ROCHESTER GAS AND ELECTRIC CORPORATION • 89 EAST AVENUE, ROCHESTER, N.Y. 14649-0001

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June 4, 2001

U.S. Nuclear Regulatory Commission
Document Control Desk
Washington, DC 20555
Attn: Mr. Guy S. Vissing (Mail Stop 14D11)
Project Directorate I-1

Subject: Revision to Emergency Plan Implementing Procedures
R.E. Ginna Nuclear Power Plant
Docket No. 50-244

Gentlemen:

In accordance with 10 CFR 50.4(b)(5), enclosed are revisions to Ginna Station Emergency Plan Implementing Procedures (EPIPs).

We have determined, per the requirements of 10 CFR 50.54(q), that these procedure changes do not decrease the effectiveness of our Nuclear Emergency Response Plan.

Very truly yours,

Peter S. Polfleit
Corporate Nuclear Emergency Planner

Enclosures

xc: USNRC Region 1 (2 copies of letter and 2 copies of each procedure)
Resident Inspector, Ginna Station (1 copy of letter and 1 copy of each procedure)
RG&E Nuclear Safety and Licensing (1 copy of letter)
Dr. Robert C. Mecredy (2 copies of letter only)

PSP/jtw

A045

PROCEDURE	REVISION NUMBER
EPIP 1-5	43
EPIP 2-1	19
EPIP 2-5	11
EPIP 2-17	6
EPIP 3-1	15
EPIP 4-7	17
EPIP 5-1	21
EPIP 5-7	32

GINNA NUCLEAR POWER PLANT
PROCEDURES INDEX
EMERGENCY PLAN IMPLEMENTING PROCEDURE

PARAMETERS: DOC TYPES - PREPIP STATUS: EF 5 YEARS ONLY:

PROCEDURE NUMBER	PROCEDURE TITLE	REV	EFFECT DATE	LAST REVIEW	NEXT REVIEW	ST
EPIP-1-0	GINNA STATION EVENT EVALUATION AND CLASSIFICATION	026	01/17/01	01/17/01	01/17/06	EF
EPIP-1-1	UNUSUAL EVENT	002	12/09/96	12/09/96	12/09/01	EF
EPIP-1-2	ALERT	003	12/09/96	12/09/96	12/09/01	EF
EPIP-1-3	SITE AREA EMERGENCY	005	12/09/96	01/23/98	01/20/02	EF
EPIP-1-4	GENERAL EMERGENCY	004	12/09/96	12/09/96	12/09/01	EF
EPIP-1-5	NOTIFICATIONS	043	06/04/01	06/04/01	06/04/06	EF
EPIP-1-6	SITE EVACUATION	012	03/12/01	03/12/01	03/12/06	EF
EPIP-1-7	ACCOUNTABILITY OF PERSONNEL	008	07/27/99	07/27/99	07/27/04	EF
EPIP-1-8	SEARCH AND RESCUE OPERATION	004	05/16/00	05/16/00	05/16/05	EF
EPIP-1-9	TECHNICAL SUPPORT CENTER ACTIVATION	019	10/06/00	10/06/00	10/06/05	EF
EPIP-1-10	OPERATIONAL SUPPORT CENTER (OSC) ACTIVATION	010	07/25/00	07/25/00	07/25/05	EF
EPIP-1-11	SURVEY CENTER ACTIVATION	021	05/16/00	05/16/00	05/16/05	EF
EPIP-1-12	REPAIR AND CORRECTIVE ACTION GUIDELINES DURING EMERGENCY SITUATIONS	007	06/21/00	06/21/00	06/21/05	EF
EPIP-1-13	LOCAL RADIATION EMERGENCY	003	08/04/95	01/23/98	01/23/02	EF
EPIP-1-15	USE OF THE HEALTH PHYSICS NETWORK HPN	005	04/24/96	03/03/99	03/03/04	EF
EPIP-1-16	RADIOACTIVE LIQUID RELEASE TO LAKE ONTARIO OR DEER CREEK	004	02/13/98	02/13/98	02/13/02	EF
EPIP-1-17	PLANNING FOR ADVERSE WEATHER	002	06/21/00	06/21/00	06/21/05	EF
EPIP-2-1	PROTECTIVE ACTION RECOMMENDATIONS	019	06/04/01	06/04/01	06/04/06	EF
EPIP-2-2	OBTAINING METEOROLOGICAL DATA AND FORECASTS AND THEIR USE IN EMERGENCY DOSE ASSESSMENT	010	04/30/01	04/30/01	04/30/06	EF
EPIP-2-3	EMERGENCY RELEASE RATE DETERMINATION	012	02/04/00	02/04/00	02/04/05	EF
EPIP-2-4	EMERGENCY DOSE PROJECTIONS - MANUAL METHOD	012	06/21/00	06/21/00	06/21/05	EF
EPIP-2-5	EMERGENCY DOSE PROJECTIONS PERSONAL COMPUTER METHOD	011	06/04/01	06/04/01	06/04/06	EF
EPIP-2-6	EMERGENCY DOSE PROJECTIONS - MIDAS PROGRAM	011	06/21/00	06/21/00	06/21/05	EF
EPIP-2-7	MANAGEMENT OF EMERGENCY SURVEY TEAMS	010	10/23/00	10/23/00	10/23/05	EF

REPORT NO. 01
REPORT: NPSP0200
DOC TYPE: PREPIP

GINNA NUCLEAR POWER PLANT
PROCEDURES INDEX
EMERGENCY PLAN IMPLEMENTING PROCEDURE

PARAMETERS: DOC TYPES - PREPIP

STATUS: EF 5 YEARS ONLY:

PROCEDURE NUMBER	PROCEDURE TITLE	REV	EFFECT DATE	LAST REVIEW	NEXT REVIEW	ST
EPIP-2-8	VOLUNTARY ACCEPTANCE OF EMERGENCY RADIATION EXPOSURE	005	05/16/00	05/16/00	05/16/05	EF
EPIP-2-9	ADMINISTRATION OF POTASSIUM IODIDE (KI)	003	12/05/97	12/05/97	12/05/01	EF
EPIP-2-10	INPLANT RADIATION SURVEYS	003	01/16/97	01/16/97	01/16/02	EF
EPIP-2-11	ONSITE SURVEYS	015	04/30/01	04/30/01	04/30/06	EF
EPIP-2-12	OFFSITE SURVEYS	018	04/30/01	04/30/01	04/30/06	EF
EPIP-2-13	IODINE AND PARTICULATE ACTIVITY DETERMINATION FROM AIR SAMPLES	008	07/27/99	07/27/99	07/27/04	EF
EPIP-2-14	POST PLUME ENVIRONMENTAL SAMPLING	014	12/04/00	12/04/00	12/04/05	EF
EPIP-2-15	POST PLUME EVALUATION OF OFFSITE DOSES DUE TO DEPOSITION	004	03/06/98	03/06/98	03/06/03	EF
EPIP-2-16	CORE DAMAGE ESTIMATION	010	02/25/00	02/25/00	02/25/05	EF
EPIP-2-17	HYPOTHETICAL (PRE-RELEASE) DOSE ESTIMATES	006	06/04/01	06/04/01	06/04/01	EF
EPIP-2-18	CONTROL ROOM DOSE ASSESSMENT	012	10/06/00	10/06/00	10/06/05	EF
EPIP-3-1	EMERGENCY OPERATIONS FACILITY (EOF) ACTIVATION AND OPERATIONS	016	06/04/01	06/04/01	06/04/06	EF
EPIP-3-2	ENGINEERING SUPPORT CENTER (ESC)	009	03/12/01	03/12/01	03/12/06	EF
EPIP-3-3	IMMEDIATE ENTRY	007	06/21/00	06/21/00	06/21/05	EF
EPIP-3-4	EMERGENCY TERMINATION AND RECOVERY	008	03/12/01	03/12/01	03/12/06	EF
EPIP-3-7	SECURITY DURING EMERGENCIES	009	11/16/99	11/16/99	11/16/04	EF
EPIP-4-1	PUBLIC INFORMATION RESPONSE TO AN UNUSUAL EVENT	006	02/13/98	02/13/98	02/13/02	EF
EPIP-4-3	ACCIDENTAL ACTIVATION OF GINNA EMERGENCY NOTIFICATION SYSTEM SIRENS	008	02/13/98	02/13/98	02/13/02	EF
EPIP-4-6	JOINT EMERGENCY NEWS CENTER ACTIVATION	008	02/11/00	02/11/00	02/11/05	EF
EPIP-4-7	PUBLIC INFORMATION ORGANIZATION STAFFING	017	06/04/01	06/04/01	06/04/06	EF
EPIP-5-1	OFFSITE EMERGENCY RESPONSE FACILITIES AND EQUIPMENT PERIODIC INVENTORY CHECKS AND TESTS	021	06/04/01	06/04/01	06/04/06	EF
EPIP-5-2	ONSITE EMERGENCY RESPONSE FACILITIES AND EQUIPMENT PERIODIC INVENTORY CHECKS AND TESTS	024	03/12/01	03/12/01	03/12/06	EF
EPIP-5-5	CONDUCT OF DRILLS AND EXERCISES	012	03/12/01	03/12/01	03/12/06	EF

PARAMETERS: DOC TYPES - PREPIP STATUS: EF 5 YEARS ONLY:

PROCEDURE NUMBER	PROCEDURE TITLE	REV	EFFECT DATE	LAST REVIEW	NEXT REVIEW	ST
EPIP-5-6	ANNUAL REVIEW OF NUCLEAR EMERGENCY RESPONSE PLAN (NERP)	004	05/28/99	05/28/99	05/28/04	EF
EPIP-5-7	EMERGENCY ORGANIZATION	032	06/04/01	06/04/01	06/04/06	EF
EPIP-5-9	TESTING THE OFF HOURS CALL-IN PROCEDURE AND QUARTERLY TELEPHONE NUMBER CHECK	006	05/28/99	05/28/99	05/28/04	EF
EPIP-5-10	EMERGENCY RESPONSE DATA SYSTEM (ERDS)	005	09/05/97	09/05/97	09/05/02	EF
NERP	GINNA STATION NUCLEAR EMERGENCY RESPONSE PLAN	020	03/21/01	03/21/01	12/09/04	EF

TOTAL FOR PREPIP 52

ROCHESTER GAS & ELECTRIC CORPORATION

GINNA STATION

Controlled Copy Number 23

Procedure Number EPIP 1-5

Revision Number 43

NOTIFICATIONS

Responsible Manager

6/4/01

Effective Date

Category 1.0

This procedure contains 26 pages

EPIP 1-5

NOTIFICATIONS

1.0 PURPOSE

The purpose of this procedure is to specify the means by which notifications are made to station personnel for all emergency action levels, to expedite the notification of selected RG&E personnel to augment the emergency response organization and notify offsite agencies.

2.0 RESPONSIBILITY

2.1 The Shift Supervisor, Emergency Coordinator or EOF/Recovery Manager is responsible for making the decision to notify offsite agencies.

2.2 Ginna Station Control Room personnel are responsible for implementing this procedure.

2.3 Community Alert Network (CAN) is responsible for activating the onsite/offsite responders.

2.4 The Corporate Nuclear Emergency Planner is responsible for maintaining the station call lists up to date on a quarterly basis.

3.0 REFERENCES

3.1 Developmental References

3.1.1 Nuclear Emergency Response Plan

3.2 Implementing References

3.2.1 EPIP 1-0, Ginna Station Event Evaluation and Classification

3.2.2 EPIP 2-1, Protective Action Recommendations (PARs)

3.2.3 O-9.3, NRC Immediate Notification

3.2.4 10 CFR 26, Fitness for Duty Programs

3.2.5 P-9, Radiation Monitoring System

3.2.6 EPIP 2-2, Obtaining Meteorological Data and Forecasts and their use in Emergency Dose Assessment

3.2.7 EPIP 4-7, Public Information Organization Staffing

3.2.8 EPIP 5-7, Emergency Organization

4.0 PRECAUTIONS

4.1 New York State, Wayne and Monroe Counties must be notified of all Emergency Classifications within 15 minutes of a declaration.

4.2 The Licensee should notify the USNRC immediately after notification of the appropriate State and local agencies and not later than one hour after the time the licensee declares one of the Emergency Classes.

4.3 Attachment 4 is a specialized notification list of people and organizations who may not require immediate notification but may need to be contacted during an emergency.

5.0 PREREQUISITES

An Emergency has been declared in accordance with EPIP 1-0, Ginna Station Event Evaluation and Classification or offsite assistance has been requested by RG&E personnel.

6.0 ACTIONS

6.1 Shift Supervisor, Emergency Coordinator, EOF/Recovery Manager

6.1.1 Ensure that notifications of all emergency declarations to New York State, Wayne and Monroe Counties are made within 15 minutes of declaring an emergency, in accordance with Attachment 3.

6.1.2 The licensee should notify the USNRC immediately after notification of the appropriate State or local agencies and not later than one hour after the time the licensee declares one of the Emergency Classes using procedure O-9.3 "NRC Immediate Notification".

6.1.3 Upon notification of an Unusual Event at Ginna Station, direct the control room personnel to implement section 6.2.1 of this procedure. If the event is an Alert or higher, implement section 6.2.2.

6.1.4 If additional assistance is required, refer to the NOG E-Plan phone list (in the RG&E telephone directory) in the Control Room and all Emergency Response Facilities, for phone numbers of station personnel.

6.2 **Control Room Personnel**

6.2.1 Unusual Event - Go to Attachment 1

6.2.2 Alert Classification or Higher - Go to Attachment 2

6.2.3 When offsite assistance has been requested - Go to Attachment 5

7.0 **ATTACHMENTS**

1. Unusual Event Notifications
2. Alert or Higher Notifications
3. Instructions for New York State Radiological Emergency Data Forms

3a. New York State Radiological Emergency Data Form (Part 1)

3b. New York State Radiological Emergency Data Form (Part 2)

3c. Instructions for Event 1 and Event 2 Printouts and Plant Status Report

3d. Event 1 Supplemental Information Form

3e. Plant Status Report (PPCS not available)

4. Specialized Notification Call List
5. Notifications When Offsite Assistance has been requested
6. Emergency Planning Contingency Notification
7. Management Notification Roster
   (This attachment is controlled by Nuclear Emergency Preparedness. It is not included as part of the distributed procedure)

UNUSUAL EVENT NOTIFICATIONS

1. Report information to NEW YORK STATE, WAYNE and MONROE counties within 15 minutes of declaring the emergency via RECS Line using **New York State Radiological Emergency Data Forms (Part 1) Attachment 3a.** Fax the **New York State Radiological Emergency Data Form (Part 1) Attachment 3a** to New York State, Wayne County, Monroe County, TSC, EOF, Survey Center and Joint Emergency News Center.

2. Notify USNRC immediately after the notification of the State and Counties, using procedure O-9.3, NRC Immediate Notification

3. Activate the following positions by stating the following:

   "We have an UNUSUAL EVENT at Ginna Station based on

   _____

   (Initiating Condition)

   Please report to the Technical Support Center. The event was declared at _____ hrs. We need to remind you of the Fitness for Duty Requirements. Are you available to report for Duty at this time? If not, we are requesting that you standby so you can be notified for the next call in shift".

A TSC Manager: Report to the TSC to support the Control Room with offsite communications.

	Joe Widay	Business	3250	Will Report (YES/NO)
		Home	716-586-2679	
		Pager	716-528-3977	
		Cellular	716-315-0343	
OR				
	Dick Marchionda	Business	3699	Will Report (YES/NO)
		Home	315-926-0324	
		Pager	716-464-4403	
		Cellular	716-315-1246	
OR				
	Jack St. Martin	Business	3641	Will Report (YES/NO)
		Home	716-586-5676	
		Pager	716-464-5287	

UNUSUAL EVENT NOTIFICATIONS

B. Technical Assessment Manager: Report to the TSC to support the Control Room with offsite communications.

Ron Ploof	Business	3673	Will Report (YES/NO)
	Home	716-381-9379	
	Pager	716-921-1722	
	Cellular	716-315-0551	
OR			
Brian Flynn	Business	3734	Will Report (YES/NO)
	Home	716-293-1565	
	Pager	716-464-5134	
	Cellular	716-315-0550	
OR			
Peter Bamford	Business	3832	Will Report (YES/NO)
	Home	716-924-0490	
	Pager	716-528-3166	

C. Operations Assessment Manager: Report to the TSC to support the Control Room with offsite communications.

Terry White	Business	3667	Will Report (YES/NO)
	Home	716-226-9381	
	Pager	716-464-7382	
	Cellular	716-315-0345	
OR			
Pete Sidelinger	Business	3509	Will Report (YES/NO)
	Home	716-671-3198	
	Pager	716-463-9830	
OR			
Bill Everett	Business	3815	Will Report (YES/NO)
	Home	315-589-8156	
	Pager	716-527-7461	
	Cellular	716-315-0359	

D. NRC Resident Inspector: Informational call only

Ho Nieh	Business	3265
	Home	315-986-7927
	Pager	1-800-944-2337 (then dial personal ID# 53133)
OR		
Chris Welch	Business	3265
	Home	(716) 425-2613
	Pager	1-800-944-2337 (then dial personal ID# 51578)

UNUSUAL EVENT NOTIFICATIONS

E. Corporate Nuclear Emergency Planner: Inform government officials, public relations, PSC and financial department of the event.

