

APPROVED BY OMB: CLEARANCE NO. 3150-0146

EXPIRES: 09/30/2024

Estimated burden per response to comply with this collection request is 106 hours. This form is a voluntary means of reporting the information required under 10 CFR 26.417(b)(2) and 26.717. The information is required by NRC to obtain on an annual basis site specific fitness-for-duty (FFD) program performance data on drug and alcohol programs from licensees and other entities. Send comments regarding burden estimate to the FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail to infocollections.Resource@NRC.gov, and the OMB reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0146), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; e-mail: oina_submission@omb.eop.gov. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.

- 1) All fields required unless marked 'optional'
2) Use of Adobe Reader 8 or later is required
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☐ Submission Update

Facility

Oyster Creek [50-219]

Period of Report

2021

Tests Conducted in the Calendar Year

| Reason For Testing | Total Number of Tests Conducted | | Total Number of Positive, Adulterated, Substituted, and Refusal to Test Results |
|--------------------|---------------------------------|---------------------|---|
| | Licensee Employees | Contractors/Vendors | |
| Pre-Access | 183 | 102 | 6 |
| Random | 149 | 55 | 2 |
| For Cause | 0 | 1 | 0 |
| Post-Event | 1 | 0 | 0 |
| Followup | 51 | 11 | 0 |
| Total (Calculated) | 384 | 169 | 8 |

FFD Program Random Testing Population and Rate

Average number of licensee employees

209

Average number of contractors/vendors

74

Total size of the random testing pool throughout the period (Calculated)

283

Annual random testing percentage achieved for the testing pool

72.1

Laboratory Testing

Does your program use a Licensee Testing Facility? (Yes / No)

No

HHS-Certified Laboratory (Primary)

MedTox

HHS-Certified Laboratory (Backup)

Eisohly Labs

Identify your Blind Performance Test Sample supplier(s)

Eisohly Labs

Substances Tested

Did your program only test for NRC-required substances AND at the NRC-specified minimum cutoff levels? (Yes / No)

Yes

Does your program conduct LOD testing permitted in 26.163(a)(2)? (Yes / No)

Yes

Special Analyses Testing Results

Total Number of "Dilute" Specimen Test Results (Optional)

Total Number of "Dilute" Specimens (Special Analyses Testing Conducted)

0

| Substance | Use NRC Cutoffs? | Initial Cutoff | Confirmatory Cutoff | Limit of Detection (LOD) Testing? | Comment (Optional) |
|--------------|------------------|----------------|---------------------|-----------------------------------|--------------------|
| Alcohol | Yes | | | Not Applicable | |
| Cocaine | Yes | | | Yes | |
| Marijuana | Yes | | | Yes | |
| Amphetamines | Yes | | | Yes | |
| Opiates | Yes | | | Yes | |
| PCP | Yes | | | Yes | |

Substances Tested - continued

Summary of Management Actions - 26.717(b)(8)

Summarize actions implemented to improve FFD program performance. As applicable, reference in the topic description audit reports, 30-day reports, and/or corrective action reports. If reporting information on more than three topics, select "Others" for Topic 3 to report any additional topics.

Topic 1

Please Select

Person(s) Responsible for Information Provided

Person 1 (required):

| | | | |
|------------------------------------|--------------------------------------|--|---|
| <input type="text" value="Linda"/> | <input type="text" value="Schratz"/> | <input type="text" value="AA/FFD Supervisor"/> | <input type="text" value="l.schratz@holtec.com"/> |
| First Name | Last Name | Position Title | Company Email Address |

Person 2 (optional):

| | | | |
|----------------------|----------------------|----------------------|-----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| First Name | Last Name | Position Title | Company Email Address |

Final Step (Required) - NRC will consider this form authentic in accordance with 10 CFR 26.11 only when the "Validate & Lock" button has been selected and all errors (i.e., those highlighted in red) have been corrected. The "Validate & Lock" button will change to "Locked" after the data validation process has been successfully completed and the form is ready for submission.

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☐ Submission Update ☐ Delete Submission

Unique Reference ID (Licensee Supplied)

OYC-2021-01

Facility

Oyster Creek [50-219]

Reason for Testing - 26.717(b)(5)

Pre-Access

Pre-Access Testing Reason (optional)

Please Select

Employment Type - 26.717(b)(3)

Contractor/Vendor

Outage Worker (optional)?

No

Labor Category - 26.717(b)(3)

Maintenance (general facility)

Is this a 24-hour reportable event under 26.719(b)?

