the BFN - Agreement Hospitals. Survey instrumentation operability shall be maintained by the Western Area Radiological Laboratory, Instrumentation Section. Electronic dosimeters shall be exchanged according to response dates not to exceed calibration due dates. Electronic dosimetry should be observed for physical damage to help ensure operability.

#### **3.4.3 Telecommunications**

**3.4.3.1 Nuclear Regulatory Commission - Emergency Notification System** telephones. Lift the receiver and listen for a dial tone; after receiving a dial tone, dial 9-1 then first number listed on the sticker located on the telephone instrument, using all 10 digits. If the first number is busy, proceed on with the second, etc. Confirm acceptable voice quality between parties conducting the test with all extensions off hook. Request a call-back be made to single phone and confirm acceptable voice quality.

### **3.4 Specific Instructions for Inventories, Operability Checks, Administrative Checks and Reviews (Continued)**

#### **3.4.3 Telecommunications (Continued)**

**3.4.3.2** All other telecommunications tested by this procedure. Conduct the test by lifting receiver and listen for a dial tone; after receiving a dial tone, place a local call and request a call-back be made. Confirm acceptable voice quality between telephones being tested.

#### **3.4.4 TSC & OSC Intercom System**

Activate the intercom system in the TSC or OSC. Assign someone to monitor the test in the applicable locations. The TSC PA services the TSC, OSC and the Technical Assessment Team Area while the OSC PA services the OSC and OSC Staging Area.

#### **3.4.5 EP Clocks**

Verify the correct operation of the TSC and the OSC clock by logging onto the clock program and making classification changes using the program. Return the system to the "No Classification" display.

#### **3.4.6 Telecopiers (TSC & OSC)**

Verify operability by faxing a test message to another telecopier. Fax a test message back to the telecopier being tested. Check telecopier paper and physical condition. Ensure legibility of test messages.

#### **3.4.7 Telephone Headsets**

Configure headset as applicable. Make call and confirm acceptable voice quality using the microphone and ear piece.

#### **3.4.8 Ring down Phones (CECC/TSC, TAT/Plt Assessment, ODS/Control Rooms 1/2 & 3)**

Contact Corporate EP, have someone man the telephone in the CECC/ODS areas. Place a call to the CECC/ODS by lifting the receiver and receive a call from the CECC/ODS.

## **3.4 Specific Instructions for Inventories, Operability Checks, Administrative Checks and Reviews (Continued)**

### **3.4.9 Meteorological (MET) Data Terminal and Printer**

Log onto the MET terminal. Request information in printed format.

Verify that the printer has a supply of paper and that the print is legible.

Log off system.

### **3.4.10 OSC Computer & Printer (OSC)**

Ensure the operability of the OSC computer by performing a task such as the activation of the word processing program. Check the response of the printer by requesting a print task via the computer, observe the action of the printer and print quality.

### **3.4.11 Copiers (TSC/OSC)**

Verify operability by copying a test message through the copier. Make copies using the sorter and verify legibility of copies, check copy paper supply and physical condition of copier.

### **3.4.12 Batteries**

All batteries shall be observed for physical damage such as indentations, leaking or rust. Batteries shall be tested to determine effectiveness by battery tester. Batteries sealed by the manufacture with an affixed label indicating a "shelf life" can be exempted from the individual battery test and accepted as is, as long as the current date does not exceed the "shelf life" date. Sealed batteries which have a "shelf life" date that is exceeded by the current date can be utilized, but must pass a battery test utilizing the battery testor.

### **3.4.13 Zetron Radio Control Units (RCU)**

Observe the unit to ensure that the time is displayed on the face plate.

Verify that a green indicator light appears by one of the radio frequency selector buttons. The RCU should be tested by contacting a normally manned station.

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### **3.4 Specific Instructions for Inventories, Operability Checks, Administrative Checks and Reviews (Continued)**

#### **3.4.14 Hand Held 2-Way Radios**

Observe the unit for physical damage, then assemble one of the battery packs to the radio. Make radio contact with another hand held unit and verify acceptable voice quality.

#### **3.4.15 Control Room Conference Bridge (101/102)**

Activate the "2-Way" bridge by dialing 101 on two plant telephones. Verify acceptable voice quality. Then test the "Listen Only" bridge by having someone activate the "2-Way" bridge by dialing 101 and someone activate the "Listen Only" bridge by dialing 102. Verify that the 102 is a "listen Only" system.

#### **3.4.16 ERO Logbooks**

Utilize EPIP-6 or 7, position attachments to identify what ERO logbooks are intended for use in the applicable centers. Review the logbooks to ensure that each contains:

- (1) The latest revision of the applicable EPIP Attachment
- (2) An adequate supply of log sheets

#### **3.4.17 Calculators, Flashlights, etc.**

Verify functional by observing anticipated response.

#### **3.4.18 Emergency Procedure Telephone Number Review and Update**

Certain EPIP's and site procedures contain telephone numbers utilized by response personnel. Once per calendar quarter these numbers will be reviewed to ensure accuracy and updates are made as applicable. Changes will be conducted in accordance with site instructions.

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### **3.4 Specific Instructions for Inventories, Operability Checks, Administrative Checks and Reviews (Continued)**

#### **3.4.19 Review of Emergency Procedures**

In accordance with the Radiological Emergency Plan (REP) the REP, REP Appendices and the EIPs shall be reviewed annually. Changes concerning the REP will be forwarded to the corporate EP staff for consideration and implementation as applicable. Changes noted concerning the EIPs shall be considered and if applicable revisions conducted in accordance with site instructions.

