



UNITED STATES  
NUCLEAR REGULATORY COMMISSION

REGION I  
475 ALLENDALE ROAD  
KING OF PRUSSIA, PA 19406-1415

October 30, 2000

Docket No. 05000245

License No. DPR-21

S. E. Scace  
Director, Nuclear Oversight and Regulatory Affairs  
c/o Mr. D.A. Smith, Manager - Regulatory Affairs  
Northeast Nuclear Energy Company  
P.O. Box 128  
Waterford, CT 06385

SUBJECT: INSPECTION 05000245/2000010

Dear Mr. Scace:

On September 28, 2000, the NRC completed an inspection at your Millstone Unit 1 facility. The findings of the inspection were discussed with Mr. Larry Temple and others of your staff on September 14 and October 2, 2000. The enclosed report presents the results of that inspection.

During the four month period covered by this inspection, you conducted decommissioning activities at Millstone Unit 1 in a safe manner, and maintained appropriate focus on the safe storage of fuel in the spent fuel pool.

Within the scope of this inspection, no violations were identified.

In accordance with 10 CFR 2.790, a copy of this letter will be placed in the NRC Public Document Room and will be accessible from the NRC Web site at <http://www.nrc.gov/NRC/ADAMS/index.html>. No reply to this letter is required.

Your cooperation with us is appreciated.

Sincerely,

***Original signed by Ronald R. Bellamy***

Ronald R. Bellamy, Chief  
Decommissioning and Laboratory Branch  
Division of Nuclear Materials Safety

Enclosure:  
Inspection Report No. 05000245/2000010

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U.S. NUCLEAR REGULATORY COMMISSION  
REGION I

INSPECTION REPORT

Inspection No. 05000245/2000010  
Docket No. 05000245  
License No. DPR-21  
Licensee: Northeast Nuclear Energy Company  
Location: Waterford, CT  
Facility: Millstone Nuclear Power Station, Unit 1  
Inspection Dates: June 3 through September 28, 2000

Inspectors: T.J. Jackson, CHP, Health Physicist  
A. Dimitriadis, Health Physicist

Approved By: Ronald R. Bellamy,  
Decommissioning and Laboratory Branch  
Division of Nuclear Materials Safety

## **EXECUTIVE SUMMARY**

Northeast Nuclear Energy Company  
NRC Inspection Report No. 05000245/2000010

This integrated inspection included aspects of licensee operations and plant support during decommissioning activities. The report covers a four-month period of announced inspections by two regional inspectors. Corrective action program and radiological protection issues of low safety significance were identified by the inspector, and were adequately addressed by the licensee. No violations were identified.

### **Operations**

The licensee's Corrective Action Program (CAP) was not always implemented as described by the requirements specified by the licensee in Procedure U1 RP 4, Rev. 1, "Unit 1 Corrective Action Program." The licensee's CAP did not always assure timely or effective corrective actions to prevent recurrence of significant problems. Required effectiveness reviews of implemented corrective actions were not always performed. Corrective actions routinely had their completion deadlines extended. The licensee took action intended to address these program concerns, as documented in several Condition Reports. (O1.1)

### **Plant Support**

The decommissioning work in progress at the time of the inspection was being conducted in a safe and appropriate manner. (R1.1)

The process for developing Radiation Work Permits (RWPs) and for performing ALARA reviews has produced adequate RWPs and ALARA reviews, although procedures describing the methodology for developing RWPs and performing ALARA reviews were unclear and difficult to follow. Personnel performing the associated work were knowledgeable and had assured that work was being completed, however the success of the program depended upon implementation by knowledgeable and experienced staff rather than on quality procedures. No violations of NRC requirements were identified. (R1.2)

The licensee provided adequate radiological controls for the decommissioning work on the spent fuel floor and restricted areas, with the exception of the contamination incidents that occurred on the refuel floor. The completed investigation and evaluation of Condition Report CR M1-00-0290 will be reviewed during a future inspection. (R1.3)

Radioactive effluents from Millstone 1 have diminished since the plant shut down, and are significantly less than regulatory limits. (R1.4)

In the area of radioactive waste management, the licensee's focus continues to be the removal of radioactive waste materials from radwaste systems, and reducing generation of new waste. A long term strategy for handling liquid radwaste while decommissioning the radwaste systems at Unit 1 was being developed. (R1.5)



## **REPORT DETAILS**

### **I. Operations**

#### **O1 Conduct of Operations**

##### **O1.1 General Comments (71801)**

The licensee continued to conduct decommissioning activities in a safe manner. Corrective action program and radiological protection issues of low safety significance were identified by the inspector, and were adequately addressed by the licensee.

