

POWER AUTHORITY OF THE STATE OF NEW YORK

INDIAN POINT NO. 3 NUCLEAR POWER PLANT

P. O. BOX 215 BUCHANAN, N. Y. 10511

TELEPHONE: 914-739-8200

TO: **NRC**CONTROL COPY NO.: **NRC**

FROM: LINDA M. LOMONACO

DATE: Dec. 27, 1982

SUBJECT: INDIAN POINT NO. 3 NUCLEAR POWER PLANT EMERGENCY PLAN AND
PROCEDURES DOCUMENT

The enclosed sheets are the revised pages to your Emergency Plan/Procedures Document (assigned controlled copy). Please discard the old sheets, insert the attached sheets, initial and date this routing sheet and return it to the Radiological and Environmental Services Department; Attention: Diane Portes

In addition, please review the section revision numbers shown on the new index attached to ensure that you have the most recent of each section incorporated into your control copy.

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CONTROLLED COPY NO.:

SECTION

PAGES

DATE

INITIALS

IP-1040

1-2

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EMERGENCY PLAN PROCEDURES

PROCEDURE NO. IP- Book II

REV. 6

TITLE: Book II

Initiating Conditions
NUE
Non-Radiological Alert
Radiological Alert
Site Area Emergency
General Emergency
Recovery Phase

16

WRITTEN BY: David M. Jones

REVIEWED BY: David D. Bell

PORC REVIEW AS DATE 12/24/82

APPROVED BY: David D. Bell DATE 12/24/82

EFFECTIVE DATE 12-27-82

EAL (INITIATING CONDITIONS)

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XIX. RECOVERY PHASE

Criteria for entering the long term Recovery Phase are as follows:

1. Radicactive releases to the environment caused by accident conditions have been terminated.
2. Plant is in Cold Shutdown.
3. Plant is in a Stable Condition.

Prior to entering the recovery mode, onsite and offsite officials shall be notified and conferred with and appropriate lines of communication established for recovery operations.

NOTIFICATION OF UNUSUAL EVENT CLASSIFICATION

Unusual Events are situations in progress or ones which have occurred which indicate a potential degradation of the level of safety of the plant. No releases of radioactive material requiring offsite response or monitoring are expected unless further degradation of safety systems occur. In this classification, no alteration of the operating status of the plant is anticipated but response may involve support from members of the plant staff and/or local services.

The Shift Supervisor or Senior Reactor Operator will declare an Unusual Event when any of the initiating conditions listed below exist, or at any time in his judgement plant status warrants such a declaration.

Initiating Conditions for Notification of an Unusual Event

1. Emergency Core Cooling System (ECCS) initiated and discharged to vessel, with the respect to the following bonafide emergencies:
 - a) Loss of reactor coolant to containment
 - b) Exceeding primary/secondary leak rate technical specification
 - c) Steam break upstream of the main steam line isolation valves or feedwater break downstream of check valve
 - d) Main steam break downstream of the main steam line isolation valves
2.
 - a) Instantaneous radiological effluent technical specification limits exceeded
 - b) Accidental release of waste liquid in excess of technical specification limits
3.
 - a) Fuel damage indication from RCS activity samples in excess of technical specifications (e.g. chemist sample or failed fuel monitor reading)
 - b) High coolant activity sample (e.g. exceeding coolant technical specifications for iodine spike).
4. RCS temperature and/or pressure exceeding technical specification limits or RCS pressure > 2735 psig
5. Exceeding RCS leak rate technical specification of > 10 gpm from a known source or > 1 /gpm from an unknown source.
6. Failure of safety or relief valve in a safety related system to close following reduction to applicable pressure.
7. Loss of offsite power or loss of onsite AC power capability

EMERGENCY DIRECTOR (EOF)

CHECKLIST

1. Assign Personnel for Emergency Organization.

ED _____

POM _____

OSC _____

TSC _____

RATL _____

Communicators in EOF _____

2. Assure EOF Habitability.

3. Contact CR for Plant Status Information.

4. Take over ED Responsibility from Shift Supervisor.

5. Accountability/Evacuation?

6. Review & Approve Search & Rescue operations (IP-1054).

7. Notify: INPO _____
ANI _____
Brookhaven National Lab _____
Adjacent Businesses _____

8. Review & Recommend Corrective Actions.

9. Exceeding NRC Radiation Exposure limits (IP-1027).

10. Planned discharge of Containment atmosphere (IP-1005).

11. Periodic briefings to EOF staff & upper gallery.

12. Periodically review the Habitability of the EOF: if a move to the AEOF is required, notify the POM and turn over ED responsibility to him and assure he delegates communicator and RATL positions to members of his staff.

13. Periodic updates to offsite authorities using EP Form #8 Radiological Emergency Data Form Parts I, II, III.

14. Review EAL's for change in Emergency Classification.

15. Escalate or de-escalate Emergency Classification.

16. Consider entering the Recovery Phase: refer to the last page of the EAL Table for guidance.

17. Insure that OSC, TSC, CR, LAO, and security are aware of any changes in Emergency Status.

18. Close out to authorities.

EMERGENCY DIRECTOR (EOF)

CHECKLIST

1. Assign Personnel for Emergency Organization.

ED _____

POM _____

OSC _____

TSC _____

RATL _____

Communicators in EOF _____

2. Assure EOF Habitability.
3. Contact CR for Plant Status Information.
4. Take over ED Responsibility from Shift Supervisor.
5. Accountability/Evacuation?
6. Review & Approve Search & Rescue operations (IP-1054).
7. Notify: INPO _____
ANI _____
Brookhaven National Lab _____
Adjacent Businesses _____
8. Review & Recommend Corrective Actions.
9. Exceeding NRC Radiation Exposure limits (IP-1027).
10. Planned discharge of Containment atmosphere (IP-1005).
11. Periodic briefings to EOF staff & upper gallery.
12. Periodically review the Habitability of the EOF: if a move to the AEOF is required, notify the POM and turn over ED responsibility to him and assure he delegates communicator and RATL positions to members of his staff.
13. Periodic updates to offsite authorities using EP Form #8 Radiological Emergency Data Form Parts I, II, III.
14. Review EAL's for change in Emergency Classification.
15. Escalate or de-escalate Emergency Classification.
16. Consider entering the Recovery Phase: refer to the last page of the EAL Table for guidance.
17. Insure that OSC, TSC, CR, LAO, and security are aware of any changes in Emergency Status.
18. Close out to authorities.

GENERAL EMERGENCY

A General Emergency is a class which involves events that are in process or have occurred which involve actual or imminent substantial core degradation or melting with potential for loss of containment integrity.

Thyroid and/or whole body doses outside of the protected area but within the exclusion area may present a radiological hazard to personnel, and in that instance the IP-3 Emergency Director may assume control of emergency actions on both the IP-3 and IP-2 sites, including shut down and/or evacuation as required.

The Shift Supervisor or Senior Reactor Operator will declare a General Emergency when any of the initiating conditions listed below exist, or at any time in his judgement plant status warrants such a declaration.

Initiating Conditions for a General Emergency

1. Effluent monitors, (R-14, RM-16, HP reading on plant vent) detect levels corresponding to 1 R/hr WB or 5 R/hr thyroid at the Site Boundary under actual meteorological conditions. (a. alone is enough to declare a General Emergency. b. needs confirmation from the condition in a.)

- a. Indications from effluent monitors or environmental survey results:

Noble Gas dose rate ≥ 1 R/hr (limiting case)

Iodine dose rate ≥ 5 R/hr (use chem sample ratio-do not use assumed ratio)

- b. Reading on R-10 $= \geq Z$
Where $Z = \left(\frac{1.3 \times 10^3}{X_{u/Q \text{ site boundary}}} \right) \times 6200 = \text{mR/hr}$

NOTE: To declare a General Emergency this (b.) must have confirmation with readings from effluent monitors or Site Boundary Environmental Survey readings.)

2. Loss of two out of three fission product barriers with a potential loss of the third barrier, (e.g., LOCA with substantial core damage and a potential loss of containment integrity)
3. Loss of physical control of the plant
4. Other plant conditions exist, from whatever the source, that make the release of large amounts of radioactivity in a short period of time possible (e.g.,
 - a) Small and large LOCA's with failure of ECCS to perform, leading to severe core degradation or melt in from minutes to hours. Ultimate failure of containment likely for melt sequences. (Several hours likely to be available to complete protective actions unless containment is not isolated.)

- b) Any transient initiated by loss of feedwater and condensate systems followed by failure of auxiliary feedwater system for extended periods that makes the release of large amounts of radioactivity in a short period of time probable.
 - c) Transient requiring operation of shutdown systems with failure to trip which results in core damage or additional failure of core cooling and makeup systems (which could lead to core melt)
 - d) Any failure of offsite and onsite power along with total loss of auxiliary feedwater for several hours. Would lead to eventual core melt and likely failure of containment.
 - e) Small LOCA and initially successful ECCS. (Subsequent failure of containment heat removal systems over several hours could lead to core melt and likely failure of containment.)
- 5. Fire which causes plant conditions that make the release of large amounts of radioactivity in a short period of time probable.
 - 6. Any major natural phenomenon that makes the release of large amounts of radioactivity in a short period of time probable.
 - 7. Any major internal or external hazards which could cause massive common damage to plant systems resulting in plant conditions that make the release of large amounts of radioactivity in a short period of time probable.