#### **3.4.20 Emergency Response List**

The Emergency Response List contains individuals which are allowed access to the protected area during an emergency at BFNP for the purposes of serving within the emergency response organization. This listing is updated quarterly and copies distributed to Nuclear Security. The list will be issued on white paper and will not require PORC review.

#### **3.4.21 Call-Out List**

This list contains active Emergency Responders by emergency positions. This list is utilized as a tool for the call-out of emergency responders. The list is updated quarterly and will be issued on white paper. The call-out list will not be PORC reviewed.

#### **3.4.22 Procedures and/or Drawings**

Controlled Procedures and/or drawings listed on applicable forms are for inventory purpose only. Procedure and Drawing inspection/maintenance process is conducted through applicable site instructions.



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#### 4.0 ATTACHMENTS

4.1 Attachment 1	Inventory Matrix Table
4.2 Attachment 2	Locked/Sealed Cabinet Listing
4.3 Attachment 3	Radcon Emergency Equipment - Service Building 565'
4.4 Attachment 4	Radcon Emergency Equipment - Control Building 617"
4.5 Attachment 5	Staging Area C-Zone Dress-Out Clothing - Service Building 565'
4.6 Attachment 6	Emergency Use SCBA Inventory
4.7 Attachment 7	Maintenance Emergency Tool Box Inventory, Clean Tool Room - Service Building 565'
4.8 Attachment 8	Technical Support Center Inventory/Operability Check
4.9 Attachment 9	Operations Support Center Inventory/Operability Check
4.10 Attachment 10	OSC Staging Area Inventory/Operability Check
4.11 Attachment 11	Huntsville/Decatur General Hospital Inventory/Operability Checks
4.12 Attachment 12	ETS Communications Operability Checks
4.13 Attachment 13	Local Recovery Center Inventory/Operability Checks
4.14 Attachment 14	EP Quarterly Administrative Checks and Reviews
4.15 Attachment 15	EP Once per Calendar Quarter Administrative Checks and Reviews
4.16 Attachment 16	EP Annual Administrative Checks and Reviews
4.17 Attachment 17	Alternate Decontamination Facility
4.1 Attachment 18	Personnel Decontamination Treatment Area

**Attachment 1**  
**Inventory Matrix Table**

<u>EPIP Attachment Number</u>	<u>Description</u>	<u>Responsible Section</u>	<u>Frequency</u>	<u>Specific Instructions Provided</u>
3	Radcon Emergency Equipment - Service Building 565'	Radcon	Once every calendar quarter	Yes
4	Radcon Emergency Equipment - Control Building 617'	Radcon	Once every calendar quarter	Yes
5	Staging Area C-Zone Dress-Out Clothing Service Building 565'	Radcon	Once every calendar quarter	Yes
6	Emergency Use SCBA Inventory	Operations	Once every calendar quarter	Yes
7	Maintenance Emergency Tool Box Inventory, Clean Tool Room - Service Building	Maintenance	Once every calendar quarter	
8	Technical Support Center Inventory Operability Check	EP	Once every calendar quarter	Yes
9	Operations Support Center Inventory Operability Check	EP	Once every calendar quarter	Yes
10	OSC Staging Area Inventory Operability Check	EP	Once every calendar quarter	Yes
11	Huntsville Decatur General Hospital Inventory Operability Checks	EP	Once every calendar quarter	Yes
12	ENS Monthly Communications Operability Check	EP	Once monthly	Yes
13	Local Recovery Center Inventory Operability Check	EP	Once every calendar quarter	Yes
14	EP Quarterly Administrative Checks and Reviews	EP	Once quarterly	Yes
15	EP Once per Calendar Quarter Administrative Checks and Reviews	EP	Once every calendar quarter	Yes
16	EP Annual Administrative Checks and Reviews	EP	Once annually	Yes
17	Alternate Decontamination Facility	EP	Once every calendar quarter	
18	Personnel Decontamination Treatment Area	Radcon	Once every calendar quarter	

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**Attachment 2**  
**Locked/Sealed Cabinet Listing**

<b><u>Cabinet</u></b>	<b><u>Location</u></b>
<b>Equipment and Supplies Cabinet</b>	<b>Technical Support Center</b>
<b>Equipment and Supplies Cabinet</b>	<b>Operations Support Center</b>
<b>Equipment and Supplies Cabinet</b>	<b>OSC Staging Area</b>
<b>Equipment and Supplies Cabinet</b>	<b>Local Recovery Center</b>
<b>Equipment and Supplies Cabinet (Radcon)</b>	<b>Service Building 565'</b>
<b>Equipment and Supplies Cabinet (Radcon)</b>	<b>Control Building 617'</b>
<b>Equipment and Supplies Cabinet (Hospital)</b>	<b>Decatur General "Emergency Room"</b>
<b>Equipment and Supplies Cabinet (Hospital)</b>	<b>Huntsville Hospital "Emergency Room"</b>
<b>Equipment and Supplies Cabinet (Alternate Decontamination Facility)</b>	<b>Power Service Shop # 4 TVA Muscle Shoals Reservation</b>

## Attachment 3

### Radcon Emergency Equipment - Service Building 565'

*Location: Service Building 565' Behind Radiological Control Lab*

Equipment	QTY	INV	OPER	INIT
<b><u>Radiological Survey Instrumentation</u></b>				
High Range Survey Meters	2	_____		_____
Ion Chambers	4	_____		_____
GM Survey Meters ( <i>Friskers</i> )	2	_____		_____
Neutron Survey Meter	1	_____		_____
Silver Zeolite Cartridges	10	_____		_____
Alpha Survey Meter	1	_____		_____
Mini-Scaler	1	_____		_____
Hi-Volume Air Sampler	2	_____		_____
Low-Volume Air Sampler	1	_____		_____
Shielded Detector "Pig" ( <i>Located in Radcon Area, Service Building, 565'</i> )	1	_____		_____
<b><u>Miscellaneous</u></b>				
Calculator (Hand Held)	1	_____	Y N	_____
Batteries (D-Cell)	16	_____	Y N	_____
Log Book	1	_____		_____
Flashlights	8	_____	Y N	_____
Box of Pens	1	_____		_____
Particulate Air Filters (Box)	2	_____		_____
Disc Smears (Box)	1	_____		_____
KI Tablets Expiration Date _____ ( <i>Radcon Supply Cage</i> )( <i>Tablets</i> )	2000	_____		_____