Peter Polfleit	Business	6772
	Home	716-654-5325
	Pager	716-527-2207
	Cellular	716-315-1201

OR

Frank Cordaro	Business	3108
	Home	315-524-2924
	Pager	716-527-3650
	Cellular	716-315-1277

OR

Richard Watts	Business	8706
	Home	716-425-2644
	Pager	716-527-3749
	Cellular	716-315-1204

OR

Jill Willoughby	Business	4033
	Home	716-787-9075
	Pager	716-528-3295
	Cellular	716-315-1205

4. If the Unusual Event lasts greater than one (1) hour, report information using the **New York State Radiological Emergency Data Forms (Part 1) Attachment 3a** to New York State, Wayne County, Monroe County, TSC, EOF, Survey Center and Joint Emergency News Center each hour from the time the previous notification was made. Fax the New York State Radiological Emergency Data Form (Part 1) Attachment 3a to New York State, Wayne County, Monroe County, TSC, EOF, Survey Center and Joint Emergency News Center after each report.

ALERT OR HIGHER NOTIFICATIONS

1. Contact Community Alert Network (CAN) at 9-1-800-552-4226 (or at their back-up number of 9-1-888-786-8478). Inform the CAN operator the following information to activate the system:

   a. This is _____. I am the Ginna Control Room Communicator with RG&E.
   (your name)

   b. My password is: Brookwood

   c. My callback number is: _____

   d. This is (circle one): an Actual Event a Drill

   e. This Emergency Classification declared at: _____
   (Time from RECS form)

   f. Message to deliver (circle one):

   Drill Alert Site Area Emergency General Emergency

   g. My current time is:_____. Please start notifications now.

2. Report information to NEW YORK STATE, WAYNE and MONROE counties within 15 minutes of declaring the emergency via RECS Line using **New York State Radiological Emergency Data Forms (Part 1) Attachment 3a.** Fax the **New York State Radiological Emergency Data Forms (Part 1) Attachment 3a** to New York State, Wayne County, Monroe County, TSC, EOF, Survey Center and Joint Emergency News Center.

3. Notify Nuclear Emergency Preparedness of the event. Emergency Preparedness will verify actuation of the emergency response organization notification. If notifications have not begun, Emergency Preparedness will refer to Attachment 6 for contingency notification of one hour responders.

Peter Polfleit	Business	6772
	Home	716-654-5325
	Pager	716-527-2207
	Cellular	716-315-1201

OR

Frank Cordaro	Business	3108
	Home	315-524-2924
	Pager	716-527-3650
	Cellular	716-315-1277

ALERT OR HIGHER NOTIFICATIONS (Continued)

OR

Richard Watts	Business	8706
	Home	716-425-2644
	Pager	716-527-3749
	Cellular	716-315-1204

OR

Jill Willoughby	Business	4033
	Home	716-787-9075
	Pager	716-528-3295
	Cellular	716-315-1205

4. Notify USNRC immediately after the notification of the State and Counties, using procedure O-9.3, NRC Immediate Notification

5. NRC Resident Inspector: Informational call only

Ho Nieh	Business	3265
	Home	315-986-7927
	Pager	1-800-944-2337 (then dial personal ID# 53133)

OR

Chris Welch	Business	3265
	Home	716-425-2613
	Pager	1-800-944-2337 (then dial personal ID# 51578)

6. If the Alert of higher lasts greater than 30 minutes report information using the **New York State Radiological Emergency Data Forms (Part 1) Attachment 3a** to New York State, Wayne County, Monroe County every 30 minutes from the time the previous notification was made. Fax the New York State Radiological Emergency Data Form (Part 1) Attachment 3a to New York State, Wayne County, Monroe County, TSC, EOF, Survey Center and Joint Emergency News Center after each report.

7. Notify Energy Operations (8944) that Ginna has an emergency and to implement procedures to increase reliability of power to Ginna.

8. If requested by the TSC or EOF, the Control Room will fax the Event 1 Supplemental Information Form, Attachment 3d to the TSC and EOF.

NOTE: EVENT 1 AND EVENT 2 PRINTOUTS SHOULD NOT BE TRANSMITTED BY THE CONTROL ROOM, BUT SHOULD BE FAXED BY THE TSC ADMINISTRATIVE/COMMUNICATIONS STAFF WHEN IT IS SUFFICIENTLY STAFFED TO DO SO.

9. Refer to Attachment 3c for Event 1 and Event 2 instructions.

INSTRUCTIONS FOR NEW YORK STATE RADIOLOGICAL EMERGENCY DATA FORMS

1. The New York State Radiological Emergency Data Form, (Part 1) Attachment 3a should be filled out with the assistance of the Emergency Coordinator or EOF/Recovery Manager and Radiation Protection personnel.

2. At the upper right hand corner of the form, number each notification form sequentially.

3. When information has changed from the previous notification, check the box for that item.

4. For training and drills/exercise, circle "B" - An Exercise. For actual events, circle "A" - NOT An Exercise.

5. **Fill out the form using the following instructions**:

Block 1 Fill in the date and time that the message is transmitted. Select A or B, depending on the method the RECS will be transmitted.

WHEN THE FORM IS COMPLETED, report the information on the completed New York State Radiological Emergency Data Form (Part 1), Attachment 3a, to New York State, Wayne and Monroe Counties within 15 minutes of declaring the emergency using the RECS line.

a. Pick up the receive and depress "A" then "*" for all call. Wait 5 seconds then depress the "Push to Talk" bar on the handset and state:

"This is Ginna Station. Please standby for roll call."
"New York State" (wait for response)
"Monroe County" (wait for response)
"Wayne County" (wait for response)

b. Report the information by reading the statement number and the statement including the designation letter (e.g., "Item four, Classification "A" Unusual Event").

c. Upon completion of transmitting the information perform roll call. Reset the system by depressing "A" then "#".

d. Hang up receiver.

If the RECS line is Out Of Service (OOS) and OTHER is selected, note the method (phone) and perform the following:

Call Wayne County at 9-1-315-946-9711 (Wayne County Warning Point). Inform Wayne County "This is a Ginna Emergency. Please hold while we connect Monroe County and New York State". Press the conference button on the telephone.

INSTRUCTIONS FOR NEW YORK STATE RADIOLOGICAL EMERGENCY DATA FORMS (Cont'd.)

Call Monroe County at 9-528-2222 (Monroe County Warning Point). Inform Monroe County "This is a Ginna emergency. Press the conference button on the telephone. Wayne and Monroe Counties should now be connected

Roll call: Wayne County _____ Monroe County _____

"Please hold while we connect New York State". Press the conference button on the telephone.

Call new York State at 9-1-518-457-2200 (New York State Warning Point). Inform New York State "This is a Ginna emergency." Press the conference button on the telephone. Wayne County, Monroe County and New York State should all be connected.

Block 2 Circle A or B

Block 3 Ginna is the facility providing the information. Nothing further is needed in this box.

Block 4 Circle the appropriate Emergency Classification. The Emergency Coordinator (TSC) or EOF/Recovery Manager (EOF) will provide this information.

Block 5 Fill in the date and time that the Emergency Classification was declared. This will normally be in the Control Room, Emergency Coordinator's or EOF/Recovery Manager's log.

Block 6 Check effluent monitor readings against the release rate limits given in procedure P-9. Circle the appropriate release information. Use the table provided and/or have the Dose Assessment Manager assist.

- **No release** - normal plant operation
- **Release BELOW federally approved operating limits** - select this if any of the following effluent radiation monitors are on **ALARM**:
  1. R-10a "Containment Vent Iodine" (during CV purge only)
  2. R-10B "Plant Vent Iodine"
  3. R-11 "Containment Vent Iodine" (during CV purge only)
  4. R-12 "Containment Vent Gas" (during CV purge only)
  5. R-13 "Plant Vent Particulate"
  6. R-14 "Plant Vent Gas"
  7. R-15 "Air Ejector Gas"
  8. R-18 "Waste Liquid" (and Not Isolated)
  9. R-20A "SFP Hx Service Water"
  10. R-20B "SFP Hx Service Water"
  11. R-21 "Retention Tank Monitor" (and Not Isolated)
  12. R-22 "High Conductivity Waste Tank" (and Not Isolated)
  13. R-31 "A Main Steam Line" (only when the associated ARV or Safety is open)
  14. R-32 "B Main Steam Line" (only when the associated ARV or Safety is open)

INSTRUCTIONS FOR NEW YORK STATE RADIOLOGICAL EMERGENCY DATA FORMS (Cont'd.)

15. **Release ABOVE federally approved operating limits** - select this if any of the release rate limits in procedure P-9, "Radiation Monitoring System", are exceeded.
16. **Unmonitored release requiring evaluation** - select this if there is an unmonitored release and it has not been quantified in Ci/sec.

Block 7 Circle the appropriate PAR. The Emergency Coordinator and/or the EOF Recovery Manager will use EPIP 2-1, Protective Action Recommendations (PAR's). PAR's only reflect RG&E's recommendations, NOT THE ACTIONS IMPLEMENTED BY OFFSITE COUNTY OFFICIALS.

Block 8 Fill in the EAL # that the Emergency Classification is based on. The Emergency Coordinator and/or EOF Recovery manager can provide that information, if necessary.

Block 9 Determine plant status and circle the appropriate condition.

Block 10 Select A, Not Applicable, if the reactor is NOT SHUTDOWN or select B and fill in the date and time if the REACTOR WAS SHUTDOWN. Reactor shutdown time is the time the reactor trip breakers are opened. This time is displayed as an "Auto Event" at the bottom of the PPCS screen. This information can be obtained from the Control Room's, Emergency Coordinator's or EOF/Recovery Manager's log.

Block 11 Determine wind speed and the elevation.

NOTE: THE WIND SPEED INDICATOR AT THE 33 FOOT LEVEL IS DESIGNED TO MEASURE ONLY TO 50 MILES PER HOUR.

Obtain wind speed using the plant process computer (PPCS).

OR

If the PPCS is not available, use the Control Room wind speed indication on the RMS rack.

OR

The Radiation Protection Shift Technician or Dose Assessment Manager will determine the weather and stability class in accordance with procedure EPIP 2-2.

Block 12 Determine wind direction and the elevation as it was taken from PPCS and/or Control Room weather data instrumentation and fill in the wind direction and elevation.

Obtain wind direction using the plant process computer (PPCS)

OR

If the PPCS is not available, use the Control Room wind direction on the RMS rack.

OR

The Radiation Protection Shift Technician or Dose Assessment Manager will determine the weather and stability class in accordance with procedure EPIP 2-2.

INSTRUCTIONS FOR NEW YORK STATE RADIOLOGICAL EMERGENCY DATA FORMS (Cont'd.)

Block 13 Fill in temperatures from the 250 foot and 33 foot levels and calculate stability class. Circle the appropriate stability class (Unstable, Neutral, Stable).

If the PPCS is not available, use the Control Room wind direction on the RMS rack.

OR

The Radiation Protection Shift Technician or Dose Assessment Manager will determine the weather and stability class in accordance with procedure EPIP 2-2.

Block 14 Fill in the name of the communicator reporting the information. Fill in the call back area code and telephone number. Return to BLOCK 1 and report information via RECS or other means, as necessary.

6. The communicator will initial the "prepared by" line at the bottom of the form. The Shift Supervisor, Emergency Coordinator or EOF/Recovery Manager will approve the form at the bottom prior to transmission. The communicator will ensure all forms are sent to the Corporate Nuclear Emergency Planner (CNEP) at the conclusion of the event.

7. Data in items 15 through 20 of the New York State Radiological Emergency Data Form (Part 2), Attachment 3b, should be filled out by the TSC/EOF Dose Assessment group and transmitted by fax as information becomes available from the TSC/EOF. The form is transmitted via fax after there has been a release above Technical Specifications (see Attachment 3a, Block 6).

8. Fax all New York State Radiological Emergency Data Forms to the following using the instructions on the fax machine:

Wayne County	9-1-315-946-9721
Monroe County	9-256-6355
New York State	9-1-518-457-9942
TSC	3927
EOF	9-262-5788
Survey Center	3612
Engineering Support Center	3774
Joint Emergency News Center	6771

9. When a County or the State request to be notified only if conditions change or when the event is terminated, check with the State/County warning points to see if they agree. If they all agree, note this in section 8 of the next Part 1 Form notification. The facility with command and control will inform the other RG&E response facilities of the status of notifications. Perform a notification when conditions change or the event is terminated.

NEW YORK STATE RADIOLOGICAL EMERGENCY DATA FORM (PART I)

RECS message number _____

"This is Ginna Station. Please stand by for roll call." "New York State" ☐ "Monroe County" ☐ "Wayne County" ☐

1. Message transmitted at:

   Date _____ Time _____ Via: A. RECS B. Other ____

2. This is:

   A. NOT an exercise B. An exercise

3. Facility providing information: C. Ginna

4. Classification:
☐ check box if information has changed

   A. UNUSUAL EVENT
   B. ALERT
   C. SITE AREA EMERGENCY
   D. GENERAL EMERGENCY
   E. EMERGENCY TERMINATED
   F. RECOVERY

5 Classification Time:
☐ check box if information has changed

This Emergency Classification declared at: Date _____ Time _____

6 Release of Radioactive Materials due to the Classified Event:
☐ check box if information has changed

   A. No Release
   B. Release BELOW federally approved operating limits (technical specifications)
      ☐ to atmosphere ☐ to water
   C. Release ABOVE federally approved operating limits (technical specifications)
      ☐ to atmosphere ☐ to water
   D. Unmonitored release requiring evaluation

7. Protective Action RECOMMENDATIONS: (Refer to EPIP 2-1)
☐ check box if information has changed

   A. No need for Protective Actions outside the site boundary
   B. Evacuate the following ERPAs

   W1 W2 W3 W4 W5 W6 W7 M1 M2 M3 M4 M5 M6 M7 M8 M9

   C. Shelter all remaining ERPAs

8. Brief Event Description:
☐ check box if information has changed
EAL # _____

9 Plant Status:
☐ check box if information has changed

   A. Stable
   B. Improving
   C. Degrading
   D. Hot Shutdown
   E. Cold Shutdown

10. Reactor Shutdown: (subcritical)
☐ check box if information has changed

   A. Not Applicable B. Date _____ Time _____

11. Wind Speed:
☐ check box if information has changed

A. _____ Miles/hour at elevation _____ feet

12. Wind Direction:
☐ check box if information has changed

From: _____ degrees at elevation _____ feet

13. Stability Class:
☐ check box if information has changed

Unstable, Neutral, Stable

DO NOT REPORT
Stability Class Work Sheet

Temperature at 250 feet _____ °F
Temperature at 33 feet _____ °F
Temperature Difference _____ °F

-1.74 -0.65

Unstable | Neutral | Stable

-3 -2 -1 0 1

Temperature Difference

14. Reported By:

Name _____

Area Code _____ Number _____

"New York State copy?" ☐"Monroe County copy?" ☐"Wayne County copy?" ☐

FOR RG&E USE ONLY:

Time Prepared: _____ Time Approved: _____ **Completed form sent**
Prepared By: _____ Approved By: _____ **to EP – Ginna Training___**

NEW YORK STATE RADIOLOGICAL EMERGENCY DATA FORM (PART II)

Telefax this data form to: ☐ New York State ☐ Monroe County ☐ Wayne County

15. Message transmitted at:

Date _____ Time _____ Location/Facility Transmitted From: _____

16. General Release Information

A. Release > Tech Specs started: Date _____ Time _____
B. Release > Tech Specs expected to end: Date _____ Time _____ OR ☐ Unknown
C. Release > Tech Specs ended: Date _____ Time _____
D. Reactor Shutdown: N/A OR Date _____ Time _____
E. Wind Speed: _____ miles/hour at elevation _____ feet
F. Wind Direction from: _____ degrees at elevation _____ feet
G. Stability Class: PASQUILL A B C D E F G OR Other _____

17. Atmospheric Release Information

A. Release from: ☐ Ground ☐ Elevated
B. Iodine/Noble Gas Ratio _____
C. Total Release Rate _____ Ci/sec
D. Noble Gas Release Rate _____ Ci/sec
E. Iodine Release Rate _____ Ci/sec
F. Particulate Release Rate _____ Ci/sec

18. Waterborne Release Information

A. Volume of Release _____ gal or liters
B. Total Concentration _____ μCi/ml
C. Radionuclides in Release _____
D. Total Activity Released _____

19. Dose Calculations (based on a release duration of _____ hours)

Calculation is based on (circle one) A. Inplant Measurements B. Field Measurements C. Assumed Source Term

Table below applies to (circle one) A. Atmosphere Release B. Waterborne Release

Distance	Xu/Q	Dose	
		TEDE (rem)	CDE - Child Thyroid (rem)
Site Boundary			
2 Miles			
5 Miles			
10 Miles			
_____ Miles			

20. Field Measurements of Dose Rates or Surface Contamination/Disposition

Miles/Sector OR Miles/Degrees	Location OR Sampling Point	Time of Reading	Dose Rate OR Contamination (Include Units)

FOR RG&E USE ONLY: **Time Prepared:** _____ **Time Approved:** _____
By: _____ **By:** _____

Completed form sent to EP - Ginna Training _____

INSTRUCTIONS FOR EVENT 1 AND EVENT 2 PRINTOUTS AND PLANT STATUS REPORT

1. Assure the Plant Process Computer System (PPCS) is operational. If PPCS is not operational, go to step 5.

NOTE: OBTAIN EVENT 1 AND EVENT 2 PRINTOUTS FROM THE COMPUTER ANALYST IF THAT POSITION IS STAFFED, OTHERWISE PERFORM THE FOLLOWING STEP.