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EMERGENCY PLAN PROCEDURES

PROCEDURE NO. IP- 1021

REV. 7

TITLE: RADIOLOGICAL MEDICAL EMERGENCY

WRITTEN BY: David D. Bell

REVIEWED BY: A. Simon

PORC REVIEW AS DATE 12/1/82

APPROVED BY: J. E. B. DATE 12/1/82

EFFECTIVE DATE 12-27-82

RADIOLOGICAL MEDICAL EMERGENCY1. INTENT

To describe the procedure to be followed when an individual is injured and contaminated.

2. DISCUSSION

This procedure is to be used as guidance when an individual is injured and contaminated at IP-3. In all such instances, it should be the guiding rule that required medical attention must take precedence over decontamination whenever the injured's life is considered to be endangered. In such instances, the prompt treatment of the injury must take first consideration. However, when contamination does occur, radiological hazards cannot be ignored and should be dealt with as feasible while the medical condition is being treated.

Rescue teams should make every attempt to stabilize the patient. If the patient is stabilized and there is no threat to life, the patient should be decontaminated (to the level normally allowed for release, i.e. with a maximum of 200 cpm above background) prior to transporting to a hospital. If the patient is not stabilized or his medical condition warrants immediate transportation to the hospital, initial attempts must be made at decon, or at a minimum to remove the contaminated protective clothing and/or wrap him in a blanket to minimize the spread of contamination.

NOTE: The transportation of a contaminated injured individual to the hospital requires notification as per the Emergency Plan classification, Notification of Unusual Event. Reportable as per IP-1030, i.e. within 15 minutes after the departure of the patient from the site to the offsite hospital.

NOTE: Applicable telephone numbers are found on the last page of this procedure.

3.0 PROCEDURE

3.1 AN EMPLOYEE ARRIVING AT THE SCENE OF THE ACCIDENT WILL:

- a) Immediately render lifesaving aid to the best of his ability to the injured individual.
- b) Notify (or cause to be notified) the Control Room.
- c) The patient should not be moved until a first aider arrives, unless conditions in the area jeopardize the patient's life.
- d) The time the patient is left alone should be minimized until the first aider(s) arrive.

3.2 THE CONTROL ROOM OPERATOR WILL:

a) Page and have report to the accident scene:

1. Nurse (Normal Work Hours)
2. First Aider
3. H.P. Technician
4. Shift Supervisor
5. NPO Rover

b) Ensure notification of the above by making follow-up phone calls to their work areas on a line other than the page line.

The follow-up call to the HP should be made to the HP Control Point.

c) Call IP-3 Security:

i) Give the location of the accident.

- ii) Request that they stand-by to escort ambulance to closest access point to patient and be on stand-by to bring protective clothing package to ambulance workers (found in the Security Emergency Locker).

d) Call the Radiological & Environmental Services Superintendent to advise of the situation.

3.3 AT THE ACCIDENT SCENE:

a) The Nurse/First Aider will render life saving aid, making every effort to stabilize the patient.

b) The Health Physics Technician will:

- i) Immediately establish the safety of the area, Set up a buffer zone with step-off pad, and assist the Nurse/First Aider.

- ii) Respond with the Decontamination kit and continue with its use until arriving at the hospital (if required).

c) All nonessential personnel in the immediate area should be instructed to leave.

d) The Shift Supervisor should be in frequent contact with the Control Room, and coordinate the Medical Emergency Response from the accident scene.

3.4 THE PATIENT'S CONDITION WILL DETERMINE ONE OF THE FOLLOWING:

a) The need to transport directly to the hospital with initial attempts at decon.

b) The need to decontaminate at the Unit 3 decon suite (See IP-1023).

3.5 IF AND WHEN TRANSPORTATION TO THE HOSPITAL IS REQUIRED. The Control Room shall:

- a) Call the Verplanck Ambulance
- b) Call Peekskill Hospital to alert them of the ambulance arrival of a contaminated or possibly contaminated individual.
- c) Call Security:
 - i) Notify IP-3 Security of the ambulance's need for access.
 - ii) Instruct security to direct the ambulance to the closest vehicle access to the injured individual.
 - iii) Instruct security to bring protective clothing packages and yellow herculite for ambulance attendants use (found in Security Emergency Locker).
- d) Make the required notification under the Emergency Action Level Notification of Unusual Event, within 15 minutes after the Ambulance leaves the site.
- e) After being advised by Security that the patient has left for the hospital, again call the Peekskill Hospital to advise them of the patients condition upon departure from the site.
- f) A Medical Representative should be notified as to the patients condition and need to transport to the hospital. (If the patients life is at risk transport 1st and make notification to the Medical Representative 2nd)

3.6 In addition, in any case where transportation to the hospital is required for an injured-contaminated individual:

- a) The IP-3 staff shall bring the patient to the ambulance.
- b) Ambulance attendants should be provided with protective clothing & dosimetry.
- c) Ambulance driver should not touch patient and should be given dosimetry. Protective clothing is not required.
- d) An H.P. Technician will accompany the injured to the hospital with a dosimeter charger and dosimeters for Ambulance and hospital personnel. The Decon kit should be used in transport to the hospital if warranted. He will remain with the patient surveying and monitoring as required. He will monitor the Hospital Room before and after the patient's arrival, and advise hospital personnel of the necessary H.P precautions.

3.7 The Control Room is to be notified by Security as soon as the patient has left for the hospital.

- 3.8 If the decision is made to transport the patient to a facility other than the Peekskill Community Hospital, the Medical Support Staff and Radiological and Environmental Services Superintendent will decide the mode of transportation to be used, and will make the necessary arrangements.
- 3.9 General Instructions on pages 5-9 are provided for the following personnel.
- a. Control Room
 - b. Nurse
 - c. First Aid
 - d. Health Physics
 - e. Security

RESPONSIBILITY OF CONTROL ROOM

GENERAL INSTRUCTIONS

1. Page Nurse, First Aider, H.P., N.P.O. Rover & S.S. to accident scene.
(Follow-up with call to individuals' work areas to ensure notification)
2. Call H.P. Control Point and the Watch H.P. report to accident scene.
3. Call RESS to advise of situation.
4. Call Ambulance and Hospital advising them of patients possible contaminated condition. (Call hospital again upon departure of ambulance to advise of patient's updated condition)
5. Call Security and advise them of the ambulance's arrival, and have Security direct the ambulance to the closest vehicle access to the patient. Have Security bring protective clothing package to ambulance attendants.
6. Call Medical Representative for IP-3 to notify of the transport of a contaminated individual offsite.
7. Make required Emergency Plan Notifications under Notification of Unusual Event.

NOTE: If necessary in the case of multiple contaminated patients, arrange for the Unit 3 - Unit 1 transportation routes to be opened (IP-1022).

RESPONSIBILITY OF THE FIRST AID TEAM

GENERAL INSTRUCTIONS

1. Respond to call of Control Room to designated location with a first aid kit (and stretcher).
2. Obtain emergency equipment and Anti-C clothing from the emergency cabinet in the Control Room or from the normal supply at the Control Point. Don coveralls before entering the Controlled Area.
3. Render immediate care under Health Physics direction. (Move victim from highly contaminated area or away from source only when it is definite that this will not create any further injury).
4. If necessary, move the victim to the Unit 3 Decon Suite (and the Unit 1 Decontamination Room in the event of multiple victims).
5. Assist in decontamination of the victim.
6. Decontaminate self, if necessary.
7. Assist with the delivery of victim to ambulance.
8. Assist transfer of victim from ambulance to hospital.
9. Assist Hospital Radiation Casualty team as needed.

RESPONSIBILITY OF HEALTH PHYSICS PERSONNEL

GENERAL INSTRUCTIONS

1. Specify Anti-C Clothing and monitoring equipment for team members. As a minimum, all personnel responding to a First Aid call in the Controlled Area shall don coveralls before entering.
2. Respond to scene with proper survey instruments.
3. Respond with Decontamination Kit and continue using this kit while in transit to the hospital.
4. Direct all non-injured to safe area.
5. Measure and evaluate fields.
6. Identify contaminated areas on victim and mark them.
7. Direct initial decontaminated procedures.
8. Restrict access to area as necessary.
9. Discuss with the RESS, or Shift Supervisor or Medical Representative the route to Decontamination Area, either on or offsite. (If necessary in the event of multiple victims, use IP-1022 for specific requirements to transport to IP-1 Decon Suite).
10. Accompany the injured to Decontamination Suite and remain with him including his transportation and decontamination at the hospital or until relieved by another H.P.
11. Follow procedures as outlined for First Aid Team.
12. The H.P. will be responsible to advise Medical personnel as long as any radiation hazard exists to rescue personnel. The H.P. will monitor and advise of allowable working time, exposure limits and shielding.
13. Accompany the patient to hospital providing dosimeters for the drivers (the ambulance driver should remain behind the wheel and not come in contact with the patient. (Dosimeter charger should be brought). Provide dosimeters for hospital personnel.
14. Survey hospital room before and after victim is treated. Assure all unnecessary major hospital equipment is out of room. (The Power Authority is responsible for all contaminated equipment replacement).
15. Inventory and bag all hospital equipment for future pick up and disposal.

