Florida Power & Light Company, 6501 South Ocean Drive, Jensen Beach, FL 34957

August 8, 2002

L-2002-145
10 CFR 50 Appendix E

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

Re: St. Lucie Units 1 and 2
Docket Nos. 50-335 and 50-389
Emergency Plan Implementing Procedures

In accordance with 10 CFR 50 Appendix E, enclosed is a copy of the revised implementing procedures for the St. Lucie Plant Radiological Emergency Plan:

Number	Title	Revision	Implementation Date
EPIP-13	Maintaining Emergency Preparedness - Emergency Exercises, Drills, Tests and Evaluations	7	July 16, 2002
HP-90	Emergency Equipment	41	July 23, 2002

EPIP-13 Revision 7 revised the following: 1) added a step to forward critique items to the St. Lucie Plant Training Manager via a plant manager action item (PMAI); 2) added steps to ensure drill exercise scope and duration adequate to meet each participating agency objectives; and 3) made editorial and administrative changes. HP-90 Revision 41 added instructions to affix seals to the latching mechanism upon completion of the inventory.

Please contact us if there are any questions regarding these procedures.

Very truly yours,

Donald E. Jernigan
Vice President
St. Lucie Plant

DEJ/tlt

Enclosures

A045

FPL

ST. LUCIE PLANT

EMERGENCY PLAN IMPLEMENTING PROCEDURE

SAFETY RELATED

Procedure No.
EPIP-13

Current Revision No.
7

Effective Date
07/16/02

Title:

MAINTAINING EMERGENCY PREPAREDNESS - EMERGENCY EXERCISES, DRILLS, TESTS AND EVALUATIONS

Responsible Department: **EMERGENCY PLANNING**

REVISION SUMMARY:

Revision 7 – Added step to forward critique items to TRNG MGR via PMAI, added steps to ensure drill exercise scope and duration adequate to meet each participating agency objectives and made editorial / administrative changes. (J. R. Walker, 06/28/02)

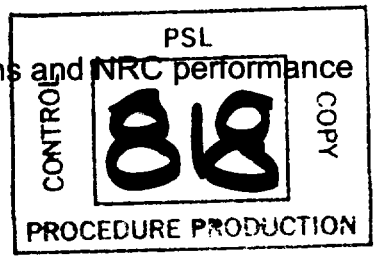
Revision 6 - THIS PROCEDURE HAS BEEN COMPLETELY REWRITTEN. Reformatted program maintenance checklists. Changed frequency of facility surveillances. Made administrative/editorial changes. (R. Walker, 09/27/01)

Revision 5 - Added quarterly test for ERDS link and reference to Generic Letter #GL 93-01. (J. R. Walker, 12/07/00)

AND

Deleted reference to PSL policy PSL-110, revised FRG review of EPIPs, changed the symbol of response to CR00-0544 from regulatory commitment to mgmt directive and added EPIP-08 to the list of EPIPs. (J. R. Walker, 10/13/00)

Revision 4 - Added staff augmentation program maintenance items and NRC performance indicator tracker. (D. Calabrese, 04/27/00)



Revision	FRG Review Date	Approved By	Approval Date
0	12/15/97	J. Scarola Plant General Manager	12/15/97
7	06/27/02	Dick Rose Plant General Manager	06/28/02
		N/A Designated Approver	
		N/A Designated Approver (Minor Correction)	

S___OPS

DATE	
DOCT	PROCEDURE
DOCN	EPIP-13
SYS	
COM	COMPLETED
ITM	7

TABLE OF CONTENTS

1.0 PURPOSE

1.1 This procedure provides instructions for:

1. Periodic exercises and drills conducted in order to test the state of emergency preparedness by FPL personnel, support organizations and off-site governmental agencies.

2. Periodic tests and reviews of components of the Emergency Planning Program (e.g. facilities, equipment, Emergency Plan and Emergency Plan Implementing Procedures, etc.) conducted to ensure availability, operability and reliability.

2.0 REFERENCES / RECORDS REQUIRED / COMMITMENT DOCUMENTS

NOTE

One or more of the following symbols may be used in this procedure:

§ Indicates a Regulatory commitment made by Technical Specifications, Condition of License, Audit, LER, Bulletin, Operating Experience, etc. and shall NOT be revised without Facility Review Group review and Plant General Manager approval.

¶ Indicates a management directive, vendor recommendation, plant practice or other non-regulatory commitment that should NOT be revised without consultation with the plant staff.

Ψ Indicates a step that requires a sign off on an attachment.

2.1 References

- $§_1$ St. Lucie Plant Radiological Emergency Plan (E-Plan)
- $¶_1$ QI 1-PR/PSL-1, Site Organization
- $¶_2$ QI-1-PSL-15, Protection Services Organization
- $¶_3$ QI-5-PSL-1, Preparation, Revision, Review/Approval of Procedures
- $¶_4$ QI-17-PSL-1, Quality Assurance Records
- NBS-NPS-EP-WP-001, Public Alert and Notification System Testing, Maintenance and Engineering
- ADM-25.02, NRC Performance Indicators

2.2 Records Required

- ¶4 The following records are maintained in accordance with QI-17-PSL-1, Quality Assurance Records:
- Data Sheet 1, Quarterly EP Maintenance Checklist
- Data Sheet 2, Emergency Plan 6 Year Element Demonstration
- Data Sheet 3, EPIP Biennial Review
- Data Sheet 4, EP Annual Exercise Checklist
- Attachment 1, EP Program Maintenance Checklist

2.3 Commitment Documents

- §2 10 CFR 50, Domestic Licensing of Production and Utilization Facilities
- §5 Generic Letter #GL 93-01, Emergency Response Data System Test Program
- ¶5 PMAI #96-02-237, Evaluation of Continuous Emergency Response
- §3 NOV Response L-97-20, Violation II. A, Part 4.D.
- ¶6 CR 00-0544, QA Audit (Ineffective Corrective Actions) QSL-EP-00-02
- ¶7 Quality Assurance Audit Report, QSL-EP-02-02, Improvement Item (Forward Critique Reports to Site Training Manager) /R7
- ¶8 PMAI PM02-03-001 (Adequacy of Drill / Exercise Scope and Duration) /R7

3.0 RESPONSIBILITIES

3.1 §1 The Protection Services Manager is responsible for:

1. Planning, scheduling, and coordinating emergency exercises involving off-site agencies.
2. Reviewing Attachment 1, EP Program Maintenance Checklist, upon completion.
3. Reviewing results of exercises and major drills.

3.2 §1 The Protection Services Manager, in conjunction with plant management, is responsible for ensuring that adequate resources are made available to support and conduct emergency preparedness activities including:

1. Exercise and drill scenario development and control
2. Exercise and drill participation
3. Support for maintenance of emergency facilities and equipment

3.3 §1 The Facility Review Group (FRG) is responsible to review the following:

1. Revisions to the St. Lucie Plant Radiological Emergency Plan.
2. Revisions to Emergency Plan Implementing Procedures (EPIPs) other than minor changes.
3. Biennial Exercise Critique Report.

3.4 The Emergency Preparedness (EP) Supervisor is responsible for:

1. Maintaining awareness of EP activities.
2. Ensuring coordination of EP drills and exercises in accordance with this procedure.
3. Ensuring documentation of EP program maintenance in Attachment 1, EP Maintenance Checklist.
4. Ensuring documentation of major element demonstration as indicated on Data Sheet 2, Emergency Plan 6 Year Element Demonstration.

3.4 The Emergency Preparedness (EP) Supervisor is responsible for: (continued)

5. Ensuring critiques of exercises, drills, and actual events are conducted, documented, and that deficiencies are addressed in accordance with plant corrective action practices.

A. ¶7 Drill and exercise critiques should be forwarded, via PMAI, for review by the Site Training Manager for needed changes to training courses or materials. /R7

B. Drill and exercise critiques should be forwarded to the applicable Emergency Response Facility (ERF) managers and / or supervisors for possible correction to open performance discrepancies, if deemed appropriate by the EP Supervisor. /R7

6. Ensuring that EPIPs are reviewed through feedback from the following sources:

A. Daily use

B. Drills and exercises

C. Actual events

D. Training

E. Biennial EPIP review as indicated on Data Sheet 3, EPIP Biennial Review

7. Ensuring biennial review of the Recovery Plan.

4.0 DEFINITIONS

4.1 **Annual** - Annual is defined as once per calendar year (January 1 through December 31).

4.2 **Biennial** - Biennial is defined as once per two calendar years.

4.3 **Drill**

1. **Communications Tests and Drills** - Communications tests involve the use of emergency communications equipment to verify operability. Communications drills involve use of emergency communications equipment to notify and transfer simulated emergency information to off-site governmental agencies.

2. **Health Physics Drills** - Health Physics drills test various tasks employed by that department during an emergency condition. Health Physics drills are conducted semi-annually and one of the semi-annual drills may be incorporated into the radiological monitoring drill.

3. **Medical Emergency Drill** - A medical emergency drill involves a simulated contaminated individual, with provisions for activation of the plant First Aid/Personnel Decontamination Team. Participation by local support services (i.e., ambulance and off-site medical treatment facility) is tested separately once per year or as part of the annual medical drill. Medical Emergency Drills are conducted at least once every calendar year.

