

REGULATORY ANALYSIS

DRAFT REGULATORY GUIDE DG-1310

“Medical Evaluation of Licensed Personnel at Nuclear Power Plants”

Proposed Revision 4 of Regulatory Guide 1.134, dated March 1998

Statement of the Problem

Regulatory Guide (RG) 1.134, “Medical Evaluation of Licensed Personnel for Nuclear Power Plants,” Revision 3, was issued in 1998 to identify that the contemporary version of consensus standard ANSI/ANS-3.4(-1996), “Medical Certification and Monitoring of Personnel Requiring Operator Licenses for Nuclear Power Plants,” is a method acceptable to the staff for complying with those portions of the NRC’s regulations associated with approval or acceptance of medical examination certifications at nuclear power plants.

ANSI/ANS-3.4, Revision 4, was issued in 2013 to provide clarification and comprehensive medical guidance to improve industry’s consistent implementation of the standard. This included clarification of specific minimum requirements, disqualifying conditions, conditional restrictions, examination methods, and monitoring methods for each medical area. The 2013 issue also includes consideration of other industry medical standards, including those of the U.S. Department of Transportation and Federal Aviation Administration and medical criteria that reflect progressions in medical science including updated terminology, current medical practices, criteria for normality, and risk assessments.

As a result the current RG should be revised to reflect current best practices.

Objective

RG 1.134 is under revision to identify to licensees that ANSI/ANS 3.4-2013 is acceptable for their use to meet the requirements for medical evaluations under 10 CFR Part 55. Revising this regulatory guide is consistent with the NRC policy of evaluating the latest versions of national consensus standards to determine their suitability for endorsement by regulatory guides. This approach also will comply with the NRC’s Management Directive (MD) 6.5, “NRC Participation in the Development and Use of Consensus Standards” (ML100600460). This is in accordance with Public Law 104 113, “National Technology Transfer and Advancement Act of 1995.”

Alternative Approaches

The NRC staff considered the following alternative approaches:

Do not revise RG 1.134.

Revise and update RG 1.134.

Alternative 1: Do Not Revise RG 1.134

Under this alternative, the NRC would not revise this guidance, and the current guidance would be retained. If NRC does not take action, there would not be any changes in costs or benefit to the public, licensees, or the NRC. However, the “no action” alternative would not comply with the National Technology Transfer and Advancement Act of 1995 that requires

Federal agencies to use standards developed or adopted by voluntary consensus standards or address use of multiple standards on the same topical area. The “no action” alternative would also discourage licensee’s voluntary use of the most current guidance because the NRC did not affirm the acceptance of the standard. Thus they may not use the new standard, and gain the value of using the enhanced guidance.

Alternative 2: Revise and Update RG 1.134

Under this alternative, the NRC would revise RG 1.134, taking into consideration the medical knowledge and experience gained since last revising RG 1.134 in March 1998. The new guidance is simply more thorough and complete.

The impact to the NRC would be the costs associated with preparing and issuing the revised regulatory guide. The impact to the public would be the voluntary costs associated with reviewing and providing comments to the NRC during the public comment period. The impact to facility licensees would be the cost of implementing the new standard. The value to the NRC staff and facility licensees would be the benefits associated with enhanced efficiency and effectiveness in using a common guidance document as the technical basis for demonstrating compliance with the Commission’s medical examination and fitness requirements, as described in 10 CFR Part 55.

Conclusion

Based on this regulatory analysis, the staff recommends revision of RG 1.134. The staff concludes that the proposed action will result in an improved and more uniform process for facility licensees to demonstrate compliance with the Commission’s operator licensing medical requirements regulations.