2. Obtain Event 1 and Event 2 printouts by entering:
   GASR <return>
   Computer response - Enter Group Name
   EVENT1 <return>
   Computer response - Select Printer Location
   Press F1 for Control Room, F2 for EOF, F3 for TSC
   GASR <return>
   Computer response - Enter Group Name
   EVENT2 <return>
   Computer Response - Select Printer Location
   Press F1 for Control Room, F2 for EOF, F3 for TSC
   Place printout in the Event 1 & 2 group trend log book

NOTE: EVENT 1 AND EVENT 2 GROUP TREND (GTLOG) SHOULD BE PRINTED EVERY 15 MINUTES.

3. Initiate Event 1 & 2 group trend log (GT LOG) by entering:
   GTLOG <return>
   Computer response - Enter Name of Group to Log
   EVENT1 <return>
   Computer response - Enter Update Rate (30-1800 seconds)
   60 <return>
   Computer response - Enter Print Interval (1-30 minutes)
   15 <return>
   Computer Response - Select Printer Location (F1-F4)
   Press F1 for F3 for TSC
   Initiate Event 1 and Event 2 Group Trend Log in EOF by repeating step 3 and enter F2 when selecting printer location.
   Place printouts in Emergency Coordinator or EOF/Recovery Manager notebook

4. Verify with the TSC computer analyst that the PPCX (plant computer data) is being transmitted to New York State, Wayne County and Monroe County via computer modem. If the PPCX (plant computer data) to offsite agencies is unavailable, perform step 2 and fax the printout to New York State, Wayne County and Monroe County.

5. If the PPCS is unavailable, the Plant Status Report (Attachment 3e) must be completed by the Control Room and faxed to the TSC for distribution to New York State, Wayne County, Monroe County and EOF.

6. When completing Attachment 3e, if the parameter is measurable (e.g. pressurizer level) use the numerical value. When the parameter is not measurable, the condition of any deviation from normal should be noted (e.g. core circulation - forced or natural).

EVENT 1 SUPPLEMENTAL INFORMATION FORM

61	Aux Feedwater System	_____Inservice	_____Standby	_____OOS
62	Safety Injection System	_____Inservice	_____Standby	_____OOS
63	Diesel Generators	_____Inservice	_____Standby	_____OOS
64	Containment Fan Cooler System	_____Inservice	_____Standby	_____OOS
65	Service Water System	_____Inservice	_____Standby	_____OOS
66	Post Accident Charcoal Filters	_____Inservice	_____Standby	_____OOS
67	Containment Spray Pumps	_____Inservice	_____Standby	_____OOS
68	Component Cooling System	_____Inservice	_____Standby	_____OOS
69	DC System	A_____v	B_____v	
70	NaOH Tank Level	_____%		

Time Completed:_____

Completed By: _____

PLANT STATUS REPORT (PPCS NOT AVAILABLE)

Plant Parameters		Plant Parameters		Radiation Monitoring	
Reactor Shutdown	YES/NO TIME	Auxiliary Feedwater System	_____ Inservice _____ Standby _____ OOS	R-1 Control Room	mRem/hr
RCS Pressure	PSIG	Safety Injection	_____ Inservice _____ Standby _____ OOS	R-2 Containment	mRem/hr
PRZR Level	%	Diesel Generators	_____ Inservice _____ Standby _____ OOS	R-9 Letdown	mRem/hr
Core Circulation	Forced/Natural	Service Water System	_____ Inservice _____ Standby _____ OOS	R-10 "A" Containment Iodine	CPM
Subcooled	°F	Cnmt Fan Coolers System	_____ Inservice _____ Standby _____ OOS	R-11 Containment Particulate	CPM
"A" S/G Level	%	Post Acc. Charcoal Filter	Damper Open / Damper Closed	R-12 Containment Gas	CPM
"B" S/G Level	%	Cnmt. Spray Cnmt. Spray Pumps	_____ Inservice _____ Standby _____ Inservice _____ Standby _____ OOS	R-10 "B" Plant Vent Iodine	CPM
"A" S/G Pressure	PSIG	Comp. Cooling System	_____ Inservice _____ Standby _____ OOS	R-13 Plant Vent Particulate	CPM
"B" S/G Pressure	PSIG	D.C. System	/ Volts	R-14 Plant Vent Gas	CPM
Safeguard	Train B (16/17) EDG/Turbine/Offsite	NaOH Tank Level	%	R-29 Containment High Range	R/hr
Offsite Power	Available/Unavailable	RWST Level	%	R-30 Containment High Range	R/hr
Cnmt Pressure	PSIG	B.A. Tank Level	%	R-15 Air Ejector Gas	CPM
Sump "A" Level	FT	Wind Speed	MPH	*R-12A SPING Containment Gas	µCi/cc
Sump "B" Level	IN	Wind Direction (From)	Degrees	*R14A SPING Plant Vent Gas	µCi/cc
RCS Temp	°F	Temperature 33 FT	°F	*R-15A SPING Air Ejector Gas	µCi/cc
RVLIS	%	Temperature 250 FT	°F	R-31 Steam Line "A"	mRem/hr
CET	°F			R-32 Steam Line "B"	mRem/hr

R/hr = Roentgen/Hour
µCi/cc =Microcuries/Cubic Centimeter
mRem/hr = millirem/Hour

*SPING Unit readings may be deleted if radiation monitors R-12 and R-14 onTime scale.

Date _____
Completed _____
Completed By _____

SPECIALIZED NOTIFICATION LIST

Medical

1.	Ontario Volunteer Emergency Squad		769-911 **(Ginna Control Room Only)** (To request ambulance) 9-1-315-524-5751 (Business number)
2.	Wayne County Emergency Dispatcher		9-1-315-946-5304
3.	Rochester General Hospital, Emergency Department Triage Nurse		9-338-2300
4.	Rochester General Hospital Main Switchboard		9-338-4000
5.	RG&E Medical Services	Office Alternate Office	8600 4616
	Dr. Carl Devore Shari Miller, N.P.		
6.	Newark-Wayne Community Hospital		9-1-315-332-2267

Police

1.	New York State Police Warning Point	9-1-518-457-2200 9-1-315-457-6811
2.	Canandaigua State Police	9-398-3200
3.	Williamson State Police	9-1-800-962-0810
4.	Wayne County Sheriff	9-1-315-946-9711
5.	Monroe County Sheriff	9-428-5511

Fire

1.	Ontario Volunteer Fire Department	769-911 **(Ginna Control Room Only)** (To report fire) 9-1-315-524-2661 (Business number)

SPECIALIZED NOTIFICATION LIST

Westinghouse Emergency Response Organization

Notify one Westinghouse contact using list in order shown. Provide available facts to individual and provide updates.

1.	Hank Sepp		9-1-412-374-5282
	Director ESBU Emergency Response	Home	9-1-412-856-4036
		Hotline	9-1-412-856-6121
2.	Dan Lipman		9-1-412-374-6920
	ESBU Service Response Manager	Home	9-1-412-744-3244
3.	Rose Cotton		9-1-412-374-6805
	ESBU Emergency News	Home	9-1-412-963-6129
	Communications ENC Manager		
4.	Mike Young		9-1-412-374-5081
	ESBU Emergency Response	Home	9-1-412-243-7996
	Technical Support Manager		
5.	Tom Hart		9-1-412-374-6980
	ESBU Emergency Response	Home	9-1-412-837-9486
	Logistic Manager	Hotline	9-1-412-837-1737
		Pager	9-1-412-765-8886

Other

1.	Ontario Town Supervisor,	Office	9-1-315-524-7105
	Roy Hermann	Home	9-1-315-524-8087
2.	Ontario Water Department		9-1-315-524-2941
3.	Plant Protection Department		9-722-2122
	Kodak Park		
4.	Wayne County Emergency		9-1-315-946-5663
	Operations Center		
5.	Director Wayne County	Home	9-1-315-597-6291
	Office of Disaster Preparedness -		
	Thelma Wideman		
6.	Monroe County Office of	Daytime	9-473-0710
	Emergency Preparedness	Offhours	9-528-2222
	(Nights, Weekends, Holidays)		

SPECIALIZED NOTIFICATION LIST (Cont'd.)

7.	Administrator, Monroe County Office of Emergency Preparedness - Mary Louise Meisenzahl	Home Pager	9-624-3194 9-428-5141
8.	University of Rochester Advance RAP Team - David Maillie	 Home	9-275-3788 9-334-2428
9.	National Weather Service (Buffalo)		9-1-800-462-7751
10.	Radiation Management Consultants	Office Emergency Fax	9-1-215-824-1300 9-1-215-243-2990 9-1-215-824-1371
11.	Helgeson Nuclear Services Inc		9-1-415-846-3453
12.	James C. Hutton (NSARB)		9-1-716-381-8473
13.	Institute of Nuclear Power Operations		9-1-800-321-0614
14.	American Nuclear Insurers		9-1-203-677-7305
15.	Emergency Preparedness Canada	Phone Fax	9-1-613-991-7000 9-1-613-996-0995
16.	NYPA Environmental Laboratory Fulton, New York	Daytime	9-1-315-593-5740 9-1-315-593-5735
		Lab Manager pager	9-1-800-436-2732 enter pager # 713-6710 then your number
		Mgr Home #	9-1-315-342-0015
		RES on call pager	9-1-800-436-2732 enter pager # 713-6726 then your number

SPECIALIZED NOTIFICATION LIST (Cont'd.)

Company Personnel

1.	Mis, Frederic Manager, Radiation Protection and Chemistry	Business Home Pager	3323 716-671-9111 716-528-7266
2.	Richards, Thomas Chief Executive Officer	Business Home	8299 (716) 288-9186
3.	Mandelaro, Doug Manager of Corporate Communications	Business Home Pager:	8258 716-377-7733 716-464-2998
4.	Mecredy, Robert Vice President Nuclear Operations	Business Home Pager	3494 716-381-6430 716-783-4900
5.	Wilkens, Paul Sr. Vice President Generation	Business Home Pager: Cellular	8076 716-248-2385 716-529-6426 716-315-0075
6.	Watts, Richard Manager, Nuclear Training	Business Home Pager Cellular	8706 716-425-2644 716-527-3749 716-315-1204

Nuclear Regulatory Commission

1.	Nuclear Regulatory Commission Region 1 - King of Prussia, PA	610-337-5000
2.	Radiation Assistance Program Dept of Energy Brookhaven National Lab	516-282-2200
3.	Commercial telephone system to NRC Operations Center (via Bethesda Central Office)	301-951-0550
4.	Commercial telephone system to NRC Communications Center (via Silver Spring Central Office)	301-427-4056
5.	Commercial telephone system to NRC Operator (via Bethesda Central Office)	301-492-8893

SPECIALIZED NOTIFICATION LIST (Cont'd.)

New York State

1.	James Baranski, State Emergency Management Office (SEMO)	518-457-8916
2.	SEMO Lake District	315-331-4880
3.	NYS Department of Health Rochester Office	716-423-8064
4.	New York State Emergency Operations Center (EOC) Albany	518-457-2200
5.	EOC Albany - Dose Assessment	518-457-9943

Federal Emergency Management Agency (FEMA)

1.	Emergency Information Coordination Center	202-634-7800 202-646-2400

NOTIFICATIONS WHEN OFFSITE ASSISTANCE HAS BEEN REQUESTED

1. When offsite assistance has been requested activate:
   - Security
   - Nuclear Management
   - Emergency Planning

   Examples of initiating events that could require offsite assistance are:

   - Fire
   - Medical Emergency
   - Security Event
   - HAZMAT Incident
   - Natural Events (such as flooding, earthquakes or severe weather)

2. Security

   Contact Security at 3210, so that they can make preparations for the arrival of the emergency vehicles and personnel.

3. Nuclear Management

   Notify the following individuals:

   "This is the Ginna Control Room. We have requested offsite assistance from_____. Can you be the Nuclear Management contact for this event? Your duties are (a) act as the RG&E lead for this event and (b) act as the liaison between the Control Room and the corporation."

   Nuclear Management (One person required to respond)

	Joe Widay	Business	3250	Available (YES/NO)
		Home	716-586-2679	
		Pager	716-528-3977	
		Cellular	716-315-0343	
OR				
	Robert Popp	Business	3645	Available (YES/NO)
		Home	716-671-6818	
		Pager	716-527-7881	
		Cellular	716-315-0351	
OR				
	John Smith	Business	3525	Available (YES/NO)
		Home:	315-524-5340	
		Pager	716-463-9716	
		Cellular	716-315-0353	

NOTIFICATIONS WHEN OFFSITE ASSISTANCE HAS BEEN REQUESTED (Cont'd.)

OR

Bob Mecredy	Business	8069	Available (YES/NO)
	Home	716-381-6430	
	Pager	716-783-4900	

The nuclear management representative may call other nuclear managers or members of the Ginna leadership team.

4. Emergency Planning

Notify the following individuals:

"This is the Ginna Control Room. We have requested offsite assistance from_____. Can you be the Emergency Planning contact for this event? Your duties are (a) activate Public Relations and (b) act as the liaison between the Control Room and government agencies.
_____ is acting as the Nuclear Management lead for this event. He can be reached at _____."

Nuclear Emergency Preparedness (One person required to respond)

Peter Polfleit	Business	6772
	Home	716-654-5325
	Pager	716-527-2207
	Cellular	716-315-1201
OR		
Frank Cordaro	Business	3108
	Home	315-524-2924
	Pager	716-527-3650
	Cellular	716-315-1277
OR		
Richard Watts	Business	8706
	Home	716-425-2644
	Pager	716-527-3749
	Cellular	716-315-1204
OR		
Jill Willoughby	Business	4033
	Home	716-787-9075
	Pager	716-528-3295
	Cellular	716-315-1205

The Emergency Planning representative will call the duty public information officer (PIO) via the ECC at 771-2233, and inform them of the event. The duty PIO will determine if a media announcement is warranted. The Emergency Planning representative will also contact Wayne County, Monroe County and New York State officials to brief them on offsite resources being used

NOTIFICATIONS WHEN OFFSITE ASSISTANCE HAS BEEN REQUESTED

5. Contact the NRC resident inspector

Ho Nieh	Business	3265
	Home	315-986-7927
	Pager	1-800-944-2337 (then dial personal ID# 53133)

OR

Chris Welch	Business	3265
	Home	716-425-2613
	Pager	1-800-944-2337 (then dial personal ID# 51578

EMERGENCY PLANNING CONTINGENCY NOTIFICATION

1. Upon verification that the Community Alert Network System or Group Page for one hour response positions does not activate or function properly, begin manual notification process.

2. Notify other Nuclear Emergency Preparedness staff members to assist with contingency notifications.

3. The following one hour response positions should be filled by contacting a minimum of one responder for each position by individual page or by home, office or cellular phone number. Refer to EPIP 4-7, Public Information Organization Staffing, and EPIP 5-7, Emergency Organization.

   - TSC Emergency Coordinator
   - Operations Assessment Manager
   - Technical Assessment Manager
   - Communicator
   - TSC Dose Assessment Manager
   - RP/Chemistry Manager
   - Maintenance Assessment Manager
   - Survey Center Manager

   - EOF Recovery Manager
   - Nuclear Operations Manager
   - Engineering Manager
   - EOF Dose Assessment Manager

   - News Center Manager

4. Inform the responder of the current emergency classification and instruct them to report to their emergency duty location immediately. Inform them of the fitness for duty requirements.

ROCHESTER GAS AND ELECTRIC CORPORATION

GINNA STATION

CONTROLLED COPY NUMBER 23

PROCEDURE NO. EPIP 2-1 REV. NO. 19

PROTECTIVE ACTION RECOMMENDATIONS

TECHNICAL REVIEW

RESPONSIBLE MANAGER

06/04/01

EFFECTIVE DATE

CATEGORY 1.0

THIS PROCEDURE CONTAINS 15 PAGES

EPIP 2-1

PROTECTIVE ACTION RECOMMENDATIONS

1.0 **PURPOSE:**

1.1 The purpose of this procedure is to provide guidance to the Emergency Coordinator or EOF/Recovery Manager in making protective action recommendations to offsite authorities.