Major activities completed by the licensee during the inspection period include: the continued re-characterization and abandonment of plant systems, structures, and components consistent with the decommissioning status of the unit; completion of the processing and removal of other (non-spent fuel) items from the spent fuel pool, and shipment of these items for burial off-site; dismantling and removal of large components such as reactor shield blocks from the refuel floor; and the continuing removal of insulation (asbestos and non-asbestos) from various plant systems and components. The schedule and scope of some activities were in the process of being modified during this inspection period due to identification of the purchaser of Millstone Station.

#### **O7 Quality Assurance in Operations**

##### **O7.1 Corrective Action Program**

###### **a. Inspection Scope (40801)**

The inspector reviewed the licensee's program for assuring prompt identification of problems and the timely and effective completion of corrective actions to prevent recurrence.

###### **b. Observations and Findings**

The licensee's corrective action program (CAP) for Unit 1 (U1) is defined in procedure U1 RP4, Revision 1. The CAP is designed to assure that issues and problems requiring resolution are identified and resolved. Identified items are assigned a Condition Report (CR) with a significance of level 1, 2, or 3. Level 1 CRs are defined by the CAP as "Significant adverse conditions for which action to preclude recurrence is required", Level 2 CRs are "adverse conditions requiring management attention", and Level 3 CRs are for minor deficiencies.

### Timeliness of Effectiveness Reviews

Section 2.4.11(c) of Procedure U1 RP 4, Rev. 1 specifies, "For applicable significance level 1 CRs, include an assignment for CR Owner to measure effectiveness of planned corrective actions (action type is 'Effectiveness Review')." Section 2.9 of this procedure describes effectiveness reviews (ERs) that should be conducted for all Level 1 CRs. These reviews are expected to be performed after the completion of the corrective actions to prevent recurrence, normally six months following completion of corrective actions. The inspector reviewed the licensee's data on performance of 20 ERs since January 1, 1998. In the licensee's database, the ER is typically shown as the last Action Request (AR) for the CR, and the CR is not closed out until the ER/final AR is completed. The licensee's data indicated that four (CRs M1-98-10; M1-98-31; M1-98-827; M1-99-368) of the 20 Level 1 CRs for the period reviewed had the ER canceled without the approval of the Management Review Team (MRT) (required by section 2.9.4 of Procedure U1 RP 4, Rev.1) or were simply not performed.

### Timeliness of Corrective Actions

The inspector reviewed the timeliness of completion for corrective actions related to CRs initiated between July 1, 1999, and August 4, 2000. The inspector observed that initial due dates for corrective actions were established based upon consideration of the resources and time required to successfully address the actions, followed by formal acceptance of the due date by the responsible manager. Due dates for Level 1 and 2 CRs are established as part of a CR Action Plan, to be written within 30 days of when responsibility is established (section 2.3.9 of Procedure U1 RP4, Rev. 1). The percentage of all CR corrective actions for which the due dates have been extended at least once is as follows:

<b>Corrective Actions with Extended Due Dates</b>	
<u>Significance Level of CR :</u>	<u>Percentage of CR Actions Extended (min - max)</u>
Level 1	29% - 40%
Level 2	21% - 24%
Level 3	13% - 19%

This data, provided by the licensee, specifies ranges because the action item tracking and trending system (AITTS) could not accurately identify action items solely on the basis of whether the due dates had been extended, and reported the minimum number (at least this many) extended and a maximum (no more than this many) extended. These actions had not become overdue, an attribute tracked by the licensee as a performance indicator. Successful completion of these corrective actions to rectify significant adverse conditions is important, and extension of due dates appears routine.

