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PDR

4. Portsmouth Hospital's average daytime midweek ALS patient census is approximately 13.

During other times, elective surgery is not scheduled and hence the number of potential ALS patients in the operating room and recovery room is reduced.

5. If the decision is made by the Hospital's medical staff to evacuate an ALS patient, the activities involved in preparing for transport include the following:

- a. mobilizing support personnel and equipment and gathering the patient's medical records and necessary medications;
- b. disconnecting the patient from the hospital's life support equipment and reconnecting the patient to portable equipment;
- c. waiting for the patient's condition to stabilize on the portable life support equipment and placing the patient into a stretcher beside the hospital bed;
- d. physically moving the patient from the hospital room and loading him into the ambulance.

6. The time required to prepare an ALS patient for transport varies from one patient to another depending on the patient's condition, the life support equipment required, and how long it takes to stabilize the patient. The time required to perform patient preparation (i.e., activities a, b, and c, in paragraph 5 above) for an average ALS patient is approximately 20 minutes. Physically moving an ALS patient from the hospital room to the loading point takes approximately 10 minutes and loading the patient into an ambulance takes approximately 15 minutes. The total time to prepare an ALS patient for transport, including patient preparation and loading is thus, $20 + 10 + 15 = 45$ minutes.

7. The amount of ALS patient preparation that can be performed prior to the time an ambulance arrives at the hospital will depend on the patient's condition and the life support equipment required. For an average ALS patient, approximately one-half of the ALS patient preparation activities (i.e.,

20/2 = 10 minutes) can be performed prior to the time an ambulance arrives at the hospital.

8. Given the times presented in paragraphs 6 and 7 above, the amount of time required to prepare an ALS patient for transport and load the patient into the ambulance measured from the time the ambulance arrives at the hospital is $45 - 10 = 35$ minutes.

9. Portsmouth Regional Hospital has the ability to accommodate up to 3 ambulances at any one time.

10. Given the ALS patient census provided in paragraph 4, and availability of the full hospital staff, it is estimated that all of the ALS patient preparation activities typically performed prior to the arrival of the ambulances can be performed for all ALS patients within 2 to 3 hours.

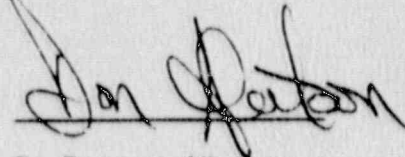
11. Assuming all ambulances are available at the hospital, final patient preparation and loading activities for 3 ALS patients can be performed in parallel.

12. The amount of time required to perform final ALS patient preparation and loading for all patients as measured from the time the ambulances are available at the hospital is thus $13 \text{ patients} / 3 \text{ patients in parallel} = 4.3$, rounded up to 5, $\times 35 \text{ minutes} = 175 \text{ minutes}$.

13. The planning basis is that one ALS patient can be accommodated in one ambulance.

14. The Portsmouth Regional Hospital's Emergency Management Plan allows for coordinating staff schedules to ensure 24-hour staffing for emergency conditions. The hospital will use existing internal operational procedures and protocols to ensure appropriate assignment of staff. (Portsmouth Regional Hospital/Portsmouth Pavilion Safety Management Plan, dated May 10, 1989).

15. The signing of this affidavit does not represent an endorsement or approval by HCA Portsmouth Regional Hospital of any evacuation plan developed by the State of New Hampshire or New Hampshire Yankee. We will use the judgement of all professionals involved and available from all authorities to make a decision about the best care of our patients in the event of an emergency at Seabrook Station. We will incorporate the supplies and plans of the State on an as needed basis depending on the actual circumstances of any individual emergency.



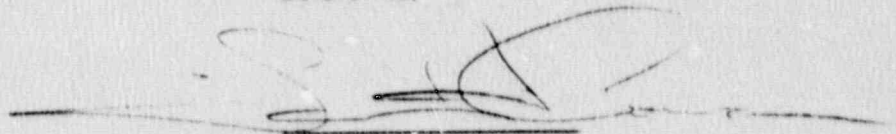
Dr. Donavon Albertson

Rockingham County, NH

June 25, 1990

The above-subscribed Dr. Donavon Albertson appeared before me and made oath that he had read the foregoing affidavit and that the statements set forth therein are true to the best of his knowledge.

Before me,



Notary Public
My Commission Expires:

LAWRENCE H. COWAN, Notary Public
My Commission Expires November 21, 1994

CURRICULUM VITA

DONAVON ALBERTSON, M.D., F.A.C.E.P.