RESPONSIBILITY OF NURSE

GENERAL INSTRUCTIONS

1. Respond to the Control Room's call to report to the accident scene or decontamination room with emergency bag.
2. Put on protective clothing and dosimetry which are necessary for Controlled Area entry.
3. In the event of mass casualties, initiate Triage procedure.
4. Evaluate the patients condition and:
 - a) Render emergency care as necessary.
 - b) Request emergency transport if needed.
5. Provide gross decontamination.
6. Remove the patient to the Decontamination Suite Unit 3.
7. In the Decontamination Suite, evaluate the patients condition so that you can describe findings to a consulting physician.
8. Contact consulting physician.
9. Start medical decontamination procedure, utilizing H.P. for continuous monitoring of contaminated areas.
10. If considered necessary; collect all urine, stool, vomitus, etc. and label.
11. If necessary; draw 1 tube blood for CBC (lavender top) mixing well, 1 full clot tube (red top) for chemistries, being careful to obtain from noncontaminated area. Specimens should be drawn prior to starting any I.V. fluids.
12. Start I.V. if medically indicated.
13. When the patient is stabilized and decontaminated as much as possible, decontaminate self and prepare to go with the patient to the hospital, maintaining life support as required.
14. Provide medical report form radiation casualty and accompany patient to the hospital, retain duplicate copies.

SECURITY RESPONSIBILITY

GENERAL INSTRUCTIONS:

1. Direct the ambulance to closest vehicle access point to injured.
 2. Bring protective clothing package and yellow herculite for ambulance attendants use.
 3. Notify the Control Room when the ambulance leaves the site.
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FIRST AID SUPPLIES

Locations of First Aid lockers and/or kits:

- a) 33' elevation First Aid Room
- b) Security Building
- c) S.S. Office
- d) H.P. Control Point
- e) Outside Nuclear NPO Office

Locations of Stretchers:

- a) Outside H.P. Control Point
- b) Decon Room
- c) 33' Elevation First Aid Room
- d) Outside Nuclear NPO Office

Locations of oxygen:

- a) S.S. Office
- b) Security Building (Security Shift Coordinators offices)
- c) Security Vehicle
- d) H.P. Control Point
- e) Outside Nuclear NPO Office

Resuscitator:

- a) In the Safety & Security Supervisors possession

Medical Response Kit:

- a) In the Safety & Security Supervisors possession

TELEPHONE

#'s.

Left out intentionally

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EMERGENCY PLAN PROCEDURES

PROCEDURE NO. IP- 1030

REV. 7

TITLE: EMERGENCY NOTIFICATION, COMMUNICATION AND STAFFING

WRITTEN BY: [Signature]

REVIEWED BY: David D. Bell

PORC REVIEW J. A. Sullivan DATE 12/1/82

APPROVED BY: John C. Brown DATE 12/1/82

EFFECTIVE DATE 12-27-82

EMERGENCY NOTIFICATION, COMMUNICATION AND STAFFING1.0 INTENT

To describe the process for the notification and associated communications required when any of the four Emergency classes is declared, as well as the methods which will mobilize the IP-3 Emergency Response Organization.

2.0 DISCUSSION

After the declaration of an Emergency (Notification of Unusual Event, Alert, Site Area or General), the Shift Supervisor (Emergency Director) will initiate and insure this procedure is implemented until he is relieved from the responsibility of Emergency Director.

Persons who must (may) be notified of an Emergency Condition include:

PASNY

*Resident Manager
*Superintendent of Power
*Information Officer
*N.Y.O. Duty Officer
Emergency Response Personnel

NRC

*Resident Inspector
*Headquarters

OFFSITE**

*Con Edison
*Westchester County
*City of Peekskill
*Rockland County
*Orange County
*Putnam County
*N.Y. State Dept. of Health
U.S. Coast Guard
Con Rail Corporation
***ANI

* Persons or agencies who must always be notified (NUE, Alert, Site Area, General)

Those not * are notified under the appropriate circumstances as per procedure.

**Offsite Agencies should be notified within 15 minutes of the declaration of an emergency classification. PASNY and NRC notifications should be made simultaneously or directly following offsite notifications.

***ANI must be notified at the Alert classification and above. (Am. Nuc. Insurers)

PASNY maintains staffing consistent with the NRC requirements for onshift; minimum (30-60 minutes); and additional support staffing during emergency conditions. Personnel required on shift are supplied by members of the Watch Organization with additional personnel available through the Con Edison Sr. Watch Supervisor. Emergency Personnel off-hours minimum staffing (30 to 60 minutes) shall be accomplished as follows:

Alert

Personnel as
Emergency Director
determines necessary

Site Area

Personnel on
Roster III

General

Personnel on
Roster III

Immediate and minimum staffing should be directed by the Shift Supervisor. Off-hours call in of Emergency Personnel will be done by Security.

3.0 PROCEDURE - NORMAL WORK HOURS

3.1 Notification of Unusual Event/Non-Radiological Alert (Use EP-Form #10)

3.1.1 Shift Supervisor

- a) Designates a communicator
- b) Determines which support centers should be activated

3.1.2 Communicator

- a) Fill out Part I of the Radiological Emergency Data Form, (EP-Form #8).
- b) Call the Resident Manager's Secretary and request her to notify the Resident Manager, Superintendent of Power, Information Officer and the NYO Duty Officer using Part I of the Radiological Emergency Data Form (EP-Form #8) and Roster #1 (EP-Form #9).
- c) Call the Con Edison Unit 2 Control Room and alert them of IP-3 conditions.
- d) Notify offsite agencies within 15 minutes of a declaration of an emergency using the Hot Line Telephone and Part I of the Radiological Emergency Data Form (EP-Form #8).
- e) Notify NRC Headquarters using the direct line telephone.
- f) Notify the USNRC Resident Inspector.
- g) Notify ANI at the Alert classification and above.
- h) Using the Radiological Emergency Data Form, keep offsite authorities (b,c,d,e,f & g) informed of significant changes (approximately every 30 minutes) - until the EOF has taken responsibility for offsite communications.
- i) Notify authorities (b,c,d,e,f & g) of a reduction or escalation in the Emergency Classification or Recovery Intention.
- j) Closeout to authorities (b,c,d,e,f & g).

3.1.3 Personnel or Support Center Activation

3.1.3.1 If Technical Assistance alone is required, use PA to announce:

- a) "All Technical Support Center personnel report to the Technical Support Center"
- b) "Shift Technical Advisor Report to the Control Room"

or

3.1.3.2 If Operational and Technical Assistance is required,
use the PA to announce:

- a) "All Technical Support Center personnel report to the Technical Support Center"
- b) "Shift Technical Advisor report to the Control Room"
- c) "Operations Support Center Personnel Report to the Operations Support Center"

or

3.1.3.3 If all Support Centers are to be activated,
use the PA to announce:

- a) "Emergency Directors and Radiological Assessment Team report to the Emergency Operation Facility"
- b) "All Technical Support Center personnel report to the Technical Support Center"
- c) "Shift Technical Advisor report to the Control Room"
- d) "Operations Support Center Personnel Report to the Operations Support Center"
- e) "All other personnel carry on with your normal duties"

3.0 PROCEDURE - NORMAL WORK HOURS (CONT'D)

3.2 Radiological Alert/Site Area/General (use EP-Form #11)

3.2.1 Shift Supervisor

- a) Designates a communicator
- b) Initiates sounding site evacuation alarm and activation of support centers.
- c) Initiates calculations for dose projection

3.2.2 Communicator

- a) Fill out the Radiological Emergency Data Form, EP-Form #8
- b) Call IP-3 Security:
 - i. Alert them of emergency status
 - ii. Direct them to restrict access to the site
- c) Call the Resident Manager's Secretary and request her to notify the Resident Manager, Superintendent of Power, Information Officer and NYO Duty Officer using the Radiological Emergency Data Form (EP-Form #8) and Roster I (EP-Form #9).
- d) Call Con Edison Unit 2 Control Room:
 - i. Alert them to IP-3 conditions
 - ii. Request offsite monitoring teams to report to the Emergency Operation Facility.
- e) Notify offsite agencies within 15 minutes of declaration of the emergency using the Hot Line Telephone and the Radiological Emergency Data Form, (EP-Form #8).
- f) Notify NRC Headquarters using direct line telephone.
- g) Notify the USNRC Resident Inspector.
- h) Notify ANI
- i) Notify the U.S. Coast Guard if emergency is Radiological in nature and will impact Hudson River traffic.
- j) Notify Con Rail if emergency is Radiological in nature and will impact railroad traffic.
- k) Using the Radiological Emergency Data Form, keep authorities (c,d,e,f,g,h,i & j) informed of significant changes (approximately every 30 minutes) - until the EOF is staffed and has taken over responsibility for offsite communications.

1) Keep authorities (c,d,e,f,g,h,i & j) informed of a reduction or escalation in the Emergency Classification or Recovery Intention.

m) Closeout to authorities (c,d,e,f,g,h,i & j).

3.2.3 Evacuation Alarm and Support Center Activation

3.2.3.1 Sounding Site Evacuation Alarm results in:

- . Emergency Director & Assessment Team reporting to the Emergency Operation Facility
- . Technical Support Center personnel reporting to the Technical Support Center
- . Operations Support Center personnel reporting to the Operations Support Center.
- . Shift Technical Advisor reporting to the Control Room
- . Watch H.P. and Chemist reporting to the Control Room unless otherwise notified

3.2.3.2 Announce over PA:

- a) "A _____ emergency has been declared. All non-watch personnel report to your Assembly Area". (repeat)

3.2.4 Dose Projection Calculations:

- a) Refer to IP-1002

4.0 PROCEDURE - NON NORMAL WORK HOURS

4.1 Notification of Unusual Event/Non-Radiological Alert (EP-Form #10)

4.1.1 Shift Supervisor

- a) Designates a communicator
- b) Determines which support centers should be activated, and initiates the call-in of Emergency Response Personnel as necessary.