The licensee noted that it is as important, if not more important, to complete these corrective actions properly rather than meet deadlines with incomplete or incorrect actions. The inspector noted that for such significant conditions, timely action is important in addition to the quality of the action and the routine extension of due dates is considered a programmatic weakness.

#### Effectiveness of Corrective Actions

The inspector reviewed the effectiveness of the licensee's corrective actions to prevent recurrence of problems. An example of ineffective corrective actions involves Procedure U1 RP 4 Rev. 1, which requires in section 2.11 that a trend analysis of the AITTS database related to CRs be performed at least quarterly and a trend report be issued within 60 days of the end of the quarter. The Station Corrective Actions Department identified on September 8, 1999, in CR M3-99-3624, that Unit 1 had been incorrectly omitted from the 2<sup>nd</sup> quarter 1999 Station Trending Report. The omission was corrected by issuing a special trending report on January 11, 2000, for Unit 1 covering the 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> quarters of 1999. Corrective action also included discussing with the personnel involved in creating the trend reports "the priority and time requirements for generating future trend reports." On August 2, 2000, CR M1-00-0316 was initiated by the Unit 1 Nuclear Safety and Regulatory Affairs (NSRA) Department because the required trend analysis and report covering the first quarter of 2000 was not completed as required for Unit 1. On September 14, 2000, the licensee also initiated CR M1-00-0416 because the 2<sup>nd</sup> quarter trend report had not been issued by August 29, 2000.

When the above observations were discussed with the licensee, the following new CRs were initiated to address the concerns:

CR M1-00-0416 addresses the failure to perform a quarterly trend analysis and produce a trend report for Unit 1 for calendar year 2000

CR M1-00-0420 addresses the inappropriate cancellation of three ERs, without the MRT approval required by the procedure.

CR M1-00-0421 concerns the lack of action to perform the ERs resulting for CR M1-98-0031.

CR M1-00-0422 addresses the fact that these issues related to performance of the CAP were identified on August 16, 2000 but not documented in a CR at that time.

#### c. Conclusions

The CAP was not always implemented as described by the requirements specified by the licensee's procedure. The licensee's CAP did not always assure timely or effective corrective actions to prevent recurrence of significant problems. Required effectiveness

reviews of implemented corrective actions were not always performed. Corrective actions routinely had their completion deadlines extended. The licensee took action intended to address these program concerns, as documented in several CRs.

## **II. Plant Support**

### **R1 Radiological Protection and Chemistry (RP&C) Controls**

#### **R1.1 Characterization and Decommissioning Activities**

##### **a. Inspection Scope (71801)**

The inspection included a review of the licensee's ongoing decommissioning activities, and surveys and removal of equipment from the refuel floor, on the 108' elevation of the reactor building. The inspector toured the reactor building, the maintenance building, and the perimeter of the site.

##### **b. Observations and Findings**

The inspector performed a walkover of the reactor building and observed the numerous projects underway on the refuel floor. Multiple teams were performing decontamination work to support engineering on various projects. Decommissioning work on the shield blocks was continuing, and the licensee was in the process of cutting and preparing blocks for shipment. The inspector was briefed on two contamination incidents that occurred on the refueling floor July 14 and July 17, 2000: a water spill while dewatering a TN RAM cask, and an LSA box with an associated contaminated rope used as a tag line while moving the LSA box. Details of the incidents and follow-up are discussed in Section R1.3 below.

The inspector observed the posting and control of the restricted areas on the refuel floor, and of the Tech Spec Locked High Radiation Areas in the perimeter of the enclosure tent where control rod blade cutting was performed. The inspector observed the workers move slings, video equipment, tool boxes and other equipment within the restricted area. Removal of tools from the radiological controlled area (RCA) boundary near the shield blocks was performed with the requisite surveys.

##### **c. Conclusions**

The decommissioning work in progress at the time of the inspection was being conducted in a safe and appropriate manner.

## R1.2 Radiation Work Permits and ALARA Reviews

### a. Inspection Scope (83750)

The inspector reviewed the licensee's program and procedures for developing radiation work permits (RWPs) and for performing reviews to assure work plans will keep personnel radiation exposures as low as reasonably achievable (ALARA).