2.0 **RESPONSIBILITY:**

2.1 The Shift Supervisor, Emergency Coordinator (TSC) or EOF/Recovery Manager is responsible for making protective action recommendations to Wayne County, Monroe County and New York State, depending on command and control status.

2.2 The decision to implement any protective actions is solely the responsibility of the local authorities.

3.0 **REFERENCES:**

3.1 Developmental References

3.1.1 Nuclear Emergency Response Plan

3.1.2 EPA-400, Manual of Protective Action Guides and Protective Actions for Nuclear Incidents (1991)

3.1.3 Evacuation Travel Time Estimates - Ginna Emergency Planning Zone, September 1992.

3.1.4 NUREG/BR - 0150 Response Technical Manual (RTM-93)

3.2 Implementing References

3.2.1 EPIP 1-0, Ginna Station Event Evaluation and Classification

3.2.2 EPIP 1-5, Notification

3.2.3 EPIP 2-3, Emergency Release Rate Determination

3.2.4 EPIP 2-4, Emergency Dose Projections - Manual Method

3.2.5 EPIP 2-18, Control Room Dose Assessment

3.2.6 EPIP 2-5, Emergency Dose Projections - Personal Computer Method

3.2.7 EPIP 2-6, Emergency Dose Projections - MIDAS Program

4.0 **PRECAUTIONS:**

None

5.0 **PREREQUISITES**:

None.

6.0 **INSTRUCTIONS**:

NOTE: PROTECTIVE ACTION RECOMMENDATIONS (PARs) WILL ONLY REFLECT RG&E RECOMMENDATIONS, NOT ACTIONS IMPLEMENTED BY OFFSITE OFFICIALS.

6.1 Obtain the event classification using EPIP 1-0.

6.2 UNUSUAL EVENT, ALERT and SITE AREA EMERGENCY.

6.2.1 Report on EPIP 1-5, Attachment 3a, Item 7:

A. **No need for protective actions outside the site boundary.**

6.3 GENERAL EMERGENCY

6.3.1 Protective Action Recommendations shall be issued with the initial declaration of a General Emergency.

6.3.2 Using Attachment 1, Page 1 of 2, and the current wind direction, determine the initial ERPAs to be evacuated. Any ERPA not evacuated will be sheltered.

6.3.3 Record in EPIP 1-5, Attachment 3a, Item 7 the Protective Actions Recommended.

6.3.4 Re-evaluate the PARs based on the following to determine if secondary PARs are required or if initial PARs need to be modified.:

a. Dose Assessment*
b. Survey Team data*

c. EPA Protective Action Guidelines (Attachment 2)
d. Wind shifts

* = If exposures in non-evacuated areas indicate that evacuation is warranted, use Attachment 1 page 2 of 2 to expand Protective Action Recommendations to an evacuated area of 5 mile radius and 10 miles downwind.

6.3.5 The Evacuation Travel Time Estimate information (Attachment 3) is used by offsite agencies to determine the correct Protective Action Decision (PAD).

6.3.6 If the EPA guidelines for evacuation or sheltering are exceeded beyond the 10 mile emergency planning zone and protective actions are required, specify the areas using roads, rivers, bodies of water or town boundaries.

7.0 **ATTACHMENTS**:

1. Evacuation Areas by Zones.

2. Projected Dose to the Population and Recommended Actions.

3. Evacuation Travel Time Estimates.

4. Emergency Response Planning Areas (ERPA's).

EVACUATION AREAS BY ZONES
PROTECTIVE ACTION RECOMMENDATIONS BY ERPA FOR GENERAL EMERGENCY CLASSIFICATION

Wind From	(Degrees)	Initial Protective Action Recommendations (Evacuation based on 2 mile radius & 5 miles downwind)
N	349 to 11	Evacuate: W (1,2,3) Shelter: All remaining ERPAs
NNE	12 to 33	Evacuate: W (1,2) M (1) Shelter: All remaining ERPAs
NE	34 to 56	Evacuate: W (1,2) M (1) Shelter: All remaining ERPAs
ENE	57 to 78	Evacuate: W (1,2) M (1) Shelter: All remaining ERPAs
E	79 to 101	Evacuate: W (1,2) M (1) Shelter: All remaining ERPAs
ESE	102 to 124	Evacuate: W (1) M (1) Shelter: All remaining ERPAs
SE	125 to 146	Evacuate: W (1) Shelter: All remaining ERPAs
SSE	147 to 168	Evacuate: W (1) Shelter: All remaining ERPAs
S	169 to 191	Evacuate: W (1) Shelter: All remaining ERPAs
SSW	192 to 213	Evacuate: W (1) Shelter: All remaining ERPAs
SW	214 to 236	Evacuate: W (1,3) Shelter: All remaining ERPAs
WSW	237 to 258	Evacuate: W (1,3) Shelter: All remaining ERPAs
W	259 to 281	Evacuate: W (1,3) Shelter : All remaining ERPAs
WNW	282 to 303	Evacuate: W (1,2,3) Shelter: All remaining ERPAs
NW	304 to 326	Evacuate: W (1,2,3) Shelter: All remaining ERPAs
NNW	327 to 348	Evacuate: W (1,2,3) Shelter: All remaining ERPAs

EVACUATION AREAS BY ZONES
PROTECTIVE ACTION RECOMMENDATIONS BY ERPA FOR
GENERAL EMERGENCY CLASSIFICATION

Wind From	(Degrees)	Initial Protective Action Recommendations (Evacuation based on 2 mile radius & 5 miles downwind)	Secondary Protective Action Recommendations (Evacuation based on 5 mile radius & 10 miles downwind)
N	349 to 11	Evacuate: W (1, 2, 3) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3, 5, 6, 7) M (1, 2, 4, 5) Shelter: All remaining ERPAs
NNE	12 to 33	Evacuate: W (1, 2) M (1) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3, 6, 7) M (1, 2, 3, 4, 5, 6, 7, 9) Shelter: All remaining ERPAs
NE	34 to 56	Evacuate: W (1, 2) M (1) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3, 7) M (1, 2, 3, 4, 5, 6, 7, 8, 9) Shelter: All remaining ERPAs
ENE	57 to 78	Evacuate: W (1, 2) M (1) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3, 7) M (1, 2, 3, 4, 5, 6, 7, 8, 9) Shelter: All remaining ERPAs
E	79 to 101	Evacuate: W (1, 2) M (1) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3) M (1, 2, 3, 4, 6, 7, 8, 9) Shelter: All remaining ERPAs
ESE	102 to 124	Evacuate: W (1) M (1) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3) M (1, 3, 6, 8, 9) Shelter: All remaining ERPAs
SE	125 to 146	Evacuate: W (1) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3) M (1) Shelter: All remaining ERPAs
SSE	147 to 168	Evacuate: W (1) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3) M (1) Shelter: All remaining ERPAs
S	169 to 191	Evacuate: W (1) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3) M (1) Shelter: All remaining ERPAs
SSW	192 to 213	Evacuate W (1) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3) M (1) Shelter: All remaining ERPAs
SW	214 to 236	Evacuate: W (1, 3) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3, 4) M (1) Shelter: All remaining ERPAs
WSW	237 to 258	Evacuate: W (1, 3) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3, 4, 5) M (1) Shelter: All remaining ERPAs
W	259to 281	Evacuate: W (1, 3) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3, 4, 5, 6) M (1) Shelter: All remaining ERPAs
WNW	282 to 303	Evacuate: W (1, 2, 3) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3, 4, 5, 6, 7) M (1) Shelter: All remaining ERPAs
NW	304 t0 326	Evacuate: W (1, 2, 3) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3, 4, 5, 6, 7) M (1, 2) Shelter: All remaining ERPAs
NNW	327 to 348	Evacuate: W (1, 2, 3) Shelter: All remaining ERPAs	Evacuate: W (1, 2, 3, 4, 5, 6, 7) M (1, 2, 5) Shelter: All remaining ERPAs

* Secondary Protective Actions are recommended when dose projections or field teams indicate ≥ 1 REM TEDE beyond 5 miles.

PROJECTED DOSE TO THE POPULATION AND RECOMMENDED ACTIONS

PROJECTED DOSE TO THE POPULATION	RECOMMENDED ACTIONS	COMMENTS
Total Whole Body < 1 REM*	No planned protective actions. Local authorities or State may issue an advisory to seek shelter and await further instructions. Monitor environmental radiation levels.	None.
Total Whole Body ≥ 1 REM*	Conduct evacuation.* Monitor environmental radiation levels and adjust area for mandatory evacuation based on these levels. Control access.	Evacuation (or for some situation, sheltering**) should be initiated at one REM. Seeking shelter would be an alternative if evacuation were not immediately possible.
Project Dose (REM) to Emergency Team Workers		
Total Whole Body 25 REM	Control exposure of emergency team members to these levels except for lifesaving mission. (Appropriate controls for emergency workers include time limitations, respirators and stable iodine.)	None.
Total Whole Body 75 REM	Control exposure of emergency team members performing lifesaving missions to this level. (Control of time of exposure will be most effective.)	None.

NOTES:

* The sum of the effective dose equivalent resulting from exposure to external sources and the committed effective dose equivalent incurred from all significant inhalation pathways during the early phase.

** Sheltering may be the preferred protective action when it will provide protection equal to or greater than evacuation, based on consideration of factors such as source term characteristics and temporal or other site-specific conditions.

EVACUATION TRAVEL TIME ESTIMATES

1. When discussing an evacuation, use this attachment to resolve conflicts.

2. 1992 Permanent Resident Population Estimates

EPRA	Population	ERPA	Population
W-1	3207	M-1	2421
W-2	5395	M-2	435
W-3	1200	M-3	258
W-4	2092	M-4	6681
W-5	3855	M-5	1253
W-6	2425	M-6	6943
W-7	4924	M-7	4750
		M-8	3033
		M-9	3285

3. Use the following curves to assist in estimating evacuation decisions.

Figure	Weather Conditions	Time of Week
41	Summer, Good Weather	Midweek, Midday
43	Summer, Rainy Weather	Midweek, Midday
45	Summer, Good Weather	Midweek, Evening
49	Summer, Good Weather	Weekend, Midday
53	Winter, Good Weather	Midweek, Midday
55	Winter, Rainy Weather	Midweek, Midday
57	Winter, Snowy Weather	Midweek, Midday

FIGURE 41
Evacuation Travel Time Estimates
Ginna Nuclear Power Station
Summer, Midweek, Midday
Good Weather

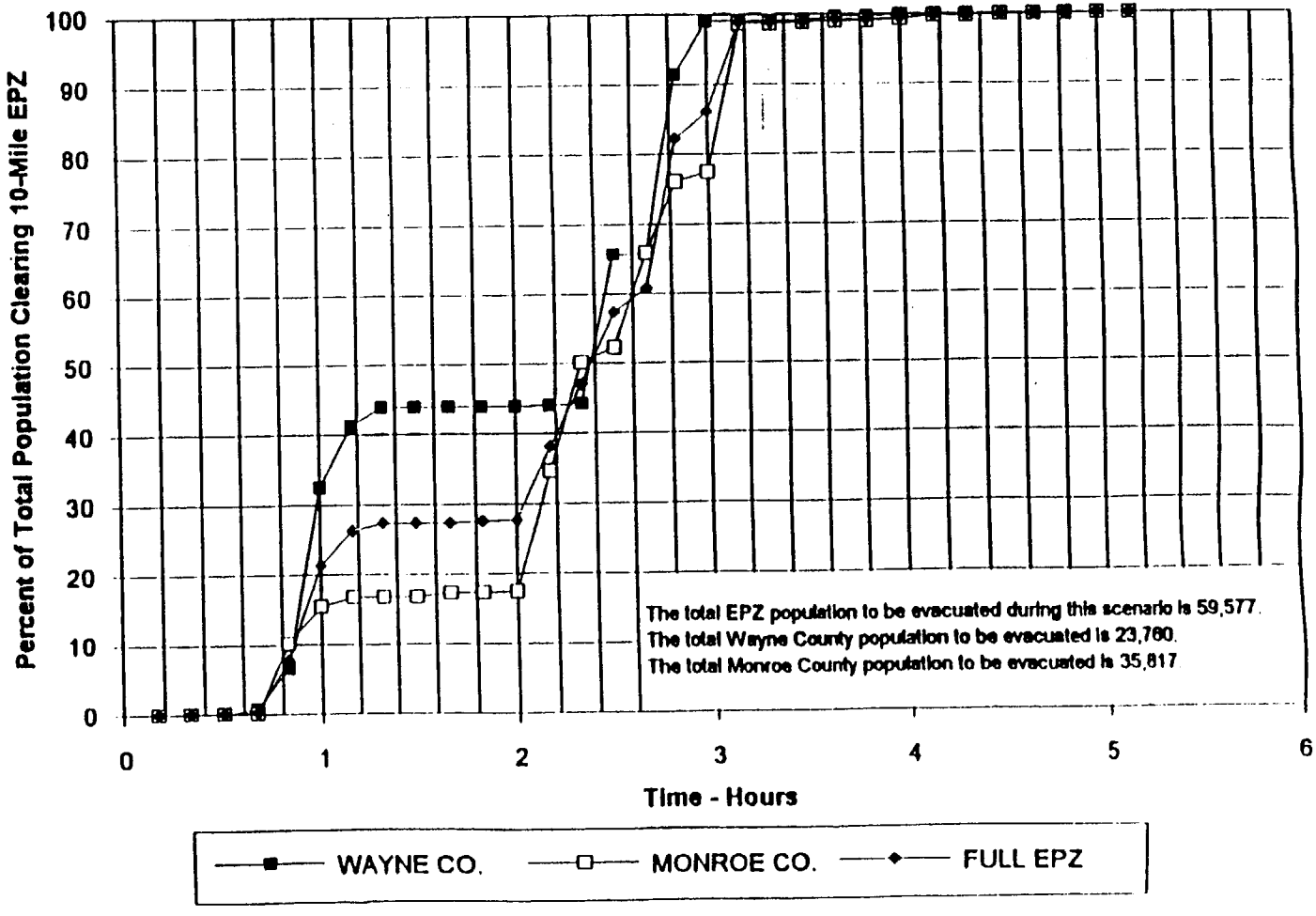


FIGURE 43
Evacuation Travel Time Estimates
Ginna Nuclear Power Station
Summer, Midweek, Midday
Rainy Weather

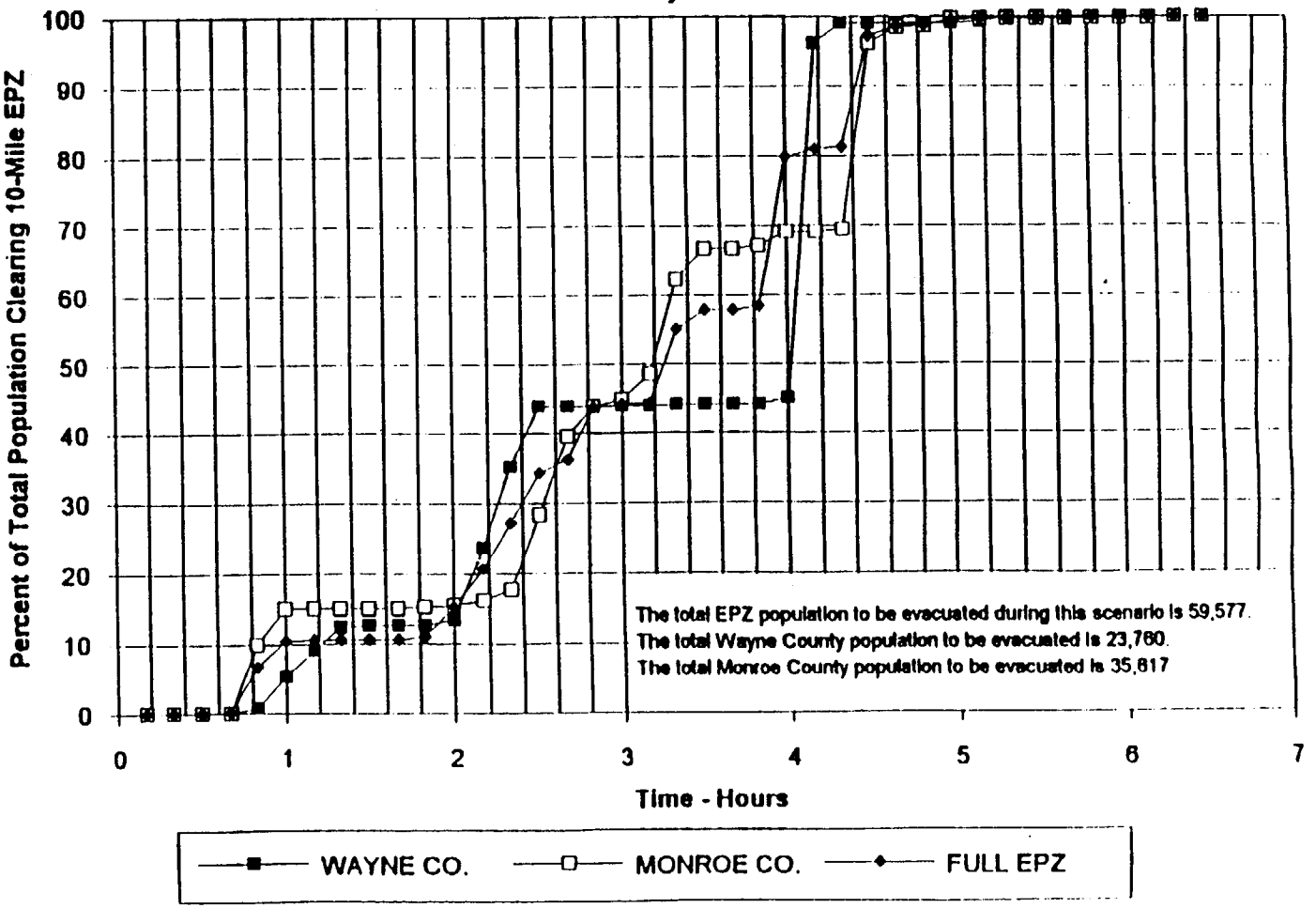


FIGURE 45
Evacuation Travel Time Estimates
Ginna Nuclear Power Station
Summer, Midweek, Evening
Good Weather