4.1.2 Communicator

- a) Fill out the Radiological Emergency Data Form, EP-Form #8.
- b) Call security and request them to notify the Resident Manager, Superintendent of Power, Information Officer and the NYO Duty Officer using Part I of the Radiological Emergency Data Form (EP-Form #8) and Roster I (EP-Form #9)
- c) Call Con Edison Unit 2 Control Room:
 - i. Alert them to IP-3 conditions
 - ii. Request 1 RO immediately and if needed HP, Chem, I&C or Maintenance Techs. to report to the IP-3 Control Room.
- d) Notify offsite agencies within 15 minutes of declaration of the emergency using the Hot Line Telephone and Part I of the Radiological Emergency Data Form (EP-Form #8).
- e) Notify NRC Headquarters using the direct line telephone
- f) Notify the USNRC Resident Inspector
- g) Notify ANI at the Alert Classification and above.
- h) Using the Radiological Emergency Data Form, keep authorities (b,c,d,e,f & g) informed of significant changes (approximately every 30 minutes) - until the EOF is staffed and has taken over responsibility for offsite communications.
- i) Notify authorities (b,c,d,e,f & g) of a reduction or escalation in the Emergency Classification or Recovery Intention.
- j) Closeout to authorities (b,c,d,e,f & g).

4.1.3 Support Center Activation & Staffing (initiated by the Shift Supervisor)

4.1.3.1 Use the PA:

- a) "Shift Technical Advisor report to the Control Room"

4.1.3.2 If Technical Assistance alone is requested:

- a) Instruct Security (Command Post) to call-in Technical Support Center Personnel; Appendix A, Roster II.

or

4.1.3.3 If Operational and Technical Assistance is required:

- a) Determine which support areas are needed.
- b) Instruct Security (Command Post) to call-in as needed from the Off Hours Personnel Call-in List, Appendix A. Roster III sections A & B.
 - i. HP
 - ii. Chem
 - iii. Technical Support
 - iv. Operations
 - v. Maintenance
 - vi. I&C

or

4.1.3.4 If All Support Centers are to be activated:

- a) Instruct Security to call-in all personnel on the off-hours Personnel Call-in List, Appendix A, Roster III sections A & B.

4.0 PROCEDURE - NON NORMAL WORK HOURS (CONT'D)4.2 Radiological Alert/Site Area/General (use EP-Form #11)4.2.1 Shift Supervisor

- a) Designates a communicator
- b) Initiates sounding site evacuation alarm and activation of support centers.
- c) Initiates calculations for dose projection

4.2.2 Communicator

- a) Fill out the Radiological Emergency Data Form, EP-Form #8.
- b) Call IP-3 Security:
 - i. Alert them of emergency status
 - ii. Direct them to restrict access to the site
 - iii. Call Security (Command Post) and request them to notify the Resident Manager, Superintendent of Power, Information Officer and the NYO Duty Officer using Part I of the Radiological Emergency Data Form (EP-Form #8) and Roster I (EP-Form #9)
- c) Call Con Edison Unit 2 Control Room:
 - i. Alert them to IP-3 conditions
 - ii. Request offsite monitoring teams to report to the Emergency Operation Facility.
 - iii. Request 1 RO immediately and if needed H.P., Chem, I&C or Maintenance Techs. to report to the IP-3 Control Room.
- d) Notify offsite agencies within 15 minutes of declaration of the emergency using the Hot Line Telephone and Part I of the Radiological Emergency Data Form (EP-Form #8).
- e) Notify NRC Headquarters using the direct line telephone
- f) Notify the USNRC Resident Inspector
- g) Notify ANI
- h) Notify the U.S. Coast Guard if emergency is Radiological in nature and will impact Hudson River traffic.
- i) Notify Con Rail if emergency is Radiological in nature and will impact railroad traffic.
- j) Using the Radiological Emergency Data Form, keep authorities (b,c,d,e,f,g,h & i) informed of significant changes (approximately every 30 minutes) - until the EOF is staffed and has taken over responsibility for offsite communications.
- k) Notify authorities (b,c,d,e,f,g,h & i) of a reduction or escalation in the Emergency Classification or Recovery Intention.
- l) Closeout to authorities (b,c,d,e,f,g,h & i).

4.2.3 Evacuation Alarm and Support Center Activation:

4.2.3.1 Sounding Site Evacuation Alarm results in:

- . Shift Technical Advisor reporting to the Control Room
- . Watch H.P. and Chemist reporting to the Control Room unless notified to the contrary

4.2.3.2 Announce over PA:

- a) "A _____ emergency has been declared, all non watch personnel report to your Assembly Area". (repeat)

4.2.3.3 Support Center Activation:

- a) Instruct Security to call-in personnel from the Off-hours Personnel Call-in List, Appendix A, Roster III sections A & B.
- b) If the Emergency Director determines additional staffing is required, a listing of PASNY personnel by department can be found in Appendix A, Roster IV.
- c) If the Emergency Director determines additional staffing other than PASNY personnel is necessary, he may request Con Edison personnel by calling the Unit 2 Watch Supervisor.

4.2.4 Dose Projection Calculations

- a) Refer to IP-1002

NOTE:

There are 4 call-in rosters:

Roster I, PASNY Notification Telephone Numbers is a listing of those people to be called (notified) in the event of any Emergency Plan Emergency. This should be used in conjunction with the Radiological Emergency Data Form.

Roster II is the Technical Support Center staff and call-in listing.

Roster III, sections A & B is the minimum staff personnel required within 30-60 minutes of the declaration of Emergency. This Roster contains Department Heads, HP, Chem., Rad. Assessment, Technical Support Center, Emergency Operations Facility, Operations, Maintenance and I&C personnel.

Roster IV is a listing of PASNY personnel by department available for Call-in.

Roster III should be initiated if a Unit 2 emergency is declared and the Con Edison Watch Supervisor requests additional non-watch personnel from the PASNY Shift Supervisor. (This does not include those PASNY watch personnel who will be sent to Unit 2 immediately upon request; 1 RO, 1 Maintenance person, 1 I&C Tech, 1 HP or Chem. Tech.).

5.0 PROCEDURE - EOF COMMUNICATIONS (Use EP-Form #12)

5.1 EOF Communicator

- 5.1.1 Use "County Hot Line" (RECS) and Radiological Emergency Data Form (EP-Form #8) to notify offsite agencies.
- 5.1.2 Use direct line telephone to notify NRC Headquarters.
- 5.1.3 Notify the NRC Resident Inspector.
- 5.1.4 Notify ANI of significant change in plant status, recommendations to the public or change in emergency class.
- 5.1.5 Notify OSC, TSC, CR, LAO, Security re: plant status and emergency class reduction or escalation.
- 5.1.6 Notify adjacent businesses where appropriate, INPO and Brookhaven.
- 5.1.7 Establish communications with the Recovery Center at Corporate Headquarters and keep them advised of plant status.
- 5.1.8 Use Radiological Emergency Data Form to update authorities (5.1.1, 5.1.2, 5.1.3, 5.1.4) of significant changes (approximately every 30 minutes).
- 5.1.9 Notify authorities (5.1.1, 5.1.2, 5.1.3, 5.1.4) of reduction or escalation in the Emergency Classification or of Recovery Intention prior to declaring or entering the Recovery phase. Offsite officials should be notified and conferred with to assure all parties agree on the appropriateness of entering the long term recovery phase.
- 5.1.10 Closeout of authorities (5.1.1, 5.1.2, 5.1.3, 5.1.4).

5.2 Radiological Assessment Team Communicator

- 5.2.1 Establish communications with Onsite and Offsite Monitoring Teams.
 - a) Dispatch teams to appropriate locations or Determine locations of teams if dispatched by CR.
 - b) Plot Plume
 - c) Advise teams of plant status: location, direction, and speed of plume; projected rad. levels,.
 - d) Instruct as to type & location of sampling, surveying to be done.
 - e) Record survey data from teams.
 - f) Repeat all incoming messages.

- g) Provide RAT with survey data.
- h) Remind teams to check dosimeters.
- i) Insure teams are not left in high rad. fields.

5.2.2 Establish communication with OSC, H.P., Chemistry to do dose accountability.

5.2.3 Interrogate Ludlum Monitors.

6.0 TRANSFER OF COMMUNICATION RESPONSIBILITIES IF ALTERNATE EOF IS ACTIVATED

- 6.1 If the decision is made to relocate to the Alternate Emergency Operation Facility (AEOF), the Emergency Director will notify the Control Room and request that the Plant Operations Manager assume Emergency Director control and communication activities. The Plant Operation Manager, after assuming the role of the ED, should then assure the following positions are assigned: Communicator and Radiological Assessment Team Leader. The flowchart for EOF communications (IP-1030) should be used by the POM (ED) and his staff during this transition period. When the EOF has been established and can resume these responsibilities, the Emergency Director at the AEOF will notify the Control Room (POM) and will again assume ED control and communication activities.

