



DUKE POWER

May 1, 1991

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

Subject: Catawba Nuclear Station, Units 1 and 2  
Docket Nos. 50-413, 414  
NRC Inspection Report No. 50-413, 414/91-06  
Exercise Weakness 50-413, 414/91-06-02  
Reply to Identified Exercise Weakness

Gentlemen:

Enclosed is the response to Exercise Weakness 50-413, 414/91-06-02 concerning failure to promptly classify and make timely notification to State/Local organizations and failure to demonstrate adequate Health Physics practices and First Aid response techniques during a medical drill.

Very truly yours,

*M. S. Tuckman*

M. S. Tuckman, Vice President  
Nuclear Operations

WRC/250/lcs

Attachment

xc: W/Attachment  
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Duke Power Company  
Reply to Identified Exercise Weakness  
50-413, 414/91-06-02

Exercise Weakness 50-413, 414/91-06-02

Failure to classify, make timely notification to State/Local organization, demonstrate adequate Health Physics practices and First Aid response technique during a medical drill.

Response

We agree the report accurately reflects Catawba Nuclear Station's annual exercise performance except for some comments supporting the Medical Drill weakness.

We have reached different conclusions that the Inspector on the following one comment in Paragraph 5 and five comments in Paragraph 8(e) identified as weakness items in Subject Report:

Paragraph 5 - "The NOUE classification was not made, nor were the notification forms completed, nor were the State and local officials notified, as required by procedure RP/0/A/5000/02 titled Notification of Unusual Event Enclosure 4.2.2 or Procedure RP/0/A/5000/06."

Response to Paragraph 5 - Duke Power Company considers it unnecessary to classify a lesser emergency based on meeting a particular EAL when in a more serious declared emergency classification. Catawba was in a declared General Emergency in accordance with expected actions by the exercise scenario at the time the contaminated injury occurred. Immediate notification to States and local government of the contaminated injury was not required because a NOUE was not and should not have been declared. However, notification of the contaminated injury on the next routine followup message should have been made but was not.

Paragraph 8(e)(1) - Poor Health Physics Practices

- Air samples were not taken
- Donning of Anti-C clothing over "contaminated" boots contaminating clean clothing
- No control of contaminated consumable waste materials (e.g. rubber gloves)

Paragraph 8(e)(2) - Poor First Aid Technique

- Wrapping an unconscious non-communicative minimally contaminated victim in plastic

Response to paragraph 8(e)(1) and (2) - Air samples are not required (by Radiation Protection Section emergency procedure HP/O/B/1009/08 entitled Contamination Control During Transportation of Contaminated Injured Individuals) to be taken at the accident scene in consideration of injured's health and available human resources. Air sampling would be considered a "recovery" activity to be taken at the appropriate time following movement of the injured to an offsite medical facility.

The Catawba RP Section considers it an acceptable practice to don Anti-C clothing over contaminated clothing in an emergency (life-saving) situation in order to minimize and/or "contain" the contamination and prevent its spread thereby saving time while facilitating treatment and transport of the injured.

The Catawba RP Section considers their actions concerning the control of contaminated consumable waste materials to have been appropriate given the exercise scenario. An RCZ was erected around the injured for the express purpose of containing the area. The fact some waste materials (e.g. rubber gloves) were not disposed in a dedicated waste receptacle was of little consequence considering the degraded condition of the injured. All waste materials generated in the RCZ were contained in the RCZ. Reclaiming the RCZ was considered a "recovery" activity to have been implemented at the appropriate time following movement of the injured to an offsite medical facility.

The Catawba Safety Section considers the wrapping of the injured in plastic to have been a prudent medical practice given the vital signs of the unconscious victim and the determination she was in shock. Qualified Paramedics and EMTs on staff have reviewed a videotape of the medical drill and determined this medical decision to have been an appropriate method of keeping the injured warm and in accordance with proper medical protocol for a victim in shock.

We disagree with Inspector comments in the last two paragraphs of 8(e) concerning prompt emergency classification and notification for the same reasons as stated in our response to Paragraph 5 above.

Catawba has committed to repeat the medical exercise twice to redemonstrate their contaminated injury capabilities and resolve the weakness item. The dates that were agreed to by the Region are April 18 and May 16, 1991. We have completed the April 18 exercise as scheduled. The exercise was successful by our assessment. The May 16th exercise will be scheduled to begin at approximately 0900 and will be terminated before transporting offsite.