4. **Radiological Monitoring Drill** - Radiological monitoring drills include collection and analysis of air samples, testing of communications, and understanding of messages between Health Physics supervision and the off-site monitoring teams. A radiological monitoring drill will be conducted at least once every calendar year.

5. **Emergency Response Facility (ERF) Drill** - An ERF Drill demonstrates various emergency response capabilities including management and coordination of emergency response, accident assessment, protective action decision-making, and plant system repair and corrective action involving all or certain Emergency Response Facilities [Control Room, Technical Support Center (TSC), Operational Support Center (OSC), Emergency Operations Facility (EOF), and/or Emergency News Center (ENC)]. These drills are conducted at least four (4) times per calendar year and should be conducted approximately once each calendar quarter. One of these drills is designed to satisfy the requirements of an exercise as defined below.

4.3 Drill (continued)

5. Emergency Response Facility (ERF) Drill - (continued)

Non-exercise drills provide an opportunity to consider accident management strategies. Supervised instruction can be permitted for these drills, with operating staff having the opportunity to resolve problems (success paths) rather than have controllers intervene. Additionally, non-exercise drills may focus on on-site training objectives.

4.4 Exercise - An exercise is an event that tests the integrated capability of a major portion of the basic elements existing within the St. Lucie Plant Radiological Emergency Plan. An exercise is required biennially per 10 CFR 50. Off-site agency participation is required biennially. Exercises are developed, scheduled, and conducted in a manner consistent with the regulations and guidance of 10 CFR 50 Appendix E, NUREG 0654, and other appropriate regulatory documents. Biennial exercises involving off-site agencies shall be conducted as a Site Area Emergency and should escalate to General Emergency. The exercise scenarios are varied such that all major elements of the Plan are tested at least every six (6) years.

4.5 Letter of Agreement (LOA) - Support or assistance from outside agencies is established and maintained through Letters of Agreement or, in some instances, purchase orders/contracts.

Letters of Agreement are confirmed annually through correspondence, direct contact, or by telephone. Each agreement is renewed at least every three (3) years. Purchase orders/contracts are renewed as required.

4.6 Monthly - Monthly is defined as at least once each calendar month, being the first day of each month until the last unless otherwise specified.

4.7 Quarterly - Quarterly is defined as once per calendar quarter, with the quarters being January through March, April through June, July through September and October through December.

4.8 Semi-annual - Semi-annual is defined as twice per calendar year, with one time from January 1 to June 30 and one from July 1 to December 31.

5.0 INSTRUCTIONS

5.1 Protection Services Manager Instructions

1. REVIEW completed documentation of Attachment 1, EP Program Maintenance Schedule, on an annual basis.

2. ENSURE that State and County Emergency Management officials are made aware of non-emergency events that have a potential for media interest.

A. INFORM Emergency Preparedness (EP) of event

B. VERIFY that EP has informed appropriate Emergency Management officials.

3. §1 ENSURE that State and County Emergency Management officials are made aware of the following on an annual basis:

A. Significant changes to the Emergency Plan/EPIPs.

B. Emergency Action Levels (EALs)

4. MAINTAIN awareness of the status of the Alert and Notification System (ANS) operability.

A. ENSURE that degradations of the ANS are promptly addressed.

1. The Manager, Nuclear Plant Support Services is responsible to maintain operability of the ANS per NBS-NPS-EP-WP-001, Alert and Notification System Testing, Maintenance and Engineering.

5. §1 ENSURE the following is performed in support of exercises:

A. SCHEDULE a date for the exercise in coordination with the primary State and County emergency response agencies.

B. PROVIDE the opportunity for State and County response agencies to participate in an exercise.

C. ¶8 ENSURE that annual exercise scenarios address the objectives of each participating agency.

/R7

5.1 Protection Services Manager Instructions (continued)

5. ENSURE the following is performed in support of exercises: (continued)

D. COORDINATE FPL efforts with other participating personnel, organizations, and agencies.

1. If the Federal Emergency Management Agency (FEMA) is evaluating State and County emergency response, Then ENSURE that the exercise scenario is developed within the timeframes specified by the regulations, as defined in Data Sheet 4, EP Annual Exercise Checklist.

E. DISCUSS and EVALUATE annual exercise performance with plant management, FPL controller/evaluators and principal participants.

END OF SECTION 5.1

5.2 Emergency Preparedness Supervisor

1. At the beginning of each calendar year:

A. REVIEW the items on Attachment 1, EP Program Maintenance Checklist and ESTABLISH a working schedule.

2. MAINTAIN awareness of status of completion of Attachment 1, EP Program Maintenance Checklist.

A. Response actions performed as part of actual plant emergencies may be CREDITED as completing one or more of the following drills or tests: /R7

- integrated facility activation drill
- call out phone test/drill
- HP drill
- off-site agency communications /R7
- medical drill

B. Activities incorporated within a multiple scope drill or exercise may be CREDITED as completing a drill or test, for example: /R7

- HP drill, medical drill, off-site communications, etc. /R7

C. ¶6 Off Hours Augmentation including:

- weekly tests of automated recall system
- quarterly off-hours phone test (at least one per year should be manual)
- monthly review of Emergency Response Directory
- quarterly verification of Emergency Response Directory data
- quarterly verification of Emergency Response Directory distribution list
- quarterly publication and distribution of Emergency Response Directory

5.2 Emergency Preparedness Supervisor (continued)

2. (continued)

D. NRC Performance Indicators

- PREPARE and SUBMIT in accordance with ADM-25.02

3. ENSURE completion of the items on Data Sheet 1, Quarterly EP Maintenance Checklist.

4. ENSURE the completion of the items on Data Sheet 2, Emergency Plan 6 Year Element Demonstration.

5. ENSURE the completion of the items on Data Sheet 3, EPIP Biennial Review.

6. ENSURE the completion of the items on Data Sheet 4, EP Annual Exercise Checklist.

7. REVIEW annual drill and exercise program with state and county representatives.

8. ¶8 ENSURE the scope and duration of annual exercise is adequate to meet objectives of each participating off-site agency.

/R7 /R7

END OF SECTION 5.2

ATTACHMENT 1
EP PROGRAM MAINTENANCE CHECKLIST
(Page 1 of 3)

(YEAR)_____

Semi-Annual/Annual/Biennial EP Maintenance Items:	INITIAL / DATE
§1 1. HP Drill (Semi-Annual)	
A. (Jan-Jun) Date____/____/____	_____/_____
B. (Jul-Dec) Date____/____/____	_____/_____
§1 2. Radiological Monitoring Drill (Annual)	
A. Date____/____/____	_____/_____
§1,2 3. Biennial Exercise (Include Data Sheet 4, EP Exercise Checklist)	
A. Date____/____/____	_____/_____
B. FEMA Evaluated (Even Years Only) Yes / No	_____/_____
§1 4. Annual Offsite Agencies Communications Drill	
A. Date____/____/____	_____/_____
§1 5. Annual Unannounced Communications Drill	
A. Date____/_____/____	_____/_____
§1 6. Annual Medical Drill	
A. Date____/____/____	_____/_____

S__OPS
DATE_____
DOCT CHECKLIST
DOCN EPIP-13
SYS_____
COMP COMPLETED
ITM REV

ATTACHMENT 1
EP PROGRAM MAINTENANCE CHECKLIST
(Page 2 of 3)

(YEAR)_____

Semi-Annual/Annual/Biennial EP Maintenance Items (continued): INITIAL / DATE

§1 7. Emergency Plan Review: _____/_____

A. Emergency Plan Review (Annual) _____/_____

B. Letters of Agreement Certification (Annual Confirmation/Triennial Renewal) _____/_____

C. EPIP Review (Even years only) (Include Data Sheet 3, EPIP Biennial Review) _____/_____

§1 8. Media Day (Annual) _____/_____

§1 9. Public Information Brochure (Annual) _____/_____

§1 10. Review and update Six Year Plan (Annual) (Include Data Sheet 2, Emergency Plan 6 Year Element Demonstration) _____/_____

§1 11. Significant Emergency Plan/EPIP Changes, Emergency Action Levels (EALs) Meeting with State/County Emergency Management (Annual) _____/_____

§1 12. Hospital Training (Annual) _____/_____

§1 13. Off-site Training (Annual) _____/_____

14. Recovery Plan Review (Biennial) _____/_____

ATTACHMENT 1
EP PROGRAM MAINTENANCE CHECKLIST
(Page 3 of 3)

(YEAR)_____

Semi-Annual/Annual/Biennial EP Maintenance Items (continued): INITIAL / DATE

15. Annual training review of ERO

    A. Solicit verification of annual ERO training completion from the Training Department. _____/_____

    B. Review training completion feedback and remove any ERO members not qualified. _____/_____

Quarterly EP Maintenance Items (complete Data Sheet 1 Quarterly EP Maintenance Checklist for each of the following):