7

RADIOLOGICAL EMERGENCY DATA FORM

PART I - GENERAL INFORMATION

CR Roll Call:

☐ Westchester
☐ Peekskill
☐ Rockland
☐ Orange
☐ Putnam
☐ NY State

☐ Coast Guard
☐ Con Rail
☐ ANI

1. Date and Time of Message Transmittal:

_____ / _____
 Date Time (24 hr clock)

2. Nuclear Facility providing the initial report:

<input type="radio"/> A	Indian Pt. No. 2	<input type="radio"/> E	Fitzpatrick Plant
<input type="radio"/> B	Indian Pt. No. 3	<input type="radio"/> F	Shoreham Station
<input type="radio"/> C	Ginna Station	<input type="radio"/> G	Other _____
<input type="radio"/> D	Nine Mile Pt. Unit 1		

3. Reported by:
- ☐
- A _____,
- ☐
- B _____
-
- Name Title

4. This
- ☐
- A is
- ☐
- B is NOT, an exercise.

5. Emergency Classification:

<input type="radio"/> A	Unusual Event	<input type="radio"/> C	Site Area Emergency
<input type="radio"/> B	Alert	<input type="radio"/> D	General Emergency

6. This classification occurred at _____, _____
-
- Date Time (24 hr clock)

7. Brief Event Description/Initiating Condition: _____
-
- _____
-
- _____

8. There:

☐ A has NOT been a release of radioactivity
☐ B has been a release of radioactivity to the ATMOSPHERE
☐ C has been a release of radioactivity to a BODY OF WATER _____
☐ D has been a GROUND SPILL release of radioactivity

9. The release:
- ☐
- A is continuing
- ☐
- C is intermittent.
-
- ☐
- B has terminated
- ☐
- D not applicable

10. Protective Actions:

☐ A There is NO need for protective actions outside the site boundary.
☐ B Protective Actions are under consideration.
☐ C Recommended Protective Actions:

➡ Shelter within _____ miles/or _____ sectors/or ERPA's.
 ➡ Evacuate within _____ miles/or _____ sectors/or ERPA's.

11. Weather:

☐ A Wind Speed _____ miles per hour or _____ meters per second
☐ B Direction (from) _____ degrees.
☐ C Stability Class (A-G) _____
☐ D General Weather Conditions (if available) _____

RADIOLOGICAL EMERGENCY DATA FORM

PART II - RADIOLOGICAL ASSESSMENT DATA

Date _____ Time _____

12. Prognosis for Worsening or Termination of the Emergency: _____
13. In Plant Emergency Response Actions Underway: _____
14. Utility Off-Site Emergency Response Action Underway: _____
15. Release Information

(A) ATMOSPHERIC RELEASE	<u>Actual</u>	<u>Projected</u>
Date and Time Release Started	_____	_____
Duration of Release	hrs	hrs
Noble Gas Release Rate	Ci/sec	Ci/sec
Radioiodine Release Rate	Ci/sec	Ci/sec
Elevated or Ground Release	_____	_____
Implant Monitors	_____	_____

(B) WATERBORNE RELEASE		
Date and Time Release Started	_____	_____
Duration of Release	hrs	hrs
Volume of Release	gal	gal
Radioactivity Concentration (gross)	uCi/ml	uCi/ml
Total Radioactivity Released	Ci	Ci
Radionuclides in Release	uCi/ml	uCi/ml
	uCi/ml	uCi/ml
	uCi/ml	uCi/ml
Basis for release data e.g. effluent monitors, grab sample, composite sample and sample location:	_____	

16 Dose and Measurements and Projections

(A) SITE BOUNDARY	<u>Actual</u>	<u>Projected</u>
Whole Body Dose Rate	mR/hr	mR/hr
Whole Body Commitment (for duration above)		Rem
Thyroid Dose (1 hr. exposure)	mRem	mRem
Thyroid Dose (Total Commitment)		Rem

(B) PROJECTED OFFSITE	<u>2 Miles</u>	<u>5 Miles</u>	<u>10 Miles</u>
Whole Body Dose Rate (mR/hr)	_____	_____	_____
Whole Body Dose (Rem)	_____	_____	_____
Thyroid Dose Commitment	_____	_____	_____
(1 hr Exposure) (mRem)	_____	_____	_____
Thyroid Dose	_____	_____	_____
(Total Commitment) (Rem)	_____	_____	_____

17. Protective Action Recommendations and the basis for that recommendation:

RADIOLOGICAL EMERGENCY DATA FORM

PART III - IP-3 PLANT PARAMETER DATA

Date _____

Time _____

MAJOR PARAMETERS

18. RCS pressure _____
19. RCS temperature _____
20. Reactor Shutdown (Y/N) _____
21. Natural/Forced circulation _____
22. Pressurizer level _____
23. S/G levels #31 _____% #33 _____%
#32 _____% #34 _____%
24. Off-site/On-site power available _____
25. Containment Pressure _____
26. Containment Temperature _____
27. RCS Subcooled/Saturated _____
psig Subcooled _____
28. VC Sump Level _____
29. RWST Level _____
30. CST Level _____

MODES OF SAFETY INJECTION (circle modes in use)

31. Passive Injection - Accumulators
32. High Head Injection
33. Low Head Injection

MODES OF RECIRCULATION

(circle modes in use)

34. Low Head Recirculation - Recirc Pumps
- RHR Pumps
35. High Head Recirculation -
- Recirc Pumps to S.I. Pumps
- RHR Pumps to S.I. Pumps
36. Hot Leg Recirculation - Recirc Pumps
- RHR Pumps

STATUS OF ENGINEERED SAFEGUARDS EQUIP.
(circle those in use)

37. Containment Spray - VC Spray Pumps
Recirculation Mode
38. Containment Fan Cooler units -
31, 32, 33, 34, 35
39. Auxiliary Feed Pumps - 31, 32, 33
40. VC Phase A Isolation Complete
Yes / No
41. VC Phase B Isolation Complete
Yes / No
42. VC Ventilation Isolation Complete
Yes / No
43. CR Ventilation Isolation Complete
Yes / No
44. Emergency Diesel Generators -
(31, 32, 33)
Running/Loaded/Secured/OOS

RADIOLOGICAL MONITORS

Plant Vent:

45. R-13 (particulate) _____
46. R-14 (gaseous) _____
47. RM-16 (High Range gas) _____

Area Monitors:

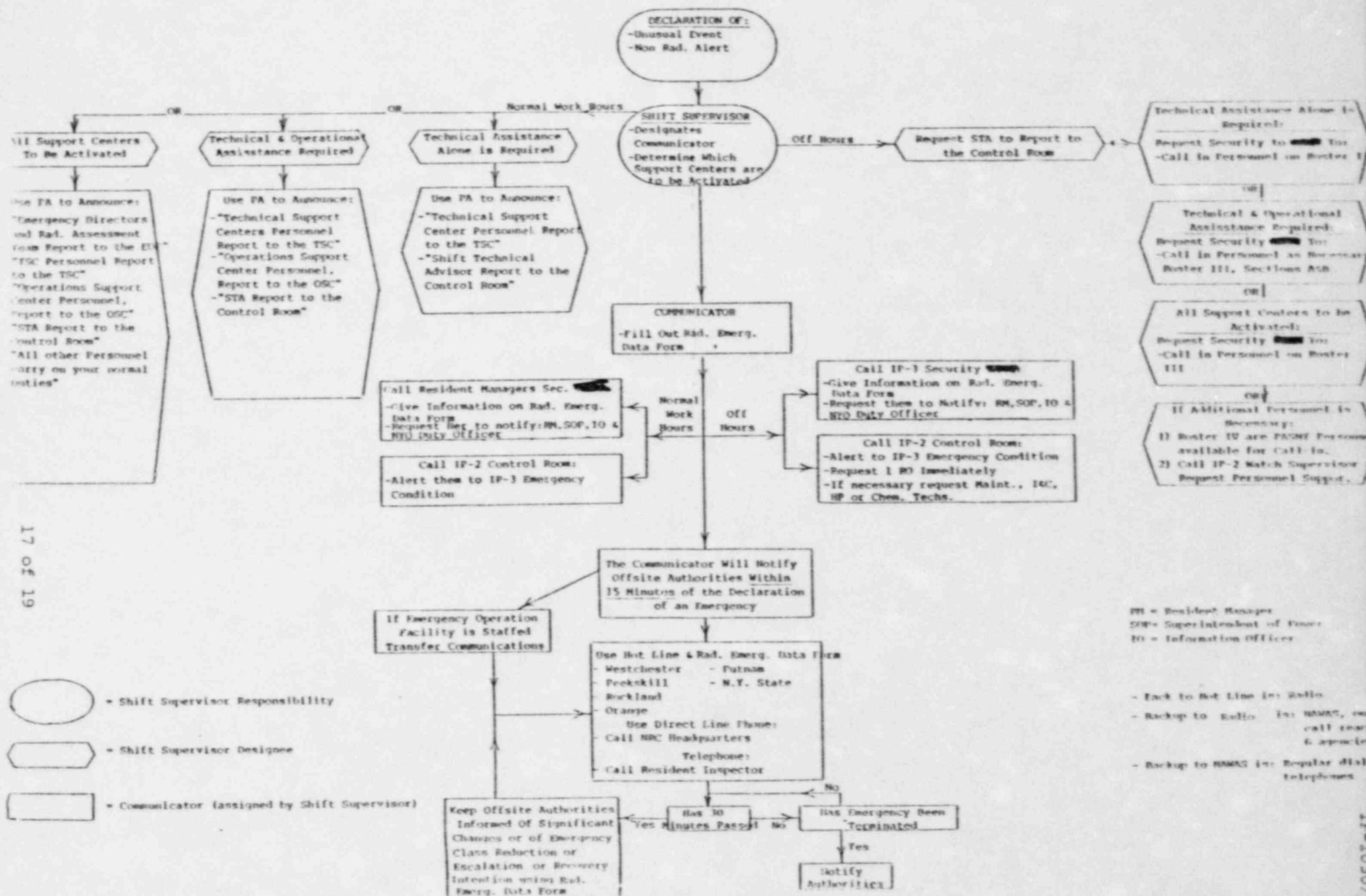
48. R-2 Containment _____
49. R-7 Containment _____
50. R-10 Accident Monitor
(Steamline penetration _____)
51. Containment High Range Monitor