#### **Signatures:**

**Supervisor, Radcon:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Manager, EP:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Retention Period is 12 months - - Non-QA Record

## Attachment 4

### Radcon Emergency Equipment - Control Building 617'

*Location: Control Building 617' Mechanical Equipment Room*

Equipment	QTY	INV	OPER	INIT
<b><u>Radiological Survey Instrumentation</u></b>				
High Range Survey Meters	2	_____		_____
Ion Chambers	4	_____		_____
GM Survey Meters ( <i>Friskers</i> )	2	_____		_____
Neutron Survey Meter	1	_____		_____
Silver Zeolite Cartridges	10	_____		_____
Alpha Survey Meter	1	_____		_____
Mini-Scaler	1	_____		_____
Hi-Volume Air Sampler	2	_____		_____
Low-Volume Air Sampler	1	_____		_____
Shielded Detector "Pig"	1	_____		_____
<b><u>Miscellaneous</u></b>				
Calculator (Hand Held)	1	_____	Y N	_____
Batteries (D-Cell)	16	_____	Y N	_____
Log Book	1	_____		_____
Flashlights	8	_____	Y N	_____
Box of Pens	1	_____		_____
Particulate Air Filters (Box)	2	_____		_____
Disc Smears (Box)	1	_____		_____

#### **Signatures:**

**Supervisor, Radcon:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Manager, EP:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Retention Period is 12 months - - Non-QA Record

## Attachment 5

### Staging Area C-Zone Dress-Out Clothing - Service Building 565'

*Location: Service Building Column 6, G-line Hallway  
behind Mechanical Maintenance Offices*

Equipment	QTY	INV	INIT
<b><u>Coveralls (Pairs)</u></b>	<b>40</b>	_____	_____
Based upon size availability an alternate distribution may be acceptable at the discretion of the Radcon Supervisor and the EP Manager, noted by signature of completed form.			
Size 46	10	_____	
Size 48	10	_____	
Size 50	5	_____	
Size 52	5	_____	
Size 54	5	_____	
Size 58	5	_____	
<b><u>Hood covers</u></b>	<b>25</b>	_____	_____
<b><u>Shoe Covers (Pairs)</u></b>	<b>25</b>	_____	_____
<b><u>Surgeon Caps</u></b>	<b>25</b>	_____	_____
<b><u>Rubber Gloves (Pairs)</u></b>	<b>25</b>	_____	_____
<b><u>Booties (Pairs)</u></b>	<b>25</b>	_____	_____
<b><u>Cotton Glove Inserts (Pairs)</u></b>	<b>25</b>	_____	_____
<b><u>Masking Tape (Rolls)</u></b>	<b>8</b>	_____	_____

#### **Signatures:**

**Supervisor, Radcon:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Manager, EP:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Retention Period is 12 months - - Non-QA Record

**Attachment 6  
Emergency Use SCBA Inventory**

Description	Location	QTY	INV	INIT
Self Contained Breathing Apparatus	Unit 1 Control Room	5	_____	_____
Self Contained Breathing Apparatus	Unit 2 Control Room	5	_____	_____
Self Contained Breathing Apparatus	Unit 3 Control Room	5	_____	_____
45 cu. ft. Air Cylinder	Service Building Elevation 565, Service Shop Hallway	15	_____	_____
Self Contained Breathing Apparatus and 10 additional cylinders	Fire Equipment Cabinet Turbine Building - 557'	10	_____	_____
Self Contained Breathing Apparatus	4kV Shutdown Bd Rm "C"	*5	_____	_____
Self Contained Breathing Apparatus	3A Electrical Board Room	5	_____	_____
Self Contained Breathing Apparatus	Fire Equipment Cabinet Stairwell - RB 1&2 El. 565'	4	_____	_____
Self Contained Breathing Apparatus	Fire Equipment Cabinet Stairwell - RB 2&3 El. 565'	4	_____	_____
Self Contained Breathing Apparatus	Radcon Emergency Cart	2	_____	_____
Self Contained Breathing Apparatus	Fire Truck	4	_____	_____

**(\*) Required for by 10 CFR 50 Appendix R Support**

**Signatures:**

**Supervisor, FIREPROTECTION:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Manager, EP:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Retention Period is 12 months - - Non-QA Record

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**Attachment 7 (Page 1 of 4)**  
**Maintenance Emergency Tool Box Inventory**

**Electrical Tool Box**

**Number of Boxes 2 -- Number of Boxes Inventoried \_\_\_\_**

Tool Description	QTY	INV	INIT
Pliers, Needle Nose, 6"	2	_____	_____
Pliers Diagonal, 6"	2	_____	_____
Tester, Circuit, 24.0"	2	_____	_____
Rule, Folding, Carpenters, Outside Reading, 6'	2	_____	_____
Pliers, Tongue & Groove, 10", #430 Channel Locks	2	_____	_____
Screwdriver, STD Tip, .25" Tip, X 8.0" Long	2	_____	_____
Screwdriver, STD Tip, .313" Tip, X 4.0" Long	2	_____	_____
Screwdriver, STD Tip, .125" Tip, X 6.0" Long	2	_____	_____
Pliers, Lineman's, 9.0"	2	_____	_____
Screwdriver, STD Tip, .25" Tip, X 6.0" Long	2	_____	_____
Screwdriver, Phillips Tip, #2 Tip, 4" Blade	2	_____	_____
Screwdriver, Holding, .25" X 6" (Klein)	2	_____	_____
Wrench, Adjustable, 10.0"	2	_____	_____