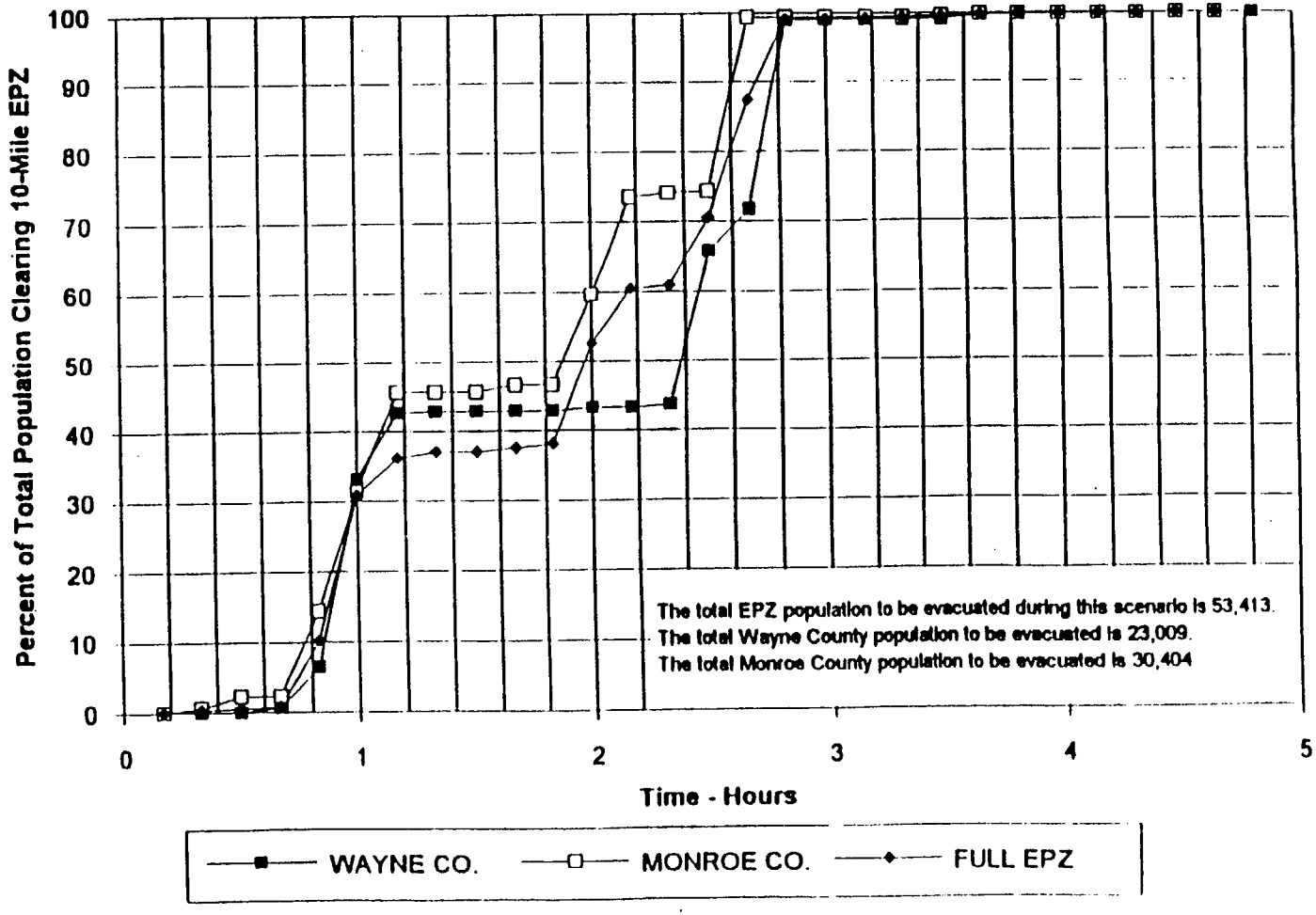


FIGURE 49
Evacuation Travel Time Estimates
Ginna Nuclear Power Station
Summer, Weekend, Midday
Good Weather

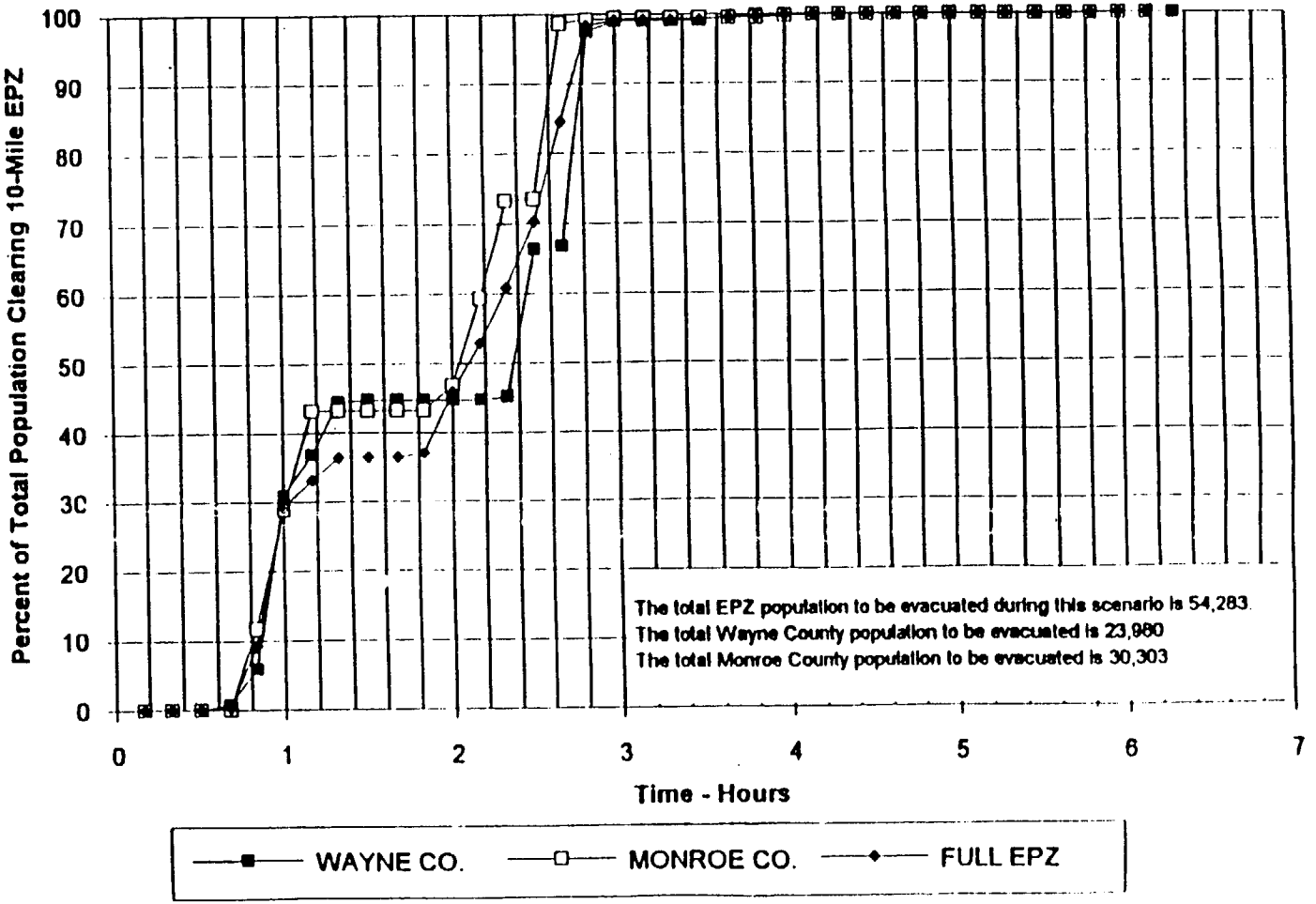


FIGURE 53
Evacuation Travel Time Estimates
Ginna Nuclear Power Station
Winter, Midweek, Midday
Good Weather

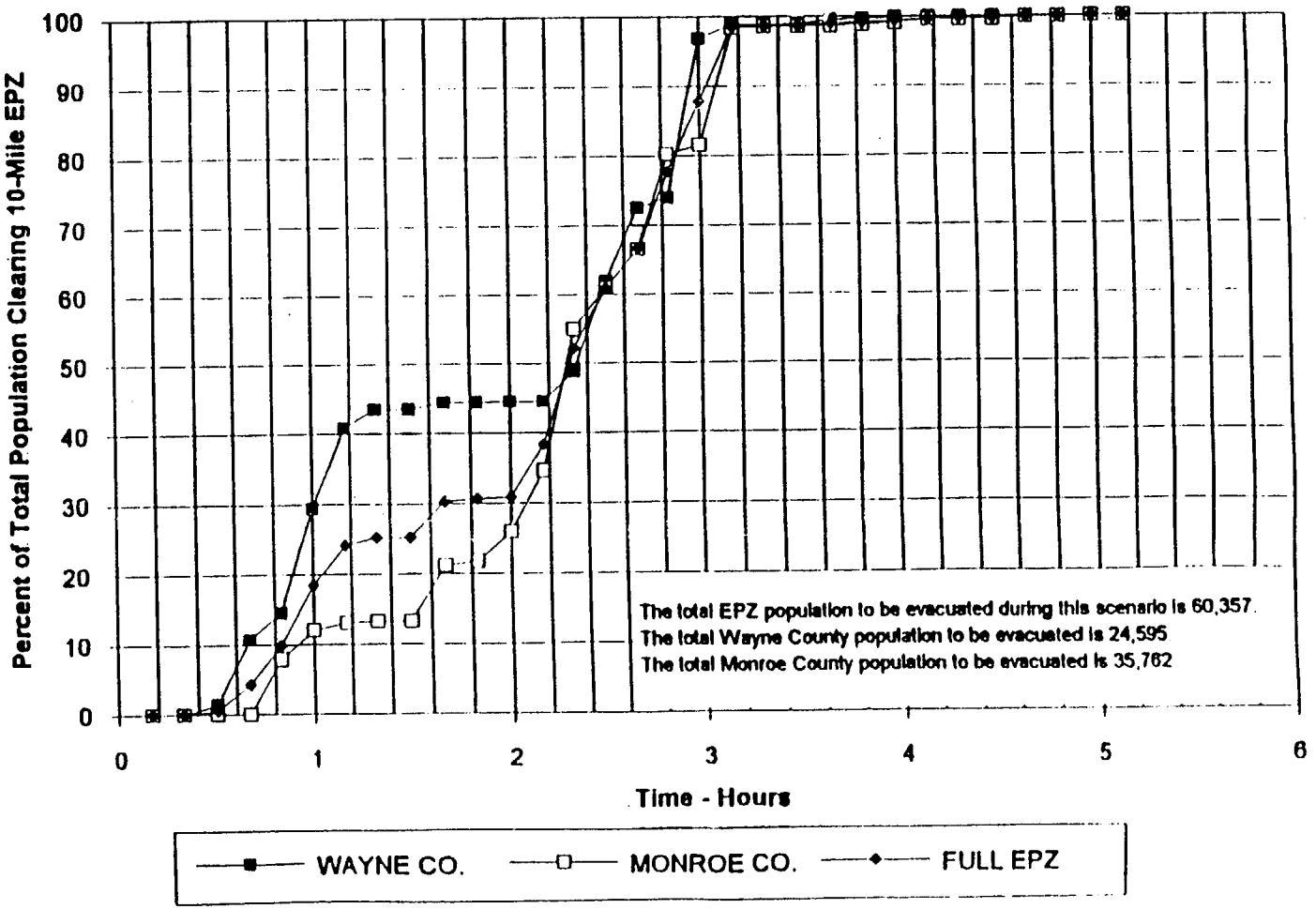


FIGURE 55
Evacuation Travel Time Estimates
Ginna Nuclear Power Station
Winter, Midweek, Midday
Rainy Weather

