

LEHIGH COUNTY
FIXED NUCLEAR FACILITY INCIDENT SUPPORT PLAN
FOR
INCIDENTS AT THE
LIMERICK GENERATING STATION



NUCLEAR REGULATORY COMMISSION

Docket No. 50-352353-01 Official Ex. No. E-5
In the matter of LIMERICK
Staff _____ IDENTIFIED /
Applicant ✓ RECEIVED /
Intervenor _____ REJECTED _____
Cont'g Off'r _____
Contractor _____ DATE 11-28-84
Other _____ WITNESS Page 1
Reporter mm

September 1984

Lehigh County Civil Defense
455 Hamilton Street
Allentown, PA 18102

Telephone Number: 215/820-3073

PROMULGATION

This fixed nuclear facility radiological emergency support plan sets forth the basic emergency management policies, responsibilities, and required preparation as prescribed by the Commonwealth of Pennsylvania, Disaster Operation Plan, Annex E, "Fixed Nuclear Facility Incidents," and federal guidance for radiological emergency response, NUREG-0654 and supercedes all other Lehigh County plans developed for emergency management in the event of an incident at the Limerick Generating Station.

It provides guidance to all affected elements within the County for the preparation of detailed plans and procedures within the scope of their specialized requirements.

The Director of Lehigh County Civil Defense shall act on behalf of the County Executive in the coordination and implementation of this plan. He shall periodically report to the County Executive regarding the readiness and performance of each county and municipal agency, or organization, that is tasked in the plan to discharge assigned responsibilities.

David K. Bausch
County Executive

DATE

Mr. Jerry Duckett, Director

DATE

Lehigh County Civil Defense

RECORD OF CHANGES

[illegible]

LEHIGH COUNTY
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I. SCOPE AND AUTHORITY

A. Scope

This Fixed Nuclear Facility Support Plan:

1. Establishes policies and procedures under which the County will operate in the event of an incident at the Limerick Generating Station (LGS) located in Montgomery County.
2. Defines the roles and responsibilities of Lehigh County Civil Defense and its staff in the event of an incident at the Limerick Generating Station.
3. Assures appropriate responses to protect the affected evacuated population from Montgomery and Berks Counties including mobilization of Lehigh County forces to support necessary actions.

B. Authority

This plan is issued under the authority of and in accordance with the provisions set forth in the Pennsylvania Emergency Management Services Act of 1978, Pamphlet Law 1332, Act 323.

II. REFERENCES

- A. U.S. Nuclear Regulatory Commission and the Federal Emergency Management Agency, "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants," NUREG-0654, FEMA-REP-1, Rev. 1, November 1980.

- B. Commonwealth of Pennsylvania Disaster Operations Plan, Annex E, "Fixed Nuclear Facility Incidents," November 1981.
- C. Pennsylvania Emergency Management Directive No. 32, "Development of a Mass Care Operational Program," November 14, 1980.
- D. Montgomery County Radiological Emergency Response Plan for Incidents at the Limerick Generating Station, (date).
- E. Pennsylvania Code, Title 4, Part I, Chapter 3, Subchapter C, "Emergency Management Responsibilities of Departments and Agencies."
- F. Limerick Generating Station Emergency Plan.

III. DEFINITIONS

- A. Central Resource Receiving Point - A designated location suitable for the receipt and distribution of supplies and equipment in an emergency.
- B. Fixed Nuclear Facility Incident (hereinafter called an "incident") - An incident is an event or condition at a fixed nuclear facility which could result in impact on public health and safety. Four incident classes have been identified; from the least serious to the most serious they are: UNUSUAL EVENT, ALERT, SITE EMERGENCY AND GENERAL EMERGENCY. (Note: SITE EMERGENCY OR GENERAL EMERGENCY action levels are not to be confused with a "Declaration of Disaster Emergency" made by the Governor in accordance with Pennsylvania Pamphlet Law 1332 of 1978-Act 323.) Within each class there are specific emergency responses necessary to ensure that public health and safety are protected. Descriptions of the four emergency action levels are as follows:
 - 1. UNUSUAL EVENT - Unusual Events are in process or 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 occurs.

2. ALERT - Events are in process or have occurred which involve an actual or potential substantial degradation of the level of safety of the plant. Any releases are expected to be limited to small fractions of the EPA Protective Action Guideline exposure levels.
 3. SITE EMERGENCY - Events are in process or have occurred which involve actual or likely major failures of plant functions needed for protection of the public. Any releases are not expected to exceed EPA Protective Action Guideline exposure levels except near site boundary.
 4. GENERAL EMERGENCY - Events are in process or have occurred which involve actual or imminent substantial core degradation or melting with potential for loss of containment integrity. Releases can be reasonably expected to exceed EPA Protective Action Guideline exposure levels offsite for more than the immediate site area.
- C. Emergency Management - The judicious planning, assignment, and coordination of all available resources into an integrated program of prevention, mitigation, preparedness, response and recovery for emergencies of any kind whether from enemy attack, man-made or natural sources.
- D. Emergency Planning Zone (EPZ) - A generic area defined about a nuclear facility to facilitate offsite emergency planning and develop a significant response base. It is defined for plume and ingestion exposure pathways.
- E. Ingestion Exposure Pathway - That area surrounding a fixed nuclear facility which, as a result of release of radioactive material, is a potential source of exposure through the ingestion of water and/or foods such as milk or fresh vegetables originating there. The EPZ

consists of a circular area of a 50 mile radius around the fixed nuclear facility.

- F. Mass Care Center - Fixed facilities suitable for providing emergency lodging for victims of disaster left temporarily homeless and capable of providing all essential social services. Feeding may be provided within a mass care center (in suitable dining facilities) or nearby.
- G. Mobilize - The act of bringing a staff, department, or agency to the strength required to accomplish its mission, including the pre-positioning or movement of equipment or personnel.
- H. Municipality - For the purpose of this annex, the terms "municipality" or "municipal government" are defined as referring, singularly or collectively, to cities, boroughs, townships, and incorporated towns within the Commonwealth of Pennsylvania.
- I. Plume Exposure Pathway EPZ - The areas surrounding a fixed nuclear facility which potentially are subject to radiation exposure as a result of an incident involving radioactive material emanating from the facility. Such potential exposure could involve: (a) whole body external exposure to gamma radiation from the plume and deposited materials, and (b) inhalation exposure from the passing radioactive plume. The EPZ for this pathway consists of an area approximately 10 miles in radius around the fixed nuclear facility. (The exact size and configuration of each plume exposure pathway EPZ for the respective fixed nuclear facility in Pennsylvania were determined in relation to local emergency response needs and capabilities as they are affected by conditions such as demography, topography, access routes, and jurisdictional boundaries.)
- J. Projected Dose - An estimate of the radiation dose which affected individuals could potentially receive if protective actions are not taken.

- K. Protective Actions - An action taken to avoid or reduce a projected dose of radiation (sometimes referred to as protective measures):
1. Sheltering - Action taken by the public to take advantage of the protection against radiation exposure afforded by remaining indoors, away from doors and windows, during and following the passage of the radioactive plume.
 2. General Evacuation - The evacuation of the entire population within the plume exposure pathway EPZ.
 3. Selective Evacuation - The evacuation of specific elements of the population, such as pregnant women, pre-school age children or the infirm.
- L. Protective Action Guide (PAG) - A preestablished projected radiation dose to individuals which warrants protective actions.
- M. Radio Amateur Civil Emergency Services (RACES) and Amateur Radio Emergency Services (ARES) - Licensed volunteer radio amateur (HAM) communications personnel, equipped and affiliated with the County Emergency Management Agency.
- N. Reception Center - A predesignated site, outside the plume exposure pathway EPZ, through which evacuees will pass to obtain information and directions to mass care centers. A reception center may be located in either a risk or a support county.
- O. Risk Counties - Those counties within the plume exposure pathway EPZ of a fixed nuclear facility.
- P. Standby Status - A term used to describe the state of readiness of reception and mass care centers. The centers are in reserve readiness ready to function when called upon. Standard operating procedures have been reviewed; material, communications and required supplies are available and adequate for initial operations; and sufficient personnel

are on hand to commence operations. Augmentation personnel necessary for sustained operations are alerted and ready to report for duty when called.

- Q. State of Disaster Emergency - A state of disaster emergency exists whenever the Governor issues a Declaration of Disaster Emergency. A disaster emergency shall be declared by executive order or by proclamation of the Governor at any time upon finding that a disaster has occurred or that the occurrence or the threat of a disaster is imminent. The State of Disaster Emergency continues until the Governor finds that the threat or danger has passed and terminates it by executive order or by proclamation, but no State of Disaster Emergency may continue for longer than 90 days, unless renewed.
- R. Student Pick-up Points - A predesignated location (usually a host school) located outside the plume exposure pathway EPZ of a fixed nuclear facility, where evacuated students from risk schools are transported. The students will be retained under the school officials custody until they are picked up by their parents or guardians.
- S. Support County - The county or counties outside the plume exposure pathway EPZ of a fixed nuclear facility that, through prior agreement, will provide support to a risk county in the event of an incident. Depending on the size and location, the same county may be both a risk and a support county.
- T. Traffic Control Points (TCP) - Police traffic control established at critical road junctions for the purpose of controlling or limiting traffic. TCP's are used to control evacuation movement and also to limit access to a nuclear power facility when an emergency situation requires it.
- U. Unmet Needs - Capabilities and/or resources required to support emergency operations but neither available nor provided for at the respective levels of government.

IV. PURPOSE

The overall purpose of this Fixed Nuclear Facility Support Plan is to provide for the housing, feeding, medical and other social service needs for approximately 17,000 persons evacuated from Montgomery and Berks Counties in response to an incident at the Limerick Generating Station.

V. RESPONSIBILITIES

A. County Civil Defense Agency

1. In coordination with the Red Cross, develop and maintain a comprehensive plan for support of Montgomery and Berks Counties in the event of an incident at the Limerick Generating Station.
2. Identify county and emergency organizations and personnel resources and task them to develop procedures in support of the county plan.
3. Identify individuals assigned functional responsibilities essential to the planning and implementation of the county support plan.
4. Develop a system for alerting county and municipal government heads, emergency management agency staff, emergency forces, volunteer organizations, schools, hospitals, nursing homes, and business and industry involved in the county support plan.
5. Assure that the alert system is operable on a 24-hour basis.
6. Identify and coordinate with Montgomery County, Berks County and PEMA:
 - a. Traffic control points
 - b. Reception centers
 - c. Mass care facilities

d. Central resource receiving point

7. Coordinate the release of information to the news media with the PEMA Public Information Officer.
8. Coordinate recommendations for changes in main evacuation routes and traffic control points with PEMA, risk counties, the PSP and the Department of Transportation.
9. Establish and train a requisite number of radiological decontamination monitoring teams for mass care centers within the county.
10. Register and provide radiological monitoring of evacuees at mass care center locations within the county.
11. Maintain plans for the decontamination of evacuees at mass care centers.
12. Designate and be prepared to operate a central resource receiving point.
13. In conjunction with PEMA, coordinate plans with designated risk counties for the movement and reception of evacuees.
14. Maintain a current listing, with copy to PEMA, of any unmet personnel and equipment needs.
15. Review and update county support plans at least annually and coordinate changes with PEMA and risk counties.
16. Coordinate the reentry of evacuees with PEMA, and the risk counties.
17. Maintain records and reports acquired during an incident, prepare after-action reports.

18. Participate with risk counties in exercises conducted by PEMA.

8. Lehigh County Civil Defense

The responsibilities required during emergency operations, planning, and activities have been assigned to the following members of the Lehigh County Emergency Operations staff. A detailed description of each staff position responsibility may be found in the Lehigh County Disaster Operation Plan.

1. County Executive

In the event that a State of Disaster Emergency is declared, the Lehigh County Executive will assume the emergency authority outlined in state laws. He will direct and control all resources and actions required by emergency management operations.

2. Civil Defense Director

The Civil Defense Director is responsible for the coordination of all staff activities. He will continually brief the County Executive, and the EOC staff as to the status of the emergency and the county response. He will be responsible for making all official announcements as the spokesman for the County Executive.

3. Administrative Assistant

The Administrative Assistant is responsible for supervising and coordinating staff activities within the Operations Room. He will also assist in message dissemination.

4. Mass Care Coordinator

The Mass Care Coordinator is responsible for coordination with Red Cross personnel in the establishment of mass care centers and for

reception center operations. The Mass Care Coordinator will coordinate mass care activities with the Medical Health Group and the Fire and Rescue Group for support.

5. Police Services Chief

The Police Services Chief is responsible for the coordination of all county police organizations and operations. He is responsible for maintaining liaison with local, state, and military authorities in order to affect his duties.

6. Fire and Rescue Division Chief

The Fire and Rescue Division Chief is responsible for the coordination, and if necessary, deployment of all county fire and rescue personnel and equipment.

7. The Medical/Health Division Chief

The Medical/Health Division Chief will coordinate all county, and relocated medical personnel resources, to provide primary and emergency care to evacuated persons. He will also assist risk county staff and agencies in the relocation of patients, staff, and equipment from risk area hospitals, nursing homes, and other health care facilities.

8. The Public Information Officer

The Public Information Officer (PIO) is responsible for the dissemination of emergency information at the direction of the County Director.

9. The Transportation Division Chief

The Transportation Division Chief is responsible for coordinating all transportation resources within the county that will provide for the movement of people and supplies.

10. The Radiological Officer (RADEF)

The Radiological Officer (RADEF) will coordinate and establish monitoring and decontamination points at each designated mass care center. He will also provide technical evaluation for situation analysis and public information dissemination, as necessary.

11. The Communications Division Chief

The Communications Chief is responsible for the receipt of all alert/notification information and the issuance of said alert/notification upon coordination with the County Civil Defense Director. He also will initiate all notification, as required, of County Disaster Operations personnel and County Communications in line of succession. He is also responsible for initiating necessary actions to establish communication between county and state resources, as required.

12. County Agricultural Agent

The County Agricultural Agent will be responsible for supplying information and advice on agricultural matters. He will coordinate with State personnel on the effects of any radiocontaminants within the County's portion of the ingestion exposure pathway EPZ (50-mile radius from Limerick).

13. Trained personnel from all available resources will be utilized by the Lehigh County Emergency Operations staff to the fullest extent. Trained auxiliaries and volunteer organizations will be used to augment normal government service personnel.

VI. CONCEPT OF OPERATIONS

- A. Lehigh County has agreed to provide reception and mass care center support for approximately 17,000 evacuees from Montgomery and Berks Counties.

B. Evacuation

Evacuees will be entering Lehigh County via the following routes:

<u>Route</u>	<u>Total Number of People*</u>	<u>Number of Vehicles</u>
1. Route 100 North (to 29N)	19,094	6,363
2. Route 663 North (to 309N)	14,924	4,974

* An estimate of 50% of this number, or 17,009, are planned to require mass care.