**Attachment 7 (Page 2 of 4)**  
**Maintenance Emergency Tool Box Inventory**

**I&C Tool Box**

**Number of Boxes 2 -- Number of Boxes Inventoried** \_\_\_\_\_

Tool Description	QTY	INV	INIT
Pliers, Tongue & Groove, 9, #42 Channel Locks	1	_____	_____
Screwdriver, STD Tip, .25" Tip, X 6.0" Long	1	_____	_____
Screwdriver, Jewelers, Set of Six, .25"-1.00" Mfg. Starrett	1	_____	_____
Screwdriver, Holding, .25" X 6" (Klein)	1	_____	_____
Cord, Extension, 110 V 100'	1	_____	_____
Wrench Set, Hex Key (Allen), Folding, 0.050"-0.187"	1	_____	_____
Wrench, Ignition, Set	1	_____	_____
Wrench, Valve Wheel, Number 0, 8.0"X.50"X.656"	1	_____	_____
Socket, Set, 1/4" DR., SL/DW, 3/16" to 9/16"	1	_____	_____
Driver, Nut, Set, Fractional 1/4" to 1/2"	1	_____	_____
Wrench, Set, Hexkey, .028" to 5/8"	1	_____	_____
Cutter, Tube, .125" to .625"	1	_____	_____
Cutter, Tube, .125" to 1.125"	1	_____	_____
Pliers, Diagonals, 6"	1	_____	_____
Pliers, Lineman, 7"	1	_____	_____
Pliers, Needle Nose, 7"	1	_____	_____
Pliers, Tounge & Groove, #430 CL.	1	_____	_____
File, Half Round, 4" Smooth	1	_____	_____
File, Round, 6" Smooth	1	_____	_____
Puller, Fuse, Midget	1	_____	_____
Puller, Fuse, 100A-250V	1	_____	_____
Screwdriver, Philips, #1x3"	1	_____	_____
Screwdriver, Phillips, #2x4"	1	_____	_____
Screwdriver, Flat, 1/8x2.25"	1	_____	_____
Screwdriver, Flat, 1/4x6"	1	_____	_____
Screwdriver, Flat, 1/4x4"	1	_____	_____
Screwdriver, Flat, 5/16x6"	1	_____	_____
Screwdriver, holding, SM/pocket Clip	1	_____	_____
Screwdriver, Holding, 3/16x6"	1	_____	_____
Screwdriver, holding, 1/4x8"	1	_____	_____
Wrench, Adjustable, 4"	1	_____	_____
Wrench, Adjustable, 6"	1	_____	_____
Wrench, Adjustable, 8"	1	_____	_____

**Attachment 7 (Page 3 of 4)**  
**Maintenance Emergency Tool Box Inventory**

**I&C Tool Box (CONTINUED)**

Tool Description	QTY	INV	INIT
Wrench, Combo, 3/8"	1	_____	_____
Wrench, Combo, 7/16"	1	_____	_____
Wrench, Combo 1/2"	1	_____	_____
Wrench, Combo, 9/16"	1	_____	_____
Wrench, Combo, 5/8"	1	_____	_____
Wrench, Combo, 11/16"	1	_____	_____
Wrench, Combo, 3/4"	1	_____	_____
Wrench, Flare Nut, 1/2"-9/16"	1	_____	_____
Wrench, Flare Nut, 5/8"-11/16"	1	_____	_____
Wrench, Flare Nut, 3/4"-1"	1	_____	_____
Wrench, Flare Nut, 7/8"-1 1/8"	1	_____	_____
Snoop, Bottle, 8 oz	1	_____	_____
Note: The following items are supplied by the I&C Shop			
Tube Fitting, 1/4"M NPT to 3/8" tube comp	2	_____	_____
Tube Fitting, 1/4"F NPT to 1/4" tube comp	2	_____	_____
Tube Fitting, 3/8" comp to 3/8" comp	2	_____	_____
Tube Fitting, 1/4" comp to 1/4" comp	2	_____	_____
Tube Fitting, Tee, 1/4" comp	2	_____	_____
Tape, Electrical, Scotch 33 Black	1	_____	_____
Leads, Test, 4'	1	_____	_____
Jumpers, Banana, 2' orange w/clips	2	_____	_____
Tywraps, 3/16"x8"	1PK	_____	_____
Tywraps, 1/8"x4"	1PK	_____	_____
Valve Wrench, Custom Made, I&C Specs.	1	_____	_____