1. Quarter 1 _____/_____
2. Quarter 2 _____/_____
3. Quarter 3 _____/_____
4. Quarter 4 _____/_____

Completed by_____
Emergency Preparedness Supervisor

Reviewed by_____
Protection Services Manager

END OF ATTACHMENT 1

DATA SHEET 1
QUARTERLY EP MAINTENANCE CHECKLIST
(Page 1 of 2)

QUARTER _____ (YEAR)_____

INITIAL / DATE

1. Emergency Response Facility Surveillance: _____/_____

   Date

   A. TSC _____

      §1 1. Monthly Communications Survey

      Dates: _____

   B. OSC _____

   C. EOF _____

2. ¶6 Off-Hours Augmentation Methodologies:

   A. Weekly test of automated emergency recall system (Autodialer). _____/_____

      Dates: _____

   B. Monthly review of Emergency Response Directory. _____/_____

      Dates:_____

   C. Quarterly verification of Emergency Response Directory Data. _____/_____

   D. Quarterly verification of Distribution List for Emergency Response Directory. _____/_____

   E. Quarterly publication of Emergency Response Directory. _____/_____

3. Quarterly Integrated Facility Activation Drill

   Drill Date _____ _____/_____

DATA SHEET 1
QUARTERLY EP MAINTENANCE CHECKLIST
(Page 2 of 2)

QUARTER _____ (YEAR)_____

INITIAL / DATE

4. Quarterly Off-Hours Call-Out Phone Test

   Drill Date _____ _____/_____

5. Quarterly Self-Assessment _____/_____

6. Quarterly submittal of EP Performance Indicators _____/_____

   A. Participation _____

   B. Drill & Exercise Performance _____

   C. Alert & Notification System _____

7. §5 Quarterly test of the NRC Emergency Response Data System (ERDS) link. _____/_____

NOTES:

END OF DATA SHEET 1

DATA SHEET 2
EMERGENCY PLAN 6 YEAR ELEMENT DEMONSTRATION
(Page 1 of 1)

YEAR_____

Element	Year Last Performed	Year Next Scheduled	Date Completed/ Initial
Off hours staffing (6 P.M. - 4 A.M.)			
Activation of Emergency News Center			
Use of fire control teams			
Use of medical support personnel			
Use of Security personnel for prompt access to emergency equipment or support			
Use of one or more portions of backup communications for notification			
Field monitoring			
Capability for determining the magnitude and impact of the particular components of a release			
Capability for post-accident coolant sampling and analysis			
Assembly and accountability			
Initial recovery planning activities			

END OF DATA SHEET 2

DATA SHEET 3
EPIP BIENNIAL REVIEW
(Page 1 of 2)

(YEAR)_____

I. Emergency Plan Implementing Procedures (Biennial)

		Revision No.	Date Reviewed	PCR Y / N
EPIP-00	Discovery and Identification of an Emergency Condition (including Chemical, Fire and Natural Emergencies)			
EPIP-01	Classification of Emergencies			
EPIP-02	Duties and Responsibilities of the Emergency Coordinator			
EPIP-03	Emergency Response Organization Notification/Staff Augmentation			
EPIP-04	Activation and Operation of the Technical Support Center			
EPIP-05	Activation and Operation of the Operational Support Center			
EPIP-06	Activation and Operation of the Emergency Operations Facility			
EPIP-07	Conduct of Evacuations/Assembly			
EPIP-08	Off-site Notifications and Protective Action Recommendations			
EPIP-09	Offsite Dose Calculations			
EPIP-10	Off-Site Radiological Monitoring			
EPIP-11	Core Damage Assessment			
EPIP-12	Maintaining Emergency Preparedness - Radiological Emergency Plan Training			
EPIP-13	Maintaining Emergency Preparedness - Emergency Exercises, Drills, Tests and Evaluations			
HP-90	Emergency Equipment			
HP-200	HP Emergency Organization			
HP-201	Emergency Personnel Exposure Control			

DATA SHEET 3
EPIP BIENNIAL REVIEW
(Page 2 of 2)

(YEAR)_____

I. Emergency Plan Implementing Procedures (Biennial) (continued)

		Revision No.	Date Reviewed	PCR Y / N
HP-202	Environmental Monitoring During Emergencies			
HP-203	Personnel Access Control During Emergencies			
HP-204	In Plant Radiation and Contamination Surveys during Emergencies			
HP-205	Emergency Inplant Air Sampling			
HP-206	Analysis of Emergency Inplant Air Samples			
HP-207	Monitoring Evacuated Personnel During Emergencies			
HP-208	Personnel Decontamination During Emergencies			
COP-06.06	Guidelines for Collecting Post Accident Samples			
COP-06.11	Establishing Remote Laboratory for Analysis of Accident Samples			

END OF DATA SHEET 3

DATA SHEET 4
EP EXERCISE CHECKLIST
(Page 1 of 1)

YEAR_____

Exercise Items:	INITIAL / DATE
1. Exercise Date Selection:	
A. Evaluated Date ____/____/____	_____/_____
2. ERO Participant Notification	_____/_____
3. Scenario Development Personnel Assigned	_____/_____
4. Controllers/Evaluators Assigned	_____/_____
5. Exercise Objectives	
A. Protection Services Manager Approval	_____/_____
B. Submitted to Licensing (75 Day NRC Submittal, Even years only)	_____/_____
6. Exercise Scenario	
A. Provided to Florida DEM (60 Day FEMA Submittal, Even years only)	_____/_____
B. Submitted to Licensing (45 Day NRC Submittal, Even years only)	_____/_____
7. Post Exercise Critique Date:____/____/____	_____/_____
§1 8. Facility Review Group (FRG) Critique Report Review	_____/_____

END OF DATA SHEET 4

FPL

ST. LUCIE PLANT

HEALTH PHYSICS PROCEDURE

SAFETY RELATED

Procedure No.
HP-90
Current Revision No.
41
Effective Date
07/23/02

Title:

EMERGENCY EQUIPMENT

Responsible Department: **HEALTH PHYSICS**

REVISION SUMMARY:

Revision 41 – Added instructions to affix seal upon completion of inventory. (Don Reisinger, 07/11/02)

Revision 40 - Added instructions for operational check of Ludlum Model 2200. (Bruce Somers, 05/09/02)

Revision 39 - Changed Section 4.2 from month to quarter and added AMS-2/3 to inventory. (Donald Reisinger, 03/28/02)

Revision 38 - Changed to reflect moving of emergency monitoring kits from SAS to OSC area in SSB. (Don Reisinger, 11/12/01)

Revision 37 - Deleted references to STA, revised TSC commo survey referent to EPIP-13, revised replacement time for failed major equipment within the OCA to 24 hours, made editorial changes, and revised attachments / forms from HP-206 to be included in e-kits. (J. R. Walker, 12/07/00)

Revision 36 - Added check of fax machines and copy machines and deleted unnecessary letter references to specific copies of ERD. (Steve Knapp, 10/28/99)

Revision 35 - Revised references to delete C-111 and added COP-06.11. Revised text and checklists to delete C-111 and added COP-06.11. Updated EP Supervisor information. Made administrative changes. (Rick Walker, 06/30/99)

Revision	FRG Review Date	Approved By	Approval Date
0	06/24/75	K.N. Harris Plant General Manager	09/11/75
41	07/11/02	Dick Rose Plant General Manager N/A Designated Approver N/A Designated Approver (Minor Correction)	07/11/02

S___OPS	
DATE	
DOCT	PROCEDURE
DOCN	HP-90
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COM	COMPLETED
ITM	41

PSL CONTROL 818 COPY
PROCEDURE PRODUCTION

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(continued)

SECTION PAGE

APPENDICES

1.0 TITLE

EMERGENCY EQUIPMENT

2.0 REVIEW AND APPROVAL

See cover sheet.

3.0 PURPOSE

3.1 This procedure gives the instructions to be used when conducting inventories and maintenance of HP Emergency Kits.

4.0 PRECAUTIONS AND LIMITATIONS

4.1 Item substitution is authorized only if the substituted item is comparable / equivalent to the original equipment.

4.2 All emergency equipment shall be checked and inventoried once each quarter and within five (5) working days following each use.

4.3 Items found in Emergency Kits which do not appear on the inventory sheets shall be removed and relocated in accordance with the instructions of a Health Physics Supervisor. This does not apply at hospitals, where FPL and non-FPL supplies may be co-located in accordance with hospital staff preferences.

4.4 In years ending in zero (0) or five (5), all inventoried equipment should be evaluated with respect to age, wear and need for replacement or upgrade.

4.5 Kit check sources used to test instrument operability should NOT be stored near the kit TLDs.

4.6 Silver impregnated zeolite cartridges may be properly stored for a period of five years from the date of manufacture.

4.7 Electronic Personnel Dosimeters (EPD) stored in the Control Rooms and offsite monitoring team kits shall be programmed to:

1. Display both Dose and Dose Rate.
2. Activate by pushing the pushbutton.
3. Alarm on a dose of 4.5R and a Dose Rate of 10R/hr.

4.8 ¶1 When notified by Emergency Planning that a revision to a procedure contained in the HP Emergency Kits has been issued, HP should update the procedure with the new revision within five (5) working days.

4.9 Full face respirators in the Emergency Kits shall be visually inspected in accordance with the requirements of HPP-62, Inspection and Maintenance of Respiratory Protection Equipment.