C. Traffic Control

Traffic Control Points (TCP) will be established to insure an orderly flow of traffic during an evacuation. The Pennsylvania State Police have identified potential bottlenecks along the major evacuation routes and are responsible for traffic control at these points. Municipal police forces are responsible for traffic control within their own municipality. The Pennsylvania Department of Transportation will assist with the clearance of obstacles on main evacuation routes. The Pennsylvania National Guard will provide wreckers and gasoline trucks to service vehicles along major evacuation routes, if available. Municipalities should provide for these services within their municipality to the extent possible. See Appendix 3 for County TCP's and police department resources.

D. Reception Centers

1. As evacuees arrive in the County, the initial reception will be provided at the following locations (also see Appendix 4):

<u>Evacuation Route</u>	<u>Reception Center</u>	<u>Location</u>
a. Route 100 (to 29)	Emmaus High School	851 North Street Emmaus
b. Route 663 (to 309)	Southern Lehigh Sch. Complex	Rt. 309 Center Valley

2. At the reception centers, the evacuees will be provided with instructions, directions and a strip map that will direct them to an assigned mass care center (See Appendix 4, Attachment B).

E. Transportation

A transportation staging area will be established at the Quigley Bus Company in Berks County and operated by Berks County EMA staff to provide bus and ambulance support to Montgomery County and Berks County. Lehigh County will dispatch available transportation resources to this facility upon the request of PEMA, should a transportation shortage develop. The Lehigh County Civil Defense will coordinate the support of transportation requirements with PEMA and appropriate risk counties.

F. Mass Care Support

A listing of mass care facilities is contained in Appendix 4. Lehigh County will accept approximately 17,000 evacuees from Montgomery County and Berks County. Lehigh County Civil Defense will notify schools designated as mass care centers of emergency classification levels.

The County will also coordinate American Red Cross operation of the designated mass care centers with the school administration for management of the mass care centers.

For sanitary reasons, pets will not be allowed inside mass care centers. Owners are responsible for arranging for their care. Available kennel and veterinary facilities are listed in Appendix 4, Attachment H. The Red Cross will also activate agreements with local Humane Societies as necessary.

G. Decontamination Monitoring

The Lehigh County Radiological Officer (RADEF) will establish monitoring and decontamination points at each mass care center. Decontamination monitoring is required only at the direction of the Bureau of Radiation Protection (BRP). Otherwise, decontamination monitoring teams will be available to perform monitoring upon request by any evacuee. When monitoring is directed by BRP, it shall be performed before registration or admittance to the general living quarters area of the mass care center. A list of decontamination monitoring needs; procedures for distribution of dosimetry, KI, and survey meters; and other radiological exposure control procedures are located in Appendix 5.

H. Medical Support

Lehigh County Civil Defense is responsible for providing appropriate medical support for the evacuees. A Medical Health Group Chief has been appointed to assist Lehigh County Civil Defense with medical support of evacuees. The Medical Health Group Chief will coordinate with the Rescue and Transportation Services Group Chiefs for transportation of evacuees requiring treatment. Medical support service information is contained in Appendix 6 of this plan.

The primary facility for treatment of irradiated individuals in Lehigh County will be the Lehigh Valley Hospital Center.

It is planned to relocate residents of the Pottstown Leader Nursing Home in Montgomery County to the Bethlehem/Easton Leader Centers and a portion of the Montgomery County Geriatric Center to the Cedarbrook Facility. The County may be requested to provide ambulance support in this regard.

A listing of Lehigh County ambulance services is provided in Appendix 6, Attachment B. These services will be notified at the time of an incident to determine the number of units available to support Montgomery County in a radiological emergency.

I. Student Pick-up Points/Host Schools

Lehigh County will receive approximately 8,200 school students from Montgomery and Berks Counties should an evacuation be required at a time when school is in session. Appendix 8 lists those schools planning to evacuate to Lehigh County, the designated host schools (student pick-up points), and policy relevant to school evacuation.

J. Emergency Action Level Operations

1. When an UNUSUAL EVENT is declared, no actions are necessary. The County will receive no notification.
2. When an ALERT emergency classification is declared, PEMA Eastern Area Headquarters will notify County Civil Defense, and the following actions will be taken:
 - a. Officially log message.
 - b. The County Communications Center notifies the County Civil Defense Director, or his assistant if he is not available.
 - c. Notify the County Executive.

- d. Alert key personnel of the County EOC staff and the County American Red Cross Chapter. Selected key personnel designated by the Civil Defense Director report to the EOC.
 - e. Alert Radio Amateur Civil Emergency Service (RACES).
 - f. Open radio communications nets with Montgomery and Berks Counties.
 - g. Establish EOC security.
3. When a SITE EMERGENCY classification is declared, PEMA Eastern Area Headquarters will notify the County. Upon notification, the following actions will be taken:
- a. Complete appropriate actions shown for ALERT.
 - b. Mobilize the County EOC staff.
 - c. Mobilize appropriate fire, police, and ambulance services throughout the county.
 - d. Request mobilization of the County Red Cross staff and the alert of volunteers.
 - e. Place reception centers and primary mass care centers on standby status. (The Mass Care Center Manager is responsible for mass care operations including the assignment of space and facilities for Decontamination Monitoring Teams and the reception center team in the event the mass care center also serves as a reception center.)
 - f. Distribute survey meters, dosimeters, and KI to decontamination monitoring teams.

- g. Mobilize decontamination monitoring teams and have them report to assigned locations. (Mass Care Centers include decontamination teams whether or not radiological monitoring is required.)
 - h. Open RACES communications nets among the County EOC, American Red Cross, primary mass care centers and reception centers.
 - i. Issue public information statements to inform the public about the situation. PEMA will coordinate information releases with the nuclear facility, Governor's Press Office, and risk and support county Public Information Officers.
 - j. Notify School Districts providing mass care and/or reception facilities of the emergency.
 - k. Notify police to make traffic control assignments in the event of evacuation.
 - l. If school is in session, notify schools serving as host facilities of the situation.
4. When a GENERAL EMERGENCY classification is declared, PEMA Eastern Area Headquarters notifies the County. Upon notification, the following action will be taken:
- a. Complete appropriate actions shown for SITE EMERGENCY.
 - b. Notify School District Superintendents of the need to utilize school facilities for mass care, and if appropriate, host schools.
 - c. Activate County reception centers and primary mass care centers.
 - d. Activate the Emergency Broadcast System and make appropriate announcements, as applicable.

- e. As each primary mass care center is filled, sequentially open remaining centers.
 - f. Man traffic control points in preparation for receipt of evacuees.
5. Upon recommendation to initiate reentry, the following actions will be taken:
- a. Activate traffic control points.
 - b. Announce reentry plans to evacuees in mass care centers and release appropriate public information announcements (Appendix 7, Attachment C).
 - c. Report any damages caused by the evacuation and reentry and any extraordinary costs of operations to the County Civil Defense Director who in turn will report to the PEMA Eastern Area Headquarters.

VII. DIRECTION AND CONTROL

- A. The overall direction and control of emergency operations will be coordinated from the Lehigh County Emergency Operations Center (EOC) located at 455 Hamilton Street, Allentown, phone (215)820-3073.
- B. Key operations personnel will be notified by the Lehigh County Civil Defense Director in the event of an incident at the Limerick Generating Station which could affect County operations.
- C. Communications between the respective county emergency operations centers (EOC's), local emergency management agencies, and reception/mass care centers will be by telephone, RACES/ARES, and through the Lehigh County Communications Center via the County police and fire radio net.

VIII. PUBLIC INFORMATION

All public announcements will be made by Lehigh County Civil Defense. All EBS and commercial radio and TV stations as well as newspapers will be alerted for these announcements. Facilities will be provided at the County Courthouse for representatives of all news media. A media listing and pre-written public information announcements are provided in Appendix 7.

IX. CENTRAL RESOURCE RECEIVING POINT

A Central Resource Receiving Point and distribution center for food, bulk supply, and medical supplies will be established at the Allentown Fairgrounds, 17th and Chew Streets, Allentown.

The Lehigh County Civil Defense Director has appointed a Supply Officer who will coordinate with appropriate staff to operate this facility.

X. OTHER

Details of EOC staffing, Mass Care Center Operations, Red Cross, Police, and other pertinent information not found in this document are contained in the current Lehigh County Disaster Operations Plan which is on file in the Lehigh County EOC.

APPENDICES

APPENDIX 1

AGREEMENTS

APPENDIX 1

ATTACHMENT A

AGREEMENTS LIST

The following agreements are on file in the Lehigh County EOC in support of this plan:

1. American Red Cross
2. Mass Care Centers
 - a. East Penn
 - b. Allentown
 - c. Catasauqua
 - d. Southern Lehigh
 - e. Salisbury
 - f. Allentown Diocese
 - g. United Wesleyan College
 - h. Muhlenberg College
 - i. Allentown College
3. Student Pick Up/Host Schools
 - a. East Penn
 - b. Catasauqua
 - c. Southern Lehigh

APPENDIX 2

ORGANIZATION

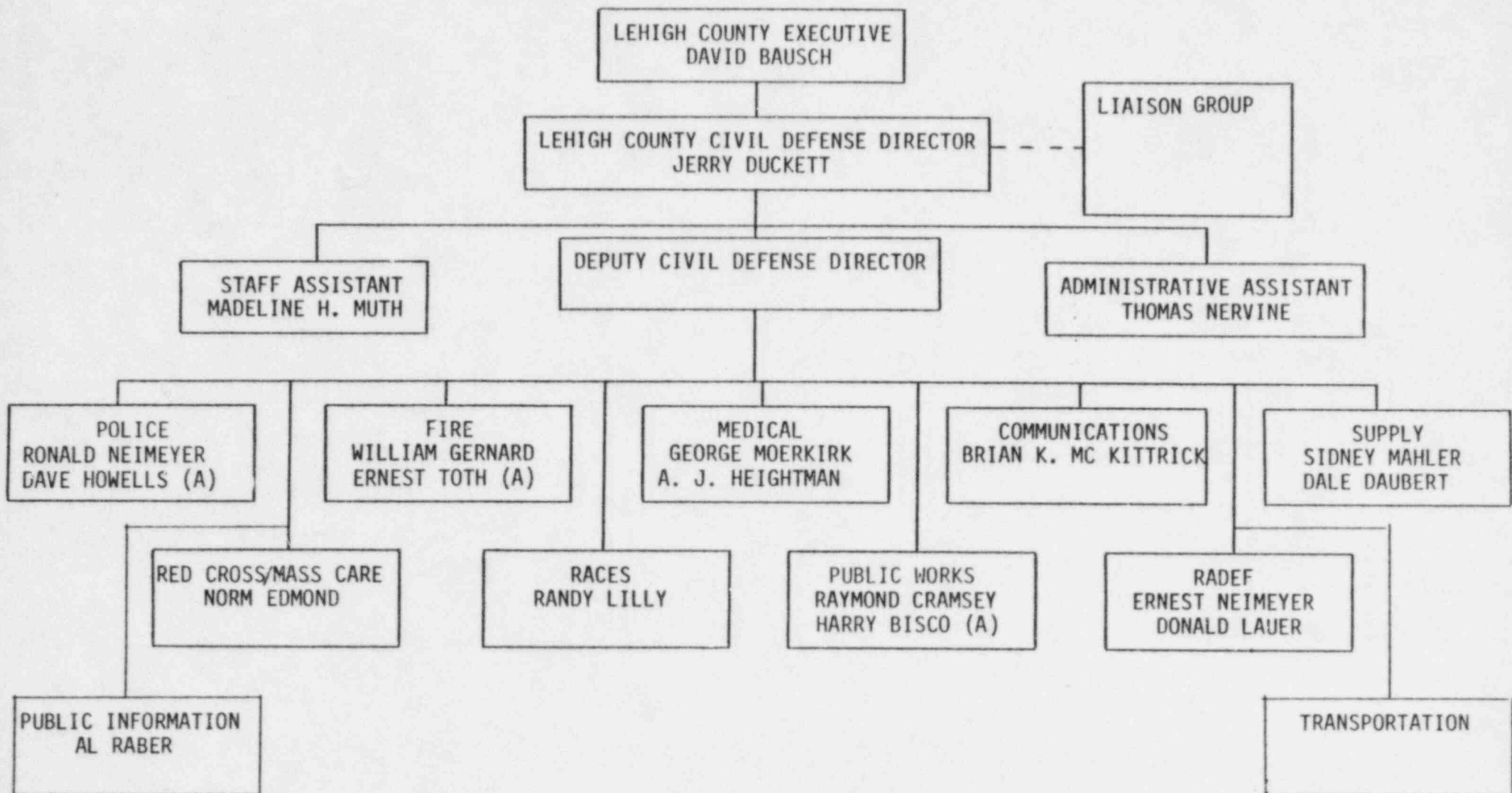
ATTACHMENTS:

- A - Civil Defense Organizational Chart and Roster
- B - Emergency Operations Center Layout

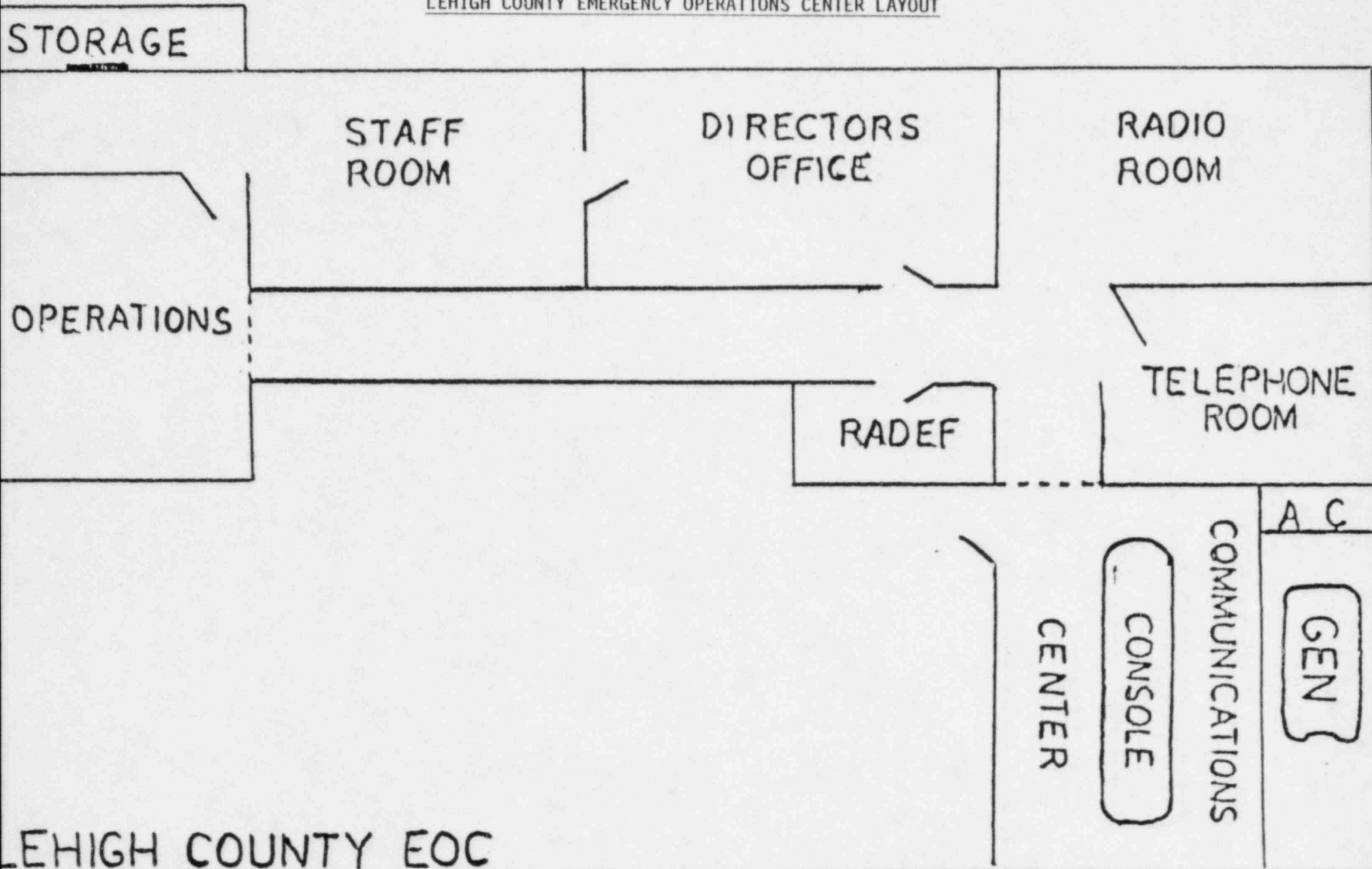
APPENDIX 2

ATTACHMENT A

LEHIGH COUNTY CIVIL DEFENSE ORGANIZATIONAL CHART



LEHIGH COUNTY EMERGENCY OPERATIONS CENTER LAYOUT



APPENDIX 3

TRAFFIC CONTROL

ATTACHMENTS:

- A - County Traffic Control Points
- B - County Police Departments

APPENDIX 3

ATTACHMENT A

LEHIGH COUNTY TRAFFIC CONTROL POINTS

<u>ROUTE/ LOCATION</u>	<u>POST NUMBER</u>	<u>NUMBER OF MEN</u>	<u>RESPONSIBLE POLICE ORGANIZATION*</u>
Rts. 309/378	1	2	Upper Saucon P.D.
Rt. 309/Camp Meeting Rd.	2	2	Upper Saucon P.D.
Rt. 309/S. Pike Ave.	3	2	Upper Saucon P.D.
Rt. 309/Station Ave.	4	2	Upper Saucon P.D.
Rt. 378/Landis Mill Rd.	5	2	Upper Saucon P.D.
Station Ave./Landis Mill Rd.	6	2	Upper Saucon P.D.
Rts. 29/100	7	2	Pennsylvania State Police
Rt. 29/Buckeye Rd.	8	2	Pennsylvania State Police
Rt. 29/Chestnut St.	9	2	Emmaus P.D.
Rt. 29/North St.	10	2	Emmaus P.D.
Rt. 29/Moravian Blvd.	11	2	Pennsylvania State Police
North St./Macungie Ave.	12	2	Emmaus P.D.
Macungie Ave./Moravian Blvd.	13	2	Emmaus P.D.
Rt. 29/Hamilton Blvd.	14	2	South Whithall P.D.
Rt. 100/E. Macungie Rd.	15	2	Pennsylvania State Police
Rt. 100/Buckeye Rd.	16	2	Macungie P.D.
Buckeye Rd./E. Macungie Rd.	17	2	Pennsylvania State Police
Rts. 100/222	18	2	Pennsylvania State Police

*Police department manpower resources will be supplemented, as necessary, for traffic control purposes by fire police and Lehigh County Uniformed Deputy Sheriffs.

APPENDIX 3

ATTACHMENT B

LEHIGH COUNTY POLICE DEPARTMENTS

<u>DEPARTMENT</u>	<u>CHIEF</u>	<u>TELEPHONE</u>	<u>NO. VEHICLES</u>
1. Alburtis P.D.	Ken Solomon	966-4777	2
2. Allentown P.D.	David Howells	437-7777	43
3. Catasauqua P.D.	Wayne Muffley	264-0577	5
4. Coopersburg P.D.	Robert Snyder	282-1444	2
5. Coplay P.D.	Wm. Balliet	262-2288	2
6. Emmaus P.D.	Earl Brensinger	967-3141	5
7. Lower Milford P.D.	Lloyd Ohl, Jr.	967-3957	1
8. Macungie P.D.	Larry Boyer	966-3900	2
9. Salisbury P.D.	Charles Durner	797-1447	4
10. Slatington P.D.	Arthur Kistler	767-1846	3
11. S. Whitehall P.D.	Don MacConnell	398-0337	8
12. Upper Saucon P.D.	Wm. Edmond, Sr.	282-3064	5
13. Whitehall P.D.	Frederick Conjour	437-5521	12
14. Fountain Hill P.D.	Karl Weid	691-5511	2
15. Lehigh County Sheriff	Ronald Neimeyer	820-3175	5
16. A.B.E. Airport	Robert Slusaw	264-2350	2

APPENDIX 4

RECEPTION AND MASS CARE

ATTACHMENTS:

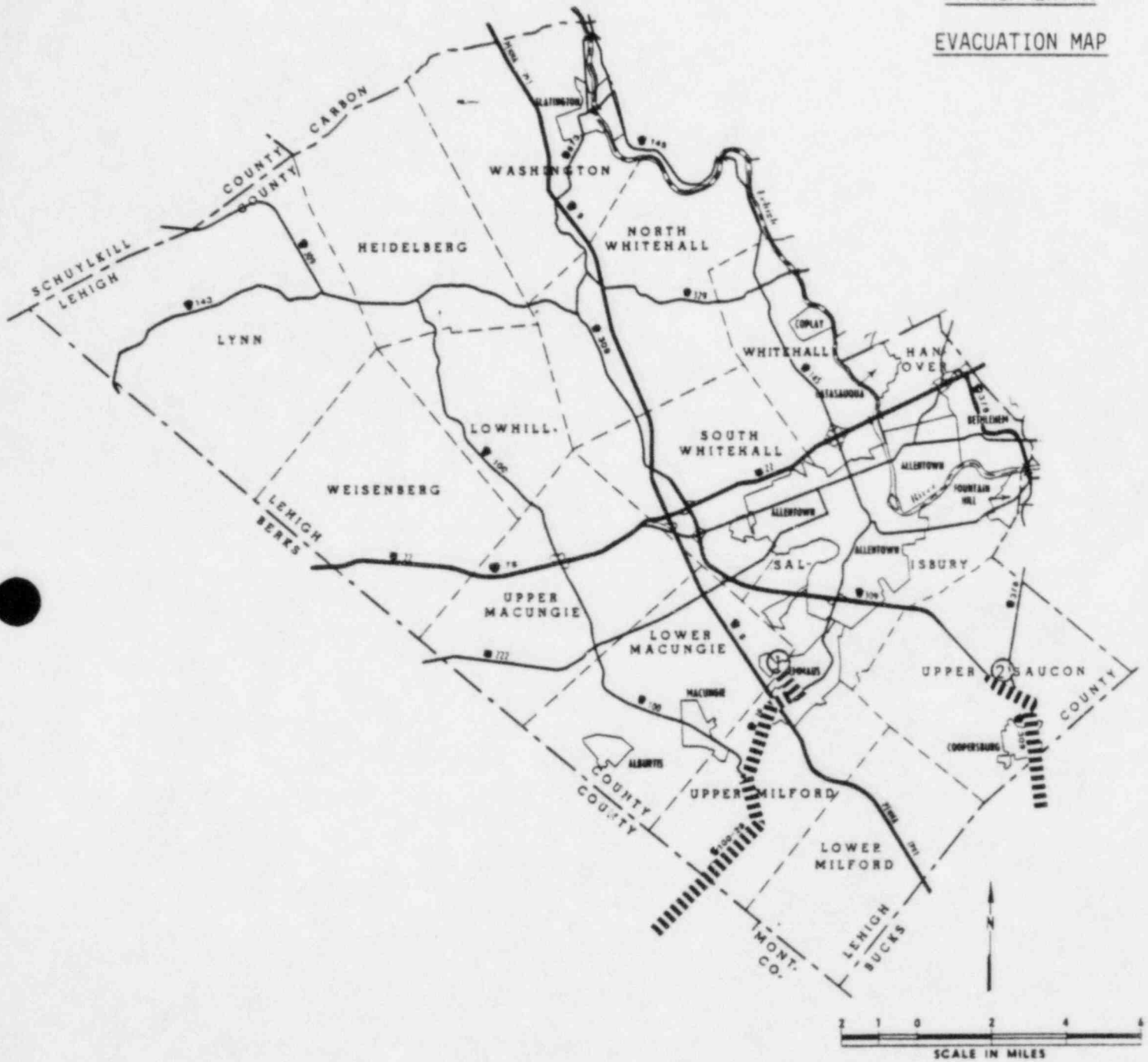
- A - Evacuation Map
- B - Strip Maps
- C - Reception and Mass Care Center Listing
- D - Activation of Reception Centers
- E - Activation of Mass Care Centers
- F - Reception Center Call List
- G - Mass Care Center Registration Form
- H - Kennel and Veterinary Facilities

LEHIGH COUNTY, PENNSYLVANIA

APPENDIX 4

ATTACHMENT A

EVACUATION MAP



- ① EMMAUS HIGH SCHOOL RECEPTION CENTER
- ② SOUTHERN LEHIGH RECEPTION CENTER

WILLIAM ALLEN HIGH SCHOOL

17th & Turner Sts.
Allentown, Pa.
PHONE: 820-2034

APPENDIX 4

ATTACHMENT B

SAMPLE STRIP MAP

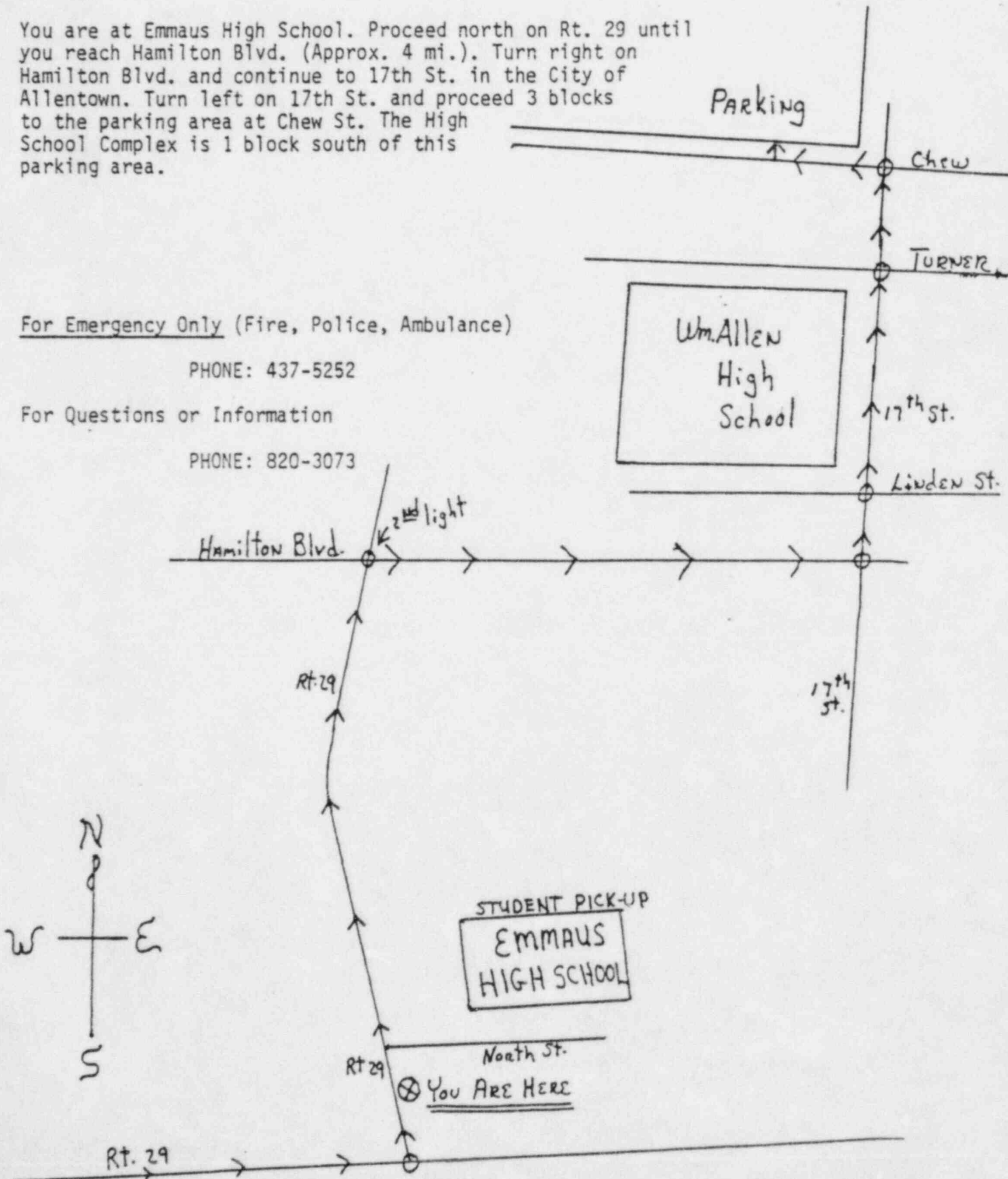
You are at Emmaus High School. Proceed north on Rt. 29 until you reach Hamilton Blvd. (Approx. 4 mi.). Turn right on Hamilton Blvd. and continue to 17th St. in the City of Allentown. Turn left on 17th St. and proceed 3 blocks to the parking area at Chew St. The High School Complex is 1 block south of this parking area.

For Emergency Only (Fire, Police, Ambulance)

PHONE: 437-5252

For Questions or Information

PHONE: 820-3073



APPENDIX 4

ATTACHMENT C

RECEPTION AND MASS CARE CENTER LISTING

<u>RECEPTION CENTER</u>	<u>ESTIMATED # OF EVACUEES NEEDING MASS CARE</u>	<u>MASS CARE CENTER</u>	<u>MASS CARE CENTER CAPACITY</u>
1. Emmaus High School Emmaus	9547	*1. Shoemaker Elementary *2. Washington Elementary 3. Central Elementary 4. Trexler Middle School 5. Union Terrace School 6. Allen High School 7. Raub Middle School 8. Muhlenberg Elementary 9. Lehigh Parkway Elem. 10. Muhlenberg College 11. St. Elizabeth Church School 12. Salisbury Middle School 13. St. Thomas Moore Sch. 14. Emmaus Sr. High School 15. Eyer Jr. High School	750 264 290 685 373 3,725 642 365 345 986 125 420 405 750 800
	TOTAL CAPACITY		10,725
2. Southern Lehigh School Complex Center Valley	7462	*1. Coopersburg Elem. Sch. *2. Salisbury High School 3. South Mountain Middle School 4. Jefferson Elem. Sch. 5. Roosevelt Elem. Sch. 6. Harrison-Morton Middle School 7. Mosser Elementary Sch. 8. Ritter Elementary Sch. 9. United Wesleyan College 10. Dieruff High School 11. Central Catholic 12. Allentown College 13. Catasauqua Middle Sch. 14. Southern Lehigh Jr.H.S. 15. Southern Lehigh Sr.H.S.	409 227 590 350 278 322 510 123 361 1,180 100 1,050 700 1,234 1,565
	TOTAL CAPACITY		8,899

*These are the primary mass care centers. The remaining mass care centers would be opened sequentially and are listed in order of priority.

