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UNITED STATES OF AMERICA
NUCLEAR REGULATORY COMMISSION

ATOMIC SAFETY AND LICENSING BOARD

In the Matter of) Docket Nos. 50-361-OL
) 50-362-OL
SOUTHERN CALIFORNIA EDISON)
COMPANY, ET AL.) INTERVENORS COMMENTS RE-
) GARDING OFF-SITE MEDICAL
(San Onofre Nuclear Generating) SERVICES; OBJECTIONS TO
Station, Units 2 and 3)) APPLICANTS MOTION TO
) AUGMENT RECORD; REQUEST
) FOR HEARING AND PROPOSED
) LICENSING CONDITION
)

INTRODUCTION

On April 5, 1983 by Memorandum and Order CLI-83-10 the Commission provided a guideline of what arrangements for off site medical services are required under 10 CFR 50.47(b)(12) (the "rule"). The Licensing Board by conference call on April 11, 1983 and subsequent order dated April 12, 1983 requested that the parties to this proceeding submit their comments with respect to what further action this Board need take to address this issue. Intervenors respectfully submit these comments.

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ANALYSIS OF THE COMMISSION'S DECISION.

The Commission issued a detailed memorandum regarding the medical arrangements rule which rejected the Applicants' interpretation that the rule excluded members of the general public. The Commission expressly stated in its conclusion on page 13 of the Slip Opinion that this emergency planning rule applies to both those people who become injured and who are also contaminated and to those people who may be exposed to dangerous levels of radiation. In doing so the Commission accepted in part the reading of the rule offered by the Intervenor and this Licensing Board. The Commission then set forth what specific arrangements are necessary to protect the general public in this area. The Commission stated that with respect to the contaminated and injured individuals of the general public that the pre-existing arrangements for on-site workers should be enough, if and when those arrangements are made known and incorporated within the plans of the off-site jurisdiction. With respect to the people who are seriously contaminated the Commission has determined that no immediate emergency action need be taken and therefore a simple listing of available resources in the off-site jurisdiction's plans should be sufficient to allow for an ad hoc treatment of these people.

The Commission indicates at page 13 of its Slip Opinion that this position is consistent with the FEMA position and it implies that the FEMA position is not entirely clear. I would submit that in fact it is the Commission's decision that is less than

1 clear.

2 On the one hand the Commission says that the rule embraces
3 the general public and on the other hand, it essentially says
4 that any arrangements are always going to be adequate. It is
5 very hard to understand how it can be determined whether the "ad
6 hoc" arrangements will be adequate without iteration of various
7 plans and without a showing of evidence. Hence, a rational
8 reading of the Commission's order is that individual hearings are
9 necessary to determine with respect to this site whether the "ad
10 hoc" measures available at that site will be adequate. Obviously,
11 if there were no hospitals at all which had the capability to
12 take up and deal with nuclear patients that would have to be
13 inadequate.

14 The Commission in its analysis uses in many places the word
15 "could" and states that "treatment could be arranged on an ad hoc
16 basis". Slip Opinion at Page 12. Or that adequate medical
17 services "could be provided by using existing local or regional
18 facilities". Slip Opinion at Page 12. It is the responsibility
19 for the Licensing Board to determine whether in any specific case
20 there is reasonable assurance that this can and will happen.
21 10 CFR 50.47(a).

22 It is submitted that the Commission's rule indicates that
23 the following must be done:

24 (1) A detailed analysis must be made of the Applicants'
25 ability to treat on-site workers to determine whether that is
26 adequate, in light of the fact that that capability must also
27 include the capability to aid off-site people who may be injured
28 and contaminated.

1 (2) The capabilities and contractual relationships with
2 the hospitals for the contaminated and injured people should be
3 made known to and incorporated within the plans of the off-site
4 jurisdictions.

5 (3) A detailed survey of hospitals in the area which
6 can provide care for seriously contaminated individuals should be
7 made and a list of such hospitals should be incorporated into the
8 response plans of the local jurisdictions and the Applicant.

9 (4) Implementing procedures and SOP's should be
10 developed by the off-site emergency response organizations for
11 sending people to the various hospitals in a rational manner
12 based on their capacities and locations in the event of a
13 radiological emergency with seriously contaminated individuals.