No

Was this collection refused? - 26.717(b)(7) & 26.75

No

Test Results - 26.717(b)(4)

Test Type(s) for Result(s) Reported - 26.717(b)(2)

Drug Only

Drug Specimen Tested

Urine

Test Validity

Valid

Was this collection observed? - 26.717(b)(7) & 26.75

No

How many substances were confirmed positive for this individual?

1

Substance - 26.717(b)(2) & (b)(6)

Marijuana

Use NRC Cutoffs?

Yes

Initial Cutoff

Confirmatory Cutoff

Limit of Detection

Subversion Attempt - Did this collection involve a subversion attempt? - 26.717(b)(7) and 26.75(b)

No

Management Actions - 26.717(b)(8) & 26.75

Reason for the Action

First drug or alcohol positive

Sanction Applied

(NRC Minimum or Licensee Administrated)

Licensee Administrated

Specific Sanction Applied

3-Year Denial

Person(s) Responsible for Information Provided

Person 1 (required):

Linda

First Name

Schratz

Last Name

AA/FFD Supervisor

Position Title

l.schratz@holtec.com

Company Email Address

Person 2 (optional):

First Name

Last Name

Position Title

Company Email Address

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Unique Reference ID (Licensee Supplied)

OYC-2021-02

Facility

Oyster Creek [50-219]

Reason for Testing - 26.717(b)(5)

Pre-Access

Pre-Access Testing Reason (optional)

Please Select

Employment Type - 26.717(b)(3)

Contractor/Vendor

Outage Worker (optional)?

No

Labor Category - 26.717(b)(3)

Maintenance (general facility)

Is this a 24-hour reportable event under 26.719(b)?

No

Was this collection refused? - 26.717(b)(7) & 26.75

No

Test Results - 26.717(b)(4)

Test Type(s) for Result(s) Reported - 26.717(b)(2)

Drug Only

Drug Specimen Tested

Urine

Test Validity

Valid

Was this collection observed? - 26.717(b)(7) & 26.75

No

How many substances were confirmed positive for this individual?

1

Substance - 26.717(b)(2) & (b)(6)

Use NRC Cutoffs?

Initial Cutoff

Confirmatory Cutoff

Limit of Detection

Methamphetamine

Yes

Subversion Attempt - Did this collection involve a subversion attempt? - 26.717(b)(7) and 26.75(b)

No

Management Actions - 26.717(b)(8) & 26.75

Reason for the Action

First drug or alcohol positive

Sanction Applied

(NRC Minimum or Licensee Administrated)

Licensee Administrated

Specific Sanction Applied

3-Year Denial

Person(s) Responsible for Information Provided

Person 1 (required):

Linda

First Name

Schratz

Last Name

AA/FFD Supervisor

Position Title

l.schratz@holtec.com

Company Email Address

Person 2 (optional):

First Name

Last Name

Position Title

Company Email Address

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Unique Reference ID (Licensee Supplied)

OYC-2021-03

Facility

Oyster Creek [50-219]

Reason for Testing - 26.717(b)(5)

Pre-Access

Pre-Access Testing Reason (optional)

Please Select

Employment Type - 26.717(b)(3)

Contractor/Vendor

Outage Worker (optional)?

No

Labor Category - 26.717(b)(3)

Maintenance (general facility)

Is this a 24-hour reportable event under 26.719(b)?

No

Was this collection refused? - 26.717(b)(7) & 26.75

No

Test Results - 26.717(b)(4)

Test Type(s) for Result(s) Reported - 26.717(b)(2)

Drug Only

Drug Specimen Tested

Urine

Test Validity

Valid

Was this collection observed? - 26.717(b)(7) & 26.75

No

How many substances were confirmed positive for this individual?

1

Substance - 26.717(b)(2) & (b)(6)

Marijuana

Use NRC Cutoffs?

Yes

Initial Cutoff

Confirmatory Cutoff

Limit of Detection

Subversion Attempt - Did this collection involve a subversion attempt? - 26.717(b)(7) and 26.75(b)

No

Management Actions - 26.717(b)(8) & 26.75

Reason for the Action

First drug or alcohol positive

Sanction Applied

(NRC Minimum or Licensee Administrated)

Licensee Administrated

Specific Sanction Applied

3-Year Denial

Person(s) Responsible for Information Provided

Person 1 (required):

Linda

First Name

Schratz

Last Name

AA/FFD Supervisor

Position Title

l.schratz@holtec.com

Company Email Address

Person 2 (optional):

First Name

Last Name

Position Title

Company Email Address

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Unique Reference ID (Licensee Supplied)

OYC-2021-04

Facility

Oyster Creek [50-219]

Date of Collection (mm/dd/yyyy)

09/28/2021

Reason for Testing - 26.717(b)(5)

Pre-Access

Pre-Access Testing Reason (optional)

Please Select

Employment Type - 26.717(b)(3)

Contractor/Vendor

Outage Worker (optional)?