### b. Observations and Findings

The inspector examined through review of procedures and discussion with personnel the licensee's ALARA program and the process for planning and writing RWPs. The RWP and ALARA programs are contained in five procedures that were recently converted from Millstone Station procedures to Unit 1 procedures:

RPM 5.2.3, Rev. 0	ALARA Program and Policy
RPM 1.4.1, Rev. 0	ALARA Reviews and Reports
RPM 1.4.2, Rev. 0	ALARA Engineering Controls
RPM 2.1.2, Rev. 0	ALARA Interface with the RWP Process
RPM 2.1.1, Rev. 0	Issuance and Control of RWPs

Procedures specify that planned jobs expected to incur worker radiation exposures of greater than 1 person-rem Total Effective Dose Equivalent (TEDE) will be subjected to an ALARA Evaluation or ALARA Review before commencing, and that jobs expected to incur worker exposure of greater than 10 person-rem TEDE must be presented to the Station ALARA Committee.

The inspector made the following observations based on review of the programs and procedures:

- Procedures did not provide complete written instructions and guidance on how to perform ALARA reviews and to prepare RWPs. The program was vaguely defined in procedures and dependent on individual ALARA reviewer's initiative and actions.
- The criteria in U1 RPM 1.4.1, Rev.1 for in-progress ALARA reviews is vague, with the most specific criteria located in step 4.5.5: if the cumulative exposure is expected to exceed the original estimate by 20%, review the job controls and evaluate whether an ALARA Review is necessary.
- Completed in-progress ALARA reviews were not numbered, and there was no way to determine if all the reviews performed are in the file. This may be significant for post-job evaluations of lessons-learned and for record-keeping purposes. The files for most jobs did not contain any in-progress reviews, and it was not possible to determine whether they were unnecessary (not performed) or if they were missing from the files.

- Recommendations from post-job ALARA reviews and in-progress reviews were not entered into a corrective actions tracking system. An example of a post-review recommendation was noted by the inspector for the RWP covering the control rod drive removal project; a procedure revision was recommended to eliminate the procedure reference to a specific brand of anti-contamination hood, which had caused confusion and a delay in work because the specific brand was not available. Several months later (June 2000) it was not clear what action, if any, had been taken to revise the procedure.

c. Conclusions

The process for developing RWPs and for performing ALARA reviews has produced adequate RWPs and ALARA reviews, although procedures describing the methodology for developing RWPs and performing ALARA reviews were unclear and difficult to follow. Personnel performing the associated work were knowledgeable and had assured that work was being completed, however the success of the program depended upon implementation by knowledgeable and experienced staff rather than on quality procedures.

R1.3 Contamination Controls

a. Inspection Scope (83750)

The inspector reviewed the licensee's procedures and program for routine contamination controls, and actions taken in response to contamination events.

b. Observations and Findings

The inspector toured Unit 1 RCAs and observed licensee and contractor personnel don protective gear, perform contamination surveys, and perform other decontamination and dismantlement activities. The inspector observed licensee personnel survey themselves for removable contamination with appropriate radiation detection instrumentation. Survey stations were set up at appropriate exit points of the restricted areas. The inspector observed individuals wearing dosimeters and airline supplied respirators in the tent area where airborne radioactivity and higher levels of contamination existed.

The inspector observed radiological controls to prevent the spread of potential contamination during the remediation work in the reactor building. Health Physics technicians were observed surveying equipment, wrenches and other tools from the refuel floor area.

The inspector observed the pre-job planning and cutting of the east wall of the reactor building. Radiological and occupational safety items were reviewed with the workers that would be performing the actual cutting. During work breaks, the inspector discussed the training program with two of the workers. The workers understood the

program. At the time of the inspection, approximately 9 cuts had been made into the east wall.

### Contamination Incidents

The inspector discussed the contamination incident that occurred on July 17, 2000 with the licensee's technical services supervisor, and reviewed CR M1-00-0290 generated in response. The inspector noted that during shift change, contractor employees had been alone on the refueling floor without HP support, when they identified a failed valve requiring replacement. During the repair, contaminated water leaked onto the liner under a transfer cask.