APPENDIX 4

ATTACHMENT D

ACTIVATION OF RECEPTION CENTERS

I. ACTIVATION

The order to activate reception centers is issued by the Director of the Lehigh County Civil Defense or his designee. Once the order to activate is issued, the Mass Care Officer is notified to contact reception center managers (see Appendix 4, Attachment F). Reception center managers are responsible for notifying and activating their respective staffs.

II. CONCEPT OF OPERATIONS

A. UNUSUAL EVENT:

No action required.

B. ALERT:

1. County Coordinator notifies the Mass Care Officer.
2. Mass Care Officer notifies Reception Center Managers informing them of the emergency status and instructing them to contact their respective staffs assuring availability.
3. Reception Center Managers notify staff and make preliminary assignments.
4. Mass Care Officer coordinates with County Warning and Communications Division Chief and Police Services Chief on assignment of a RACES team and traffic control personnel at reception centers.

C. SITE EMERGENCY:

1. If this is the initial emergency level, perform all actions listed under ALERT above.
2. Mass Care Officer reports to the EOC and notifies Reception Center Managers to place reception centers on standby status.
3. Mass Care Officer confirms assignment of RACES and traffic control personnel with Warning and Communications Division Chief and Police Services Chief.
4. Mass Care Officer contacts reception center facility owner/operator to notify them of the need to utilize facility.
5. Reception Center Managers notify staff to report to assigned reception centers and Managers pick up strip maps from the County EOC.
6. Upon arrival at reception center, Reception Center Manager briefs staff on emergency status and reviews responsibilities and procedures.
7. Reception Center Manager contacts municipal officials for needed barricades and traffic cones.
8. Reception Center Manager provides periodic status reports to the County EOC through RACES.

D. GENERAL EMERGENCY:

1. If this is the initial emergency level, perform all actions listed for SITE EMERGENCY above.

2. Activate reception centers:

- a. Reception Center Manager will assign staff to distribute strip maps and to assist with internal traffic control.
 - b. ONE strip map will be given to EACH evacuee. Once all the strip maps to a particular mass care center have been distributed, meaning that mass care center is at its capacity, reception center personnel will begin distribution of the next set of strip maps.
 - c. Reception Center personnel will not divide family groups when distributing strip maps.
 - d. Reception Center Managers will keep the County EOC informed of mass care center needs through RACES.
3. Upon closing of the reception center, the Manager will take all necessary steps to return the facility to its original condition.
4. Upon conclusion of duties, the Reception Center Manager should prepare an after-action report to include:
- a. Summary of all activities with statistics on the total number of evacuees processed.
 - b. Names and addresses of participating staff.
 - c. Message log.

APPENDIX 4

ATTACHMENT E

ACTIVATION OF MASS CARE CENTERS

I. ACTIVATION ORDER

The order to activate one or more mass care centers is issued by the County Civil Defense Director or his designate in his absence. Once the order to activate is issued, the Mass Care Officer or designated alternate is notified, who in turn notifies the appropriate Mass Care Center Managers.

II. ACTIONS OF MASS CARE CENTER MANAGERS

- A. Acknowledge receipt and make a written record of the information received, including date and time.
- B. Issue, directly or with assistance from other immediately available personnel, specific mobilization instructions to mass care center staff members assigned to the first shift and directly concerned with mass care center operations. (The call out of staff shall be conducted in accordance with Red Cross Standard Operating Procedures for Mobilization.)
- C. Issue, directly or with assistance, specific standby instructions for second, and if applicable, third shift mass care center personnel directly concerned with relief operations of the centers.
- D. Confirm with person in charge of the building the details of the predisaster agreements for operations, and then proceed to open the mass care center.
- E. Arrange for heating, lighting, cooking, sanitary facilities, water and for substitutes if regular facilities are disrupted. Obtain other supplies and additional equipment as previously planned.

- F. Request support through the appropriate Mass Care Coordinator for required health, police and transportation services and supplies.
- G. Incoming mass care center staff shall be briefed, assigned responsibilities and commence setting up activities.
- H. Use telephones when possible between the mass care center and the Emergency Operations Center and within the center itself. If telephones are unavailable, maintain communications via RACES or messenger service. A public address system may be utilized if desired for announcements within the facility.
- I. Upon arrival, evacuees will have been monitored for radiation exposure when BRP has directed that the situation warrants such and decontaminated if necessary. All persons shall be registered and family units kept together if at all possible. Upon completion of registration, forward a copy of the registry to the Mass Care Coordinator located at the EOC.
- J. As each family or individual is registered, they are assigned space. Cots, blankets and chairs are furnished. If quantities are insufficient, then the infirm, aged, expectant mothers, mothers with infants and the handicapped should be given first consideration. Separate quarters are provided for unmarried men and unmarried women, if possible.
- K. Establish and enforce fire and safety regulations and arrange for adequate police and guard protection.
- L. Maintain records of all borrowed and purchased equipment and keep records of all mass care activities. Use this to compile a daily report to be submitted to the Mass Care Coordinator located at the Emergency Operations Center.
- M. Select an Advisory Council from those being cared for, which will assist the Mass Care Center Manager in enforcing health, sanitary,

and safety regulations; assign duties to the center inhabitants and advise the manager and staff in dealing with mass care center problems. If the center operation is prolonged, it may be desirable for the Advisory Council to assist in establishing a recreation program.

- N. Provide for janitorial service and the maintenance of essential utilities (e.g., light, heat, water and toilets).
- O. Post large printed signs designating a place or rooms for men's toilet, women's toilet, registration and inquiry, information, monitoring/decontamination area, clothing and feeding; also, signs for smoking regulations, luggage storerooms, the manager's office and others as required.
- P. Bathing facilities should be provided for all persons, if possible, but especially for babies and small children. Shower facilities should be provided for the monitoring/decontamination process.
- Q. Feeding must be conducted in a separate room other than the sleeping quarters and space must be provided for a kitchen, dining room and a storage area or pantry storeroom adjacent to the kitchen.
- R. A room shall be set aside as a clothing distribution point for providing suitable clothing as required, for individuals undergoing decontamination.
- S. A Registered Nurse should head the Mass Care Center Aid Station to assist persons requiring special care. If a Registered Nurse is not immediately available, the best-qualified medically trained individual should serve. Medical and nursing supplies should be stored in a location convenient to or within the emergency medical station.
- T. When the amount of supplies warrants it, the Mass Care Center Manager assigns a storekeeper to assist him. Duties are: receiving

and checking incoming supplies and equipment, safeguarding supplies and equipment, maintaining an inventory and issuing properly requisitioned supplies-on-hand receipts. Articles stored for individuals housed within the mass care center shall be plainly marked and stored at the owner's risk.

- U. Pets are not allowed in the human living area of mass care centers. The Mass Care Center Manager may try to provide for pets in a separate area or enclosure with pet owners required to provide for their care. Guide dogs for the handicapped are not considered to be in this category, and they will remain with their master in the center. When applicable, activate agreements made with the Humane Society for sheltering pets.
- V. After the mass care center has been closed, the manager will take the necessary steps to prepare the center and grounds for return to the owner. The manager will then prepare and submit a final report to the Mass Care Coordinator located at the Emergency Operations Center. The report shall be in accordance with established reporting policies and procedures.
- W. Report to the County Mass Care Coordinator, via telephone or RACES, at least once every two hours, the number of: (1) residents (2) persons monitored/decontaminated. Also report any special needs, problems, etc.

III. SPONTANEOUSLY ACTIVATED MASS CARE CENTERS

In times of emergency, it is quite possible that a predesignated mass care center, or even a facility not so designated, might be opened spontaneously. When that happens, it might be desirable to continue its operation. Upon request, the Red Cross may be able to provide a Mass Care Center Manager and assume responsibility from that point on for the management and funding of it. It should be made known to the person(s) responsible for the facility that Red Cross management must be accepted in order for the Red Cross to fund its operation, and any unusual costs

incurred before the Red Cross assumes management responsibility are not the responsibility of the Red Cross. It is desirable to record this understanding in writing if possible, and to include appropriate notations in the log.

IV. RECORDS AND FISCAL MATTERS

A. Records

In addition to daily reports, agreements, supply requisitions and hand receipts for supplies, the following records shall be prepared:

1. A list of all equipment borrowed from government sources with instructions as to disposition when facilities are closed.
2. A list of all other equipment borrowed from private sources and its disposition. When the borrowed equipment is returned to private owners, a signed hand receipt should be obtained.
3. A list of all Red Cross-owned supplies and equipment with instructions regarding transfer to another disaster area or to storage.
4. Reports of loss or damage to both borrowed equipment and buildings.
5. A list of outstanding expenditures for direct purchases of supplies and services.
6. A final after-action report to include:
 - a. A complete summary of all activities including statistics on number housed, fed, given medical care, evacuated or received from other counties or states.
 - b. Names and addresses of all workers, both voluntary and paid.

- c. Overall narrative report to include recommendations, changes in procedures, suggested improvements and repairs required relating to any damages to the facility or losses or damages to equipment.

B. Fiscal Matters

When a mass care center is operated by Red Cross Managers, then the Red Cross will pay the operational costs of the center(s) as an outright grant. In situations not within Red Cross purview, expenses for operations will be borne by municipal or county governments. In these cases, complete records of expenditures should be kept for reasons of possible reimbursement from State or Federal funds.

V. USE OF GOVERNMENT DONATED FOOD

- A. Normally, if mass care centers are located in schools and school cafeterias are used, food supplies on hand are usually sufficient for immediate needs. Procurement of additional food supplies may be made per agreement with the Pennsylvania Department of Agriculture and the General Services Bureau of Government Donated Foods.
- B. The American Red Cross is authorized to make the necessary requests. Refer to Annex C of PEMA Emergency Management Directive No. 32, Development of a Mass Care Operational Program, November 14, 1980.

APPENDIX 4

ATTACHMENT F

RECEPTION CENTER CALL LIST

I. RECEPTION CENTERS

<u>FACILITY</u>	<u>OWNER/OPERATOR</u>	<u>EMERGENCY CONTACT</u>
A. Emmaus High School	East Penn S.D. 640 Macungie Ave. Emmaus, PA 215/967-3101	Dr. William Leary (W) 967-3101 (H) 398-8243 George Anderson (W) 967-3101 (H) 432-8851
B. Southern Lehigh	Southern Lehigh S.D. R.D. 1, Box 13 Center Valley, PA 215/282-3121	1. Michael F. Green, Superintendent (W) 282-3121 (H) 679-4577 2. Stephen Lucas (W) 282-3121 (H) 868-7585 3. Thomas Wallace (W) 282-3121 (H) 967-3348

II. RECEPTION CENTER STAFF

A. Emmaus High School	Manager: Richard Hildebeidel Emmaus Borough EMC 551 Fernwood Street Emmaus, PA
-----------------------	---

(W) 967-3141

(H) 965-5862

Staff: (Lehigh County Uniformed Deputy
Sheriffs to be assigned)

B. Southern Lehigh

Manager: George Radle

Upper Saucon Township EMC

R.D. 1

Center Valley, PA

(W) 965-4944

(H) 965-4944

Staff: (Lehigh County Uniformed Deputy
Sheriffs to be assigned)

III. The reception center team, in addition to the manager, will include approximately eight (8) individuals for distribution of maps and internal traffic flow.

NOTE: Home telephone numbers are retained on file in the County EOC.

APPENDIX 4

ATTACHMENT G

MASS CARE CENTER REGISTRATION FORM *

American Red Cross

DISASTER SHELTER REGISTRATION

Family Last Name			
Names	Age	Medical Problem * Killed * Injured * Hospitalized	Referred to Nurse
Man			
Woman (Include Maiden Name)			
Children in Home			
Family Member not in Shelter (Location if Known)			

SHELTER MASTER FILE

Shelter Location	
Shelter Telephone No.	Date of Arrival
Predisaster Address and Telephone No.	

I ☐ do, ☐ do not, authorize release of the above information concerning my whereabouts or general condition.

Signature _____	
Date Left Shelter	_____
Time Left Shelter	_____
Postdisaster Address and Telephone Number	

AMERICAN RED CROSS FORM 5972 (5-79)

*This sample form is provided for informational purposes only. Multiple-copy originals are available from the Red Cross.

APPENDIX 4

ATTACHMENT H

LEHIGH COUNTY KENNEL AND VETERINARY FACILITIES

<u>FACILITY NAME/ADDRESS</u>	<u>TELEPHONE</u>
1. Briarberry Kennels, Inc. 4412 Kressler Road Allentown, PA	398-2506
2. Candy's County Kennels R.D. 2 Schnecksville, PA	799-3794
3. Colonial Kennels 3127 S. Church Street Whitehall, PA	434-0444
4. Dapper Dal Kennels R.D. 1 Slatington, PA	767-2859
5. Jubilee Kennels Shankweiler Road Orefield, PA	395-1796
6. Lane's Kennels Route 309 Orefield, PA	395-2274
7. Earl E. Minnich R.D. 1 Macungie, PA	845-7330
8. Win-Dee-Hil Kennels R.D. 2 Schnecksville, PA	799-3794

APPENDIX 5

RADIOLOGICAL EXPOSURE CONTROL

ATTACHMENTS:

- A - Decontaminating Monitoring Procedures
- B - Dosimetry and Potassium Iodide
- C - Inventory and Maintenance Procedures
- D - Dosimetry-Survey Meter-KI Distribution List
- E - Decontamination Monitoring Assignments

APPENDIX 5

ATTACHMENT A

DECONTAMINATION MONITORING PROCEDURES

I. GENERAL INFORMATION AND ORGANIZATION

A. Decontamination Monitoring of the Public

In the event of a fixed nuclear facility incident, the public may have to be individually monitored to ascertain whether or not the individual is contaminated with a radioactive substance. If a person is found to be contaminated, then he/she must be decontaminated. BRP will issue a statement indicating whether or not decontamination monitoring is required and PEMA will send this message through emergency management channels. Decontamination monitoring teams will be located at mass care centers and will perform decontamination monitoring upon request regardless of whether it is required.