4.10 Field Monitoring Team Kits, Attachment 5 Inventory Form, shall have seals affixed to the latching mechanism upon completion of the inventory to expediate the team getting into the field in case of emergency. /R41

5.0 RELATED SYSTEM STATUS

None

6.0 REFERENCES

NOTE

One or more of the following symbols may be used in this procedure:

§ Indicates a Regulatory commitment made by Technical Specifications, Condition of License, Audit, LER, Bulletin, Operating Experience, etc. and shall NOT be revised without Facility Review Group review and Plant General Manager approval.

¶ Indicates a management directive, vendor recommendation, plant practice or other non-regulatory commitment that should NOT be revised without consultation with the plant staff.

Ψ Indicates a step that requires a sign off on an attachment.

6.1 St. Lucie Plant Radiological Emergency Plan (E-Plan)

6.2 E-Plan Implementing Procedures (EPIP 00-13)

6.3 St. Lucie Plant Emergency Response Directory (ERD)

6.4 Florida Power & Light Company, St. Lucie Plant Recovery Plan

6.5 HPP-62, "Inspection and Maintenance of Respiratory Protection Equipment."

6.6 HPP-70, "Personnel Contamination Monitoring and Decontamination Procedure."

6.7 HPP-101, "Identification and Reporting of Radiological Events."

6.8 Health Physics Procedures, HP-200 Series

6.9 COP-06.06, "Guidelines for Collecting Post Accident Samples."

6.10 COP-06.11, "Establishing Remote Laboratory for Analyses of Accident Samples."

6.11 OP 1-0010125, "Schedule of Periodic Tests, Checks and Calibrations."

6.12 OP 2-0010125, "Schedule of Periodic Tests, Checks and Calibrations."

6.13 NRC Generic Letter 91-14, Emergency Telecommunications.

6.14 NRC Administrative Letter 94-04, Change of the NRC Operations Center Commercial Telephone and Facsimile Numbers.

6.15 OSHA 1926.404(b)(iii), Assured Equipment Grounding Conductor Program.

6.16 ¶1 PMAI number PM 97-04-006, EPIP Updates in HP EKits

6.17 ¶2 PMAI number PM 97-04-147, Shaving Supplies in HP EKits

6.18 ¶3 PMAI number PM 97-07-142, First-aid Kit in Site Assembly Station

6.19 ¶4 PMAI number PM 99-09-076, Fax and Copy Machine Tests

6.20 Calibration, Operation, and Operational Check of the Eberline Models AMS-2 and AMS-3 Air Monitoring Systems

6.21 ¶5 PMAI number PM02-04-034, Seals on Kits

/R41

7.0 RECORDS REQUIRED

7.1 Inventory sheets for each of the locations listed in 8.2 below (HP-90) - Attachments #1-7 shall be maintained in the plant files in accordance with QI-17-PSL-1 "Quality Assurance Records."

8.0 INSTRUCTIONS

8.1 Prior to conducting inventories of the kits:

1. Ascertain the current revision number of Emergency Planning documents.

   A. Contact the Nuclear Records Vault for 1, 2 and 3 below.

   B. Access the Controlled Electronic Procedure Index (in Lotus Notes) for all other documents (4-10 below).

> **NOTE**
> Kits designating that full sets of EPIPs and / or HP-200 series procedures are available, shall contain all the procedures in Table 1 and / or Table 2, as applicable.

1. St. Lucie Plant Radiological Emergency Plan (E-Plan)
2. St. Lucie Plant Emergency Response Directory (ERD)
3. Florida Power & Light Company, St. Lucie Plant Recovery Plan
4. EPIPs (see Table 1)
5. HP-200 Series (see Table 2)
6. HPP-70, "Personnel Contamination Monitoring," (Form HPP-70.1, Personnel Skin and Clothing Contamination Report)
7. HP-90, "Emergency Equipment"
8. HPP-101, "Identification and Reporting of Radiological Events," (Form HPP-101.1, Radiological Event Report)
9. COP-06.06, "Guidelines for Collecting Post Accident Samples"
10. COP-06.11, "Establishing Remote Laboratory for Analyses of Accident Samples."

The procedure distribution is listed on the inventory sheet.

2. Contact Emergency Planning to determine if any procedure revisions are available to be added to the emergency kits.

3. Contact Land Utilization to arrange for access to the Emergency Operations Facility (EOF), if necessary (i.e., not on the access list).

8.2 Inventory all items, verifying that the proper supplies are present. Use the appropriate inventory list.

1. Attachment 1 - Unit 1 Control Room / Technical Support Center Emergency Kit
2. Attachment 2 - Unit 2 Control Room Emergency Kit
3. Attachment 3 - Operational Support Center Emergency Kit
4. Attachment 4 - Site Assembly Station Emergency Kit
5. Attachment 5 - Field Monitoring Team Emergency Kit (complete 1 attachment for each kit)
6. Attachment 6 - Emergency Operations Facility Emergency Kit
7. Attachment 7 - Hospital Emergency Kit (complete one attachment for each hospital)

8.3 Any equipment which is out of calibration, fails the operability check, or appears to be unusable shall be replaced.

1. An asterisk designates a major piece of equipment. If a major piece of equipment is found to be deficient, the equipment must be replaced as follows:

   A. For Emergency Kits located within the Owner Controlled Area - within 24 hours.

   B. For Emergency Kits located outside the Owner Controlled Area - within 48 hours.

8.4 Quantities of non-asterisked inventory items may be exceeded, but shall not be less than that indicated on the attachment. An item found to be in a quantity less than that listed on the attachment shall be replenished by the time of the next inventory.

8.5 Perform operability checks of instruments in accordance with Appendix A, Operability Instructions.

8.6 Verify that dosimetry is current.

> **NOTE**
> Not all dosimetry is required in each Emergency Kit.

1. Direct Reading Dosimeter (DRD). DRDs are calibrated every six (6) months.
   - **A.** 0-500 mR
   - **B.** 0-5 R
   - **C.** 0-20 R
   - **D.** 0-100 R
2. Electronic Personal Dosimeter (EPD)
   - **A.** Alarm Setpoint, Dose: 4.5 R
   - **B.** Alarm Setpoint, Dose Rate: 10 R/hr
3. Thermoluminescent Dosimeter (TLD). TLDs are changed out in the kits on a semi-annual basis.
   - **A.** Whole Body
   - **B.** Extremity
   - **C.** Finger Rings

8.7 Verify that respirators are visually inspected as prescribed in HPP-62, Inspection and Maintenance of Respiratory Protection Equipment.

8.8 Verify that silver zeolite cartridges are current. Inform the Health Physics Technical Supervisor when the posted shelf life of the cartridges is within three (3) months of expiring.

8.9 Extension cords stored in the Emergency Kits shall be tested or replaced with tested extension cords after use.

1. A testing device is available in each kit which has extension cords.
2. Record test results or cord replacement in the "Remarks" section (e.g., all extension cords passed; one extension cord replacement due to test failure).

NOTE

The portable count rate instruments (friskers) and the dual channel analyzers are exempt from this instruction because they require re-chargeable batteries. Spare instruments are available as backups should one of these instruments (friskers) experience battery failure.

8.10 Verify that there is a sufficient supply of spare batteries available for all instruments and equipment requiring batteries.

1. Replace any battery or package of batteries which is approaching (prior to the end of the current quarter) or exceeds its expiration date or shelf life.

2. Every first and third quarter, inspect batteries in all instruments and equipment for signs of deterioration or leaks and replace, as necessary.

8.11 Verify that the procedures contained in the kit are the current revisions, if not, replace procedure with a **controlled copy** of the current revision.

8.12 Perform monthly test of communications equipment with state and local governments and the NRC in accordance with Appendix B, Instructions for Testing Emergency Communications Equipment.

8.13 Complete the inventory form as follows:

1. Indicate the results of the operability checks of the kit instruments by marking "Pass" or "Fail" on the appropriate attachment. Record any discrepancy in the "Remarks" section.

2. Dosimetry, dress-out supplies, and other equipment should be evaluated against the "Minimum Quantity" requirements as listed on the inventory form. Record the "As Found" condition as either "Pass" or "Fail". Indicate any discrepancy in the "Remarks" section.

3. Review all documents, procedures, and logs and show whether they are "Available" or "Unavailable". Record any discrepancy in the "Remarks" section.

4. Indicate the results of the communications tests by marking "Pass" or "Fail" on the appropriate attachment. Record any discrepancy in the "Remarks" section.

5. Upon completion of the inventory, close and lock the kit and sign and date the attachment in the blanks labeled "Inventoried by" and "Date".

8.13 Complete the inventory form as follows: (continued)

6. After completing a satisfactory inventory of the Field Monitoring Team Kits, Attachment 5, install a seal on each kit in such a manner that the kit cannot be opened without breaking the seal.

/R41

8.14 A copy of each completed inventory (attachment) is required.

1. Conspicuously post the copy of the inventory on the front of the Emergency Kit for ready reference by the next user of the kit.