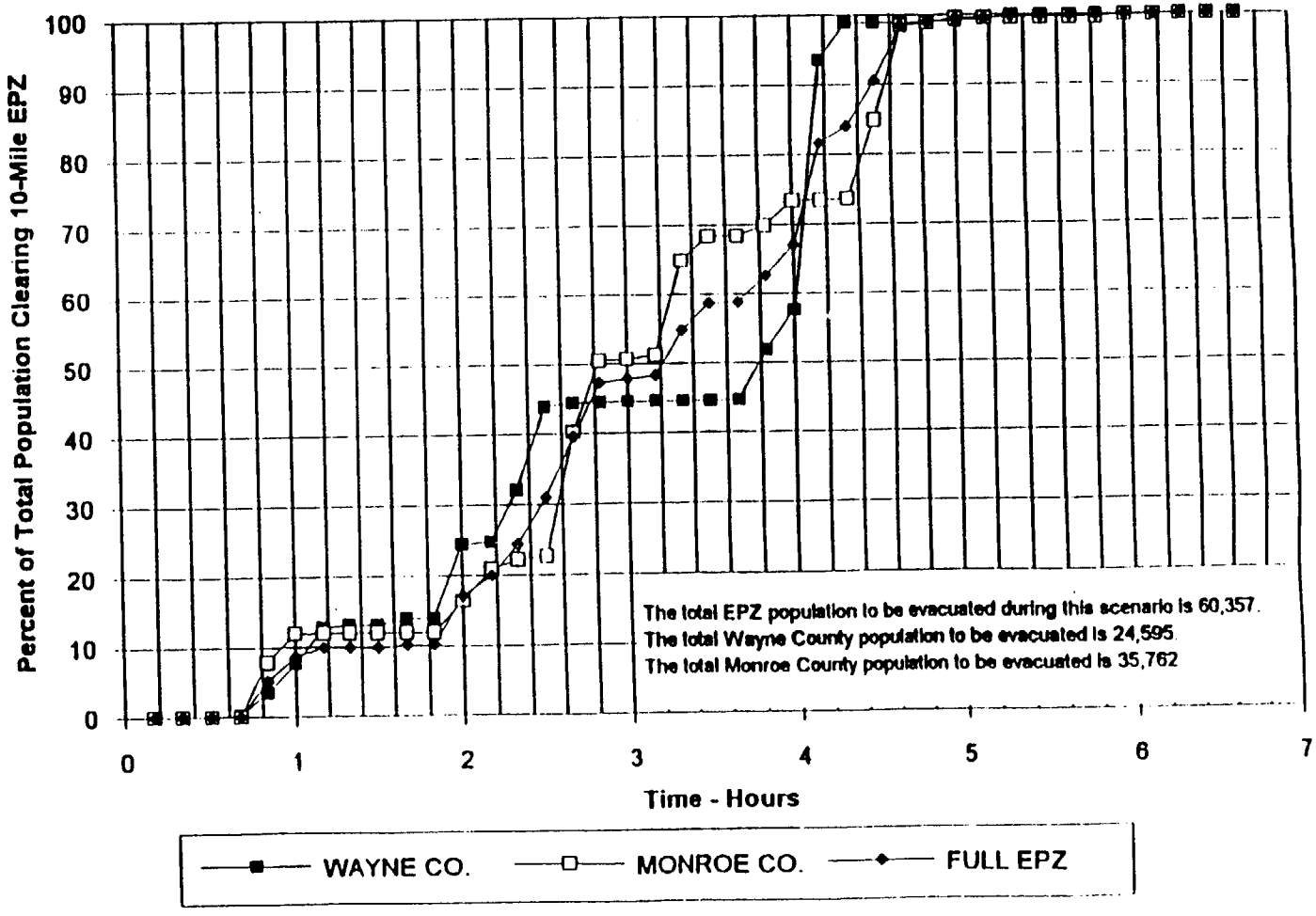
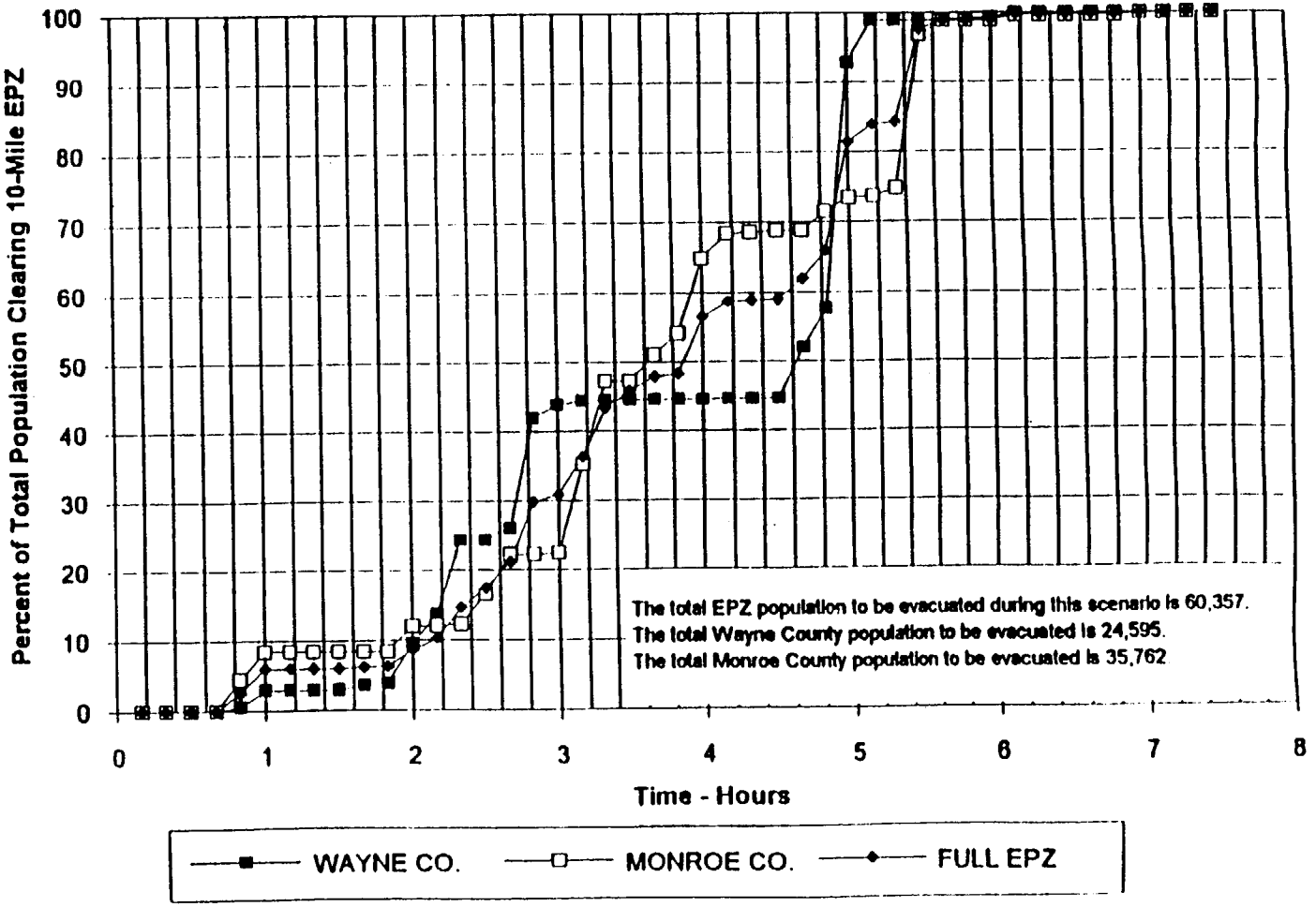
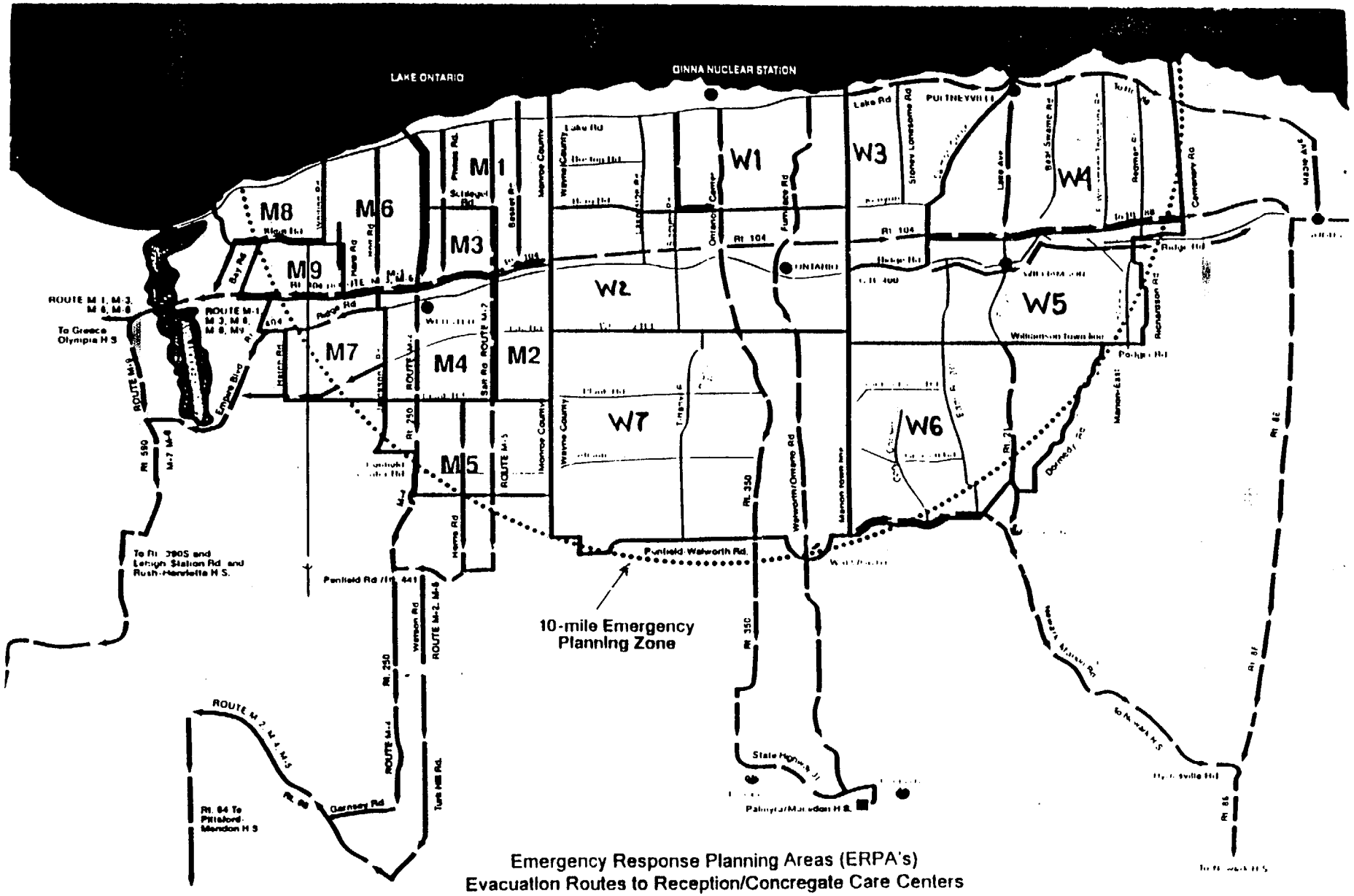


FIGURE 57
Evacuation Travel Time Estimates
Ginna Nuclear Power Station
Winter, Midweek, Midday
Snowy Weather





Emergency Response Planning Areas (ERPA's)
Evacuation Routes to Reception/Concregate Care Centers

ROCHESTER GAS AND ELECTRIC CORPORATION

GINNA STATION

CONTROLLED COPY NUMBER 23

PROCEDURE NO. EPIP 2-5 REV. NO. 11

EMERGENCY DOSE PROJECTIONS - PERSONAL COMPUTER METHOD

RESPONSIBLE MANAGER

6/4/01

EFFECTIVE DATE

Category 1.0

This procedure contains 10

EPIP 2-5

EMERGENCY DOSE PROJECTIONS - PERSONAL COMPUTER METHOD

1.0 PURPOSE

The purpose of this procedure is to provide a personal computer-based method for performing projections of downwind dose rates and doses. Such information is needed to decide upon protective actions to be recommended to limit the exposure of the general public and emergency workers.

2.0 RESPONSIBILITY

The TSC or EOF Dose Assessment Manager is responsible for implementing this procedure.

3.0 REFERENCES

3.1 Developmental References

3.1.1 Nuclear Emergency Response Plan

3.1.2 EPA-400, Manual of Protective Action Guides and Protective Actions for Nuclear Incidents (1991)

3.1.3 Ginna UFSAR, Chapter 15

3.1.4 Regulatory Guide 1.109

3.1.5 Vertechs Corporation, EOF7, Estimated Offsite Dose Assessment Software Users Manual

3.2 Implementing References

3.2.1 EPIP 2-1, Protective Action Recommendations

3.2.2 EPIP 2-2, Obtaining Meteorological Data and Forecasts and Their Use in Emergency Dose Assessment

3.2.3 EPIP 2-3, Emergency Release Rate Determination

3.2.4 EPIP 2-4, Emergency Dose Projections - Manual Method

3.2.5 EPIP 1-0, Ginna Station Event Evaluation and Classification

3.2.6 EPIP 2-17, Hypothetical (Pre-Release) Dose Estimates

4.0 PRECAUTIONS

None.

5.0 PREREQUISITES

5.1 The following equipment and data sources are available for use in performing computerized dose projections:

5.1.1 Plant Process Computer System (PPCS) - EVENT 2 Report.

5.1.2 Personal Computer in TSC and EOF (for obtaining 15-minute meteorological data averages from Ginna primary weather tower).

5.1.3 Back-up wind speed and direction indicators at Station 13A (accessible from TSC or EOF Personal Computer) and National Weather Service.

5.1.4 Field readings from survey teams, including gamma dose rate and air sample measurements taken in the release plume.

5.1.5 Personal Computer for performing dose projection routines detailed in this procedure.

DOSE ASSESSMENT USE OF GINNA COMPUTER DATA

NOTE: Compare all dose projections against EPIP 1-0, Section 5.2.

6.0 ACTIONS

6.1 Part "A" - Release Assessments

6.1.1 During a Ginna Refueling Outage, R12 could be an effluent monitor. Check with your technical support for this condition. If R12 is an effluent monitor and IS NOT on alarm or increasing, go to step 6.1.2. If R12 is an effluent monitor and IS on alarm or increasing, check:

	Alarm	
EPIP 1-0 Section 5.1 and		
R12A5 - SPING Containment Vent LOW Range Gas Monitor	□ Yes	□ No
R12A7 - SPING Containment Vent MID Range Gas Monitor	□ Yes	□ No
R12A9 - SPING Containment Vent HIGH Range Gas Monitor	□ Yes	□ No

Use the SPING sheet (Attachment 1) to determine which channel to use and enter the value in the DOWNCALC program (Go to step 6.1.2).

NOTE: R15 PROBLEMS USUALLY INDICATE THAT THERE IS A TUBE IN THE STEAM GENERATOR THAT IS LEAKING RADIOACTIVE REACTOR COOLANT SYSTEM WATER INTO THE NON-RADIOACTIVE STEAM PLANT WATER.

6.1.2 R15 - Condenser Air Ejector Monitor. If R15 IS NOT on alarm continue to Step 6.1.3. If R15 IS on alarm check:

	Alarm	
EPIP 1-0 Section 5.1 and		
R15A5 - SPING Condenser Air Ejector LOW Range Gas Monitor	□ Yes	□ No
R15A7 - SPING Condenser Air Ejector MID Range Gas Monitor	□ Yes	□ No
R15A9 - SPING Condenser Air Ejector HIGH Range Gas Monitor	□ Yes	□ No

Use the sping sheet (Attachment 1) to determine which channel to use and enter that value in the downcalc program. (Go to step 6.1.3).

NOTE: R14 PROBLEMS USUALLY INDICATE THAT THERE IS SOMETHING LEAKING IN THE AUXILIARY OR INTERMEDIATE BUILDINGS.

6.1.3 R14 - Plant Vent Gas Monitor. If R14 IS NOT on alarm go to step 6.1.4 If R14 IS on alarm check:

	Alarm	
EPIP 1-0 Section 5.1 and		
R14A5 - SPING Plant Vent LOW Range Gas Monitor	□ Yes	□ No
R14A7 - SPING Plant Vent MID Range Gas Monitor	□ Yes	□ No
R14A9 - SPING Plant Vent HIGH Range Gas Monitor	□ Yes	□ No

Use the sping sheet (Attachment 1) to determine which channel to use and enter that value in the downcalc program. (Go to step 6.1.4).

NOTE: R31 AND R32 PROBLEMS USUALLY INDICATE THAT THERE IS A TUBE IN THE STEAM GENERATOR THAT IS LEAKING RADIOACTIVE REACTOR COOLANT SYSTEM WATER INTO THE NO-RADIOACTIVE STEAM PLANT WATER. AS LONG AS THE ARVS AND SAFETY VALVES ARE SHUT, THERE IS NO RELEASE.

6.1.4 R31 and R32 - "A" & "B" Steam Line Monitors. If R31 and R32 ARE NOT on alarm, go to step 6.2 for plant assessments. If R31 or R32 ARE on alarm, determine, from the event 2 printout, if any ARVs or Safety Valves are open. Also, compare R-31/32 readings to EPIP 1-0, Section 5.1. If the associated ARV or Safety Valve for the alarming monitor is open, enter the reading in the DOWNCALC program. (Go to step 6.3.) The event 2 report also lists a computer calculated 15 minute average of Ci/sec released. This can be directly entered into the DOWNCALC program also.

6.1.5 For unmonitored releases from containment, go to EPIP 2-17 to calculate the release rate.

6.2 Part "B" - Plant Assessments

6.2.1 Check R12 - Containment Gas Monitor. If R12 IS NOT on alarm or increasing then the containment atmosphere is clean of radioactivity. If R12 IS on alarm or increasing, then the Reactor Coolant System is leaking water out into the containment atmosphere. Go to step 6.2.2.

6.2.2 Check R9 - Letdown Monitor. If R9 IS on alarm or increasing then the Reactor Fuel is leaking into the Reactor Coolant System water. Go to Step 6.2.4.

6.2.3 If you have reached this step the plant and reactor, most probably, are in a stable condition and no release is occurring. If the plant is in an outage, check with your Technical Group to learn about any unusual conditions that could pose special problems.

6.2.4 Check R29 and R30 - Containment HIGH Range Area Monitors.
Check and compare the readings. If R29 or R30 read >100 R/hr, declare a Site Area Emergency (EAL#2.3.2). If R29 or R30 read >1000 R/hr, declare a General Emergency (EAL#2.3.3). Continue to check R29 and R30 for increases due to degraded plant conditions.

6.3 Dose Calculations Using Personal Computer

6.3.1 If using the computers at RG&E, log in to corporate desktop using "User: Ginna", "Password: lakela".

6.3.1.1 Select the EOF8 icon to start session information.

6.3.1.2 Choose "new session".

6.3.1.3 Enter "session date" in MM/DD/YY format. Enter "session time" in HHMM format.

6.3.1.4 Enter your name.

6.3.1.5 Enter a short description of the event.

6.3.1.6 Enter a reactor shutdown date and time if the reactor is shutdown. If the reactor is not shutdown, do not enter any data.

6.3.1.7 Select the "save" button. A message should appear in the upper right portion of the screen. Click anywhere on the screen to clear the "save" message.

6.3.2 Downwind dose calculations

6.3.2.1 Select the downcalc button along the left side of the screen.

6.3.2.2 Review the release flowrates. Contact Operations personnel to determine current flowrates. On the initial calculation, if Operations is busy, use the normal flowrates in the program so the initial assessment is not delayed. Select the normal or emergency flowrates. Adjust the values as necessary. Select OK when done. Ensure TSC/EOF Dose Assessment and offsite responders are using the same flowrates.

NOTE: TO SCROLL THROUGH FIELDS, PRESS THE TAB KEY.

6.3.2.3 Enter the shutdown date and time if the reactor is shutdown. If the reactor is not shutdown, then press tab to scroll through these 2 fields.