No

Labor Category - 26.717(b)(3)

Maintenance (general facility)

Is this a 24-hour reportable event under 26.719(b)?

No

Was this collection refused? - 26.717(b)(7) & 26.75

No

Test Results - 26.717(b)(4)

Test Type(s) for Result(s) Reported - 26.717(b)(2)

Drug Only

Drug Specimen Tested

Urine

Test Validity

Valid

Was this collection observed? - 26.717(b)(7) & 26.75

No

How many substances were confirmed positive for this individual?

1

| Substance - 26.717(b)(2) & (b)(6) | Use NRC Cutoffs? | Initial Cutoff | Confirmatory Cutoff | Limit of Detection |
|-----------------------------------|------------------|----------------|---------------------|--------------------|
| Cocaine | Yes | | | |

Subversion Attempt - Did this collection involve a subversion attempt? - 26.717(b)(7) and 26.75(b)

No

Management Actions - 26.717(b)(8) & 26.75

Reason for the Action

First drug or alcohol positive

Sanction Applied

(NRC Minimum or Licensee Administrated)

Licensee Administrated

Specific Sanction Applied

3-Year Denial

Person(s) Responsible for Information Provided

Person 1 (required):

Linda

First Name

Schratz

Last Name

AA/FFD Supervisor

Position Title

l.schratz@holtec.com

Company Email Address

Person 2 (optional):

First Name

Last Name

Position Title

Company Email Address

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☐ Submission
Update ☐ Delete
Submission

Unique Reference ID (Licensee Supplied)

OYC-2021-05

Facility

Oyster Creek [50-219]

Reason for Testing - 26.717(b)(5)

Random

Please elaborate (optional)

Employment Type - 26.717(b)(3)

Contractor/Vendor

Outage Worker (optional)?

No

Labor Category - 26.717(b)(3)

Maintenance (general facility)

Is this a 24-hour reportable event under 26.719(b)?

No

Was this collection refused? - 26.717(b)(7) & 26.75

No

Test Results - 26.717(b)(4)

Test Type(s) for Result(s) Reported - 26.717(b)(2)

Drug Only

Drug Specimen Tested

Urine

Test Validity

Valid

Was this collection observed? - 26.717(b)(7) & 26.75

No

How many substances were confirmed positive for this individual?

1

Substance - 26.717(b)(2) & (b)(6)

Cocaine

Use NRC
Cutoffs?

Yes

Initial
Cutoff

Confirmatory
Cutoff

Limit of
Detection

Subversion Attempt - Did this collection involve a subversion attempt? - 26.717(b)(7) and 26.75(b)

No

Management Actions - 26.717(b)(8) & 26.75

Reason for the Action

First drug or alcohol positive

Sanction Applied

(NRC Minimum or Licensee Administrated)

Licensee Administrated

Specific Sanction Applied

3-Year Denial

Person(s) Responsible for Information Provided

Person 1 (required):

Linda

First Name

Schratz

Last Name

AA/FFD Supervisor

Position Title

l.schratz@holtec.com

Company Email Address

Person 2 (optional):

First Name

Last Name

Position Title

Company Email Address

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☐ Submission Update ☐ Delete Submission

Unique Reference ID (Licensee Supplied)

OYC-2021-06

Facility

Oyster Creek [50-219]

Date of Collection
(mm/dd/yyyy)

01/20/2021

Reason for Testing - 26.717(b)(5)

Pre-Access

Pre-Access Testing Reason (optional)

Please Select

Employment Type - 26.717(b)(3)

Contractor/Vendor

Outage Worker (optional)?

No

Labor Category - 26.717(b)(3)

Maintenance (general facility)

Is this a 24-hour reportable event under 26.719(b)?

No

Was this collection refused? - 26.717(b)(7) & 26.75

Yes

Subversion Attempt - Did this collection involve a subversion attempt? - 26.717(b)(7) and 26.75(b)

Yes

- ☐ Did not appear for testing
☐ Shy-bladder (no medical condition)
☐ Refused to provide initial specimen
☒ Refused to provide second specimen
☒ Specimen temperature (out of range)
☐ Specimen paraphernalia identified

- ☐ Specimen characteristics (e.g., color, odor, precipitant)
☐ Invalid test result (initial specimen collected) - 26.185(f)
☐ Refused to follow directions
☐ Donor admitted to subversion attempt
☐ Other

Please elaborate on the choice(s) selected:

The Initial test temperature was out of range. The donor volunteered to a 2nd observed test per approval by the MRO. Donor changed their mind on the observed test and refused to provide second specimen.