**Attachment 7 (Page 4 of 4)**  
**Maintenance Emergency Tool Box Inventory**

**Mechanical Tool Box**

**Number of Boxes 2 -- Number of Boxes Inventoried \_\_\_\_**

Tool Description	QTY	INV	INIT
Flux, Soldering	1	_____	_____
Chisel, Cold, .4375" Cut	1	_____	_____
Wrench Set, Combo, 0.250"-1.250"	1	_____	_____
Wrench Set, Hex Key (Allen), 0.187"-0.375"	1	_____	_____
Wrench Set, Hex Key (Allen), Folding, 0.050"-0.187"	1	_____	_____
Socket Set, .375"	1	_____	_____
Hammer, Ball Pein, 12 oz	1	_____	_____
Punch, Pin, .188"	1	_____	_____
Punch, Pin, .125"	1	_____	_____
Pliers, Tongue & Groove, 9" #420 Channel Locks	1	_____	_____
Screwdriver, Phillips Tip, Round Shank, #2 Tip X 4.0" Blade	1	_____	_____
Screwdriver, Phillips Tip, Round Shank, #2 Tip X 1.50" Blade	1	_____	_____
Screwdriver, STD Tip, .25" Tip X 6.0" Long	1	_____	_____
Screwdriver, STD Tip, .25" Tip X 12.0" Long	1	_____	_____
Wrench, Pipe, 12"	1	_____	_____
Wrench, Adjustable, 12.0"	1	_____	_____
Pliers, Slip Joint, 10"	1	_____	_____
Pliers, Needle Nose, W/Side Cutter, 8"	1	_____	_____

**Signatures:**

**Supervisor, Tool Room:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Manager, EP:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Retention Period is 12 months -- Non-QA Record

**Attachment 8 (Page 1 of 4)**  
**Technical Support Center Inventory/Operability Check**

<b>Equipment In the Technical Support Center</b>	<b>QTY</b>	<b>INV</b>	<b>OPER</b>	<b>INIT</b>
Telecopier	2	_____	Y N	_____
Telecopier (TAT Area)	1	_____	Y N	_____
TSC Intercom System	1	_____	Y N	_____
TSC Zetron Radio System	1	_____	Y N	_____
Copier	1	_____	Y N	_____
EP Clock	1	_____	Y N	_____
Control Room Conference Bridge Headset	2	_____	Y N	_____
Met Data Terminal & Printer	1	_____	Y N	_____
ERO Logbooks	*	_____		_____
Accountability Roster	1	_____		_____
ICS Terminal (TSC Area)	4	_____	Y N	_____
ICS Terminal (TAT Area)	1	_____	Y N	_____
<b><u>In TSC Equipment &amp; Supply Cabinet</u></b>				
Calculators, ( <i>Scientific</i> )	6	_____	Y N	_____
Flashlights	12	_____	Y N	_____
Batteries ( <i>D-Cells</i> )	24	_____	Y N	_____
Batteries ( <i>AA</i> )	24	_____	Y N	_____
Telephone Headsets ( <i>Spares</i> )	3	_____	Y N	_____
Staplers	1	_____		_____
Pens ( <i>Black Ink</i> )	24	_____		_____
Pencils	12	_____		_____
Tape Dispensers w/tape	1	_____		_____
"Post-it-notes" Pads	12	_____		_____
Message Pads	12	_____		_____
Note Pads ( <i>8.5"x 11"</i> )	12	_____		_____
Board Cleaner ( <i>Bottles</i> )	1	_____		_____
Paper Towels ( <i>Rolls</i> )	1	_____		_____
Grease Pencils	12	_____		_____
Dry Erase Markers	12	_____		_____
Copier Paper ( <i>Packs</i> )	4	_____		_____
Spare Phones for NRC ETS	6	_____		_____

\* Utilize EPIP-6, position attachments to identify what ERO logbooks are intended for use in the TSC.

**Attachment 8 (Page 2 of 4)**  
**Technical Support Center Inventory/Operability Check**

<b>Procedures/Drawings In the Technical Support Center</b>	<b>QTY</b>	<b>INV</b>	<b>OPER</b>	<b>INIT</b>
<b>*REP</b>	<b>4</b>	_____		_____
<b>*BFN EPIP's</b>	<b>11</b>	_____		_____
<b>*CECC EPIP's</b>	<b>2</b>	_____		_____
<b>*Severe Accident Management Guidelines</b>				
<b>Flowcharts</b>	<b>1 Set</b>	_____		_____
<b>*Technical Support Guidelines</b>	<b>1 Set</b>	_____		_____
<b>*Emergency Operating Instruction (EOI)</b>				
<b>Flowcharts</b>	<b>1 Set</b>	_____		_____
<b>*EOI Program Manual</b>	<b>1 Set</b>	_____		_____
<b>*Radiological Control Instructions</b>	<b>1 Set</b>	_____		_____
<b>*Abnormal Operating Instructions</b>	<b>1 Set</b>	_____		_____
<b>*REND</b>	<b>2</b>	_____		_____
<b>*AI Radiological Emergency Response Plan</b>	<b>1</b>	_____		_____
<b>*Multi-Jurisdictional Radiological Emergency</b>				
<b>Response Plan TEMA</b>	<b>1</b>	_____		_____
<b>*Alarm Response Procedures</b>	<b>1 Set</b>	_____		_____
<b>*Operating Instructions</b>	<b>1 Set</b>	_____		_____
<b>*Technical Specifications</b>	<b>1 Set</b>	_____		_____
<b>*Technical Requirements</b>	<b>1 Set</b>	_____		_____
<b>*Safe Shutdown Instructions</b>	<b>1 Set</b>	_____		_____
<b>*Fire Protection Report</b>	<b>1 Set</b>	_____		_____
<b>*Final Safety Analysis Report</b>	<b>1 Set</b>	_____		_____
<b>*User Manual Meteorological Data Display</b>				
<b>Program CECC</b>	<b>1</b>	_____		_____
<b>*User Manual Nuclear Power (NP) Sites -</b>				
<b>Emergency Paging System (EPC) CECC</b>	<b>1</b>	_____		_____
<b>*FRED Forecast Radiological Emergency Dose</b>	<b>1</b>	_____		_____
<b>*User Manual Meteorological Data Print</b>				
<b>Program</b>	<b>1</b>	_____		_____
<b>*Plant Drawings</b>	<b>1 Set</b>	_____		_____
<b>Radcon Survey Maps</b>	<b>1 Set</b>	_____		_____
<b>EP 10-Mile Sample Point Map</b>	<b>2</b>	_____		_____
<b>EP 2-Mile Sample Point Map</b>	<b>1</b>	_____		_____
<b>EP 50 Mile Sample Point Map</b>	<b>1</b>	_____		_____
<b>EP 10 Mile Evacuation Sector Map</b>	<b>1</b>	_____		_____
<b>Operators Manual Zetron Radio Console</b>	<b>1</b>	_____		_____