2. Provide the original to an HP Supervisor for review.

8.15 An HP Supervisor shall review all completed inventories.

1. A PMAI is to be issued by the reviewing HP Supervisor for each item which is not addressed in 8.3 or 8.4 above and can not be resolved within five (5) working days of identification.

The PMAI number is to be recorded in the "Remarks" section of the affected attachment.

2. Sign and date the reviewed inventories in the "Reviewed by" and "Date" blanks on each attachment.

3. A copy of each reviewed attachment is to be forwarded to Emergency Planning.

4. The originals of all reviewed attachments are to be sent to the Nuclear Records Vault.

TABLE 1
EMERGENCY PLAN IMPLEMENTING PROCEDURES
(Page 1 of 1)

EPIP-00	Discovery & Identification of an Emergency Condition (Including Chemical, Fire and Natural Emergencies)
EPIP-01	Classification of Emergencies
EPIP-02	Duties and Responsibilities of the Emergency Coordinator
EPIP-03	Emergency Response Organization Notification / Staff Augmentation
EPIP-04	Activation and Operation of the Technical Support Center
EPIP-05	Activation and Operation of the Operational Support Center
EPIP-06	Activation and Operation of the Emergency Operations Facility
EPIP-07	Conduct of Evacuations / Assembly
EPIP-08	Off-site Notifications and Protective Action Recommendations
EPIP-09	Off-site Dose Calculations
EPIP-10	Off-site Radiological Monitoring
EPIP-11	Core Damage Assessment
EPIP-12	Maintaining Emergency Preparedness - Radiological Emergency Plan Training
EPIP-13	Maintaining Emergency Preparedness - Emergency Exercises, Drills, Tests and Evaluations

TABLE 2
HP-200 SERIES PROCEDURES
(Page 1 of 1)

HP-200	Health Physics Emergency Organization
HP-201	Emergency Personnel Exposure Control
HP-202	Environmental Monitoring During Emergencies
HP-203	Personnel Access Control During Emergencies
HP-204	In-Plant Radiation and Contamination Surveys During Emergencies
HP-205	Emergency In-Plant Air Sampling
HP-206	Analysis of Emergency In-Plant Air Samples
HP-207	Monitoring Evacuated Personnel During Emergencies
HP-208	Personnel Decontamination During Emergencies

ATTACHMENT 1
UNIT 1 CONTROL ROOM / TECHNICAL SUPPORT CENTER EMERGENCY KIT
(Page 1 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

	INSTRUMENTS	Pass	Fail
*	1. Portable Dose Rate Instrument (≥ 5 R/hr)		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	2. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	3. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	4. Dual Channel Analyzer or Single Channel Analyzer		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
	5. Continuous Air Monitor		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		

	DOSIMETRY		Minimum Quantity	As** Found
*	1. TLD, Whole Body	Semi-annual:	53	
*	2. TLD, Finger Ring	Semi-annual:	16	
*	3. TLD, Multibadge	Semi-annual:	50	
*	4. DRD, 0-500 mR	Calib. Due Date:	50	
*	5. DRD, 0-5R	Calib. Due Date:	10	
*	6. DRD, 0-100R	Calib. Due Date:	5	
***	7. Electronic Dosimeter	Calib. Due Date:	10	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks
*** Alarm Setpoint: Dose - 4.5R; Dose Rate 10R/hr.

ATTACHMENT 1
UNIT 1 CONTROL ROOM / TECHNICAL SUPPORT CENTER EMERGENCY KIT
(Page 2 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

DRESS-OUT SUPPLIES	Minimum Quantity	As** Found
1. Coveralls	20	
2. Cloth Hood	20	
3. Cotton Liners (pr.)	20	
4. Rubber Gloves (pr.)	20	
5. Surgical Gloves (pr.)	20	
6. Rubber Shoe Covers (pr.)	20	
7. Plastic Booties (pr.)	20	
8. T-Cuts (pr.)	20	
9. Whirl-Pack	50	
10. Tape (2" roll)	5	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 1
UNIT 1 CONTROL ROOM / TECHNICAL SUPPORT CENTER EMERGENCY KIT
(Page 3 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

	OTHER EQUIPMENT	Minimum Quantity	As** Found
*	1. SCBA	5	
*	2. Air Sampler Model No.: Serial No.: Calib. Due Date:	1	
	3. Silver Zeolite Cartridges Exp. Date:	5	
	4. Particulate Filters	6	
	5. Whirl-Packs (labeled Air Sample Data)	6	
	6. Full-Face Respirator (perform visual inspection, update card)	8	
	7. Charcoal Canister Exp. Date:	16	
	8. Dosimeter Charger	2	
	9. Contamination Smears and Envelopes / Folders	500	
	10. Radiation Barrier Tape / Rope / Ribbon	N/A	
	11. Radiation Sign and Assorted Inserts	5	
	12. Step-off Pads	10	
	13. Poly Bags (yellow)	10	
	14. Extension Cord (HD)	3	
	15. Extension Cord Adapter - White	3	
	16. Extension Cord Adapter - Red	3	
	17. Plastic Rainsuits	20	
	18. Batteries - complete set of replacement batteries, both type and number, available for all equipment requiring batteries; check shelf life.	N/A	
	19. Telephone Headset	1	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 1
UNIT 1 CONTROL ROOM / TECHNICAL SUPPORT CENTER EMERGENCY KIT
(Page 4 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

DOCUMENTS, PROCEDURES, LOGS	Avail.	Unavail.
1. PSL Emergency Plan (check for current revision)		
2. EPIPs (full set) (check for current revisions)		
3. Emergency Response Directory (check for current revision)		
4. HP-90 (check for current revision)		
5. HP-200 Series (full set) (check for current revisions)		
6. HP-206: Attachments 1, 2, 3 and Forms HP-206.1 and HP-206.2 (10 copies each) (check for current revision)		
7. COP-06.06 (check for current revision)		
8. COP-06.11, "Establishing Remote Laboratory for Analyses of Accident Samples" (check for current revision)		
9. Radiation Exposure Summary Report		
10. Control Room Rad Survey Maps (10 copies)		
11. Laminated Floor Plan Maps with Index for Rad Survey (full set)		
12. Field Monitoring Maps		

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

Remarks:_____

_____

Inventoried by:_____ Reviewed by:_____

Date:_____ Date:_____

ATTACHMENT 2
UNIT 2 CONTROL ROOM EMERGENCY KIT
(Page 1 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

	INSTRUMENTS	Pass	Fail
*	1. Portable Dose Rate Instrument (≥ 5 R/hr)		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	2. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	3. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	4. Dual Channel Analyzer or Single Channel Analyzer		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		

	DOSIMETRY		Minimum Quantity	As** Found
*	1. TLD, Whole Body	Semi-annual:	10	
*	2. TLD, Finger Ring	Semi-annual:	12	
*	3. TLD, Multibadge	Semi-annual:	50	
*	4. DRD, 0-500 mR	Calib. Due Date:	10	
*	5. DRD, 0-5R	Calib. Due Date:	10	
*	6. DRD, 0-100R	Calib. Due Date:	5	
***	7. Electronic Dosimeter	Calib. Due Date:	10	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks
*** Alarm Setpoints: Dose - 4.5R; Dose Rate 10R/hr.

ATTACHMENT 2
UNIT 2 CONTROL ROOM EMERGENCY KIT
(Page 2 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

DRESS-OUT SUPPLIES	Minimum Quantity	As** Found
1. Coveralls	10	
2. Cloth Hood	10	
3. Cotton Liners (pr.)	10	
4. Rubber Gloves (pr.)	10	
5. Surgical Gloves (pr.)	10	
6. Rubber Shoe Covers (pr.)	10	
7. Plastic Booties (pr.)	10	
8. T-Cuts (pr.)	10	
9. Whirl-Pack	50	
10. Tape (2" roll)	3	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 2
UNIT 2 CONTROL ROOM EMERGENCY KIT
(Page 3 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

	OTHER EQUIPMENT	Minimum Quantity	As** Found
*	1. SCBA	5	
*	2. Air Sampler Model No.: Serial No.: Calib. Due Date:	1	
	3. Silver Zeolite Cartridges Exp. Date:	5	
	4. Particulate Filters	6	
	5. Whirl-Packs (labeled Air Sample Data)	6	
	6 Full-Face Respirator (perform visual inspection, update card)	8	
	7 Charcoal Canister Exp. Date:	16	
	8 Dosimeter Charger	1	
	9 Contamination Smears and Envelopes / Folders	500	
	10. Radiation Barrier Tape / Rope / Ribbon	N/A	
	11. Radiation Sign and Assorted Inserts	5	
	12. Step-off Pads	10	
	13. Poly Bags (yellow)	10	
	14. Extension Cord (HD)	N/A	
	15. Extension Cord Adapter - White	3	
	16. Extension Cord Adapter - Red	3	
	17. Plastic Rainsuits	10	
	18. Batteries - complete set of replacement batteries, both type and number, available for all equipment requiring batteries; check shelf life	N/A	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 2
UNIT 2 CONTROL ROOM EMERGENCY KIT
(Page 4 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