Additional Monitors of Importance:

TELEPHONE #15

TELEPHONE #'S

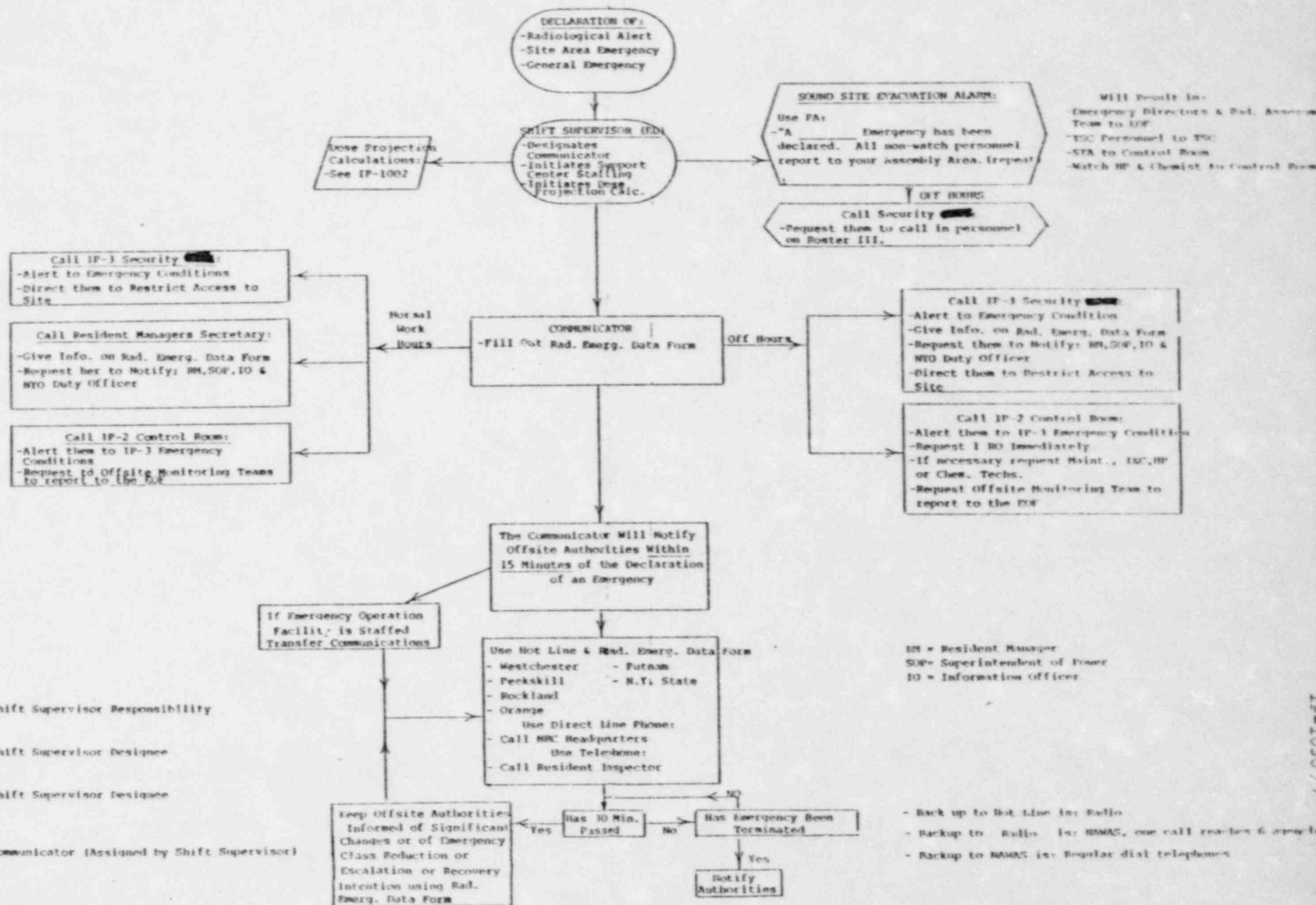
NOTIFICATION-COMMUNICATION-STAFFING
NON-RADIOLOGICAL EMERGENCY
 CONTROL ROOM PROCEDURAL FLOW CHART



NOTIFICATION-COMMUNICATION-STAFFING

RADIOLOGICAL EMERGENCY

Control Room Procedural Flow Chart



10075-19

RADIOLOGICAL EMERGENCY
EDF PROCEDURAL FLOW CHART

NOTE: If a move to the AEDF is necessary transfer these communication activities to the Control Room under the direction of the NRI.

- * Back up to Hot Line is Radio
- * Back up to Radio is NAWAS
- Back up to NAWAS is regular dial telephone

- ** Make the initial Notification to ANI at the Alert or Above classification. Follow-up notifications are only necessary for significant plant status changes, change in emergency class, when recommendations to public are made, or closeout.

DECLARATION OF:
-Radiological Alert
-Site Area Emergency
-General Emergency

SHIFT SUPERVISOR (ED)
Notify Emergency Director
and Rad. Assessment Team
to report to EDF via:
-P.A. System (Normal Work Hrs.)
-Security (off Hrs.)

When staffed, EDF
assumes control and
communications

Contact Control
Room for Plant
Status

EDF Communicator

Rad. Assessment
Team Communicator

Interrogate
Ludlum Monitors;
Record & Plot Data

Use Hot Line* & Rad. Emerg.
Data Form.
-Westchester -Putnam
-Peekskill -Orange
-Rockland -N.Y. State

-Call NRC Headquarters
-Call Resident Inspector
-Call ANI**

Notify: OSC, TSC, CR, LAO
Security Re: Plants Status
and Emergency Class.
reduction or escalation or
Recovery Intention. Etab.
Communications with Recovery
Center and keep advised of
status.

Notify: INFO
Brookhaven
Adjacent Businesses

Etab. Communications
with Onsite Monitoring
Teams

Etab. Communications
with Offsite Monitoring
Teams

Etab. Communications
with OSC, HF, Chemistry
to do done accountability

-Dispatch teams to appropriate
locations or
-Determine locations of teams if
dispatched by C.R.
-Plot Plume
-Advise teams of plant status:
location, direction and spread of
plume; projected rad. levels
-Instruct as to type & location
of sampling, surveying to be done
-Record survey data from teams
-Repeat all incoming messages
-Provide RAT w/survey data
-Remind teams to check dosimeters
-Insure teams are not left in high
rad. fields

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-Advise teams of plant status:
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plume; projected rad. levels
-Instruct as to type & location
of sampling, surveying to be done
-Record survey data from teams
-Repeat all incoming messages
-Provide RAT w/survey data
-Remind teams to check dosimeters
-Insure teams are not left in high
rad. fields.

Have 30 Min.
Passed?

No

NO

Has Emergency been
Terminated?

Yes

Notify Authorities

Yes

Keep Offsite Authorities
informed of significant
changes or of Emergency
Class Reduction or Escalation
or Recovery Intention.
Rad. Emerg. Data Form

19 OF 19

1000/7

POWER AUTHORITY OF THE STATE OF NEW YORK

INDIAN POINT NO. 3 NUCLEAR POWER PLANT

P. O. BOX 215 BUCHANAN, N. Y. 10511

TELEPHONE 914-739-8200



EMERGENCY PLAN PROCEDURES

PROCEDURE NO. IP- 1034

REV. 3

TITLE: NOTIFICATION AND RECOMMENDATIONS TO U.S. COAST GUARD & RAILROAD

WRITTEN BY: David W. Bell
REVIEWED BY: [Signature]
PORC REVIEW JAS. [Signature] DATE 12/1/82
APPROVED BY: John H. [Signature] DATE 12/1/82
EFFECTIVE DATE 12-27-82

NOTIFICATION AND RECOMMENDATIONS TO U.S. COAST GUARD & RAILROAD1.0 INTENT

To describe the notification and recommendations given to the Coast Guard and/or the Railroad when an emergency with potential Radiological hazards (Alert, Site or General) occurs at the Indian Point Site.

2.0 DISCUSSION

It is the responsibility of the Control Room to initially notify the U.S. Coast Guard and/or Railroad whenever an Alert, Site or General Emergency with Radiological consequences is declared at the Indian Point Site which might effect the Hudson River traffic or the railroads near the plant. However, recommendations regarding evacuation of River traffic and/or restriction to rail traffic and further dose assessment of the accident shall be done by the Radiological Assessment Team Leader (RATL) or his designee.

3.0 PROCEDURE FOR COAST GUARD

- 3.1 Evaluate the radiological effect the emergency will have on the Hudson River. Wind direction of 330° to 220° will place the Hudson in the critical path of Noble Gases and Iodines. Determine:

a) Whole body exposure

b) Thyroid exposure

- Use the site boundary calculations which may travel to the Hudson as guidance (IP-1002).

- 3.2 Call the U.S. Coast Guard Operations Duty Officer at [REDACTED] Notify him of the emergency, radiological effect on the Hudson River, and give him the following recommendations for traffic control.