B. Organization at Mass Care Centers

1. Mass care centers for evacuees will serve as points where decontamination monitoring and decontamination procedures will be conducted. When decontamination monitoring is required, evacuees, upon arrival at the mass care center, will first be monitored for radiological contamination and, if necessary, be decontaminated, after which they will be admitted to the "general living" portion of the mass care center. Trained decontamination monitoring teams will conduct the monitoring for radiological contamination, carry out decontamination procedures, and complete associated records. This activity, while falling under the overall coordination of the mass care center manager, is not an integral part of that operation. Decontamination monitoring teams take direction from the county radiological officer. Decontamination monitoring of evacuees

should be completed as soon as possible. Decontamination monitoring of personal belongings (i.e., clothing, personal articles, vehicles) can be accomplished after the evacuees have been processed.

2. Decontamination monitoring teams will organize their areas and traffic flow patterns so that contaminated persons and those to be monitored will not mix with the contamination-free individuals who have already been admitted to the "general living" portion of the mass care center. For example, persons will be sent to the decontamination area (showers) by a route that will not place them in contact with contamination-free areas. Showers used for decontamination will not be available for general use until they are decontaminated.

C. Decontamination Monitoring Services for Persons Who Are Not Housed at Mass Care Centers

Persons who do not intend to stay at a mass care center, but who wish to be monitored will be extended these services at mass care/decontamination centers. Decontamination monitoring procedures and record keeping are identical for people who stay or do not stay at mass care centers.

D. Equipment and Personnel Requirements

1. The instrument used for decontamination monitoring is the CD V-700 Geiger-Mueller Survey Meter (ranges approximately 0.0 to 50 mR/hr), which is supplied to the respective county emergency management agencies by PEMA in sufficient quantities to meet their needs. Survey meters in civil defense kits are considered as the backup or reserve units to the special distribution of this equipment for response to fixed nuclear facility incidents.

2. A sufficient number of CD V-700 survey meters are available for each mass care/decontamination center to allow one meter for each 250 people.
3. Personnel requirements are one trained monitor and one recorder (assistant to the monitor) for each survey meter as a minimum. Each decontamination monitor and recorder is supplied with dosimetry (CD V-742 and TLD) and KI.
4. Inventory, maintenance, and property accountability with regard to dosimetry, survey meters, and KI are described in Attachment C to this Appendix.

E. Decontamination Monitoring Record Keeping

Decontamination monitoring personnel will be responsible for completing a "Decontamination Monitoring Report Form" (see Tab 1 to this Attachment) for each individual with a reading of 0.05 mR/h (milliroentgens per hour) or more above background, which is the action level set by BRP indicating that decontamination of the individual is necessary. The form will be completed, signed by the monitor at each of the steps [(1) initial monitoring, (2) after first decontamination, (3) after second decontamination, (4) medical referral]. Two copies of the form will be prepared. One copy will be given to the individual when decontamination is completed or the individual is sent to a medical facility. The original will be retained by the risk county emergency management agency in a historical file. Lehigh County Civil Defense will forward these completed forms to the Montgomery and Berks County Emergency Management Agencies, as appropriate. The risk county emergency management agencies will make these forms available to BRP, if requested by BRP.

F. Progress Reports on Decontamination Monitoring

Decontamination Team Chiefs should verbally report at two hour intervals to the County Civil Defense Director pertinent information

on results of monitoring. The report shall include the following cumulative data: number of persons monitored; number of persons contaminated; number decontaminated; number referred to a medical facility (for radiation decontamination/treatment); the highest reading (above 0.05 mR/h) on any particular individual; and any unusual or particularly notable findings. The county emergency management coordinators are responsible for consolidating this information and reporting it immediately to PEMA who in turn will relay the information to BRP.

II. PROCEDURES FOR DECONTAMINATION MONITORING TEAMS

A. Decontamination Monitoring Procedures

Monitors performing decontamination monitoring of people should follow these procedures:

1. Select a reception location for conducting the monitoring operation. Precautions must be taken to prevent contamination of the area.
2. Use the CD V-700. Attach the headphone. This allows the monitor to observe the position of the probe and better control it while monitoring. The headphone responds more quickly to changes in radiation level than the meter.
3. Check the operability of the CD V-700.
4. Place the probe in a light plastic bag or cover of lightweight material to prevent contamination. This is desirable but not mandatory.
5. Periodically determine the background radiation level of the location where the monitoring is to take place. If the meter indication is above background radiation with the probe shield closed, find a better location that will bring the meter indication as low as possible.

6. Open the shield on the CD V-700 probe and put on the headphone.
7. Place the probe about two inches from the head, being careful not to touch the person.
8. Move the probe downward on one side of the neck, the collar, the shoulder, arm, wrist, hand, underarm, armpit, side of body, side of leg, around the cuff and shoe, including the bottom of the shoe. Then monitor the inside of the leg from the cuff to the groin and continue the procedure on the other side of the body. (See Illustration 1.)

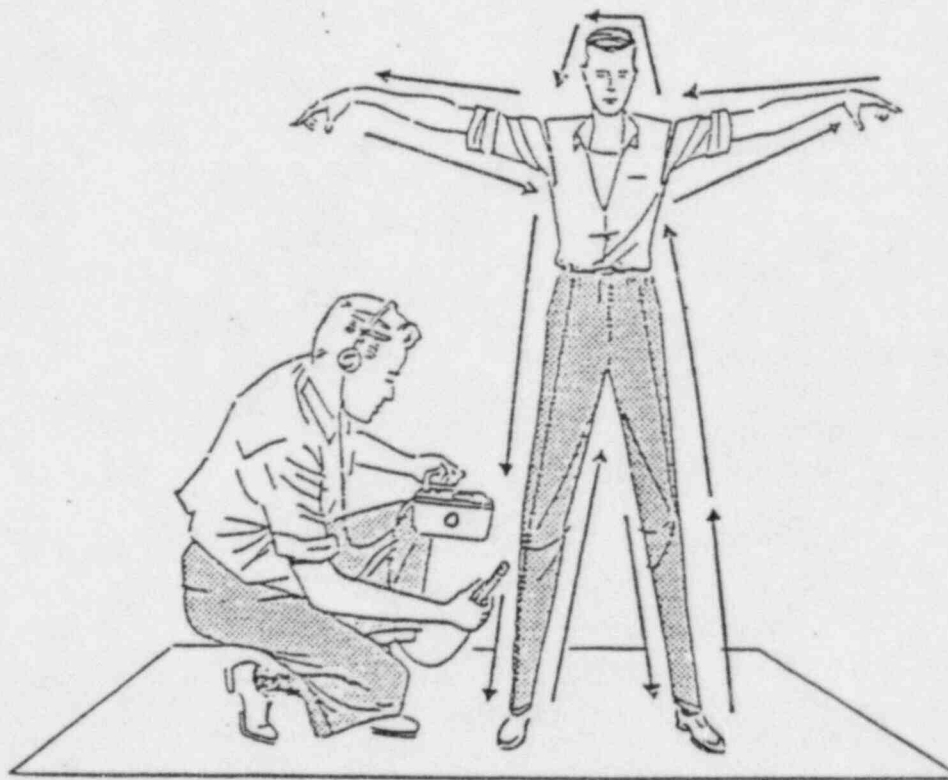


Illustration 1 - Decontamination Monitoring

9. Monitor the front and back of the body.
10. Record the information on the Decontamination Monitoring Report Form (see Tab 1 to this Attachment).
11. Assure that individuals found to be contaminated are decontaminated.¹
12. Monitor the individual after decontamination to determine that the contamination has been removed. Repeat decontamination procedures if contamination still remains.

B. Decontamination of People

1. Contaminated persons should wash with soap and warm water. A thorough shower should be sufficient. Emphasis should be placed on any specific spots found to be contaminated in the monitoring process. Also, special attention should be given to the hair, hands, and fingernails.
2. After thorough cleansing, the individuals should be monitored again. If some contamination still remains, the individual should shower again and use a mild abrasive soap. If monitoring after the second thorough cleansing indicates that the contamination is still present, the individual should be sent to the nearest medical facility that is capable of treating contaminated persons.
3. Care should be taken that persons who are decontaminated do not become recontaminated by dressing in contaminated clothing (the clothing they were wearing or possibly other clothing brought by

¹ A person is considered contaminated if there is a reading of 0.05 mR/hr above background or more. Do not confuse background radiation with your readings; contamination would be apparent by a sustained increase on the visual meter reading (Selector Switch on X 1 range), and also by a marked increase in the audible indication from the headphone.

them). If the individual does not have contamination free clothing of his/her own, then clean clothing should be issued the individual until such time as his/her clothing can be decontaminated.

C. Decontamination Procedures for Wounds

Persons with contaminated wounds will be referred to an appropriate medical facility for radiation decontamination and treatment.

D. Clothing Decontamination Procedures

1. Articles which are machine washable should be laundered with a conventional detergent, line dried in a contamination free area or machine dried, and retained until they can be monitored as a decontamination check. Water repellent items may be scrubbed with water and detergent, and retained until monitored.
2. The county emergency management agency is responsible for arranging for a laundry facility dedicated to washing of contaminated clothing.

E. Decontamination Procedures for Supplies, Instruments and Equipment

1. The item in question should be monitored first to determine the extent and area of contamination by thoroughly going over the object with the CD V-700 probe about two inches from the surface. Decontamination of these articles is generally accomplished by wiping and/or washing to the extent necessary to remove the radiocontaminants.
2. The county emergency management agency is responsible for arranging for radiation monitoring of vehicles and decontamination. At mass care/decontamination centers monitoring teams will initially direct their efforts to the evacuees as described in (a) and (b) above. When time permits,

the monitoring teams can monitor the vehicles of the evacuees where they are parked. Generally, external monitoring of vehicles will be sufficient; however, inside monitoring will also be done for those vehicles found to be externally contaminated and those vehicles used by persons found to be contaminated. Suitable car washing arrangements can be made for external decontamination depending upon the number of vehicles contaminated and amount of radiocontamination. The county emergency management agency should seek the advice of BRP, through PEMA, in deciding what measures will be effective and expeditious. Vehicles with contamination in the interiors will be impounded and BRP must be consulted, before return to their owners.

F. Disposal of Contaminated Wastes

As described above, clothing and similar materials as well as miscellaneous equipment and vehicles, can be decontaminated. Where cleaning materials and other items cannot be successfully decontaminated, special handling is necessary.

Contaminated waste materials should be packaged in a plastic bag, tied securely at the top, and placed in a metal container with a snug fitting lid (garbage can) until it is laundered. If any material cannot be decontaminated by laundering, place it in the same type of plastic bag and container and store in a locked room that is not used for any other purpose until such time as the contaminated waste is disposed of by IRAP (federal government - Interagency Radiological Assistance Plan) personnel. Accumulation of contaminated waste materials and the need for disposal should be reported through the emergency management system.

TABS:

1. Decontamination Monitoring Report Form

TAB 1
ATTACHMENT A
DECONTAMINATION MONITORING REPORT FORM

NOTE: THIS FORM WILL BE COMPLETED FOR EACH INDIVIDUAL WITH A READING OF 0.05 mR/hr OR MORE ABOVE BACKGROUND.

NAME of person monitored _____
SOCIAL SECURITY NUMBER _____
ADDRESS _____

FIRST Radiological Monitoring

Monitor's or Recorder's Signature X _____
Mass Care Center _____
Survey Meter Serial # _____ DATE _____ TIME _____ ^{am}/_{pm}

SECOND Radiological Monitoring - to be completed after person has undergone decontamination including acquiring radiologically "clean" clothing.

Monitor's or Recorder's Signature X _____
Mass Care Center _____
Survey Meter Serial # _____ DATE _____ TIME _____ ^{am}/_{pm}

THIRD Radiological Monitoring - to be completed after person has undergone decontamination a second time.

Monitor's or Recorder's Signature x _____
Mass Care Center _____
Survey Meter Serial # _____ DATE _____ TIME _____ ^{am}/_{pm}

ANATOMY	FIRST MONITORING	SECOND MONITORING	THIRD MONITORING
head	mR/hr	mR/hr	mR/hr
face	mR/hr	mR/hr	mR/hr
neck	mR/hr	mR/hr	mR/hr
rt. shoulder	mR/hr	mR/hr	mR/hr
rt. arm	mR/hr	mR/hr	mR/hr
rt. hand	mR/hr	mR/hr	mR/hr
rt. side	mR/hr	mR/hr	mR/hr
rt. outside leg	mR/hr	mR/hr	mR/hr
rt. foot	mR/hr	mR/hr	mR/hr
rt. inside leg	mR/hr	mR/hr	mR/hr
groin	mR/hr	mR/hr	mR/hr
lt. inside leg	mR/hr	mR/hr	mR/hr
lt. foot	mR/hr	mR/hr	mR/hr
lt. outside leg	mR/hr	mR/hr	mR/hr
lt. side	mR/hr	mR/hr	mR/hr
lt. hand	mR/hr	mR/hr	mR/hr
lt. arm	mR/hr	mR/hr	mR/hr
lt. shoulder	mR/hr	mR/hr	mR/hr
chest	mR/hr	mR/hr	mR/hr
stomach	mR/hr	mR/hr	mR/hr
back	mR/hr	mR/hr	mR/hr
buttocks	mR/hr	mR/hr	mR/hr

Medical Referral - subject individual sent to _____ hospital for decontamination and/or treatment at (TIME) _____ ^{am}/_{pm} on (DATE) _____

Decontamination Team Chief's Signature X _____

Form Distribution: Original to county emergency management agency;
copy to person monitored.

APPENDIX 5

ATTACHMENT B

DOSIMETRY AND POTASSIUM IODIDE (KI)

I. GENERAL INFORMATION

- A. Each member of a decontamination monitoring team is issued a CD V-742, a TLD, KI and a Dosimetry-KI Report Form. Each decontamination monitoring team is also issued a CD V-700 Geiger-Mueller Survey Meter.
- B. Dosimeter chargers (CD V-750) which are used to "zero" or charge the self-reading dosimeters are located with, or within easy access to, each emergency organizational unit.

II. DISTRIBUTION OF DOSIMETRY-POTASSIUM IODIDE AND RELATED PROCEDURES

A. Distribution

At the ALERT stage, the County Technical Division Chief (RADEF) will report to the EUC to prepare dosimetry, survey meters, KI, and necessary report forms for distribution to decontamination monitoring teams (generally fire services personnel). At SITE EMERGENCY, the Technical Division Chief (RADEF) will contact the County Fire and Rescue Division Chief for distribution of the dosimetry and other radiological equipment resources to decontamination monitoring teams throughout the County. Upon receipt, each organization shall distribute to individual team members and mobilize teams to their assigned locations.

To facilitate this distribution, a "Dosimetry, KI, Survey Meter Distribution List" is contained in Attachment U to this Appendix. The list indicates the receiving organizations and the required number of items.

B. Property Control

Property accountability must be maintained in the distribution process. The "Receipt Form for Dosimetry-Survey Meters-KI" (see Tab 4) is designed for transferral of quantities of equipment from agency to agency. "Acknowledge of Receipt by Emergency Workers for Dosimetry-KI and Survey Meters" (see Tab 5) is designed to expedite transferral of the equipment-KI to individual users.