DOCUMENTS, PROCEDURES, LOGS	Avail.	Unavail.
1. PSL Emergency Plan (check for current revision)		
2. EPIPs (full set) (check for current revisions)		
3. Emergency Response Directory (check for current revision)		
4. HP-200 Series (full set) (check for current revisions)		
5. HP-206: Attachments 1, 2, 3 and Forms HP-206.1 and HP-206.2 (10 copies each) (check for current revision)		
6. Radiation Exposure Summary Report		
7. Control Room Rad Survey Maps (10 copies)		

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

Remarks:_____

_____

Inventoried by:_____ Reviewed by:_____

Date:_____ Date:_____

ATTACHMENT 3
OPERATIONAL SUPPORT CENTER EMERGENCY KIT
(Page 1 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

	INSTRUMENTS	Pass	Fail
*	1. Portable Dose Rate Instrument (≥ 5 R/hr)		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	2. Portable Dose Rate Instrument (≥5 R/hr)		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	3. Portable Dose Rate Instrument (≥5 R/hr)		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	4. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	5. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	6. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	7. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	8. Dual Channel Analyzer or Single Channel Analyzer		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	9. Scaler and Detector		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 3
OPERATIONAL SUPPORT CENTER EMERGENCY KIT
(Page 2 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

	DOSIMETRY	Minimum Quantity	As** Found
*	1. TLD, Whole Body Semi-annual:	46	
*	2. TLD, Finger Ring Semi-annual:	22	
*	3. TLD, Multibadge Semi-annual:	50	
*	4. DRD, 0-500 mR Calib. Due Date:	40	
*	5. DRD, 0-5R Calib. Due Date:	20	
*	6. DRD, 0-100R Calib. Due Date:	10	
	DRESS-OUT SUPPLIES		
	1. Coveralls	50	
	2. Cloth Hood	50	
	3. Cotton Liners (pr.)	50	
	4. Rubber Gloves (pr.)	50	
	5. Surgical Gloves (pr.)	50	
	6. Rubber Shoe Covers (pr.)	50	
	7. Plastic Booties (pr.)	50	
	8. T-Cuts (pr.)	50	
	9. Whirl-Pack	100	
	10. Tape (2" roll)	10	
¶2	11. Shaving Cream (can)	1	
¶2	12. Disposable Razors	6	
	OTHER EQUIPMENT		
*	1. SCBA	2	
*	2. Air Sampler Model No.: Serial No.: Calib. Due Date:	1	
	3. Silver Zeolite Cartridges Exp. Date:	20	
	4. Particulate Filters	20	
	5. Whirl-Packs (labeled Air Sample Data)	20	
	6. Full-Face Respirator (perform visual inspection, update card)	12	
	7. Charcoal Canister Exp. Date:	24	
	8. Dosimeter Charger (electric)	1	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 3
OPERATIONAL SUPPORT CENTER EMERGENCY KIT
(Page 3 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

OTHER EQUIPMENT (continued)	Minimum Quantity	As** Found
9. Dosimeter Charger (battery)	2	
10. Contamination Smears and Envelopes / Folders	1500	
11. Radiation Barrier Tape / Rope / Ribbon	N/A	
12. Radiation Sign and Assorted Inserts	20	
13. Step-off Pads	20	
14. Poly Bags (yellow)	50	
15. Portable Fluorescent Lights	3	
16. Flashlights	24	
17. Rope (manila)	N/A	
18. Insect Repellent (spray can)	10	
19. Decontamination Agent	1	
20. Bull Horn	1	
21. Plastic Rainsuits	50	
22. Clipboards (regular)	5	
23. Lined Tablets	10	
24. Note Pads	10	
25. Felt-Tip Pens (black)	24	
26. Ink Pens (black)	24	
27. Pencils	24	
28. Scissors	3	
29. Calculator	1	
30. Stapler with staples	1	
31. Bolt Cutters	1	
32. Batteries - Complete set of replacement batteries, both type and number, available for all equipment requiring batteries; check shelf life.	N/A	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 3
OPERATIONAL SUPPORT CENTER EMERGENCY KIT
(Page 4 of 4)

NOTE
Inspect all batteries during first and third quarter inventories.

DOCUMENTS, PROCEDURES, LOGS		Avail.	Unavail.
1.	EPIPs (full set) (check for current revision)		
2.	Emergency Response Directory (5 copies) (check for current revision)		
3.	HPP-70 (check for current revision)		
4.	HP-90 (check for current revision)		
5.	HP-200 (full set) (check for current revision)		
6.	COP-06.06 (check for current revision)		
7.	COP-06.11, "Establishing Remote Laboratory for Analyses of Accident Samples" (check for current revision)		
8.	Radiation Exposure Summary Report		
9.	HP Blank Survey Forms (Unit 1 and Unit 2)		
10.	Field Monitoring Map		
11.	Assembly Area Kit		
	Emergency Response Directory (1 copy) (check for current revision)		
	HP-207 (check for current revision)		
	HP-208 (check for current revision)		
12.	Decon Log Notebook including:		
	Form HP207.1 (25 copies) (check for current revision)		
	Form HPP-70.1 (25 copies) (check for current revision)		
COMMUNICATIONS TEST		Pass	Fail
1.	Videolink Check		
	Perform check in accordance with Appendix B		

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

Remarks:_____

_____

Inventoried by:_____ Reviewed by:_____

Date:_____ Date:_____

ATTACHMENT 4
SITE ASSEMBLY STATION EMERGENCY KIT
(Page 1 of 3)

NOTE
Inspect all batteries during first and third quarter inventories.

	INSTRUMENTS	Pass	Fail
*	1. Portable Count Rate (Frisker) Instrument (Decon)		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 4
SITE ASSEMBLY STATION EMERGENCY KIT
(Page 2 of 3)

NOTE
Inspect all batteries during first and third quarter inventories.

DRESS-OUT SUPPLIES	Minimum Quantity	As** Found
1. Coveralls	10	
2. Cloth Hood	10	
3. Cotton Liners (pr.)	10	
4. Rubber Gloves (pr.)	10	
5. Surgical Gloves (pr.)	10	
6. Rubber Shoe Covers (pr.)	10	
7. Plastic Booties (pr.)	10	
8. T-Cuts (pr.)	10	
9. Whirl-Pack	50	
10. Tape (2" roll)	3	
OTHER EQUIPMENT		
1. Paper PCs	10	
2. Radiation Barrier (Tape / Rope / Ribbon)	N/A	
3. Radiation Sign and Assorted Inserts	3	
4. Step-off Pads	10	
5. Poly Bags (yellow)	50	
6. 5 Gallon Jug of Water	1	
7. Waterless Hand Cleaner (can)	2	
8. Hand Rags	50	
9. Towels	6	
10. Shaving Cream (can)	1	
11. Disposable Razors	6	
12. First Aid Kit	1	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 4
SITE ASSEMBLY STATION EMERGENCY KIT
(Page 3 of 3)

NOTE
Inspect all batteries during first and third quarter inventories.

DOCUMENTS, PROCEDURES, LOGS	Avail.	Unavail.
1. Emergency Response Directory (check for current revision)		
2. HP-200 Series (full set) (check for current revision)		
3. Notebook		
4. Decon Log Clipboard with:		
Form HP 207.1 (25 copies) (check for current revision		
5. Decon Log Clipboard with:		
Form HPP-70.1 (25 copies) (check for current revision)		
COMMUNICATIONS TEST	**Pass**	**Fail**
1. Wall Phone		
Perform communications test in accordance with Appendix B		

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

Remarks:_____

_____

Inventoried by:_____ Reviewed by:_____

Date:_____ Date:_____

ATTACHMENT 5
FIELD MONITORING TEAM EMERGENCY KIT
(Page 1 of 2)

NOTE
Inspect all batteries during first and third quarter inventories.

	INSTRUMENTS	Pass	Fail
*	1. Portable Dose Rate Instrument (≥ 5 R/hr)		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	2. Dual Channel Analyzer or Single Channel Analyzer		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	3. Portable Count Rate (Frisker) Instrument (Field Team)		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		

	DOSIMETRY	Minimum Quantity	As** Found
*	1. TLD, Whole Body Semi-annual:	2	
*	2. EPD *** Calib. Due Date:	2	
*	3. DRD, 0-5 R Calib. Due Date:	2	

	OTHER EQUIPMENT		
*	1. Air Sampler (auto battery-powered)	1	
	Model No.: Serial No.: Calib. Due Date:		
	2. Silver Zeolite Cartridges Exp. Date:	6	
	3. Particulate Filters	6	
	4. Whirl-Packs (labeled "Air Sample Data")	6	
	5. Surgical Gloves (pr.)	6	
	6. Portable Radio	1	
	7. Power Cord with Cigarette-Lighter Plug	1	
	8. DC Power Receptacle with Battery Clips	1	
	9. Microphone with Cable	1	
	10. Magnetic-Mount Antenna	1	
	11. Full Face Respirator (perform visual inspection, update card)	2	
	12. Charcoal Canister Exp. Date:	2	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks
*** Alarm setpoints: Dose - 4.5R, Dose Rate 10R/hr.

ATTACHMENT 5
FIELD MONITORING TEAM EMERGENCY KIT
(Page 2 of 2)

NOTE
Inspect all batteries during first and third quarter inventories.