6.3.2.4 Enter the calculation date and the calculation time.

6.3.2.5 To use the <u>last</u> saved values, click on the button labeled "use the last saved values". If new data is to be used, continue.

6.3.2.6 Enter the temperature at 250 feet.

6.3.2.7 Enter the temperature at 33 feet.

NOTE: THE WIND SPEED INDICATOR AT THE 33 FOOT LEVEL IS DESIGNED TO MEASURE ONLY TO 50 MILES PER HOUR.

6.3.2.8 Enter the wind speed at 33 feet.

NOTE: IF "WHAT IF" CALCULATIONS ARE DESIRED, REFER TO EPIP 2-17.

6.3.2.9 If a radioiodine value for the containment vent (R10A) or plant vent (R10B) has been calculated using the "ventconc" program, enter the values for the appropriate monitor. If no value has been calculated, the program will use the default radioiodine release rate based on the noble gas concentration.

6.3.2.10 Enter the value (in mR/hr) if R-31 is in alarm condition.

6.3.2.11 Enter the value in (in mR/hr) if R-32 is in alarm condition and is a release path.

6.3.2.12 Enter value (in uCi/cc from R-12A) if R-12 is in alarm condition and is a release path.

6.3.2.13 Enter value (in uCi/cc from R-14A) if R-14 is in alarm condition.

6.3.2.14 Enter value (in uCi/cc from R-15A) if R-15 is in alarm condition.

6.3.2.15 Enter date and time of data.

6.3.2.16 Enter exposure duration, if the release duration is known. If the release duration is unknown, enter the default of 4 hours.

NOTE: THE SITE BOUNDARY IS 0.3 MILES FROM THE REACTOR.

6.3.2.17 Enter "X" miles to 5.0. If PARs have been issued, ensure that 5 miles is adequate for evacuation. This can be changed in later assessments for other areas of interest.

6.3.2.18 Select the "save and report" button on the bottom of the screen.

6.3.2.19 Review the file name and select OK.

6.3.2.20 Review the data, then print the report and exit.

CAUTION: DO NOT PRINT THE "EMERG DATA FORM" WITH N/A OR ZEROS (0) IN <u>ALL</u> OF THE RELEASE POINTS.

6.3.2.22 Select "emerg data form (part II)". Report will print. Give this report to the Dose Assessment Manager. This report should be reviewed and faxed to RG&E, Wayne County, Monroe County and New York State.

6.3.2.23 Return to step 6.3.2.2 for more downwind calculations. To perform other calculations, select "exit" from the top of the screen.

6.3.3 Survey Team Data Dose Projections

6.3.3.1 Select the sample button from the left hand side of the screen.

6.3.3.2 Enter the shutdown date and time if the reactor is shutdown. If the reactor is not shutdown, then press enter to scroll through these 2 fields.

6.3.3.3 Enter the calculation date and the calculation time.

6.3.3.4 Enter the team number, color or other identification.

6.3.3.5 Enter the team location where the sample was obtained.

6.3.3.6 Enter the date and time that the sample was started.

6.3.3.7 Enter the date and time that the sample was stopped.

6.3.3.8 Enter the units of measurement of the air sample.

6.3.3.9 Enter the air sample flow rate at the start of the sample.

6.3.3.10 Enter the air sample flow rate when the sample was stopped.

6.3.3.11 Enter the count rate (CPM) of the iodine cartridge.

6.3.3.12 Enter the count rate (CPM) of the particulate filter.

6.3.3.13 Enter the background count rate (CPM) in the area that the sample was counted. (This should be performed outside of the plume).

6.3.3.14 The bottom right of the screen will show you:

- radioiodine concentration in the air (in uCi/cc)
- radioactive particulate in the air (in uCi/cc)
- the dose rate (in REM/hr) to a child's thyroid from the radioiodine concentration in the air.

6.3.3.15 Select the "save and report" button on the bottom of the screen.

6.3.3.16 Enter description of reason for calculation and select ok.

6.3.3.17 Review the data, then print the report and exit.

6.3.3.18 Select "exit" from the top of the screen.

6.3.3.19 Select the "backcalc" button along the left side of the screen.

6.3.3.20 Enter the shutdown date and time if the reactor is shutdown. If the reactor is not shutdown, then press enter to scroll through these 2 fields.

6.3.3.21 Enter the calculation date and the calculation time.

6.3.3.22 Enter the temperature at 250 feet.

6.3.3.23 Enter the temperature at 33 feet.

NOTE: THE WIND SPEED INDICATOR AT THE 33 FOOT LEVEL IS DESIGNED TO MEASURE ONLY TO 50 MILES PER HOUR.

6.3.3.24 Enter the wind speed at 33 feet.

6.3.3.25 Enter the team number, color or other identification.

6.3.3.26 Enter the team location where the sample was obtained.

6.3.3.27 Enter the distance (in miles) away from the Ginna Plant.

6.3.3.28 Enter the sample date and sample time.

6.3.3.29 Enter the dose rate that the survey team reported at the sample location. This dose rate will be in R/hr or mR/hr. (DO NOT use the background CPM value of the radioiodine analysis. That was a different screen that you have already completed.)

6.3.3.30 Enter the radioiodine concentration (in uCi/cc) from the SAMPLE program printout.

6.3.3.31 Enter A & B points of interest.

6.3.3.32 You have now projected doses from the point where your survey team collected sample data.

6.3.3.33 Select the "save and report" button on the bottom of the screen.

6.3.3.34 Review the file name and select OK.

6.3.3.35 Review the data, then print the report and exit.

6.3.3.36 Select "report".

6.3.3.37 Select "emerg data form (part II)". Report will print. Give this report to the Dose Assessment Manager. This report should be reviewed and faxed to RG&E, Wayne County, Monroe County and New York State.

6.3.3.38 Return to step 6.3.2 for more survey team calculations. To perform other calculations, select "exit" from the top of the screen.

6.4 Use of RASCAL for determination of exposure due to field samples.

6.4.1 Start RASCAL by clicking on the icon labeled "Shortcut to STDose3". Click OK.

6.4.2 Select "Event Type"

6.4.2.1 Select "Nuclear Power Plant Reactor" then OK.

6.4.3 Select "Event Location"

6.4.3.1 Under Site Names select "Ginna" then OK

6.4.4 Select "Source Term"

6.4.4.1 Select "Effluent Release Concentrations" then OK.

6.4.4.2 Input the measurement location (i.e. plant vent, air ejector).

6.4.4.3 Under Release Period 1, Enter:

- Start date and time
- Stop date and time
- Effluent Flow Rate and select the correct flowrate unit on the right hand side. Also on the right hand side, change the "Effluent Concentrations in:" to the units in the sample results.

6.4.4.4 Enter the radionuclides and the concentrations.

6.4.4.5 Select OK when all of the data has been entered.

6.4.4.6 Select "Release Path".

6.4.4.7 Release height should be zero.

6.4.4.8 Enter the release start date and time.

6.4.4.9 Enter the release end date and time then OK.

6.4.5 Select "Meteorology".

6.4.5.1 Select "Actual Observations and Forecasts" then "Create New".

6.4.5.2 Ensure Station is "GINN" then select "Enter Data".

6.4.5.3 Enter the date, time, wind direction, wind speed, Stability, precipitation and 33 ft temp.

6.4.5.4 Select OK.

6.4.5.5 Select "Create RASCAL Input".

6.4.5.6 Under "Save File as", name the file using the Ginna then a number (i.e. 1,2,3) then OK.

6.4.5.7 Select "View Meteorology"

6.4.5.8 Select "Observations" and review the data to ensure only the center data point has an arrow.

6.4.5.9 Select "Done".

6.4.5.10 Select "Exit".

6.4.5.11 Select "Return"

6.4.5.12 Select OK

6.4.6 Select "Calculate Doses"

6.4.6.1 Under Distance Calculations select

- Close-in + out to 10 miles"
- "Defaults"

6.4.6.2 Under Building Wake correction select "on"

6.4.6.3 Input the date and time that calculations should end (typically 4 hours after release start)

6.4.6.4 Enter case description then OK

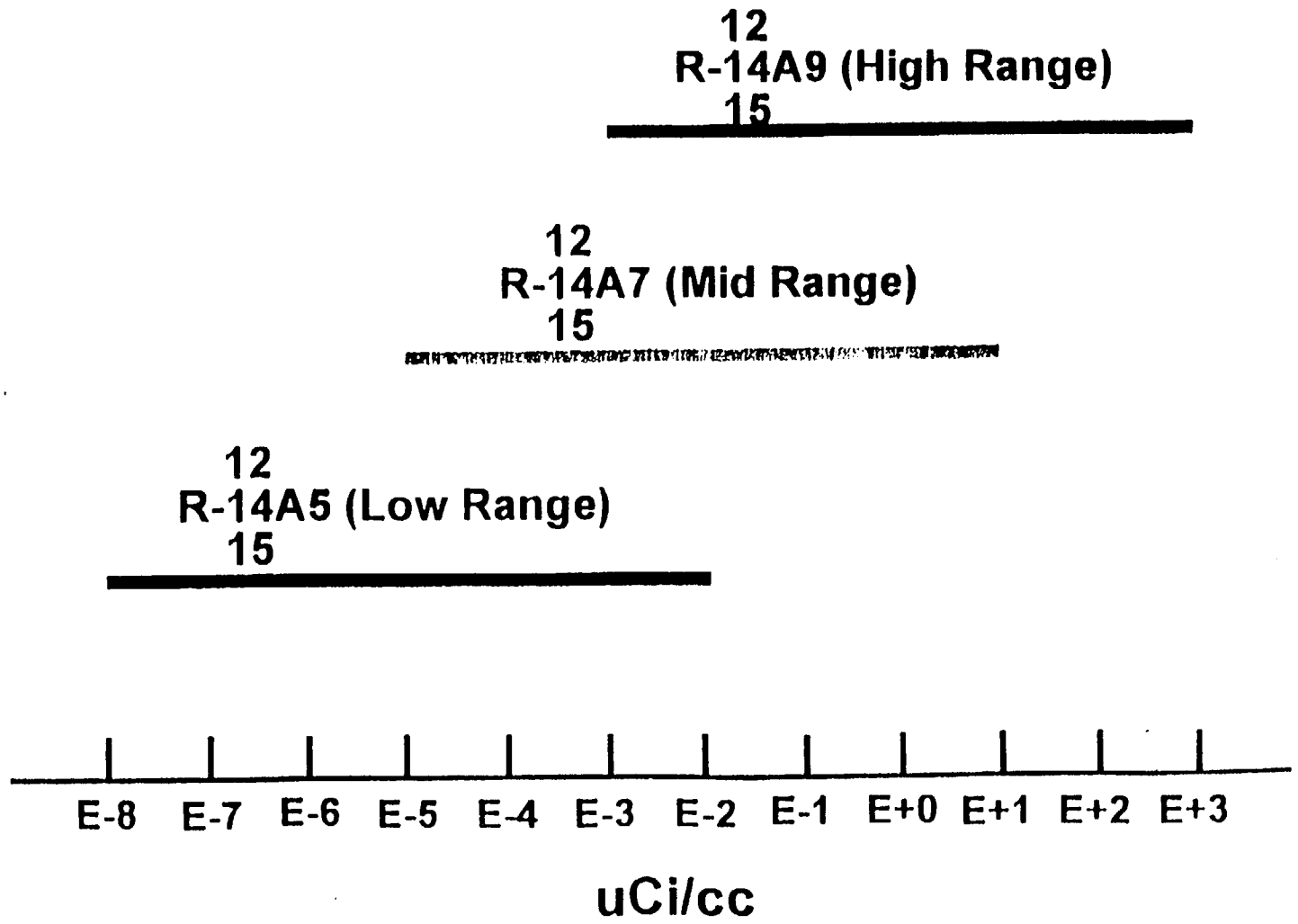
6.4.7 Save the case using the button on the bottom left part of the screen

6.4.8 Print Results by using the Print button on the right hand side of the screen

7.0 ATTACHMENTS

7.1 SPING Functional Ranges

SPING FUNCTIONAL RANGES



SPING 008

ROCHESTER GAS & ELECTRIC CORPORATION

GINNA STATION

CONTROLLED COPY NUMBER 23

PROCEDURE NUMBER EPIP 2-17 REVISION NUMBER 6

HYPOTHETICAL (PRE-RELEASE) DOSE ESTIMATES

RESPONSIBLE MANAGER

6/4/01
EFFECTIVE DATE

CATEGORY 1.0

THIS PROCEDURE CONTAINS 9 PAGES

EPIP 2-17

HYPOTHETICAL (PRE-RELEASE) DOSE ESTIMATES

1.0 PURPOSE

The purpose of this procedure is to provide guidance to Dose Assessment personnel on projecting doses based on the known source term prior to an actual release. Various release rates are assumed and doses are projected using current meteorological data.

2.0 RESPONSIBILITY

2.1 The TSC or EOF Dose Assessment Manager is responsible for implementing this procedure.

3.0 REFERENCES

3.1 Developmental References

None.

3.2 Implementing Procedures

3.2.1 S-14.3, Operation of Containment High Range Area Monitors, R-29, R-30

3.2.2 EPIP 2-4, Emergency Dose Projections - Manual Method

3.2.3 EPIP 2-5, Emergency Dose Projections - Personal Computer Method

3.2.4 EPIP 2-16, Core Damage Estimation

3.2.5 EPIP 2-6, Emergency Dose Projections - MIDAS Program

4.0 PRECAUTIONS

None.

5.0 PREREQUISITES

None.

6.0 ACTIONS

6.1 Dose projection from current meteorology and assumed release rates.

6.1.1 Obtain current meteorological data.

6.1.2 Run a "what if" calculation by performing the following:

- Double click on the RG&E dose assessment program icon
- Select "new session" - enter session information
- Select "downcalc"
- Printout the flowrates and ensure they are the same as Attachment 4. Change them if necessary.
- Select OK
- Enter the following in the "downcalc" screen.
- DO NOT enter a reactor shutdown time. Tab through the reactor shutdown date and time.
- Enter 50 for the 250ft temperature
- Enter 51 for the 33ft temperature
- Enter 5 for the windspeed
- Tab through all of the inputs for the radiation monitor readings.
- Enter 100 for "other noble gasses in Ci/sec.
- Ensure the box for "iodine from noble gas" is selected.
- For the "data date and time" use the same date and time as the "calculation date and time".
- Enter 4 for exposure duration.
- Enter 0.3 for "X" miles.
- From the pulldown menu select save. Then select save & report to print the report.
- Ensure that the site boundary, 2 miles, 5 miles and 10 miles WB (TEDE) and THY (CDE) are the same as Attachment 5.
- If they are the same, all of your defaults are correct. If they are not the same, ensure all of your inputs are correct. If your inputs are correct, consult the dose assessment manager to resolve the problem.

6.1.3 Alternatively, run a "what if" case to allow comparison of results between MIDAS and the IBM PC. Enter 1.0 uCi/cc (R14A) for noble gas and default to 1.0E-4 uCi/cc for radioiodine. In MIDAS, enter noble gas concentration as Monitor No. 6 (SPING 2-9) and radioiodine as Monitor No. 4 (SPING 2-3). In the IBM PC program, enter noble gas concentration as uCi/cc under R-14 and radioiodine as uCi/cc under R10B.

6.2 <u>Dose Projection from Reactor Coolant Sample Activity</u>

6.2.1 Using Attachment 2, add all xenons and kryptons in the sample to obtain the total noble gas concentration. Multiply the concentration by the total grams of reactor coolant (1.28E to 8g), and by 1E-06 to obtain total curies of noble gas in the reactor coolant.

6.2.2 Assume all noble gas is released to the containment atmosphere and is available for release. To obtain the estimated total curies of radioiodine available for release, multiple the total curies of noble gas by 1E-04.

6.2.3 Assume the containment leaks at the design rate of 2.32E-08/sec to obtain an assumed release rate in curies/sec of noble gas and radioiodine.

6.2.4 Do a dose projection using the assumed release rates in step 6.2.3 and current meteorology.

6.3 Dose Projection from Containment Air Activity

6.3.1 When reactor coolant has leaked into the containment, the source term in the containment atmosphere can be determined from the containment high range area monitor reading or from a containment air sample. Noble gas and radioiodine concentrations for several types of releases from the fuel are given in Attachment 1. Also, see Procedure S-14.3.

6.3.2 From Attachment 1, select the column best corresponding to the time after shutdown and the high range monitor reading. Record the noble gas and radioiodine on Attachment 2.

6.3.3 Multiply the total radioiodine and total noble gas concentrations by the free volume of containment which is 2.75E+10 cc and by 1E-06 Curies per microcurie to get total Curies of both radioiodine and noble gas in the containment atmosphere.

6.3.4 If the containment is pressurized and at elevated temperature, the following correction is made:

$$\frac{14.7 + \text{psig}}{14.7} \times \frac{492}{°F + 460} = \text{correction factor}$$

where psig is the containment pressure and °F is the containment temperature.