The County, which stores and maintains the equipment and KI, will be responsible for ensuring return of all equipment upon termination of the incident.

C. Control TLD's

1. In the event of an incident, the County will retain the designated "Control TLD's." Control TLD's are equal in number to about 5% of the total amount allotted for distribution. Each "control TLD" is so labeled and the serial numbers are not in the same sequential batch as the TLD's meant for distribution to emergency workers. As coordinated by PEMA, the control TLD's will be forwarded to the TLD service contractor. The County EMA will complete the "Control TLD's Form" (see Tab 2) and forward it with the control TLD's.
2. The purpose of "control TLD's" is to allow measurement of a "baseline" of radiation (background radiation) that the TLD's have been exposed to at the time the County EMA distributes TLD's in reaction to the incident. The measurement of the accumulated background radiation, as measured by the control TLD's, will be subtracted from the reading obtained from each emergency worker in that county. This procedure can be characterized as a "mathematical zeroing" of the TLD.

3. At the time of the incident, the County EMA will ensure that the control TLD's are not exposed to radiation other than background radiation.

D. Inventory and Maintenance

Inventory and maintenance procedures are specified in Attachment C to this Appendix.

E. County Distribution Time Requirements

The County plans to make its entire dosimetry-KI-survey meter distribution to using organizations within two hours.

III. POTASSIUM IODIDE (KI)

A. Background Information

1. Iodine accumulates in the thyroid gland which is located at the front base of the neck just below the larynx (Adam's apple). Radioactive iodine is no different, i.e., it will accumulate in the thyroid, saturating the thyroid gland with iodine so that radioiodine (radioactive iodine) will not lodge there in a large quantity. Hence, KI lessens the risk to the thyroid gland; otherwise it provides no protection against radiation.
2. The Pennsylvania Department of Health is responsible for developing policies relating to use of KI during fixed nuclear incidents. The department has procured KI tablets for emergency workers and KI in liquid form for staff and patients of risk hospitals. Thyro-Block (product of Carter-Wallace Inc.) is the brand name of the KI tablets procured by the department for emergency workers. A unit of Thyro-Block consists of 14 tablets of 130 milligrams in size; the dose is one tablet per day.

3. The toxicity level of KI is very low and dangers in taking this drug are considered to be minimal. Nonetheless, individuals should not take more than the recommended dose. Although side effects to KI are unlikely because of the low dose and the short time period it will be taken, some side effects are possible. The side effects may include: skin rashes, swelling of the salivary glands, "iodism" (metallic taste, burning mouth and throat, sore teeth and gums, cold symptoms and sometime gastrointestinal symptoms). A few people may have an allergic reaction with more serious symptoms. These symptoms could be: elevated temperature, joint pains, swelling of the face and body, and at times, severe shortness of breath which requires immediate medical attention.
4. The effectiveness of KI as a blocking agent is greatest if administered before the time of exposure to radioiodine, but some exposure saving can be obtained by administration shortly after exposure. A user information sheet on Thyro-Block is included at Tab 3 to this Attachment.

B. Pennsylvania Department of Health Policies on KI

1. KI in tablet form is available to emergency workers (emergency management agencies, police forces, fire companies, ambulance services, and farmers keeping livestock) and in liquid form to acute care hospitals. County EMA's specify in their plans those municipalities, agencies, and teams that receive KI for use by emergency workers.
2. The Secretary of the Department of Health is charged with the decision to use, or not to use, KI in an incident. The decision criteria made in conjunction with BRP, includes radioiodine dose projections, exposure savings, drug risk factors and incident assessment information.

KI should be taken only on the advice of the Secretary of the Department of Health. The Secretary's advice will be disseminated to emergency workers through emergency management channels. Upon taking KI, the emergency worker should read this information on the Dosimetry-KI Report Form (see Tab 1 to this Attachment).

IV. DOSIMETRY READINGS, RECORD KEEPING AND PROTECTIVE ACTION OPTIONS

A. Dosimetry Reading Procedures and Related Actions

1. Dosimeters should be worn in the pocket of an outer garment. In no case should the TLD be worn by more than one person since there is no way of ascertaining later how much of the dose recorded on the TLD was received by each individual if more than one person was involved.
2. For practical purposes each Roentgen registered on the CU V-742 self-reading dosimeters is interpreted to mean that the worker has received a corresponding number of rem, e.g., a reading of 5 R should be interpreted to mean that a 5 rem dose has been received.¹
3. Each emergency worker should read the self-reading dosimetry at least once each thirty minutes.

B. Protective Action Guides (PAG) for Emergency Workers

The protective action guide for whole body exposure specified by the Environmental Protection Agency (EPA) and by BRP is 25 rem. Workers should use the self-reading dosimetry to ensure that the 25 rem whole body PAG is not exceeded. By regularly checking the self-

¹ A Roentgen is a unit of measurement of x-ray or gamma radiation that is based upon effects as measured in air; a rem is a unit of radiation measurement that is based upon effects as measured in the human body. In this plan, Roentgen and rem are considered to be essentially identical.

reading dosimeter the worker can make reasonable judgements about how much radiation, if any, has been received, and at what rate it is being received. It is unlikely that doses of this magnitude would be received by decontamination monitoring personnel.

C. Dosimetry and KI Record Keeping

1. Each emergency worker is responsible for completing a Dosimetry-KI Report Form (see Tab 1 to this Attachment) and for returning it, along with the dosimetry, to his organization at the termination of his services. Each emergency organization shall forward the forms and dosimetry to the County EMA who in turn will deliver the TLD's and forms to PEMA. PEMA will deliver the forms and TLD's from all counties to BRP who will deliver the TLD's to the TLD service contractor for reading. All dosimetry records will be forwarded through emergency management channels to BRP for the purposes of record keeping, analysis, reporting and storage.
2. BRP will retain all original copies and will be the permanent record keeper of the completed Dosimetry-KI Report Forms along with BRP's explanation of each, the TLD service contractor generated information, and all related material. The records of individuals will be kept confidential.
3. BRP will use the Dosimetry-KI Report Form to select TLD's for immediate reading. The highest priority will be given to TLD's worn by persons whose self-reading dosimetry indicates 25 R or more, or where medical authority has requested immediate reading, or where other circumstances warrant. In these cases, BRP will expedite delivery of the TLD's to the TLD service contractor and readings will be received within 24 hours after the contractor's receipt of the TLD's. BRP will promptly relay the readings, with their interpretation to the individual and appropriate medical authorities. All other TLD's will be in the "routine" category of five days turnaround time from the TLD

service contractor; individuals will be informed of the TLD readings.

TABS:

1. Dosimetry-KI Report Form
2. Control TLD's Form
3. Patient Package Insert for Thyro-Block
4. Receipt for Dosimetry-Survey Meters-KI Form
5. Acknowledgement of Receipt by Emergency Workers for Dosimetry-KI and Survey Meters
6. Dosimetry-Survey Meter-KI Distribution List

(Please print legibly)

Emergency Worker's Name: _____
Home Address: _____

Social Security Number: _____
Emergency Worker's Organization: _____

County: _____

Emergency Worker's Signature: X _____

MISSION		CD V-730 or DCA-622 (0-20R)		CD V-742 (0-200R)		TLD (thermoluminescent dosimeter)	
No.	Description	DATE	SERIAL #	BEFORE	AFTER	MISSION TOTAL	Serial # of TLD:
1.				R	R	R	Issued _____
2.				R	R	R	Turned In _____
3.				R	R	R	By: _____
4.				R	R	R	To: _____
5.				R	R	R	READING OF TLD _____
m/rem _____							Date of Reading _____

POTASSIUM IODIDE (KI) RECORD		
Day	Date	Amount Taken
Day 1		1 tablet/130mg
Day 2		1 tablet/130mg
Day 3		1 tablet/130mg
Day 4		1 tablet/130mg
Day 5		1 tablet/130mg
Day 6		1 tablet/130mg
Day 7		1 tablet/130mg
Day 8		1 tablet/130mg
Day 9		1 tablet/130mg
Day 10		1 tablet/130mg
Day 11		1 tablet/130mg
Day 12		1 tablet/130mg
Day 13		1 tablet/130mg
Day 14		1 tablet/130mg

DOSIMETRY INSTRUCTIONS: Read the CD V-730 (DCA-622) and CD V-740 each half hour. Do not exceed 25 R cumulative total. The TLD gives an accurate reading of total dose and therefore should be used only by one person. Forward the TLD with this form (see form distribution below).

THYROID GLAND SCREENING CHECK

Upon completion of the mission, or as directed, each emergency worker must undergo "decontamination monitoring" at a decontamination monitoring station or a mass care/decontamination center. Monitoring personnel at these stations will complete a "Decontamination Monitoring Report Form" for you. Additionally emergency workers should be screened for radioiodine uptake in the thyroid gland and the results recorded here. Medical referral action level for the thyroid check is 0.1 mR/hr or higher when using the CD V 700 survey meter.

CD V-700 Serial #: _____
Signature of Monitor: X _____
Reading: _____ mR/hr

DOSIMETRY-KI REPORT FORM DISTRIBUTION: Forward this completed form with the TLD through emergency management channels to BRP. When the self-reading dosimetry indicates total exposure of 25R or more, expedite delivery to BRP. BRP will forward to the individual and to the county EMA the TLD reading as well as an explanation of the reading. When expedited delivery is made to BRP and where otherwise warranted, BRP will report the TLD reading within 24 hours. Routine reports: May take a week or more.

KI INSTRUCTIONS: Take KI only on the direction of the Secretary of the Department of Health. Take one tablet (130 mg) once a day. If you have any adverse reaction to the drug, discontinue taking KI and report to your supervisor.

TAB 2

ATTACHMENT B

CONTROL TLD's FORM

When TLD's are distributed during an incident this form should be completed by the county emergency management agency. The completed form, together with the control TLD's, should be forwarded through PEMA to BRP.

Note: If a fixed nuclear facility incident occurs, the three control TLD's should not remain in, or be moved into the plume exposure pathway EPZ.

County _____

The control TLD's accompanied by this form are serial numbered "Control _____" through "Control _____" and/or "Control" _____, _____, _____, _____, _____.

The TLD stock, with which the control TLD's were co-located, was stored at:

Address _____

At the time of the incident the control TLD's were moved to (if not moved, so indicate):

Address _____

Date and time moved: Date: _____ Time: _____

This form completed by _____

Signature X _____

ATTACHMENT B

Patient Package Insert For

THYRO-BLOCK™

(POTASSIUM IODIDE)
(pronounced pot-TASS-ee-um EYE-oh-ye-oh)
(abbreviated: KI)
TABLETS and SOLUTION U.S.P.

TAKE POTASSIUM IODIDE ONLY WHEN PUBLIC HEALTH OFFICIALS TELL YOU. IN A RADIATION EMERGENCY, RADIOACTIVE IODINE COULD BE RELEASED INTO THE AIR. POTASSIUM IODIDE (A FORM OF IODINE) CAN HELP PROTECT YOU.

IF YOU ARE TOLD TO TAKE THIS MEDICINE, TAKE IT ONE TIME EVERY 24 HOURS. DO NOT TAKE IT MORE OFTEN. MORE WILL NOT HELP YOU AND MAY INCREASE THE RISK OF SIDE EFFECTS. DO NOT TAKE THIS DRUG IF YOU KNOW YOU ARE ALLERGIC TO IODIDE. (SEE SIDE EFFECTS BELOW.)

INDICATIONS

THYROID BLOCKING IN A RADIATION EMERGENCY ONLY.

DIRECTIONS FOR USE

Use only as directed by State or local public health authorities in the event of a radiation emergency.

DOSE

Tablets: ADULTS AND CHILDREN 1 YEAR OF AGE OR OLDER: One (1) tablet once a day. Crush for small children. BABIES UNDER 1 YEAR OF AGE: One-half (1/2) tablet once a day. Crush first.

Solution: ADULTS AND CHILDREN 1 YEAR OF AGE OR OLDER: Add 5 drops to one-half glass of liquid and drink each day. BABIES UNDER 1 YEAR OF AGE: Add 3 drops to a small amount of liquid once a day.

For all dosage forms: Take for 10 days unless directed otherwise by State or local public health authorities.

Store at controlled room temperature between 15° and 30°C (59° to 86°F). Keep container tightly closed and protect from light. Do not use the solution if it appears brownish in the bottle of the bottle.

WARNING

Potassium iodide should not be used by people allergic to iodide. Keep out of the reach of children. In case of overdose or allergic reaction, contact a physician or the public health authority.

DESCRIPTION

Each THYRO-BLOCK™ TABLET contains 130 mg of potassium iodide.

Each drop of THYRO-BLOCK™ SOLUTION contains 21 mg of potassium iodide.

HOW POTASSIUM IODIDE WORKS

Certain forms of iodine help your thyroid gland work right. Most people get the iodine they need from foods, like iodized salt or fish. The thyroid can "store" or hold only a certain amount of iodine.

In a radiation emergency, radioactive iodine may be released in the air. This material may be breathed or swallowed. It may enter the thyroid gland and damage it. The damage would probably not show itself for years. Children are most likely to have thyroid damage.

If you take potassium iodide, it will fill-up your thyroid gland. This reduces the chance that harmful radioactive iodine will enter the thyroid gland.

WHO SHOULD NOT TAKE POTASSIUM IODIDE

The only people who should not take potassium iodide are people who know they are allergic to iodide. You may take potassium iodide even if you are taking medicines for a thyroid problem, for example, a thyroid hormone or antithyroid drug. Pregnant or nursing women and babies and children may also take this drug.

HOW AND WHEN TO TAKE POTASSIUM IODIDE

Potassium Iodide should be taken as soon as possible after public health officials tell you. You should take one dose every 24 hours. More will not help you because the thyroid can "hold" only limited amounts of iodine. Larger doses will increase the risk of side effects. You will probably be told not to take the drug for more than 10 days.

SIDE EFFECTS

Usually, side effects of potassium iodide happen when people take higher doses for a long time. You should be careful not to take more than the recommended dose or take it for longer than you are told. Side effects are unlikely because of the low dose and the short time you will be taking the drug.

Possible side effects include skin rashes, swelling of the salivary glands, and "iodism" (metallic taste, burning mouth and throat, sore teeth and gums, symptoms of a head cold, and sometimes stomach upset and diarrhea).

A few people have an allergic reaction with more serious symptoms. These could be fever and joint pains, or swelling of parts of the face and body and at times severe shortness of breath requiring immediate medical attention.

Taking iodide may rarely cause overactivity of the thyroid gland, underactivity of the thyroid gland, or enlargement of the thyroid gland (goiter).

WHAT TO DO IF SIDE EFFECTS OCCUR

If the side effects are severe or if you have an allergic reaction, stop taking potassium iodide. Then, if possible, call a doctor or public health authority for instructions.

HOW SUPPLIED

THYRO-BLOCK™ TABLETS (Potassium Iodide, U.S.P.) bottles of 14 tablets (NDC 0037-0472-20). Each white, round, scored tablet contains 130 mg potassium iodide.