\* Controlled Documents or Drawings

**Attachment 8 (Page 3 of 4)**  
**Technical Support Center Inventory/Operability Check**

<b>Procedures/Drawings <u>In the Technical Assessment Team Area</u></b>	<b>QTY</b>	<b>INV</b>	<b>OPER</b>	<b>INIT</b>
*REP	1	_____		_____
*BFN EPIP's	2	_____		_____
*REND	1	_____		_____
*Operating Instructions	1 Set	_____		_____
*Technical Specifications	1 Set	_____		_____
*Technical Requirements	1 Set	_____		_____
*UMMI	1 Set	_____		_____
*UEMI	1 Set	_____		_____
*EMI	1 Set	_____		_____
*Unit 2 EOI Appendices	1	_____		_____
*Unit 3 EOI Appendices	1	_____		_____
*SAMG EOI Appendices	1	_____		_____
*SPCC Plan	1	_____		_____
*Plant Drawings	1 Set	_____		_____

Attachment 8 (Page 4 of 4)

## Technical Support Center Inventory/Operability Check

### Technical Support Center Telephones

Telephone Number	Operable	Initials	Telephone Number	Operable	Initials
3777	Y N	_____	2305	Y N	_____
3730	Y N	_____	3734	Y N	_____
3771	Y N	_____	3733	Y N	_____
3770	Y N	_____	3736	Y N	_____
3732	Y N	_____	3735	Y N	_____
3764	Y N	_____	3744	Y N	_____
3761	Y N	_____	3756	Y N	_____
3765	Y N	_____	3745	Y N	_____
3767	Y N	_____	3738	Y N	_____
3766	Y N	_____	3740	Y N	_____
3768	Y N	_____	3762 w/Headset	Y N	_____
3763	Y N	_____	3769 w/Headset	Y N	_____
3779	Y N	_____	3737 w/Headset	Y N	_____
3782 (Node 2)	Y N	_____	CECC Ringdown	Y N	_____
3784 (Node 2)	Y N	_____	101/102 Bridge	Y N	_____
TSC Fixed Satellite	Y N	_____	103 Radcon Bridge	Y N	_____

### Technical Assessment Team Area

Telephone Number	Operable	Initials	Telephone Number	Operable	Initials
3741	Y N	_____	3025	Y N	_____
2165	Y N	_____	2202	Y N	_____
2274	Y N	_____	Plt Assessment Ringdown	Y N	_____

### Control Rooms

Telephone Number	Operable	Initials	Telephone Number	Operable	Initials
ODS Unit 1/2 Ringdown	Y N	_____	ODS Unit 3 Ringdown	Y N	_____
Unit 1/2 Bridge Headset	Y N	_____	Unit 3 Bridge Headset	Y N	_____
Unit 1/2 Fixed Satellite Telephone	Y N	_____	Unit 3 Fixed Satellite Telephone	Y N	_____

Manager, EP: \_\_\_\_\_ Date: \_\_\_\_\_

Retention Period is 12 months - - Non-QA Record

**Attachment 9 (Page 1 of 2)**  
**Operations Support Center Inventory/Operability Check**

<u>Equipment</u> <u>In the Operational Support Center</u>	QTY	INV	OPER	INIT
Telecopier	1	_____	Y N	_____
OSC Intercom System	1	_____	Y N	_____
Copier	1	_____	Y N	_____
EP Clock	1	_____	Y N	_____
Computer Terminal	1	_____	Y N	_____
Printer for Computer	1	_____	Y N	_____
Accountability Roster	1	_____		_____
OSC Zetron Radio System	1	_____	Y N	_____
RADCON Zetron Radio System	1	_____	Y N	_____
ICS Terminals	2	_____	Y N	_____
<u>In OSC Equipment &amp; Supply Cabinet</u>				
Calculators, ( <i>Scientific</i> )	6	_____	Y N	_____
Flashlights	12	_____	Y N	_____
Batteries ( <i>D-Cells</i> )	24	_____	Y N	_____
Batteries ( <i>AA</i> )	24	_____	Y N	_____
Telephone Headsets ( <i>Spares</i> )	2	_____	Y N	_____
Staplers	3	_____		_____
Pens ( <i>Black Ink</i> )	24	_____		_____
Pencils	12	_____		_____
Tape Dispensers w/tape	1	_____		_____
"Post-it-notes" Pads	12	_____		_____
Message Pads	12	_____		_____
Note Pads ( <i>8.5"x 11"</i> )	12	_____		_____
Board Cleaner ( <i>Bottles</i> )	1	_____		_____
Paper Towels ( <i>Rolls</i> )	1	_____		_____
Grease Pencils	12	_____		_____
Dry Erase Markers	12	_____		_____
Copier Paper ( <i>Packs</i> )	4	_____		_____
Hand Held 2-Way Radios	10	_____		_____
ERO Logbooks	*	_____		_____

\* Utilize EPIP-7, position attachments to identify what ERO logbooks are intended for use in the OSC.