OTHER EQUIPMENT (continued)		Minimum Quantity	As** Found
13.	Stopwatch	1	
14.	Calculator	1	
15.	Dosimeter Charger	1	
16.	Tweezers	1	
17.	Flashlight	1	
18.	Batteries - Complete set of replacement batteries, both type and number, available for all equipment requiring batteries; check shelf life.	N/A	
DOCUMENTS, PROCEDURES, LOGS		Avail.	Unavail.
1.	Emergency Response Directory (check for current revision)		
2	HP-202 (check for current revision)		
3	(Form) Table 1 of HP-202 (2 copies) (check for current revision)		
4	Form HP-202.1 (6 copies) (check for current revision)		
5	Field Monitoring Log		
6.	Field Monitoring Maps		

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

Remarks:_____

_____

Inventoried by:_____ Reviewed by:_____

Date:_____ Date:_____

ATTACHMENT 6
EMERGENCY OPERATIONS FACILITY EMERGENCY KIT
(Page 1 of 3)

NOTE
Inspect all batteries during first and third quarter inventories.

	INSTRUMENTS	Pass	Fail
*	1. Portable Dose Rate Instrument (≥ 5 R/hr)		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	2. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	3. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		

	DOSIMETRY	Minimum Quantity	As** Found
*	1. TLD, Whole Body Semi-annual:	6	
*	2. DRD, 0-500 mR Calib. Due Date:	10	
*	3. DRD, 0-5 R Calib. Due Date:	5	
	DRESS-OUT SUPPLIES		
	1. Coveralls	20	
	2. Cloth Hood	20	
	3. Cotton Liners (pr.)	20	
	4. Rubber Gloves (pr.)	20	
	5. Surgical Gloves (pr.)	20	
	6. Rubber Shoe Covers (pr.)	20	
	7. Plastic Booties (pr.)	20	
	8. T-Cuts (pr.)	20	
	9. Whirl-Pack	50	
	10. Tape (2" roll)	5	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 6
EMERGENCY OPERATIONS FACILITY EMERGENCY KIT
(Page 2 of 3)

NOTE
Inspect all batteries during first and third quarter inventories.

	OTHER EQUIPMENT	Minimum Quantity	As** Found
1.	Full Face Respirator (perform visual inspection, update card)	6	
2.	Charcoal Canister Exp. Date:	12	
3.	Dosimeter Charger (electric)	1	
4.	Dosimeter Charger (battery)	1	
5.	Silver Zeolite Cartridges Exp. Date:	50	
6.	Contamination Smears and Envelopes / Folders	500	
7.	Radiation Barrier (Tape / Rope / Ribbon)	N/A	
8.	Radiation Sign and Assorted Inserts	10	
9.	Step-off Pads	10	
10.	Poly Bags (yellow)	10	
11.	Plastic Rainsuits	20	
12.	Batteries - Complete set of replacement batteries, both type and number, available for all equipment requiring batteries; check shelf life.	N/A	
	DOCUMENTS, PROCEDURES, LOGS	Avail.	Unavail.
1.	PSL Emergency Plan (check for current revision)		
2.	EPIPs (full set) (check for current revision)		
3.	Emergency Response Directory (check for current revision)		
4.	Florida Power & Light Company St. Lucie Plant Recovery Plan		
5.	HP-90 (check for current revision)		
6.	HP-200 Series (full set) (check for current revision)		
7.	COP-06.06 (check for current revision)		
8.	COP-06.11, "Establishing Remote Laboratory for Analyses of Accident Samples" (check for current revision)		
	COMMUNICATIONS TEST	Pass	Fail
1.	NRC Emergency Notification System (ENS)		
	Perform communications test in accordance with Appendix B		
2.	NRC Health Physics Network (HPN)		
	Perform communications test in accordance with Appendix B		
3.	NRC Reactor Safety Counterpart Link (RSCL)		
	Perform communications test in accordance with Appendix B.		

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 6
EMERGENCY OPERATIONS FACILITY EMERGENCY KIT
(Page 3 of 3)

NOTE
Inspect all batteries during first and third quarter inventories.

		COMMUNICATIONS TEST - EMERGENCY OPERATIONS FACILITY (EOF) (continued)	Pass	Fail
	4.	NRC Protective Measures Counterpart Link (PMCL)		
		Perform communications test in accordance with Appendix B.		
	5.	NRC Management Counterpart Link (MCL)		
		Perform communications test in accordance with Appendix B.		
	6.	NRC Local Area Network (LAN)		
		Perform communications test in accordance with Appendix B		
	7.	Local Government Radio (LGR) Channel 2 (39.18 MHz)		
		Perform communications test in accordance with Appendix B; ☐ Unit 1, ☐ Unit 2, ☐ TSC (All 3 ok to pass)		
	8.	Local Government Radio (LGR) Channel 1 (39.10 MHz)		
		Perform communications test in accordance with Appendix B; ☐ Unit 1, ☐ Unit 2, ☐ TSC (All 3 ok to pass)		
	9.	Spectra Radio, HP Offsite Channel		
		Perform communications test in accordance with Appendix B		
	10.	State Warning Point (SWP) Hot Ring Down Phone (HRD)		
		Perform communications test in accordance with Appendix B		
	11.	Videolink check		
		Perform check in accordance with Appendix B		
¶4	12.	Test fax machines in rooms 102, 108 and 130 (send fax to EP at ext. 7500). Send using form similar to Appendix C.		
¶4	13.	Test copy machines in rooms 102 and 131. Run copy using form similar to Appendix D.		

/R41

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

Remarks:_____

_____

Inventoried by:_____ Reviewed by:_____

Date:_____ Date:_____

ATTACHMENT 7
HOSPITAL EMERGENCY KIT
(Page 1 of 2)

NOTE
Inspect all batteries during first and third quarter inventories

	INSTRUMENTS	Pass	Fail
*	1. Portable Dose Rate Instrument (≥ 5 R/hr)		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	2. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		
*	3. Portable Count Rate (Frisker) Instrument		
	Model No.: Serial No.: Calib. Due Date:		
	Perform operability check in accordance with Appendix A		

	DOSIMETRY	Minimum Quantity	As** Found
*	1. TLD, Whole Body Semi-annual:	12	
	2. DRD, 0-20 R Calib. Due Date:	5	
*	3. DRD, 0-500 mR Calib. Due Date:	12	

	OTHER EQUIPMENT		
	1. Dosimeter Charger	1	
	2. Contamination Smears and Envelopes / Folders	500	
	3. Radiation Barrier Tape / Rope / Ribbon	N/A	
	4. Radiation Sign and Assorted Inserts	5	
	5. Step-off Pads	10	
	6. Poly Bags (yellow)	20	
	7. Herculite (may be precut)	N/A	
	8. Decontamination Table and Accessories	1	
	9. Tape (2" roll)	5	
	10. Radioactive Material Tags	25	

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

ATTACHMENT 7
HOSPITAL EMERGENCY KIT
(Page 2 of 2)

NOTE
Inspect all batteries during first and third quarter inventories.

OTHER EQUIPMENT (continued)	Minimum Quantity	As** Found
11. Lined Tablets	2	
12. Note Pads	2	
13. Ink Pens (black)	12	
14. Batteries - Complete set of replacement batteries, both type and number, available for all equipment requiring batteries; check shelf life.	N/A	
DOCUMENTS, PROCEDURES, LOGS	**Avail.**	**Unavail.**
1. Emergency Response Directory (check for current revision)		
2. HPP-70 (check for current revision)		
3. HPP-101 (check for current revision)		
4. HP-207 (check for current revision)		
5. HP-208 (check for current revision)		
6. Form HPP-101.1 (5 copies) (check for current revision)		
7. Form HPP-70.1 (5 copies) (check for current revision)		

* Major Equipment
** Codes: P=Pass, F=Fail, R=See Remarks

Remarks:_____

_____

Inventoried by:_____ Reviewed by:_____

Date:_____ Date:_____

APPENDIX A
OPERABILITY INSTRUCTIONS
(Page 1 of 8)

1. Portable Dose Rate Instrument - Check calibration sticker, battery test and response to supplied check source.

> **NOTE**
> Kit check sources should not be stored near the kit TLDs

2. Portable Count Rate Instrument - Check calibration sticker, battery test (unplug line cord) and response to supplied check source.

3. Battery and Operational Checks of the Ludlum Model 2218 and Ludlum Model 2200.

> **NOTE**
> - Should it be necessary to use Channel 2 of the Ludlum Model 2218, items contained within parentheses are settings to be used for Channel 2.
> - A layout of the Ludlum Model 2218 is provided in Figure 1 to this Appendix.
> - Steps 3.1 through 3.20 provide instructions for the Ludlum Model 2218.
> - Steps 3.21 through 3.28.13 provide instructions for the Ludlum Model 2200.
> - A layout of the Ludlum Model 2200 is provided in Figure 2 of this Appendix.

Verify that the RECYCLE knob is OFF. The knob is labeled and located on the rear panel of the instrument.