6.3.5 Multiply the curie totals in step 6.3.3 by the correction factor in 6.3.4, if applicable.

6.3.6 After the source term is determined, dose projections can be made by assuming the containment leaks at the design rate.

6.3.7 The containment design leak rate is 0.2% per day. In terms of seconds, this is:

$$\frac{0.002}{\text{day}} \times \frac{\text{day}}{24 \text{ hrs.}} \times \frac{\text{hour}}{3600 \text{ sec}} = 2.32\text{E-}08 \text{ per second.}$$

6.3.8 Multiply curies of radioiodine and noble gas by 2.32E-08 to determine release rates of each in curies/sec.

6.3.9 The maximum duration of the release may be determined by dividing the curies total by the curie/sec release rate.

6.3.10 Make hypothetical dose projections using the assumed release rate and procedures EPIP 2-4 or EPIP 2-5 as time permits.

7.0 Attachments

1. Air Activity from High Range Monitors.
2. Pre-Release Dose Estimate Calculation Sheet (Reactor Coolant)
3. Pre-Release Dose Estimation Calculation Sheet (Containment Air Activity)
4. Downwind Dose Calculation Flowrates
5. Downwind Dose Calculation (DownCalc)

AIR ACTIVITY FROM HIGH RANGE MONITORS

1. NORMAL COOLANT RELEASE

R/hour		Hours after shutdown		
6-20	0.0	0.5	2.0	8.0
NG uCi/cc	1.95	1.87	1.65	1.54
I uCi/cc	2.44E-02	2.30E-02	2.02E-02	1.48E-02

2. GAP RELEASE (W)

R/hour		Hours after shutdown		
800-3000	0.0	0.5	2.0	8.0
NG uCi/cc	7.14E+01	7.13E+01	7.03E+01	6.84E+01
I uCi/cc	4.46E+01	4.27E+01	3.87E+01	3.16E+01

3. GAP RELEASE (NRC)

R/hour		Hours after shutdown		
7000-30K	0.0	0.5	2.0	8.0
NG uCi/cc	8.96E+02	8.55E+02	7.54E+02	5.78E+02
I uCi/cc	6.34E+02	5.55E+02	4.16E+02	2.57E+02

4. 100% FUEL RELEASE

R/hour		Hours after shutdown		
50K-100K	0.0	0.5	2.0	8.0
NG uCi/cc	1.22E+04	1.02E+04	7.69E+03	6.12E+03
I uCi/cc	3.20E+03	2.80E+03	2.10E+03	1.28E+03

PRE-RELEASE DOSE ESTIMATE CALCULATION SHEET

1. REACTOR COOLANT ACTIVITY SOURCE TERM

Noble Gas (NG) = _____uCi/gm (all Xenons & Kryptons)

_____ uCi/gm NG x 1.28E+2 gm-Ci/uCi = _____Ci NG

_____ Ci NG x 1E-04 = _____ Ci I*

2. LEAK RATE

Containment Design Leak Rate Duration: 24 hours

_____ Ci NG x 2.32E-08/sec = _____ Ci/sec NG

_____ Ci I* x 2.32E-08/sec = _____ Ci/sec I

*Available for release from containment.

PRE-RELEASE DOSE ESTIMATION CALCULATION SHEET

1. CONTAINMENT AIR ACTIVITY SOURCE TERM

Containment Pressure (psig) . . . . . _____

Containment Temperature (F) . . . . . _____

Temperature Correction Factor (CF)

$$CF = \frac{14.7 + (\quad) \text{ psig}}{14.7} \times \frac{492}{(\quad) F + 460}$$

CF = _____ x _____ = _____

AIR ACTIVITY FROM HIGH RANGE MONITORS (R-29, R-30)

Highest Reading . . . . . _____ R/hour

Hours after shutdown . . . . _____ hours

NG = _____ uCi/cc (from S-14.3)

I = _____ uCi/cc (from S-14.3)

Air Sample Results of Estimates from HIGH RANGE MONITORS

_____ uCi/cc NG x _____ CF x 2.75E+4 cc-Ci/uCi = _____ Ci NG

_____ uCi/cc I x _____ CF x 2.75E+4 cc-Ci/uCi = _____ Ci I

2. LEAK RATE

Containment Design Leak Rate Duration: 24 hours

_____ Ci NG x 2.32E-8/sec = _____ Ci/sec NG

_____ Ci I x 2.32E-8/sec = _____ Ci/sec I

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Downwind Dose Calculation Flowrates

Description	Select	Value	Units
Containment Vent Flow Monitor	*Normal*	*15300.000*	cfm
Plant Vent Flow Monitor	*Emerg.*	*69074.000*	cfm
Air Ejector Vent Flow Monitor	*Other*	*900.000*	cfm

☐ *1* Safety Relief Valves open * cc/sec = cc/sec

☐ Atmospheric Relief Valve open * cc/sec = cc/sec

☐ Water R31/R32: cc/sec

☑ Steam

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Downwind Dose Calculation (DownCalc)

Session Number: 2001002 Calculation Number: 1.01
Shutdown DateTime: Calculation DateTime: 05/08/2001 1523

Meteorological Data: Temp 250: 50.000 Stability: D
Temp 33: 51.000 Windspeed: 5.000
Delta Temp: -1.000e+00

RadioIodine Release Data:			
	R-10A:	NA	uCi/cc
	R-10B:	NA	uCi/cc
	Other Iodine:	NA	Ci/sec
☑	Iodine from Noble Gas:	0.01000	Ci/sec
	Total RadioIodine Release Rate:	0.01000	Ci/sec

Noble Gas Release Data:			
	R-12:	NA	uCi/cc
	R-14:	NA	uCi/cc
	R-15:	NA	uCi/cc
	R-31:	NA	mRem/hr
	R-32:	NA	mRem/hr
	Other Noble Gas:	100.000	Ci/sec
	Total Noble Gas Release Rate:	100.000	Ci/sec

Time Data: Data DateTime: 05/28/2001 1523 Time since Shutdown:
Exposure Duration: 4.000

External & Internal Effective Dose Equivalent in mREMs 'X' Miles: 0.3000

	Site Boundary	2 miles	5 miles	10 miles	0.3000 miles
WB(TEDE):	8897.458	854.552	275.602	117.088	8897.458
THY(CDE):	829.899	79.707	25.706	10.921	829.899

PAR at 0.3000 Miles: WHILE BODY (TEDE) PAR: Evacuate
THYROID (CDE) PAR: Administer KI

ROCHESTER GAS & ELECTRIC CORPORATION

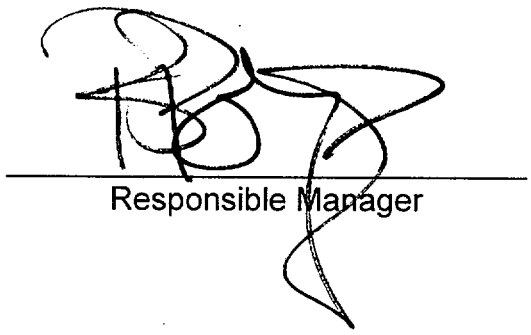
GINNA STATION

Controlled Copy Number 23

Procedure Number EPIP 3-1

Revision Number 16

Emergency Operations Facility (EOF) Activation



Responsible Manager

06/04/01

Effective Date

Category 1.0

This procedure contains 10 pages

EPIP 3-1

EMERGENCY OPERATIONS FACILITY (EOF) ACTIVATION

1.0 PURPOSE

The purpose of this procedure is to designate actions and responsibility of individuals who would report to the Emergency Operations Facility upon a decision to activate the facility.

2.0 RESPONSIBILITY

2.1 The first qualified person to arrive is responsible for initiating this procedure.

2.2 The EOF/Recovery Manager is responsible for activation of the EOF upon arrival.

3.0 REFERENCES

3.1 Developmental References

3.1.1 Nuclear Emergency Response Plan

3.1.2 NUREG-0654 "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants".

3.2 Implementing References

3.2.1 EPIP 1-0, Ginna Station Event Evaluation and Classification

3.2.2 EPIP 1-5, Notifications

3.2.3 EPIP 3-3, Engineering Support Center (ESC) Activation

3.2.4 EPIP 3-6, Corporate Notifications

3.2.5 EPIP 4-6, Joint Emergency News Center (JENC) Activation

3.2.6 EPIP 5-7, Emergency Organization

4.0 PRECAUTIONS

As noted in this procedure.

5.0 **PREREQUISITES**

5.1 An Alert, Site Area Emergency or a General Emergency has been declared in accordance with EPIP 1-0.

5.2 The EOF could be activated anytime at the discretion of the EOF/Recovery Manager.

6.0 **ACTIONS**

6.1 **Arriving Personnel**

NOTE: Depending on the number of arriving personnel, perform steps concurrently to minimize activation time.

6.1.1 Sign in at the Security Desk at the entrance to the EOF.

6.1.2 Place your name under the appropriate emergency position on the magnetic organization chart.

6.1.3 Perform responsibilities as described in EPIP 5-7, Emergency Organization

6.1.4 Personnel arriving from the Ginna plant should perform a whole body frisk to check for contamination if there has been a release of radioactivity.

6.2 **EOF/Recovery Manager perform the following:**

NOTE: In the event of power loss at the EOF contact the TSC Emergency Coordinator and discuss the need for the TSC to re-assume or maintain command and control, as appropriate.

6.2.1 Ensure minimum response staff listed below is available:

a. Nuclear Operations Manager

b. Engineering Manager

c. Dose Assessment Manager

d. News Center Manager

6.2.2 If a position is not staffed, call in personnel. Qualified responders are found in their position checklist in EPIP 5-7.

6.2.3 Obtain a briefing from the TSC Director on plant conditions.

6.2.4 Obtain notification forms from EOF fax machine that the Control Room and TSC have sent to notify offsite agencies. Use these forms and brief the response staff on plant conditions. Ensure that the staff makes contact with their counterparts. The counterparts are:

a. EOF/Recovery Manager - TSC Director

b. EOF Dose Assessment Manager - TSC Dose Assessment Manager

c. Nuclear Operations Manager - TSC Operations Manager

d. Engineering Manager - TSC Technical Manager

6.2.5 The EOF will activate to support the actions of the onsite emergency organization. Have the EOF personnel support operational issues, technical/engineering issues and dose assessment/radiological protection issues. Make contact with the News Center Manager and ensure that there is a good information flow from the EOF to the JENC.

6.2.6 Brief Federal, State and County Representatives in the EOF on the status of the emergency. Request that they contact their respective emergency operation facilities and determine if the county response organizations have any concerns.

6.2.7 Contact RG&E management and inform them that you are the EOF/Recovery Manager and that the EOF is activated in response to a Ginna emergency.

Primary Notifications

Thomas S. Richards Chairman, President & CEO	Work: (716) 724-8299 Home: (716) 288-9186 Pager: (716) 525-2265
Paul C. Wilkens Sr. Vice President, Generation	Work: (716) 724-8076 Home: (716) 248-2385 Pager: (716) 529-6426

Secondary Notifications

(To be called ONLY if the above are not reachable.)

Michael T. Tomaino Sr. Vice President & General Counsel	Work: (716) 724-8768 Home: (716) 582-1350

6.2.8 Contact INPO at (800) 321-0614 and inform them of the declared emergency at an Alert or higher.

6.2.9 Request the Facilities and Personnel Manager contact hotels and food service providers for support of TSC and EOF responders.

6.2.11 **Assuming Command and Control of the Emergency**

6.2.11.1 Ensure minimum activation staff listed below is available to assume command and control:

a. EOF Dose Assessment Manager

b. Dose Assessment Support (3)

c. Energy Distribution Liaison

d. Nuclear Operations Manager (NOM)

e. Technical Assistant to the NOM

f. Administrative Assistant to the NOM

g. Communicator

h. Engineering Manager

i. Facilities and Personnel Manager

j. Security Manager

k. Offsite Agency Liaison

l. Technical Liaison

m. Corporate Spokesperson

n. News Center Manager

6.2.11.2 If a position is not staffed, call in personnel. Qualified responders are found in their position checklist in EPIP 5-7.

6.2.11.3 Confer with the TSC Emergency Coordinator on shifting command and control of the emergency from the TSC organization to the EOF. Normally when command and control is transferred, the EOF assumes:

a. Overall direction for the emergency

1. Emergency Classification

2. Protective Action Recommendations

b. Notifications to New York State, Wayne and Monroe Counties

c. Dose Assessment and Offsite Survey Team coordination

However, certain conditions may warrant transferring a given responsibility area (e.g. survey team coordination) at different times, per the discretion of the Emergency Coordinator and EOF/Recovery Manager.

6.2.11.4 Brief EOF personnel on plant status and notify them that command and control will be assumed at the agreed upon time using Attachment 2 for meeting agenda.

6.2.11.5 At the agreed upon time, call the TSC Emergency Coordinator and state that, unless he has any objections, the EOF is assuming command and control at this time.

6.2.11.6 Announce to the EOF that the EOF has assumed command and control of the emergency.

6.2.11.7 Upon assuming command and control, direct the NOM to provide RECS line updates every 30 minutes using procedure EPIP 1-5, Attachment 3.

6.2.11.8 Direct the Federal, State and County representatives in the EOF to contact their emergency management organizations and inform them that the EOF has assumed command and control.

6.3 Shift Turnover

6.3.1 If the EOF will be activated for more than 12 hours, direct the Facilities and Personnel Manager to complete Attachment 1 for continuous staffing.

6.3.2 When the responders for the next shift have arrived, have them perform a detailed turnover with the person that they are relieving. Have them log the turnover in their log book.

6.3.3 When the individual turnovers are complete, have the on-coming crew perform a briefing for each other using the standard meeting agenda (Attachment 2). The off-going crew should also be at the briefing to ensure that the information that is hared is correct and complete.

6.3.4 To terminate the emergency or to transition to the recovery phase use EPIP 3-4.

7.0 ATTACHMENTS

1. EOF Continuous Staffing Schedule

2. EOF Meeting Agenda

EOF CONTINUOUS STAFFING SCHEDULE

(Consult EPIP 5-7 position checklists for qualified personnel and phone numbers to fill positions.)

	Shift A _____hrs to _____hrs	Shift B _____hrs to _____hrs
POSITION	**Date**:	**Date**:
EOF/Recovery Manager		
Secretary, Recovery Mgr		
Nuclear Operations Manager		
Technical Asst. to NOM		
Admin Asst to NOM		
Corporate Spokesperson		
Assistant to Corporate Spokesperson		
Technical Assistant to Corporate Spokesperson		
News Announcement Writer		
Engineering Manager		
Offsite Agency Liaison		
EOF Technical Representative		
Monroe County Tech. Rep.		
Wayne County Tech. Rep.		
Albany Tech. Rep.		
Facilities and Personnel Mgr		

EOF CONTINUOUS STAFFING SCHEDULE

(Consult EPIP 5-7 position checklists for qualified personnel and phone numbers to fill positions.)

	Shift A _____hrs to _____hrs	Shift B _____hrs to _____hrs
POSITION	**Date**:	**Date**:
Security Manager		
Advisory Support Manager		
Clerical Supervisor		
Computer Operator		
Fax Operator		
Copier Operator		
Courier		
Dose Assessment Manager		
Assistant DA Manager		
Dose Assessment Liaison		
Calculator		
Calculator		
Radio Operator		
Communicator		
Plotter		
Weather/Status Board		
Survey Team		

EOF CONTINUOUS STAFFING SCHEDULE

(Consult EPIP 5-7 position checklists for qualified personnel and phone numbers to fill positions.)

	Shift A	Shift B
	_____hrs to _____hrs	_____hrs to _____hrs
POSITION	**Date:**	**Date:**
Survey Team		
Communications Manager		
Communicator		
Communicator		
Status Board Keeper		

EOF MEETING AGENDA

Meeting Date: _____ Time: _____

1. Recovery Manager
   - Classification level
   - Time classification declared
   - Brief event description (use EAL reference manual)

2. Dose Assessment
   - Offsite Areas of concern (downwind areas)
   - Protective Actions Recommended
   - Abnormal radiation levels

3. Nuclear Operations Manager (Ginna to report if on conference calls)
   - Plant Status
   - Maintenance
     - Equipment out of service
     - Repairs planned or in progress

4. Engineering Manager (Ginna to report if on conference calls)
   - Brief technical issues

5. Security
   - Accountability of plant personnel
   - Movement of response personnel to and from site.

6. Facility and Personnel Manager
   - Staffing of facilities
   - Transportation of personnel
   - Food
   - Requests received

7. Corporate Spokesperson
   - Media questions

8. Other RG&E Concerns

9. County Concerns
   - Wayne County
   - Monroe County

10. State Concerns
    - State Emergency Management Office (SEMO)
    - Department of Health (DOH)
    - Department of Environmental Conservation

11. Federal Concerns
    - Nuclear Regulatory Commission (NRC)
    - Federal Emergency Management Agency (FEMA)
    - Department of Energy (DOE)

Please write on these pages. New pages will be provided after each use.