Attachment 9 (Page 2 of 2)  
Operations Support Center Inventory/Operability Check

Operations Support Center Telephones

Telephone Number	Operable	Initials	Telephone Number	Operable	Initials
3276	Y N	_____	3639	Y N	_____
3233	Y N	_____	3274	Y N	_____
2964	Y N	_____	2942	Y N	_____
2599	Y N	_____	3225	Y N	_____
2558	Y N	_____	2598	Y N	_____
2026	Y N	_____	3660	Y N	_____
3184	Y N	_____	2904	Y N	_____
3780	Y N	_____	3093	Y N	_____
3172	Y N	_____	3001 w/Headset	Y N	_____
3750 (Node 1)	Y N	_____	2089 w/Headset	Y N	_____
3752 (Node 1)	Y N	_____			

Manager, EP: \_\_\_\_\_ Date: \_\_\_\_\_  
Retention Period is 12 months - - Non-QA Record

**Attachment 10**  
**OSC Staging Area Inventory/Operability Check**

Equipment	QTY	INV	OPER	INIT
<u><b>In the OSC Staging Area Equipment &amp; Supply Cabinet</b></u>				
Calculators, ( <i>Scientific</i> )	1	_____	Y   N	_____
Flashlights	12	_____	Y   N	_____
Batteries ( <i>D-Cells</i> )	24	_____	Y   N	_____
Staplers	1	_____		_____
Pens ( <i>Black Ink</i> )	24	_____		_____
Pencils	12	_____		_____
Tape Dispensers	1	_____		_____
"Post-it-notes" Pads	12	_____		_____
Message Pads	12	_____		_____
Note Pads ( <i>8.5"x 11"</i> )	12	_____		_____
Accountability Roster	1	_____		_____
ERO Logbooks	*	_____		_____
<b>In the OSC Staging Area</b>				
Ice Vests	12	_____		_____
Ice Packs for vests	72	_____		_____

**Operations Support Center Staging Area Telephones**

Telephone Number	Operable	Initials	Telephone Number	Operable	Initials
2244	Y   N	_____	2115	Y   N	_____
2309	Y   N	_____	2215	Y   N	_____
			2303	Y   N	_____

\* Utilize EPIP-7, position attachments to identify what ERO logbooks are intended for use in the OSC Staging Area.

**Manager, EP:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Retention Period is 12 months - - Non-QA Record

**Attachment 11 (Page 1 of 2)**  
**Huntsville/Decatur General Hospital Inventory/Operability Check**  
**(Circle One)**

Hospital Equipment & Supply Cabinet	QTY	INV	OPER	INIT
<b><u>Personnel Dress-Out Clothing</u></b>				
"Booties" (Pairs)	10	_____		_____
Dress Out Packages	10	_____		_____
Surgical Gloves (Pairs)	50	_____		_____
Surgical Gowns	3	_____		_____
Surgical tape for dressout (Rolls)	4	_____		_____
<b><u>Rad Monitoring Instruments &amp; Dosimetry</u></b>				
Bicron Surveyor 50 (GM) or equivalent	2	_____	Y N	_____
Bicron RSO 5 (Ion Chamber) or equivalent	1	_____	Y N	_____
TLD's	10	_____		_____
Electronic Dosimeters	10	_____		_____
Wound Probe w/Cable	1	_____		_____
<b><u>Zone, Survey &amp; Contamination Control</u></b> <b><u>Supplies</u></b>				
Floor Covering (Set)	1	_____		_____
Duct Tape (Rolls)	2	_____		_____
Rad Posting Signs	8	_____		_____
Contamination Smears	100	_____		_____
Step-Off-Pads	2	_____		_____
Rad Ribbon or rope (Rolls)	1	_____		_____
Massilin Mop	1	_____		_____
Massilin Cloths	20	_____		_____
Rad Emblem Tape (Rolls)	1	_____		_____
Flexible Funnel w/ drain hose	1	_____		_____
Fluid Collection Bottle (2 Gallon min.)	1	_____		_____
3 ft. Wide Paper (Feet)	20	_____		_____
Cotton Swabs	12	_____		_____
Radioactive Material Tags	12	_____		_____
Traffic Cones (set)	1	_____		_____

Attachment 11 (Page 2 of 2)  
Huntsville/Decatur General Hospital Inventory/Operability Check

<u>Zone, Survey &amp; Contamination Control Supplies (Continued)</u>	QTY	INV	OPER	INIT
Scissors	1	_____		_____
Plastic Bags ( <i>Large</i> )	10	_____		_____
Plastic Bags ( <i>Medium</i> )	10	_____		_____
"Zip Lock" Plastic Bags	24	_____		_____
Skin Decon Media ( <i>Container</i> )	1	_____		_____
Sample Bag Labels	12	_____		_____
Hospital Response Booklet ( <i>Hospital Specific</i> )	1	_____		_____
Wall Poster (" <i>Care of Contamination Patients</i> ")	1	_____		_____
NCRP Report # 65 ( <i>Issued Date - April 15, 1980</i> )	1	_____		_____
Decontamination Table, bottle and Backboard	1	_____		_____

Manager, EP: \_\_\_\_\_ Date: \_\_\_\_\_  
Retention Period is 12 months - - Non-QA Record