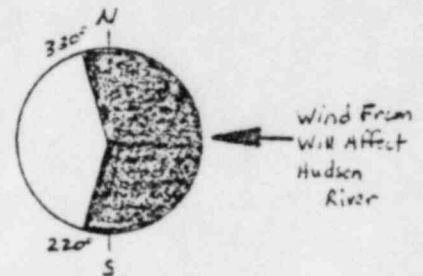
3.2.1 No radiological effect - river not involved in plume

a) Traffic may proceed normally

3.2.2 Radiological effect - river involved in plume

a) Ships - Halt southbound traffic at West Point and northbound traffic at the Tappan Zee Bridge.

b) Boats - Clear the area of the Hudson River between the Tappan Zee Bridge and West Point.



- 3.3 Evaluate the potential whole body and thyroid exposure to Coast Guard personnel aboard vessels passing the site enroute to duty and advise them. This is arrived at by considering the following:

- Concentration of Noble Gases and Iodines in the air.
- Conversion of concentrations to exposure rates (see IP-1002).
- Length of time of exposure to complete assignment.

EX: Iodine-131 concentration is 1×10^{-7} uCi/cc
for a one mile section of the river by the site.
This would give a thyroid exposure to personnel
aboard the cutter of 70 mrem/hr or 1.17 mRem/min.
With a vessel traveling at 10 knots there would be
an exposure of approximately 5.2 minutes, equivalent
to about 6 mrem. (1kt = 1.151 mi/hr)

- 3.4 Inform the Coast Guard on the direction of the radioactive plume and suggest to them the direction and distance they should fly their helicopter when approaching and passing the site. (The helicopter would be used by the Coast Guard to notify ships without radio communication of the need to clear the area).
- 3.5 Inform the Coast Guard that there is no need for them to put personnel ashore at the site and you recommend that they do not because of radiological conditions.
- 3.6 If and when the above evaluations change due to meteorological conditions and/or radiological conditions notify the Operations Duty Officer in order that he might re-direct his forces.

4.0 PROCEDURE FOR RAILROAD

- 4.1 Evaluate the radiological effect the emergency will have on the Railroad lines surrounding Indian Point (0-360°).
- 4.2 If radiological conditions may affect the rail line on the east side of the river, call [REDACTED]. If the west side of the river is affected, call [REDACTED]. Inform the Dispatcher of the problem and make your recommendation as to stopping rail traffic from nearing or passing through the Indian Point vicinity.

***** = Railroad



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POWER AUTHORITY OF THE STATE OF NEW YORK
INDIAN POINT NO. 3 NUCLEAR POWER PLANT
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EMERGENCY PLAN PROCEDURES

PROCEDURE NO. IP- 1038

REV. 4

TITLE: USE OF THE EMERGENCY COMMUNICATIONS SYSTEMS

WRITTEN BY: [Signature]

REVIEWED BY: [Signature]

PORC REVIEW J.A. Schinera DATE 12-21-82

APPROVED BY: [Signature] DATE 12/27/82

EFFECTIVE DATE 12-27-82

USE OF THE EMERGENCY COMMUNICATIONS
SYSTEMS (RADIOLOGICAL EMERGENCY DATA FORMS & COUNTY HOT LINE, RADIO & NAWAS)

1.0 INTENT

This procedure is intended to describe the use of, operation procedures for, and the testing of the Radiological Emergency Communications System ("County Hot Line"), the State and County radio system and the National Warning System (NAWAS).

2.0 DISCUSSION

The "County Hot Line" is the primary means of notification & communication to Westchester, Rockland, Orange and Putnam Counties, the City of Peekskill and New York State Department of Health in the event an Unusual Event, Alert, Site Area or General Emergency is in process at IP-3. The State and County radio system is the backup to the County Hot Line, NAWAS and regular dial telephones are also back up communication systems for offsite notifications.

Radiological Emergency Data Forms are described in Section 3.0 are used to communicate pertinent information offsite during emergencies. The data form method of communicating data is the same whether the Hot Line, Radio, NAWAS or regular dial telephones are used.

3.0 PROCEDURE FOR USE OF THE RADIOLOGICAL EMERGENCY DATA FORM

3.1 The Radiological Emergency Data Form is to be used when reporting any Emergency Plan emergency. It can be found in IP-1030 or in the Book of Forms.

3.2 The Radiological Emergency Data Forms consists of three (3) parts:
Part I : General Information
Part II : Radiological Assessment Data
Part III: Plant Parameter Data

3.3 Instructions to use Radiological Emergency Data Forms over County Hot Line:

\ Part I, General Information: should be relayed initially to the warning points, and thereafter to the EOC's.

Part II, Dose Assessment Data: should only be relayed to the EOC's; warning points do not have this Part II.

Part III, Plant Parameter Data: should only be relayed to the EOC's; warning points do not have this Part III.

3.4 The Control Room has the responsibility to initially fill out Part I of this form, and communicate this to persons in Section 3.5 below.

3.5 Persons who ultimately should have the information on the Radiological Emergency Data Form are:

PASNY

Resident Manager
 Superintendent of Power
 Information Officer
 Nuclear Operations Duty Officer

NRC

NRC (ENS)

Resident Inspector

OFFSITE (Use County Hot Line Phone)
(or County Radio)

Westchester County
 Rockland County
 Orange County
 Putnam County
 City of Peekskill
 New York State Department of Health

The NRC and the NRC Resident Inspector should be given similar information although the use of the Radiological Emergency Data Form is not required.

3.6 When using the Radiological Emergency Data Form, information transfer should be accomplished in the following manner.

- a) State your intention of using the Radiological Emergency Data Form (Part ____).
- b) Begin giving information - examples follow:

State: "1. Date and time of message transmittal:
 Date _____, Time _____"
 24 hr. clock

"2B, This is Indian Point No. 3"

"3A, This is _____, B _____"
 (your name) (your title)

"4A, This is an exercise"

or

"4B, This is not an exercise" etc...

If certain statements are not applicable, tell the receivers to skip appropriate number(s).

Example: State: Skip 9
 Skip 10

4.0 PROCEDURE FOR USE OF THE HOT LINE

4.1 The County Hot Line is labeled, is red, has a "red eye" (lit when in use), and has a ring button.

4.2 Designated communicator will depress ring button and release. After ring stops, operator will pick up handset and announce: "THIS IS TO REPORT AN INCIDENT AT INDIAN POINT NO. 3. STAND BY FOR ROLL CALL."
 (Conduct roll call to include the following stations:)

_____ "Westchester County Warning Point"
 _____ "Peekskill City Warning Point"
 _____ "Rockland County Warning Point"
 _____ "Orange County Warning Point"
 _____ "Putnam County Warning Point"
 _____ "NYS Warning Point" (ODP during duty hours, State Police during non-duty hours)

- 4.3 Upon completion of roll call, operator will give information outlined on Radiological Emergency Data Form, Part ____.
- 4.4 Operator will again call roll, by saying, "(NAME OF STATION) did you copy?"
- 4.5 Operator will sign off by saying, "INDIAN POINT NO. 3 out at (TIME) and (DATE)."
- 4.6 Operator will record dissemination of information on log.
- 4.7 IN THE EVENT A COUNTY WARNING POINT STATION DOES NOT ANSWER ROLL CALL, LICENSEE OPERATOR WILL PROCEED WITH INFORMATION, ODP SOUTHERN DISTRICT (DURING DUTY HOURS) OR STATE WARNING POINT (DURING NON-DUTY HOURS) WILL BE RESPONSIBLE TO NOTIFY NON-ANSWERING STATION AND GIVE REQUIRED INFORMATION.
- 4.8 After EOC's are staffed and Part II and III are being used, it may be advantageous to provide this information in parallel via telecopier as well as the Hot Lines to the EOC's.

Note #1: During duty hours, the following stations may be active to receive information:

NYS Health Department (Radiological Health)
 NYS ODP Radiological (State EOC)
 NYS ODP Southern District
 Westchester County Disaster and Emergency Services
 Rockland County EOC
 Orange County EOC
 Putnam County EOC

These stations do not have to be present on telephone before licensee operator begins message information. If these stations want repeat of information, State Warning Point will comply.

Note #2: During non-duty hours, the State Police will notify and give information to personnel listed on notification lists maintained by the State Health Department and State ODP via commercial phone. State ODP will notify and give information to ODP Southern District in accordance with its notification procedures via commercial phone.

5.0 PROCEDURE FOR THE USE OF THE COUNTY RADIO

5.1 Designated communicator will pick up handset and announce:

" THIS IS TO REPORT AN INCIDENT AT INDIAN POINT NO. 3. STAND BY FOR ROLL CALL."

(Conduct roll call to include the following stations:)

_____"Westchester County Warning Point"
 _____"Peekskill City Warning Point"
 _____"Rockland County Warning Point"
 _____"Orange County Warning Point"
 _____"Putnam County Warning Point"

- a) Direct them to the Radiological Emergency Data Form, Part I, General Information, and transmit applicable information.
- b) Operator will again call roll, by saying, "(NAME OF STATION) did you copy?"
- c) Operator will sign off by saying, "INDIAN POINT NO. 3 OUT AT (TIME) and (DATE)."
- d) Operator will record dissemination of information on log.

5.2 New York State must be notified separately. To accomplish this use the microwave line ~~XXXXXXXXXX~~

- a) and call the N.Y.S. Warning Point. Identify it as an emergency call and report information on Radiological Emergency Data Form.