In addition, the licensee was following up on the cause of the contamination of a rope that was used two days later to lower an equipment storage box from the 108' to the 14' 6" elevation of the reactor building. This rope was attributed as the source of loose contamination in the facial area of a worker. Upon further survey, the rope had radiation levels up to 100 mrem/h on contact, with contamination levels up to 100,000 dpm/100 cm<sup>2</sup>.

The inspector reviewed the daily work area surveys of the various levels of the reactor building and examined the calibration certificates of the instruments used for area surveys. Surveys had been performed on each of the four elevations of the reactor building with special emphasis on level 108', in the area around the cask scaffold and the equipment hatch. The calibration certificates revealed that all instruments used were properly calibrated and acceptance criteria was properly documented. The licensee's investigation for the contamination events was not completed during the inspection period, and will be reviewed during future inspections.

### c. Conclusions

The licensee provided adequate radiological controls for decommissioning work, with the exception of the contamination incidents that occurred on the refuel floor. The completed investigation and evaluation of CR M1-00-0290 will be reviewed during a future inspection. **IFI 50-245/00-010-01**

### R1.4 Radioactive Effluent Monitoring

#### a. Inspection Scope (84750)

The inspector reviewed the licensee programs for monitoring and controlling radioactive effluents, and for environmental monitoring.

#### b. Observations and Findings

The inspector reviewed the liquid and airborne discharges of radioactive material from Unit 1 for the period January through July 2000. All discharges were significantly lower

than the applicable regulatory limits. Offsite dose estimates to a hypothetical maximally exposed member of the public, as defined in the Radiological Environmental Monitoring Offsite Dose Calculation Manual (REMDCM), were as follows:

<b>Licensee Estimated Offsite Doses from Unit 1 Effluents January - July, 2000</b>	
Liquid pathway, total body	8.521E-3 mrem
Liquid pathway, max organ	7.157E-3 mrem
Airborne pathway, max organ	6.426E-3 mrem

Environmental monitoring at Millstone is performed by the Station organization, with the Unit 1 organization not responsible for performing any part of the program. The most recent inspection of the Millstone Station radiological environmental monitoring program was conducted April 12-16, 1999, and is documented as Inspection Report 50-245;336;423/99-05.

c. Conclusions

Effluents from Millstone 1 have diminished since the plant shut down, and are significantly less than regulatory limits.

R1.5 Radioactive Waste Management

a. Inspection Scope (86750)

The inspector reviewed the licensee's program for the collection, processing and shipment of Unit 1 radioactive waste. Areas of inspection focus included verification of compliance with regulatory requirements found in 10 CFR 20.1906, Appendix G to 10 CFR 20, 10 CFR 61.55 and 61.56, 10 CFR 71, and 49 CFR 172 Subparts C, D, E, F, G, and I. The inspector directly observed activities of radwaste and transportation, reviewed selected procedures, shipping documents and records, and interviewed cognizant plant personnel.

b. Observations and Findings

The inspector toured the radwaste storage and processing areas, including the radwaste building, the Millstone Radioactive Waste Reduction Facility (MRRF), the staging area in the reactor building, the bunker, and the staging area outside the fence near the east entrance.

From January 1, 2000 to July 14, 2000, the licensee made 57 radioactive waste shipments totaling approximately 272,000 pounds of waste. The waste was comprised

primarily of control rod blades, stellite bearings, local power range monitors, contaminated asbestos insulation, and source range power monitors. Of the 57 waste shipments, 5 were Type B shipments in TN-RAM casks and the majority of the remaining were shipped as LSA-II in seavan containers. The bulk of the radwaste was shipped to GTS Duratek, in Tennessee.

The inspector reviewed randomly selected shipping manifests to ensure compliance with the applicable transportation and waste requirements. All records selected were complete and determined to be in compliance with the applicable regulations.