14 (5) The Licensing Board should review the overall state
15 of off-site facilities and implementing procedures to determine
16 whether or not they can serve as an adequate basis for "ad hoc"
17 response in the event of a radiological emergency.

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19 II

20 INTERVENORS OBJECT TO APPLICANTS' MOTION
21 TO AUGMENT THE RECORD.

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23 Intervenor must respectfully object to Applicants' motion
24 to augment the record, Items 1 and 2. These items purport to be
25 enclosures from the emergency response plans of San Diego and
26 Orange County respectively. These items are objected to on the
27 grounds that they are not authenticated in any way by affidavit
28 or declaration. Applicants must demonstrate that these items are

1 truly existing, implemented and approved plans of the various
2 jurisdictions. Federal Rules of Evidence, Rule 901. It is
3 respectfully requested that the Applicants provide sufficient
4 foundation for these documents by way of declaration or affidavit
5 or by way of further hearings requested below.

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7 III

8 INTERVENORS RESPECTFULLY REQUEST THE LICENSING
9 BOARD TO RESCHEDULE HEARINGS INTO THE ADEQUACY
10 OF THE ARRANGEMENTS FOR MEDICAL SERVICES, BOTH
11 ON-SITE AND OFF-SITE.

12 Intervenor in the hearing process were not litigating the
13 issue of whether the medical arrangements were sufficient to
14 handle the on-site contaminated and injured individuals. There-
15 fore, information concerning that issue was not objected to and
16 no cross-examination was tendered thereon. Now the Commission
17 has ruled that those items are crucial as they set the standard
18 as to what is necessary for off-site populations. It is necessary
19 to have further hearings on this issue to determine whether or
20 not the arrangements are truly adequate for the on-site personnel
21 given the fact the arrangements now must also serve off-site
22 populations as well.

23 The Applicants have submitted and pointed to in their moving
24 papers various lists of hospitals which allegedly exist in the
25 Orange County and San Diego plans. They also assert without
26 record basis that these hospitals have the capacity to handle
27 seriously contaminated individuals. It is necessary to establish
28

1 a record basis for this fact. Obviously, if these hospitals do
2 not have the capacity to handle people the list of them will not
3 serve as an adequate basis for "ad hoc" response in the event of
4 a radiological emergency. Although the Commission has ruled that
5 such "ad hoc" response could be sufficient, it is up to this
6 Licensing Board to determine whether such "ad hoc" measures are
7 in fact sufficient in this case or whether additional planning
8 steps are required. It is clear that no new hospitals need to be
9 built and no new personnel need to be hired. It is not clear that
10 a modicum of planning would not be appropriate under the rule.

12 IV

13 PROPOSED LICENSING CONDITION

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15 In the event this Licensing Board should deny Intervenors'
16 request for further hearings and to accept the arguments of the
17 Applicants in general, Intervenors would respectfully request the
18 following licensing condition be imposed.

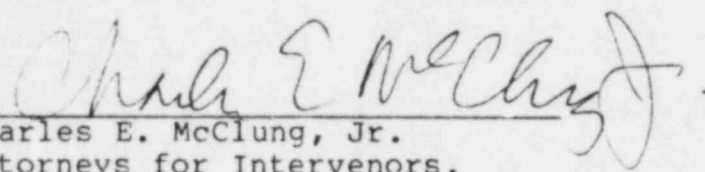
19 "The plans for off-site jurisdictions including
20 Orange County, San Diego County, San Juan
21 Capistrano and San Clemente should have
22 specific provisions in them which set forth
23 hospitals which will be available to aid
24 contaminated and traumatically injured individ-
25 uals as well as seriously contaminated individ-
26 uals in the event of a radiological emer-
27 gency."
28

CONCLUSION

It is respectfully submitted that the Applicants have not met their burden of proof to establish that adequate arrangements for medical services exist for contaminated individuals as set forth in 10 CFR 50.47(b)(12) and that further hearings are required in this matter.

DATED: June 6, 1983 FLEMING, ANDERSON, McCLUNG & FINCH

BY:


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