THYRO-BLOCK™ SOLUTION (Potassium Iodide Solution, U.S.P.) 30 ml (1 fl. oz.) light-resistant, measured-drop dispensing unit (NDC 0037-4287-25). Each drop contains 21 mg potassium iodide.

WALLACE LABORATORIES
Division of
CARTER-WALLACE, INC.
Granbury, New Jersey 03512

C71-107915-1079

TAB 4
ATTACHMENT B

RECEIPT FORM FOR DOSIMETRY-SURVEY METERS-KI

ISSUED BY _____ ISSUED TO _____
 ADDRESS _____ ADDRESS _____
 RESPONSIBLE INDIVIDUAL _____
 TELEPHONE _____

INSTRUCTIONS: During a nuclear power plant incident, use this form to maintain property control when distributing the items listed below to municipalities and decontamination monitoring teams. This form should be used for transfer of these items in bulk form from: (1) the county emergency management agency to risk municipalities and decontamination monitoring teams; and (2) the municipalities to their local emergency response organizations (such as fire, police, and ambulance associations). NOTE: The form listed on item 11 below should be used when issuing dosimetry-KI to individual emergency workers.

LINE NUMBER	DESCRIPTION	QUANTITY
1.	CD V-742 Self-Reading Dosimeter (0-200R)	
2.	CD V-730 Self-Reading Dosimeter (0-20R)	
3.	DCA-622 Self-Reading Dosimeter (0-20R)	
4.	CD V-750 Dosimeter Charger	
5.	TLD (Thermoluminescent Dosimeter) Serial Numbers THROUGH	
6.	Potassium Iodide (KI) Tablets (Bottles of 14 Tablets Each)	
7.	CD V-700 Survey Meter	
8.	Dosimetry-KI Report Form	
9.	Decontamination Monitoring Report Form	
10.	Receipt Form for Dosimetry-Survey Meters-KI	
11.	Acknowledgment of Receipt by Emergency Workers for Dosimetry-KI and Survey Meters	

RECEIVED BY: _____ TITLE _____
 (print name)
 SIGNATURE: X _____ DATE _____

NOTES: Emergency workers assigned to decontamination monitoring teams at decontamination monitoring stations or centers do NOT receive a CD V-730 or DCA 622 (see column 2). Only members of decontamination monitoring teams receive a CD V-700 survey meter (see column 6).

INSTRUCTIONS FOR DISTRIBUTION: Enter (1) or (0) in columns 2 and 6. Record the serial number of the DCA-622 in column 2 and the serial number of the TLD in column 3. By signing column 8, the individual accepts responsibility for each item indicated on the respective line and agrees to return these items (less the KI authorized to be used) upon request and automatically when the nuclear power plant incident is terminated.

INSTRUCTIONS FOR RETURN OF ITEMS DESCRIBED: [✓] by the organization's responsible individual indicates return of each item.

DATE _____

NAME OF EMERGENCY ORGANIZATION _____

RESPONSIBLE INDIVIDUAL _____

ORGANIZATION ADDRESS _____

1	2	3	4	5	6	7	8
CD V-742 DOSIMETER (0-200R)	CD V-730 OR DCA- 622 (Serial Number) (0-20R)	TLD (THERMO- LUMINESCENT DOSIMETER) (Serial Number)	KI (POTASSIUM IODIDE) (Tablets)	DOSIMETRY- KI REPORT FORM	CD V-700 SURVEY METER	INDIVIDUAL'S NAME (print legibly)	INDIVIDUAL'S SIGNATURE
✓	✓	✓	✓	✓	✓		
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
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1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			
1 each			1 bottle	1 each			

APPENDIX 5

ATTACHMENT C

INVENTORY AND MAINTENANCE PROCEDURES

I. PURPOSE

This attachment sets forth inventory and maintenance procedures in Pennsylvania for dosimetry, chargers, survey meters and Potassium iodide (KI) intended for use in response to incidents at fixed nuclear facilities.

II. DEFINITIONS

For the purpose of this attachment, the following definitions are applicable:

- A. Inspection - A visual check for physical damage and missing accessories to include batteries (for the CD V-750 and CD V-700) which should be stored separately.
- B. Operational check -
 - 1. Self-reading dosimetry (CD V-730, CD V-742, OR Dosimetry Corporation of America Model 622) - The dosimetry is operational if the hairline can be moved to or close to zero using a dosimeter charger.
 - 2. Dosimeter charger (CD V-750) - The charger is operational if the light source for reading dosimeters is working and the charger can move the hairline on a self-reading dosimeter to or close to zero.
 - 3. Survey meter (CD V-700) - The survey meter is operational if after turning the selector switch to the X10 range, allowing 30 seconds and warmup, opening the shield on the probe and placing

the open area of the probe as close as possible to the operational check source located on the instrument case, the meter reads between 1.5 and 2.5 mR/h.

- C. Special RERP issue - Refers to dosimeters, dosimeter chargers and survey meters that are either civil defense or commercial equipment issued to selected counties for the express purpose of response to nuclear facility incidents; this equipment is in addition to civil defense kits issued to counties as a preparedness measure for nuclear attack.
- D. Set aside - Refers only to CD V-742 dosimeters and CD V-750 dosimeter chargers originally issued to counties as part of civil defense kits for use in the event of nuclear attack. These two items have, in some cases, been removed from the kits (but still stored in the proximity of the kits) and "set-aside" for ready availability if a nuclear power plant incident should occur. This equipment, of course, can be placed back into the civil defense kits if nuclear attack becomes a heightened concern. (Note: Most of the CD V-742's and CD V-750's designated for response to nuclear facility incidents are "special issue" and only a small portion are "set-aside." Further, not all counties are involved in this set-aside, since some counties received a full special issue.)

III. INVENTORY AND MAINTENANCE PROCEDURES

- A. Annually, during the month of January, each risk and support county for nuclear power facilities in Pennsylvania will physically conduct a complete inventory of all special RERP issue or set-aside of dosimeters, dosimeter chargers, survey meters, KI and related forms (see Tab A). Using the form provided (Tab A), the county coordinator will report the results of the inventory to PEMA.
- B. At least once each year PEMA will physically conduct an inventory-inspection-operational check of the special issue and set-aside equipment and KI. Affected county emergency management agencies are

responsible for making available all such equipment and KI at a central location.

- C. PEMA will provide an annual KI report to the Department of Health.
- D. These procedures pertain only to the special RERP issue or set-aside of equipment and KI for response to nuclear power facility incidents and in no way changes or alters other established procedures for RADEF equipment.

IV. THERMOLUMINESCENT DOSIMETERS

Each year, based on the original issue date, PEMA will conduct an exchange of new-for-old TLD's with each county involved in response to nuclear power facility incidents. When the annual replacements are received from the TLD service contractor, PEMA will exchange the TLD's on a one-for-one basis with the respective county(ies).

There are no maintenance requirements for the TLD's and each has a usable life of only one year.

TAB:

1. Fixed Nuclear Facility Special Equipment-KI Forms Inventory Report Form

TAB 1

ATTACHMENT C

FIXED NUCLEAR FACILITY SPECIAL EQUIPMENT-KI
FORMS INVENTORY REPORT FORM

_____ COUNTY

I, _____, certify that a physical
(name of individual conducting the inventory)
inventory of the equipment and KI issued to or set-aside by this county
specifically for response to incidents at nuclear power plants was conducted
on _____, 19__ and the results of such inventory are as follows:

<u>Equipment/KI/Forms</u>	<u>1</u> Quantity Special Issue	<u>2</u> Quantity Set-Aside	<u>3</u> Total Columns 1&2	Physical Inventory Quantity
1. CD V-730 self-reading dosimeter	_____	_____	_____	_____
2. Dosimeter Corporation of America Model 622 self-reading dosimeter (commercial equivalent of CD V-730)	_____	_____	_____	_____
3. CD V-740 self-reading dosimeter	_____	_____	_____	_____
4. CD V-742 self-reading dosimeter	_____	_____	_____	_____
5. CD V-750 dosimeter charger	_____	_____	_____	_____
6. TLD (thermoluminescent dosimeter) Serial numbers _____ through _____ and _____ through _____	_____	_____	_____	_____
7. CD V-700 survey meter	_____	_____	_____	_____
8. Bottles of KI (14 tablets)	_____	_____	_____	_____
9. Copies of "Dosimetry-KI Report Form"	_____	_____	_____	_____
10. Copies of "Decontamination Monitoring Report Form"	_____	_____	_____	_____
11. Copies of "Farmer Emergency Worker Certification"	_____	_____	_____	_____

NAME OF INVENTORY CLERK: _____

(please print or type)

INVENTORY CLERK'S SIGNATURE: X _____

DATE: _____

SIGNATURE-COUNTY COORDINATOR: X _____

DATE: _____

APPENDIX 5

ATTACHMENT D

DOSIMETRY-SURVEY METER-KI DISTRIBUTION LIST

RESPONSE ORGANIZATION	CD V-750's	CD V-742's	TLD's	CD V-700's	BOTTLES OF KI	DOSIMETRY-KI REPORT FORMS	DECONTAMINATION MONITORING REPORT FORMS
1. Allentown Fire Department Ernest Toth, Chief Fourth and Hamilton Allentown, PA	18	105	105	50	105	120	12000
2. Macungie Fire Department Tim Shantzbaugh, Chief 102 E. Main Street Macungie, PA	2	15	15	7	15	20	1500
3. Emmaus Fire Department Robert Riss, Chief 652 Chestnut Street Emmaus, PA	2	10	10	5	10	20	800
4. Upper Saucon Fire Department Glen Scholl, Chief R.D. 2, Box 322 Center Valley, PA	6	35	35	17	35	40	4000
5. Coopersburg Fire Department Barry Reinhard, Chief 223 E. Station Ave. Coopersburg, PA	1	5	5	3	5	10	500
6. Salisbury Fire Department Rodney Andrecs, Chief 822 Lawrence Street Bethlehem, PA	2	10	10	5	10	20	700

RESPONSE ORGANIZATION	CD V-750's	CD V-742's	TLD's	CD V-700's	BOTTLES OF KI	DOSIMETRY-KI REPORT FORMS	DECONTAMINATION MONITORING REPORT FORMS
7. Catasauqua Fire Department Richard Fehnel, Chief 825 Bath Avenue Catasauqua, PA	2	10	10	4	10	15	700
8. Whitehall Fire Department William Balliet, Chief 600 K Mickley Run Apts. Whitehall, PA	1	5	5	2	5	10	150
9. Western Salisbury Fire Dept. Jack Kelley, Chief 3007 Meadowbrook Circle N. Allentown, PA	1	6	6	3	6	10	410
COUNTY RESERVE	80	24	24*	9	24	35	475
TOTAL	115	225	225	105	225	300	21500

*Ten of these twenty-four reserve TLD's are "control TLD's."

APPENDIX 5

ATTACHMENT E

DECONTAMINATION MONITORING ASSIGNMENTS

<u>RECEPTION CENTER</u>	<u>MASS CARE CENTER</u>	<u>LOCATION</u>	<u>DECONTAMINATION TEAM*</u>
I. Emmaus High School, Emmaus	1. Shoemaker Elementary	North Fairview St. Macungie	Macungie F.D.
	2. Washington Elementary	Ninth & Washington Streets, Allentown	Allentown F.D.
	3. Central Elementary	Turner & Lumber Streets, Allentown	Allentown F.D.
	4. Trexler Middle School	15th & Greenleaf Streets, Allentown	Allentown F.D.
	5. Union Terrace School	Union St. (West of 19th), Allentown	Allentown F.D.
	6. Allen High School	17th & Turner Allentown	Allentown F.D.
	7. Raub Middle School	St. Cloud & Walnut Allentown	Allentown F.D.
	8. Muhlenberg Elementary	21st & Washington Streets, Allentown	Allentown F.D.
	9. Lehigh Parkway Elementary	1708 Coranado St. Allentown	Allentown F.D.
	10. Muhlenberg College	23rd & Chew Streets Allentown	Allentown F.D.
	11. St. Elizabeth Church School	433 Pershing St. Allentown	White Hall F.D.
	12. Catasauqua Middle Sch.	330 Howertown, Rd. Catasauqua	Catasauqua F.D.
	13. St. Thomas Moore Sch.	1040 Flexer Ave. Allentown	Western Salisbury F.D.
	14. Emmaus Sr. High School	851 North St. Emmaus	Emmaus F.D.
	15. Eyer Jr. High School	Macungie	Macungie F.D.

<u>RECEPTION CENTER</u>	<u>MASS CARE CENTER</u>	<u>LOCATION</u>	<u>DECONTAMINATION TEAM</u>
II. Southern Lehigh Sch. Complex Center Valley	1. Coopersburg Elem. School	317 E. State St. Coopersburg	Coopersburg F.D.
	2. Salisbury High School	500 E. Montgomery St., Allentown	Salisbury F.D.
	3. Salisbury Middle School	3301 Devonshire Rd. Allentown	Salisbury F.D.
	4. South Mountain Middle School	Emmaus Ave. & S. Church, Allentown	Allentown F.D.
	5. Jefferson Elem. School	Eighth & St. John Streets, Allentown	Allentown F.D.
	6. Roosevelt Elem. School	W. Susquehanna & S. Second, Allentown	Allentown F.D.
	7. Harrison-Morton Middle School	2nd & Turner	Allentown F.D.
	8. Mosser Elementary School	Dauphin & E. Union Streets, Allentown	Allentown F.D.
	9. Ritter Elementary School	Plymouth & E. Washington Streets, Allentown	Allentown F.D.
	10. United Wesleyan School	1414 E. Cedar Allentown	Allentown F.D.
	11. Dieruff High School	E. Washington & Irving Streets, Allentown	Allentown F.D.
	12. Central Catholic	4th & Chew Streets Allentown	Allentown F.D.
	13. Allentown College	Center Valley	Upper Saucon F.D.
	14. Southern Lehigh Jr. High School	Center Valley	Upper Saucon F.D.
	15. Southern Lehigh Sr. High School	Center Valley	Upper Saucon F.D.

*These are primary assignments. In the event of unavailability, other trained county fire company personnel will be assigned.

APPENDIX 6

MEDICAL SERVICES SUPPORT

ATTACHMENTS:

- A - County Hospitals Capable of Radiation Treatment
- B - Ambulance Services
- C - Air Evacuation

APPENDIX 6

ATTACHMENT A

LEHIGH COUNTY HOSPITALS

The hospitals and medical services of Lehigh County that can support evacuation and treatment of contaminated/irradiated individuals are:

<u>HOSPITAL</u>	<u>CAPACITY (# BEDS)</u>	<u>TREATMENT OF CONTAMINATED INDIVIDUALS</u>	<u>CAN SUPPORT AIR MEDICAL EVACUATION</u>
1. Lehigh Valley Hospital Center*	472	Yes	Yes**
2. Allentown General Hospital	305	Yes	Yes
3. Sacred Heart Hospital	205	Yes	No
4. Allentown Osteopathic	150	Yes	No

*Primary facility for the treatment of irradiated individuals in Lehigh County.