Management Actions - 26.717(b)(8) & 26.75

Reason for the Action

Subversion attempt

Sanction Applied

(NRC Minimum or Licensee Administrated)

NRC Minimum

Specific Sanction Applied

Permanent Denial

Person(s) Responsible for Information Provided

Person 1 (required):

Linda

First Name

Schratz

Last Name

AA/FFD Supervisor

Position Title

l.schratz@holtec.com

Company Email Address

Person 2 (optional):

First Name

Last Name

Position Title

Company Email Address

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Unique Reference ID (Licensee Supplied)

OYC-2021-07

Facility

Oyster Creek [50-219]

Reason for Testing - 26.717(b)(5)

Pre-Access

Pre-Access Testing Reason (optional)

Please Select

Employment Type - 26.717(b)(3)

Contractor/Vendor

Outage Worker (optional)?

No

Labor Category - 26.717(b)(3)

Maintenance (general facility)

APPROVED BY OMB: CLEARANCE NO. 3150-0146

EXPIRES: 09/30/2024

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Date of Collection
(mm/dd/yyyy)

02/04/2021

Is this a 24-hour reportable event under 26.719(b)?

No

Was this collection refused? - 26.717(b)(7) & 26.75

Yes

Subversion Attempt - Did this collection involve a subversion attempt? - 26.717(b)(7) and 26.75(b)

Yes

- ☐ Did not appear for testing ☐ Specimen characteristics (e.g., color, odor, precipitant)
☐ Shy-bladder (no medical condition) ☐ Invalid test result (initial specimen collected) - 26.185(f)
☐ Refused to provide initial specimen ☐ Refused to follow directions
☒ Refused to provide second specimen ☐ Donor admitted to subversion attempt
☒ Specimen temperature (out of range) ☐ Other
☐ Specimen paraphernalia identified

Please elaborate on the choice(s) selected:

The Initial specimen provided by the donor was out of the acceptable temperature range. The donor refused to provide a second specimen under direct observation.

Management Actions - 26.717(b)(8) & 26.75

Reason for the Action

Subversion attempt

Sanction Applied

(NRC Minimum or Licensee Administrated)

NRC Minimum

Specific Sanction Applied

Permanent Denial

Person(s) Responsible for Information Provided

Person 1 (required):

Linda

Schratz

AA/FFD Supervisor

l.schratz@holtec.com

First Name

Last Name

Position Title

Company Email Address

Person 2 (optional):

First Name

Last Name

Position Title

Company Email Address

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Unique Reference ID (Licensee Supplied)

OYC-2021-08

Facility

Oyster Creek [50-219]

Reason for Testing - 26.717(b)(5)

Random

Please elaborate (optional)

Employment Type - 26.717(b)(3)

Contractor/Vendor

Outage Worker (optional)?

No

Labor Category - 26.717(b)(3)

Maintenance (general facility)

Is this a 24-hour reportable event under 26.719(b)?

No

Was this collection refused? - 26.717(b)(7) & 26.75

Yes

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EXPIRES: 09/30/2024

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Date of Collection
(mm/dd/yyyy)

03/19/2021

Subversion Attempt - Did this collection involve a subversion attempt? - 26.717(b)(7) and 26.75(b)

Yes

☐ Did not appear for testing

☐ Shy-bladder (no medical condition)

☐ Refused to provide initial specimen

☒ Refused to provide second specimen

☒ Specimen temperature (out of range)

☐ Specimen paraphernalia identified

☐ Specimen characteristics (e.g., color, odor, precipitant)

☐ Invalid test result (initial specimen collected) - 26.185(f)

☐ Refused to follow directions

☐ Donor admitted to subversion attempt

☐ Other

Please elaborate on the choice(s) selected:

The initial specimen provided by the donor was out of acceptable temperature range. The donor refused to provide a second specimen under direct observation.

Management Actions - 26.717(b)(8) & 26.75

Reason for the Action

Subversion attempt

Sanction Applied

(NRC Minimum or Licensee Administrated)

NRC Minimum

Specific Sanction Applied

Permanent Denial

Person(s) Responsible for Information Provided

Person 1 (required):

Linda

First Name

Schratz

Last Name

AA/FFD Supervisor

Position Title

lschratz@holtec.com

Company Email Address

Person 2 (optional):

First Name

Last Name

Position Title

Company Email Address

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