Classification of the waste containing the control rod drive mechanisms (CRDMs) removed from the spent fuel pool was examined by the inspector. Scaling factors for hard to detect radionuclides were developed for waste streams and waste packages by the waste vendor. The licensee used radiation levels and removable contamination levels from the removed components to establish an activity relationship for the CRDMs. Activation information from CRDM assemblies at another boiling water reactor was used to establish a relationship of expected radionuclides and their relative abundance. The Microshield computer code was then used to calculate activity, based on geometry and dose rate information. The licensee's reactor coolant system radioanalytical data was used to determine the estimated surface contamination on the CRDMs. The combined estimates of activation and contamination radioactivity were used to characterize the CRDMs as waste for shipping purposes.

The inspector had the opportunity to observe the transfer of velocity limiters into a shipping cask. This transfer occurred at the bunker site outside the site security fence. A job briefing was performed at which the Radiation Protection (RP) Supervisor reviewed the work and safety items, outlined the elements contained in the RWP, and stressed the use of communication during the evolution. The inspector observed good organization and coordination among the staff and very good RP support for the task.

c. Conclusions

The licensee's focus continues to be the removal of radioactive waste materials from radwaste systems, and reducing generation of new waste. A long term strategy for handling liquid radwaste while decommissioning the radwaste systems at Unit 1 was being developed.

### III. Management Meetings

#### X1 Exit Meeting Summary

The inspector presented the inspection results to members of licensee management at the conclusion of the inspection period via teleconference on September 14, 2000. The licensee provided additional information to the inspector on September 28, 2000. The licensee acknowledged the findings presented.

## PARTIAL LIST OF PERSONS CONTACTED

### Licensee

L. Temple, Unit 1 General Manager  
W. E. Perks, Director, Unit 1 Operations  
B. Ford, Director, Decommissioning & Nuclear Safety and Regulatory Affairs  
J. Veglia, Manager, Engineering Decommissioning, Unit 1  
W. Axelson, Manager, Health Physics  
D. Evans, ALARA  
R. Walpole - Unit 1 Licensing  
W. McCollum - Unit 1 Operations  
D. Wilkens - Unit 1 Chemistry  
J. Wheeler - Millstone Waste Services  
R. J. Decensi - Radiation Protection Manager Millstone Units 2 & 3  
R. Schmidtknecht -Maintenance Manager  
J. Allen - Waste Services  
R. Harnal - Unit 1 Decommissioning  
C. Palmer - Technical Services, Health Physics  
S. Thickman - Corrective Actions  
B. Castiglia, Station Corrective Actions Department  
F. Neff - Radwaste Shift Manager  
W. Ross - HP Support, Calibration Laboratory  
M. Joyce - HP Radiation Protection Supervisor  
A. Cobb - HP Balance of Plant Supervisor  
J. Marshall - HP Waste Services, Millstone  
G. L. Holtz - Regulatory Analyst  
M. Novak - Health Physics  
L. Linden - Health Physics

## INSPECTION PROCEDURES USED

40801	Self-Assessment, Auditing, and Corrective Action Permanently Shutdown Reactors
71801	Decommissioning Performance and Status at Permanently Shutdown Reactors
83750	Occupational Radiation Exposure
84750	Radioactive Waste Treatment, and Effluent and Environmental Monitoring
86750	Solid Radioactive Waste Management Transportation of Radioactive Materials

## ITEMS OPENED, CLOSED, AND DISCUSSED

### Opened

IFI 00-010-01 Followup review of contamination events and completed CR M1-00-0290.

### Closed

None

### Discussed

IFI 00-010-01 Followup review of contamination events and completed CR M1-00-0290.

## LIST OF ACRONYMS USED

ALARA	As Low As is Reasonably Achievable
CFR	Code of Federal Regulations
CRDM	Control Rod Drive Mechanism
CRs	Condition Reports
MRT	Management Review Team
PDR	Public Document Room
RP	Radiation Protection
RP&C	Radiological Protection and Chemistry
RWP	Radiation Work Permit
TN-RAM	Trans-Nuclear radioactive material
CAP	Corrective Actions Program
ER	Effectiveness Review
AR	Action Request
AITTS	Action Item Tracking and Trending System
NSRA	Nuclear Safety and Regulatory Affairs
TEDE	Total Effective Dose Equivalent
REMDCM	Radiological Environmental Monitoring Offsite Dose Calculation Manual
MRRF	Millstone Radioactive Waste Reduction Facility