**This hospital has its own helicopter.

APPENDIX 6

ATTACHMENT B

LEHIGH COUNTY AMBULANCE RESOURCES

<u>AMBULANCE SERVICE</u>	<u>NUMBER OF AMBULANCES</u>
1. Catasauqua Ambulance Corps. 418 Pearl Street Catasauqua, PA 18032 Telephone: 264-4000	2
2. Cetronia Ambulance Corps. 3939 Hamilton Street Allentown, PA 18104 Telephone: 395-6833	5
3. Coopersburg Ambulance Corps. Coopersburg, PA 18036 Telephone:	2
4. Emmaus Ambulance Corps. 32 South 4th Street Emmaus, PA 18049 Telephone: 967-3141	3
5. H-M-S Ambulance Corps. Whitehall, PA 18052 Telephone: 264-7244	2
6. Fountain Hill Ambulance Corp. Address: Telephone:	2
7. Lower Milford Ambulance Corp. Limport, PA Telephone: 965-5166	1
8. Macungie Ambulance Corps. 31 S. Walnut Street Macungie, PA 18062 Telephone:	2
9. North Whitehall Ambulance Corps. R.D. 1 Coplay, PA 18037 Telephone:	3
10. Salisbury Ambulance Corp. 1222 Marlowe Street Allentown, PA 18103	2

AMBULANCE SERVICENUMBER OF AMBULANCES

- | | |
|---|-------------|
| 11. Slatedale Ambulance Corps.
Slatedale, PA
Telephone: | 1 |
| 12. Slatington Community Ambulance Corp
510 Main Street
Slatington, PA
Telephone: | 2 and 1 van |
| 13. Northwestern Ambulance Corps.
Box 453, R.D. 1
New Tripoli, PA 18066
Telephone: | 3 |
| 14. Upper Saucon Ambulance Corps.
510 Main Street
Slatington, PA 18080
Telephone: | 2 |
| 15. Whitehall Emergency Squad
Box 243
Whitehall, PA 18052
Telephone: 264-4452 | 2 |
| 16. Allentown City Ambulance
425 Hamilton Street
Allentown, PA 18101 | 2 |

TOTAL 36

APPENDIX 6

ATTACHMENT C

AIR (HELICOPTER) MEDICAL EVACUATION

I. SITUATION

- A. The Pennsylvania State Police and the Pennsylvania National Guard will provide air evacuation of patients when this need is determined by PEMA during an incident at Limerick Generating Station.
- B. The determination of helicopter readiness will depend upon:
 - 1. Whether evacuation of patients was preplanned and sufficient lead time is allowed to mobilize crews. (Normally 6 hours to mobilize Pennsylvania National Guard.)
 - 2. The location and urgency of the situation.
- C. Evacuation of patients may be accomplished at the site of hospitals and nursing homes if space allows for a minimum 200' x 100' landing area and the approach is conducive to a helicopter descent.

II. MISSION

- A. To provide transportation for patients by air evacuation when time is an important factor.
- B. Non-ambulatory patients to be transported are those from hospitals and nursing homes.

III. POLICIES GOVERNING THE USE OF NATIONAL GUARD AND PENNSYLVANIA STATE POLICE HELICOPTERS

- A. National Guard

1. Department of Defense (DOD) Directive 45.15.13R governs the use of National Guard aircraft. The general policy governing the use of National Guard aircraft is that they may only be used in support of a state or federal mission.
2. Official purposes for utilizing National Guard aircraft are:
 - a. In direct support of the military mission (federal or state).
 - b. When specifically authorized by law.
 - c. When approved by Department of Defense after the head of a federal department or agency has certified the mission to be in the national interest and commercial transportation is not available.
 - d. When the mission is of an emergency nature involving a potential loss of life and commercial transportation is not available, feasible or adequate.

B. Pennsylvania State Police

1. In the event of an incident at the Limerick Generating Station, the PSP helicopters are available and have been authorized by the Governor to provide medical air evacuation if required.
2. Patients may be transferred by PSP helicopter when:
 - a. Ground transportation is not readily available.
 - b. Ground ambulance access to the incident is prevented.
 - c. Speed is essential.

- d. Advanced emergency care would otherwise be lacking or non-existent.

C. Responsibilities

1. The Pennsylvania Department of Health in coordination with EPAM is the responsible agency for coordinating medical air evacuation efforts.
2. PSP prefers to have either a physician or a registered nurse accompany each patient during helicopter medical evacuation. During an emergency, their policy may have to be modified to include a qualified person to administer emergency care and, therefore, assume responsibility for patient care.
3. PSP ground patrols will provide the necessary ground to air coordination of activities during the time the helicopters are airborne.
4. The Army National Guard will coordinate their ground to air activities through their own communications system. Communications between PSP and National Guard are possible.
5. Bucks County Emergency Operating Center will provide necessary assistance concerning communications whenever possible. (National Guard helicopters can communicate on the primary fire frequency of 46.12.)

D. Specific Helicopter Area Operation

1. National Guard helicopters can provide approximately nine (9) chinooks (CH-47) and thirty (30) UH (Huey) helicopters.
2. Helicopter patient carrying capabilities:
 - a. Chinook - CH-47:

(1) Max. 12 litters with three (3) attendants..

(2) 33 seats.

b. Huey - UH-1B:

(1) Max. 3 litters with two (2) attendants.

(2) 10 seats.

3. PSP

a. 206B Jet Rangers (7)

(1) Max. 2 litters with one (1) attendant.

(2) four passengers.

APPENDIX 7

PUBLIC INFORMATION

ATTACHMENTS:

- A - General Information
- B - Media Listing
- C - Evacuation Announcement
- D - Reentry Announcement

APPENDIX 7

ATTACHMENT A

GENERAL INFORMATION

- I. The Lehigh County Executive and/or the Director of Lehigh County Civil Defense, are responsible for the release of prepared instructions to the public, in the event of an incident at the Limerick Generating Station.
- II. The County PIO, supported by the Civil Defense Director, with the assistance of PEMA, will prepare and update, prepared statements for broadcast in the event of an emergency.
- III. If an incident reaches the SITE EMERGENCY or the GENERAL EMERGENCY level, and an evacuation is imminent or has been declared, the County Executive and/or by the County Civil Defense Director and PIO may commence issuing public information statements explaining the governmental actions being taken by the county. The purpose of these statements is to provide accurate information, prevent panic, and to counteract misinformation and rumors.
- IV. The County Executive through the (C.D. Director), will serve as the county spokesperson in the event of an incident at the Limerick Generating Station.
- V. A Rumor Control Center (RCC) will be established by Lehigh County Civil Defense whenever the EOC is activated in support of this plan. The PIO is responsible for the staffing and operation of the rumor control telephone. The rumor control telephone number for Lehigh County is 215-820-4843.

APPENDIX 7

ATTACHMENT B

MEDIA LISTING

<u>NEWSPAPER PUBLISHERS</u>	<u>ADDRESS</u>	<u>PHONE NO.</u>
Call Chronicle	Sixth & Linden Sts., Allentown	820-6500
Bethlehem Globe Times	202 West Fourth Street, Bethlehem	867-5000
Easton Express	30 North Fourth Street, Easton	258-7171
<u>RADIO</u>		
WFMZ	East Rock Road, Allentown	797-4530
WLEV/WEST	436 Northampton Street, Easton	250-9600
WAEB/WXKW	N. Fenwick & Tilyhman Sts., Allentown	439-1092
WGPA (daytime only)	528 N. New Street, Bethlehem	886-8074
WHOL (daytime only)	Poplar & Colorado Sts., Allentown	434-4801
WSAN	1183 Mickley Road, Whitehall	432-1191
WZZO	West Gate Mall, Bethlehem	694-0511
WKAP	1504 MacArthur Road, Allentown	435-9571
WEEX/WQQQ	107 Paxinosa Road, West Easton	258-8775 258-6155

MEDIA LISTING CON'T

<u>TELEVISION</u>	<u>ADDRESS</u>	<u>PHONE NO.</u>
WFMZ TV	East Rock Road, Allentown	797-4176
WLVT (Public)	Mountain Dr., Bethlehem	867-4677
Service Electric TV	1045 Hamilton Street, Allentown	434-7833
Twin County TV	3925 Airport Rd., Allentown	264-5141

APPENDIX 7

ATTACHMENT C

PUBIC INFORMATION ANNOUNCEMENT

EVACUATION

"This announcement has been released by Lehigh County Civil Defense Director."

"There has been an Emergency at the Limerick Generating Station requiring evacuation of residents within ten miles of the plant. This evacuation does not affect the residents of Lehigh County. I repeat. This evacuation does not affect the residents of Lehigh County."

Two reception centers for evacuees of Berks and Montgomery Counties have been established in Lehigh County. People evacuating from affected areas of Berks and Montgomery Counties via Route 100 North who need a place to stay should follow Route 100 to Route 29 North to the Emmaus High School Reception Center.

Montgomery County evacuees using Route 663 North to Route 309 North who need temporary shelter should take Route 309 to the Southern Lehigh School Complex in Center Valley.

Emergency personnel at these reception centers will assign you to a Red Cross Mass Care Facility.

Lehigh County residents are requested to avoid Routes 100 and 29 in the vicinity of Emmaus and Route 309 in the Coopersburg/Center Valley vicinity to avert possible traffic congestion.

I repeat. . . (Announcer should repeat this entire announcement immediately, and then periodically rebroadcast until requested to terminate by County Civil Defense.)

APPENDIX 7

ATTACHMENT U

PUBLIC INFORMATION ANNOUNCEMENT

REENTRY & RECOVERY

The following message has been released by the Pennsylvania Emergency Management Agency and affects all residents who have evacuated the ten-mile area around the Limerick Generating Station.

"The Governor has announced that residents who evacuated the area around the Limerick Generating Station may begin the orderly return to their homes.

Procedures for reentry to the evacuated area have been planned to ensure the safety of all returning evacuees. Persons in mass care centers will be notified by Center Staff of their scheduled return. They should wait for notification before proceeding.

Return routes, which are generally the same as those used for evacuation, have been manned by emergency personnel.

It is requested that each family cooperate with the municipalities which have been your hosts during this emergency by helping to restore evacuation facilities to their original condition and by assisting with general area clean-up before leaving.

The preceding has been an announcement by the Pennsylvania Emergency Management Agency concerning reentry of evacuated residents to the area surrounding the Limerick Generating Station. Please stay tuned to this station for further information."

(Repeat this message one time, then end transmission.)

APPENDIX 8

SCHOOL SERVICES SUPPORT

ATTACHMENTS:

- A - School Evacuation Policy
- B - Risk and Host School Information

APPENDIX 8

ATTACHMENT A

SCHOOL EVACUATION POLICY

- I. In the event of an evacuation when school is in session, several schools within the plume EPZ of the Limerick facility will be hosted at Lehigh County schools. A list of the risk schools and their designated host facilities in Lehigh County are contained in Appendix 8, Attachment B.
- II. If school evacuation is required, students located within the plume EPZ will be bussed directly to host schools to await pick-up by parent or guardian.
- III. Risk school staff will accompany evacuated students to designated host schools and remain with students until they are picked up by parents or guardians.
- IV. Should student pick-up extend beyond 8:00 p.m., remaining students will be bussed to a pre-designated central location to be fed, temporarily housed and to await pick-up. This location for Lehigh County will be Emmaus Senior High School. Students will remain under the supervision of school officials. In addition, County Child Welfare officials will be available at this designated location to assist school officials.
- V. Details of school evacuation procedures are contained in the school emergency plans.

APPENDIX 8

ATTACHMENT B

RISK AND HOST SCHOOL INFORMATION

I. PUBLIC SCHOOLS

RISK SCHOOL DISTRICT	SUPERINTENDENT	RISK BUILDING	NUMBER OF STUDENTS	HOST FACILITY	LOCATION	HOST DISTRICT	SUPERINTENDENT
A. Pottstown	Ray E. Feick 323-7510 or 323-8200	1. Pottstown Senior High School	974	Emmaus Senior High School	851 North St. Emmaus	East Penn School District	Harold D. Guthrie 967-3101
		2. Pottstown Junior High School	526	Emmaus Junior High School	851 North St. Emmaus		
		3. Edgewood Elementary School	259	Eyer Junior High School	Macungie		
		4. Franklin Elementary	378	Eyer Junior High School	Macungie		
		5. Lincoln Elementary	455	Eyer Junior High School	Macungie		
		6. Rupert Elementary	282	Eyer Junior High School	Macungie		
		7. Elizabeth B. Barth Elementary	411	Eyer Junior High School	Macungie		
B. Pottsgrove	Joseph P. Roberts 327-2277	1. Pottsgrove High School	850	Southern Lehigh Senior H.S.	Center Valley	Southern Lehigh	Michael F. Greene 282-3121
		2. Pottsgrove Intermediate	700	Southern Lehigh Senior H.S.	Center Valley		

RISK SCHOOL DISTRICT	SUPERINTENDENT	RISK BUILDING	NUMBER OF STUDENTS	HOST FACILITY	LOCATION	HOST DISTRICT	SUPERINTENDENT
B. Pottsgrove (Cont'd.)		3. Lower Pottsgrove Elementary	500	Southern Lehigh Junior H.S.	Center Valley	Southern Lehigh	Michael F. Greene 282-3121
		4. Ringing Rocks Elementary	375	Southern Lehigh Junior H.S.	Center Valley		
		5. West Pottsgrove Elementary	325	Southern Lehigh Junior H.S.	Center Valley		

II. PRIVATE SCHOOLS

RISK FACILITY	NUMBER OF STUDENTS	ADMINISTRATOR	HOST FACILITY	LOCATION	CONTACT
A. Hill School	520	Charles Watson 326-1000	Catasaugua High School	850 Pine Street Catasaugua	Catasaugua Area School District Superintendent: Frank J. Farrell 214-5571
B. West-Mont Christian Academy	90	Matthew Royer 323-1816	Kings Highway	Rt. 100 Old Zionsville	East Penn School District Superintendent: Harold D. Guthrie 967-3101

RISK FACILITY	NUMBER OF STUDENTS	ADMINISTRATOR	HOST FACILITY	LOCATION	CONTACT
C. Wyndcroft School	170	Gerald McGrath 326-0544	Swain School	1100 S. 24th St. Allentown	Dr. Lyanld Sillisbe 433-4522
D. St. Pius X High School	664	Mr. James Attanasio 326-8990	Allentown College	Center Valley	Rev. John F. McGinley 282-1100
E. St. Gabriel School	206	Sister Electa	St. Ann's	6th & Fairview Sts. Emmaus	Sister Rosemarie 965-9220
F. St. Aloysius School	408	Sister Wanda Marie 326-1498	St. Thomas Moore	1040 Flexer Avenue Allentown	Monsignor John Murphy 432-0396
G. St. Peter School	95	Sister Rose Christi 323-9378	St. Ann's	6th & Fairview Sts. Emmaus	Sister Rosemarie 965-9220

APPENDIX 8

ATTACHMENT B

RISK AND HOST SCHOOL INFORMATION

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