## Attachment 12 ETS Communications Operability Check

<u>Description</u>	<u>Location</u>	<u>Telephone Number</u>	<u>OPER</u>	<u>INIT</u>
Reactor Safety Counterpart Link (RSCL)	TSC (NRC Area)	(256) 729-3757	Y N	—
Protective Measures Counterpart Link (PMCL)	TSC (NRC Area)	(256) 729-3758	Y N	—
Management Counterpart Link (MCL)	TSC (NRC Area)	(256) 729-3759	Y N	—
Local Area Network (LAN) Access (Check this line by use of a telephone instrument)	TSC (NRC Area)	(256) 729-3760	Y N	—
Health Physics Network (HPN)	TSC (NRC Area)	(256) 729-2212	Y N	—
Health Physics Network (HPN)	TSC (TVA Area)	(256) 729-2212	Y N	—
*Emergency Notification System (ENS)	TSC (NRC Area)	(256) 729-2273	Y N	—
*Emergency Notification System (ENS)	TSC (TVA Area)	(256) 729-2273	Y N	—
*Emergency Notification System (ENS)	Unit 1/2 Control Room	(256) 729-2273	Y N	—
*Emergency Notification System (ENS)	Unit 3 Control Room	(256) 729-2273	Y N	—

\* Notify the Shift Manager prior to beginning the ENS telephone checks

Note: IMMEDIATELY, Report Failures to (1) the Shift Manager , and (2) the NRCOC at 9-1-301-951-0550 from a TVA telephone. (The NRC may request that Browns Ferry conduct repairs.)

Note: Upon Completion of repairs, perform a test of the affected telephones. If test is satisfactory, inform the Shift Manager and the NRCOC.

Manager, EP: \_\_\_\_\_ Date: \_\_\_\_\_  
Retention Period is 12 months - - Non-QA Record

Attachment 13 (Page 1 of 2)  
Local Recovery Center Inventory/Operability Check

Equipment	QTY	INV	OPER	INIT
<u>In the LRC Area</u>				
Met Data Terminal	1	_____	Y N	_____
Printer for Met Data Terminal	1	_____	Y N	_____
ICS Terminal	1	_____	Y N	_____
<u>In LRC Equipment &amp; Supply Cabinet</u>				
Calculators, ( <i>Scientific</i> )	4	_____	Y N	_____
Flashlights	12	_____	Y N	_____
Batteries ( <i>D-Cells</i> )	24	_____	Y N	_____
Staplers	1	_____		_____
Pens ( <i>Black Ink</i> )	24	_____		_____
Pencils	12	_____		_____
Tape Dispensers	1	_____		_____
"Post-it-notes" Pads	12	_____		_____
Message Pads	12	_____		_____
Note Pads ( <i>8.5"x 11"</i> )	12	_____		_____
Board Cleaner ( <i>Bottles</i> )	2	_____		_____
Paper Towels ( <i>Rolls</i> )	1	_____		_____
Dry Erase Markers	12	_____		_____

Attachment 13 (Page 2 of 2)  
Local Recovery Center Inventory/Operability Check

Telephone Number	Operable	Initials	Telephone Number	Operable	Initials
2038	Y N	_____	2692	Y N	_____
3666	Y N	_____	2460	Y N	_____
3636	Y N	_____	2064	Y N	_____
3656	Y N	_____	3647	Y N	_____
3645	Y N	_____			
Portable Satellite Telephone	Y N	_____			

Manager, EP: \_\_\_\_\_ Date: \_\_\_\_\_  
Retention Period is 12 months - - Non-QA Record





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**Attachment 15**  
**EP Once per Calendar Quarter Administrative Checks and Reviews**

	QTY	INV	DATE	INIT
<b>Emergency Procedure</b> <b>Telephone Number Review and Update</b> <ul style="list-style-type: none"><li>• <b>BFNP Emergency Preparedness</b> <b>Implementing Procedures</b></li></ul>	<b>ALL</b>	_____	_____	_____

<b>Manager, EP:</b> _____ <b>Date:</b> _____ Retention Period is 12 months - - Non-QA Record
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**Attachment 17**  
**Alternate Decontamination Facility**  
**Power Service Shop # 4 - TVA, Muscle Shoals Reservation**

Equipment	QTY	INV	INIT
<u>Supply Cabinet</u>			
Cotton Tipped Swabs	2 PKG	_____	_____
Square Gauze	1 Box	_____	_____
Detergent	1 Box	_____	_____
Surgical Brush	12	_____	_____
Waterless Hand Cleaner	2 Cans	_____	_____
Shampoo	2 BTL	_____	_____
Paper Bath Towels	100	_____	_____
Small Coveralls	12	_____	_____
Medium Coveralls	12	_____	_____
Large Coveralls	12	_____	_____
Small Tennis Shoes	12	_____	_____
Large Tennis Shoes	12	_____	_____

**Signatures:**

**Inventoried/Inspected by** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Manager, EP:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Retention Period is 12 months - - Non-QA Record

**Attachment 18**  
**Personnel Decontamination Treatment Area**

Equipment/Supplies	QTY	INV	INIT
Disposable Gloves	2 Box	_____	_____
Gauze Pads	2 Box	_____	_____
Cotton Swabs	1 PKG	_____	_____
Saline Solution	2 Bottle	_____	_____
Surgical Brushes	12 Each	_____	_____
Shampoo	2 BTL	_____	_____
Soap	5 Bars	_____	_____
Laundry Detergent	1 Box	_____	_____
Soap (liquid abrasive)	1 Bottle	_____	_____
Mechanic's Hand Cleaner	2 Cans	_____	_____
Shaving Cream	1 Can	_____	_____
Razors	5 Each	_____	_____
Paper Bath Towels	1 Box	_____	_____
Towels	25 Each	_____	_____
Scissors	1 Pair	_____	_____
Petri Dish	5 Each	_____	_____
Duct Tape	2 Rolls	_____	_____
Paper Coveralls	10 Pair	_____	_____
Tennis Shoes (Sizes 7-12) (half-sizes are OK)	one pair each	_____	_____

**Signatures:**

**Supervisor, Radcon:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Manager, EP:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Retention Period is 12 months - - Non-QA Record

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