Work
333 Borthwick Avenue
Portsmouth, NH 03801
603-436-5110

Home
796 Middle Street
Portsmouth, NH 03801
603-431-7772

EDUCATION

Augustana College, Sioux Falls, South Dakota
Bachelor of Arts in Biology, 1970
GPA: 3.8

University of South Dakota School of Medicine
Vermillion, South Dakota
Masters of Science in Medicine, 1972
GPA: 3.9

This was a two year degree-granting institution from which all students transferred to a four year program.

Tufts University School of Medicine, Boston, Massachusetts
Doctor of Medicine, 1974
GPA: Pass/Fail System

1974 to 1977

Internal Medicine Internship and Residency

Boston VAH Boston, Massachusetts

Affiliated with Tufts University and Boston University Schools of Medicine. Hospitals included Framingham Union, Peter Bent Brigham, Boston City & New Eng Med Center.

1978 to 1980

University of California at San Francisco

San Francisco, California

Fellowship in Emergency Medicine

This two year program included clinical rotations in emergency medicine as well as research and administrative modules.

ACADEMIC APPOINTMENTS

1977 to 1978

Tufts University School of Medicine, Lecturer in Medicine

Boston, Massachusetts

Attending physician in Intensive Care, Ambulatory as well as Emergency units.

CERTIFICATION

Board Certification

American Board of Internal Medicine

1977

Advanced Achievements in Internal Medicine

1987

American Board of Emergency Medicine

1988

American Heart Association

Advanced Cardiac Life Support

Current

American College of Surgeons

Advanced Trauma Life Support

Current

LICENSURE

1980 to 1990

Continuing Medical Education

Fifty to One Hundred Fifty Hours per Year

1980 to 1990

New Hampshire Medical License #6323

PUBLICATIONS

Albertson, D.R. & Gleckman, Richard

"Micrococcus lutea Septicemia"

Archives of Internal Medicine. 1977.

**PROFESSIONAL
SOCIETIES**

1974 to 1984

American College of Physicians

1974 to 1990

American Medical Association

1984 to 1990

American College of Emergency Physicians

1982 to 1990

New Hampshire Medical Society

1982 to 1990

Portsmouth Medical Society

HOSPITAL APPOINTMENTS

1978 to 1980

Moffitt Hospital San Francisco, California

Full-time staff as Fellow in Emergency Medicine supported by the Robert Wood Johnson Foundation. Rotations included San Francisco General, Highland and Children's Hospitals.

1978 to 1980

Ross General Hospital Ross, California

Part-time staff in the Department of Emergency Medicine

1978 to 1980

St. Mary's Hospital San Francisco, California

Part-time staff in the Department of Emergency Medicine

1980 to 1990

Portsmouth Hospital Portsmouth, New Hampshire

Active staff in the Department of Emergency Medicine

Disaster Committee Chair

Medical Executive Committee

PROFESSIONAL EXPERIENCE

Administrative

Medical Director, Department of Emergency Medicine, Portsmouth Hospital, 1981-1990

Medical Director, New Hampshire Seacoast, Emergency Medical Services, 1984-1990

Medical Director, Occupational Care Services, Portsmouth Regional Hospital, 1989-1990

Occupational Medicine Miniresidency

University of California at San Francisco, 1988-1989.

This training program included nearly 300 hours of didactic lectures as well as field experience. Research papers were presented.

The didactic material included biostatistics, epidemiology, toxicology, administrative/legal issues as well as the core of occupational medicine by systems.

BUSINESS EXPERIENCE

1981 to 1989

Professional Corporation, Portsmouth, New Hampshire
President

Contract with Portsmouth Hospital to provide professional administrative as well as clinical services in emergency medicine. Subcontracts held with other vendors including physicians. Consultative services provided other industries, legal firms and insurance companies.

1989 to 1990

Occupational Medicine Consulting

Portsmouth, New Hampshire

Consultation services to industry vis-a-vis medical surveillance exams, toxicologic exposures, independent medical examinations, etc.

REFERENCES

Available upon request

CERTIFICATE OF SERVICE

I, Thomas G. Dignan, Jr., one of the attorneys for the Licensees herein, hereby certify that on June 26, 1990, I made service of the within document by depositing copies thereof with Federal Express, prepaid, for delivery to (or, where indicated, by depositing in the United States mail, first class postage paid, addressed to):

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Thomas G. Dignan, Jr.

(* = Ordinary U.S. First Class Mail)