6.0 PROCEDURE FOR USE OF NAWAS FOR INITIAL NOTIFICATION OF AN EMERGENCY

6.1 Designated Communicator will:

- a) Listen to determine that the Westchester County Warning Point is not participating in any transmission.
- b) Depress the handset switch and announce "This is Indian Point No. 3 calling: Westchester, Putnam, and City of Peekskill Warning." You will be answered by receiving "Westchester, Putnam and City of Peekskill Warning."
- c) Direct them to the Radiological Emergency Data Form Part I, General Information, and transmit applicable information.
- d) Warning points will acknowledge message and will conclude by saying "_____ Warning Point."
- e) Terminate transmission by saying "Indian Point off at _____ hours."
- f) Operator will record dissemination of information on log.

6.2 Westchester County Warning Point will transmit message and information on Radiological Emergency Data Form to New York State Warning Point. Orange and Rockland Counties will hear this transmission. New York State Warning Point and Orange County will acknowledge receipt of message to Westchester County Warning Point.

6.3 Orange County will call Rockland County by telephone to assure Rockland has received the message (Rockland County is not on the transmission loop therefore they can not be heard, however they can receive messages.)

6.4 New York State Warning Point will assure that the New York State Department of Radiological Health is notified.

6.5 New York State will telephone IP-3 for verification on ~~XXXXXXXXXX~~.

7.0 PROCEDURE FOR INITIAL NOTIFICATION WHEN COUNTY HOT LINE AND NAWAS ARE NOT WORKING

- 7.1 Using regular telephones call: Westchester, Putnam, Rockland, Orange, City of Peekskill and New York State Warning Points. Telephone numbers are found in Appendix B listed as "Offsite Notification & Communication Telephone Numbers.

8.0 TESTING FOR THE COUNTY HOT LINE (RADIOLOGICAL EMERGENCY COMMUNICATIONS SYSTEM, RECS)

- 8.1 New York State Warning Point (NYSWP) will initiate test.

- 8.2 Test Schedule - Tests will be conducted bi-weekly on Tuesdays preceding the bi-weekly NAWAS tests according to the following:

- A) Indian Point at [REDACTED].
- B) Test schedules will be issued by NYSWP.
- C) Unannounced tests will be conducted as necessary.

- 8.3 New York State Warning Point will announce: "THIS IS A TEST. REPEAT. THIS IS A TEST. This is NYS WARNING POINT calling all stations. Stand by for roll call."

8.4 SEQUENCE OF ROLL CALL:

Indian Point Unit #2 Control Room
 Indian Point Unit #3 Control Room
 Indian Point Emergency Operations Facility
 Westchester County Warning Point
 Westchester County Disaster and Emergency Services
 Westchester County EOC
 Peekskill City Warning Point
 Rockland County Warning Point
 Rockland County EOC
 Orange County Warning Point
 Orange County EOC
 Putnam County Warning Point
 Putnam County EOC
 NYS ODP Southern District
 NYS Department of Health (Radiological Health)
 NYS Division of State Police (Alternate State Warning Point)
 NYS ODP Radiological (State EOC)

- 8.5 All stations will lift up handset and answer roll call after hearing ring and its station name over loudspeaker by saying, "(NAME OF STATION) TEST." (DO NOT LIFT UP HANDSET UNTIL YOUR STATION IS CALLED.)
- 8.6 After completing roll call, NYSWP will recall all stations not answering, saying, "NYS WARNING POINT recalling (NAME OF STATION NOT ANSWERING)." (NAME OF STATION RECALLED) will answer using terminology in 7.5 above.
- 8.7 NYSWP will sign off by saying, "END OF TEST, NYS WARNING POINT out at (TIME) LOCAL and (DATE)."
- 8.8 All stations will log results.

- 8.9 All stations not answering initial test will be called on commercial telephone by NYSWP for reasons. The location having problems should report problems immediately to the

trouble number: [REDACTED]
report: [REDACTED] failed, and location of problem
[REDACTED]

- 8.10 If circuit failures occur, the station that has failure will call by commercial telephone, NYSWP and appropriate County Warning Point(s) and report outage and time when back in service. (See Appendix B for numbers).

9.0 TESTING FOR NAWAS

- 9.1 A bi-weekly test conducted on Tuesdays at approximately [REDACTED].
- 9.2 The Southern District Office of Disaster Preparedness will conduct test.
- 9.3 Messages are to be logged.
- 9.4 Test is acknowledged by saying "Indian Point No. 3."
- 9.5 If equipment failure occurs, station with problem should report malfunction to [REDACTED]. Circuit number for IP-3 Control Room [REDACTED].
- 9.6 If failure occurs, station that has failure will call by commercial telephone, Westchester County Warning Point and report outage.
- 9.7 When malfunction is corrected, report to Westchester County Warning Point via the NAWAS phone.

POWER AUTHORITY OF THE STATE OF NEW YORK

INDIAN POINT NO. 3 NUCLEAR POWER PLANT

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EMERGENCY PLAN PROCEDURES

PROCEDURE NO. IP- 1040

REV. 5

TITLE: HABITABILITY OF THE EMERGENCY FACILITIES

WRITTEN BY: L. J. Brown

REVIEWED BY: David D. Bell

PORC REVIEW JAS DATE revised

APPROVED BY: J. P. B. DATE 12-27-82

EFFECTIVE DATE 12-27-82

HABITABILITY OF THE EMERGENCY FACILITIES

1.0 INTENT

To describe the necessary checks to determine if the radiological conditions of the Emergency Operations Facility (EOF), the Technical Support Center (TSC) and Operations Support Center (OSC) are such that a move to their alternates is required.

2.0 PROCEDURE FOR THE EOF:

- 2.1 The Emergency Director, or the Radiological Assistant Team Leader upon arrival at the EOF, will immediately call the Unit No. 3 Control Room to confer with the Shift Supervisor on whether or not the EOF has been involved in the plume since the start of the emergency, and if so, for how long.
- 2.2 Interrogate the Meteorological system at the EOF to determine if the meteorological conditions have prevailed for the past hour.
- 2.3 Follow guidance in section 3.0.
- 2.4 The EOF will be considered tenable after careful consideration of the following:
 - 2.4.1 Radiation fields inside and outside the EOF.
 - 2.4.2 Meteorological Conditions at the time
 - a) Plume direction
 - b) Atmospheric Stability
 - c) Weather forecast obtained from the National Weather Service at ██████████
- 2.5 If the decision is made to relocate to the Alternate Emergency Operation Facility (AEOF), the Emergency Director will notify the Control Room and request that the Plant Operations Manager assume Emergency Director control and communication activities. The POM, after assuming the role of the ED, should then assure the following positions are assigned: Communicator and Radiological Assessment Team Leader. The Flowchart for the EOF communications (IP-1030) should be used by the POM (ED) and his staff during this transition period. When the AEOF has been established and can resume those responsibilities, the Emergency Director at the AEOF will notify the Control Room (POM) and will again assume ED control and communication activities.

3.0 PROCEDURE FOR THE EOF, TSC, AND OSC

- 3.1 The Emergency Locker should be unlocked.
- 3.2 If the emergency is one where radiological conditions are expected, the radiation monitoring equipment should be put in use immediately.
- 3.3 An initial survey should be made for beta and gamma fields, and results recorded in the log book.

- 3.4 If at the EOF perform beta and gamma surveys outside the building. Record readings in the log book.
- 3.5 After the initial survey, an H.P. technician may be contacted (through the OSC) to discuss and/or set up further monitoring equipment.
- 3.6 The results of the radiation surveys are to be analyzed, and an evaluation of potential radiation hazard is to be made by Radiological Assessment personnel, Health Physics personnel or the Facility supervisor.
- 3.7 Check Radiological conditions frequently and record all readings in log book.
- 3.8 Monitoring for personnel should be in accordance with IP-1041.

4.0 HABITABILITY GUIDANCE

Various factors and conditions must be considered when deciding on the Habitability of the Operation Facilities and Centers. Whole body, beta and iodine doses must be measured and evaluated along with the accident conditions and circumstances.

The basic factor to consider is whether or not the accident is under control: is the radiological release terminated? or will stop it shortly? or, is the release expected to continue for hours or days? The duration of expected release, along with advantages and disadvantages of moving, must be considered. The following is offered as general guidance:

4.1 Whole Body and Beta Doses

Fields	Considerations	Maximum acceptable total dose for a 10 hr. release	
		WB	β *
10 mR/hr	move if feasible	100 mR	300 mR
100 mR/hr	move if at all possible	1000mR	3000mR
500 mR/hr	move	5000 mR	15000 mR

* β = 3 x WB rather than 6 x WB
because the lens of the eye has
been factored into the calculation.

4.2 Iodine Doses

From the Iodine sample taken the concentration of I-131 can be determined and from this the dose of I-131 is determined.

$$\text{Dose} = \text{Concentration} \times 1.5 \times 10^6 \times \text{hr breathed} = \text{Rem thyroid}$$

If the dose is 1 R or greater, distribution of KI should be considered.
If the dose is $\geq 5 \rightarrow 25\text{R}$ KI should be given.

If doses are greater than 25R give KI and re-evaluate the dose to the thyroid on that basis. Then make the determination of whether or not to evacuate the facility or center and relocate.

- 4.3 The Radiological Assessment Team should be consulted for recommendations and dose projections prior to any relocation of the Operation Facilities.