APPENDIX A
OPERABILITY INSTRUCTIONS
(Page 2 of 8)

3. (continued)

3.1 Check the battery as follows:

NOTE
If an instrument fails the battery check, it can be used only if it is connected to AC power and therefore should be replaced with an instrument capable of passing this operability check.

1. Turn the POWER knob to "BAT".
2. Unplug the AC line cord.
3. Depress the BAT testbutton
4. Observe the condition below the RATE SCALE.
5. If battery condition is not within the acceptable BAT TEST range, plug in the AC line cord and turn the POWER knob to CHARGE. Attach a label to the instrument stating "Instrument is charging, started charge at _____ AM / PM on_____19____".
6. If the battery condition is acceptable, then continue with the steps below.

3.2 Set the STABILIZER toggle switch to OFF.

NOTE
Steps 3.3 through 3.15.4 are initially performed on Channel 1.

3.3 Ch1 (Ch2), set the ADD-OFF-SUBTRACT knob to ADD.

3.4 Ch2 (Ch1), set the ADD-OFF-SUBTRACT knob to OFF

3.5 Ch1 and Ch2, set the ON-BYPASS toggle switch to BYPASS.

3.6 Ch1 (Ch2), set the WINDOW and the THRESHOLD dials IAW (in accordance with) settings on the side of the 2218 cabinet.

3.7 Set the unused Channel's WINDOW and THRESHOLD dials to 10.0.

3.8 Ch1 (Ch2), set the IN-OUT toggle switch to IN.

APPENDIX A
OPERABILITY INSTRUCTIONS
(Page 3 of 8)

3. (continued)

3.9 Ch2 (Ch1), set the IN-OUT toggle switch to OUT.

3.10 Set the MINUTES knob to X1.

3.11 Set the LIVE-CLOCK toggle switch to LIVE.

3.12 Set the F-S (Fast-Slow) toggle switch to S.

3.13 Set the Ch1-Ch2-Scaler knob to SCALER.

3.14 Set the MINUTES thumbwheel to 01.

3.15 Perform a source check as follows:

1. Place the Ba-133 check source in the shield under the detector.
2. Depress the COUNT-RESET button to start counting.
3. When counting stops, compare the displayed counts with the acceptance range that is located on the side of the instrument.
4. If the displayed counts are within the acceptance range then go to step 3.17. If the displayed counts are not within the acceptance range then go to step 3.16.

3.16 High voltage (HV) adjustments are performed as follows:

1. Set the MINUTES knob to EXT.
2. Place the Ba-133 check source in the shield under the detector.
3. Depress the COUNT-RESET button to start counting.
4. Observe the COUNTS / MINUTE (Count Rate Meter) scale while making small adjustments in voltage to obtain the **maximum** count rate achievable.
5. Increase or decrease the voltage with the HV (High Voltage) dial.
6. Set the MINUTES knob to X1.

APPENDIX A
OPERABILITY INSTRUCTIONS
(Page 4 of 8)

3. 3.16 (continued)

7. Depress the COUNT-RESET button to start counting.

8. When counting stops, compare the displayed counts with the acceptance range that is located on the side of the instrument.

9. If the displayed counts are within the acceptance range then go to step 3.17. If the displayed counts are not within the acceptance range then repeat steps 3.3 through 3.15.4 using channel 2.

3.17 If the instrument successfully completed the operational response check, record the results on the appropriate Attachment.

3.18 If the instrument did not successfully complete the operational check, using channel 2:

1. Tag the instrument OUT OF SERVICE, give the reason.

2. Record the results in the appropriate Attachment.

3. Give the reason for failure in the Remarks section.

3.19 If the instrument successfully completed the operational response check using channel 2, record the results on the appropriate Attachment and label the instrument "use channel 2".

3.20 Turn the power knob to CHARGE.

3.21 For the Ludlum Model 2200 check the battery as follows:

NOTE
If an instrument fails the battery check, it can be used only if it is connected to AC power and successfully passes the operational check.

1. Turn the Power switch to BAT and unplug the AC line cord.

2. Rotate the RATE-HV-BAT selector to BAT. (A downscale reading indicates battery reversal).

APPENDIX A
OPERABILITY INSTRUCTIONS
(Page 5 of 8)

3. 3.21 (continued)

3. If the BAT meter indication falls within the BATT TEST zone on the Meter face, continue with the operational check.

4. If the BAT meter indication falls below the BATT TEST zone on the Meter face, replace the batteries and retest OR use on AC line power only.

3.22 Confirm Window, Threshold and HV (High Voltage) settings match the settings posted on the instrument with window "ON".

3.23 Set the F-S switch to F.

3.24 Rotate the RATE-HV-BAT selector RATE.

3.25 Set the MINUTES thumb wheel to 01.

3.26 Set the X0.1-X1-X10-EXT selector to X1.

3.27 Perform a source check as follows:

1. Place a Ba133 check source in the shield under the detector.

2. Press the COUNT button to start the counting.

3. When the counting stops, compare the displayed counts with the acceptance range values posted on the instrument.

4. If the displayed counts are within the acceptance range, the operability test is complete. If the displayed counts are not within the acceptance range, then go to Step 3.28.

3.28 High Voltage adjustments are performed as follows:

1. Set the MINUTES knob to EXT.

2. Place the Ba-133 check source in the shield under the detector.

3. Rotate the RANGE selector switch to the appropriate position (Based upon the expected one minute count).

APPENDIX A
OPERABILITY INSTRUCTIONS
(Page 6 of 8)

3. 3.28 (continued)

   4. Depress the COUNT button to start the count.

   5. Observe the COUNTS / MINUTE (Count Rate Meter) scale while making small adjustments in voltage to obtain the maximum count rate achievable within the acceptance range. DO NOT EXCEED 1200 volts.

   6. Increase or decrease the voltage with the HV (High Voltage) dial.

   7. Press the HOLD button.

   8. Set the MINUTE knob to X1.

   9. Press the COUNT button to start counting.

   10. When the counting stops, compare the displayed counts with the acceptance rate that is posted on the instrument.

   11. If the displayed counts are within the acceptance range, then DO NOT use the instrument.

   12. TAG the instrument OUT-OF-SERVICE, give the reason.

   13. Obtain a different L2200, if available, and perform an operability check.

4. Scaler and Detector - check the calibration sticker and response to supplied check source. This is a response check only; use the supplied kit check source used for dose rate instruments.

5. Portable Continuous Air Monitor - Monthly Check.

   1. Verify calibration sticker.

   2. Perform a functional check of the portable continuous air monitor as per the instructions in procedure HP13F, Calibration, Operation and Operational Check of the Eberline Models AMS-2 and AMS-3 Air Monitoring Systems.

APPENDIX A
OPERABILITY INSTRUCTIONS
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FIGURE 1
LUDLUM MODEL 2218

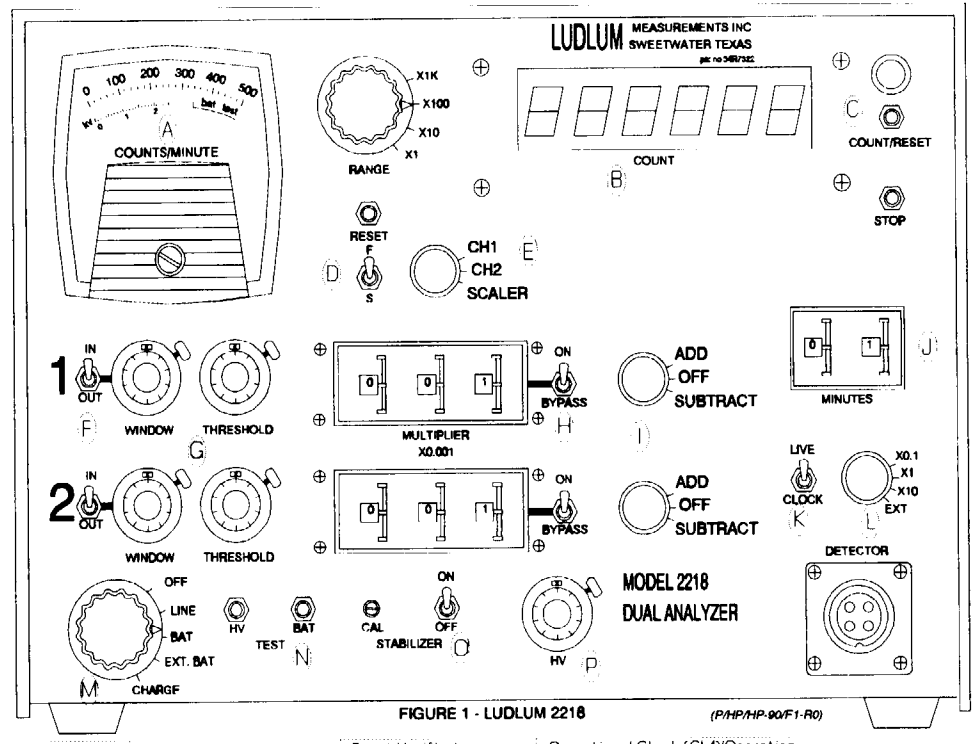


FIGURE 1 - LUDLUM 2218 (P/HP/HP-90/F1-R0)

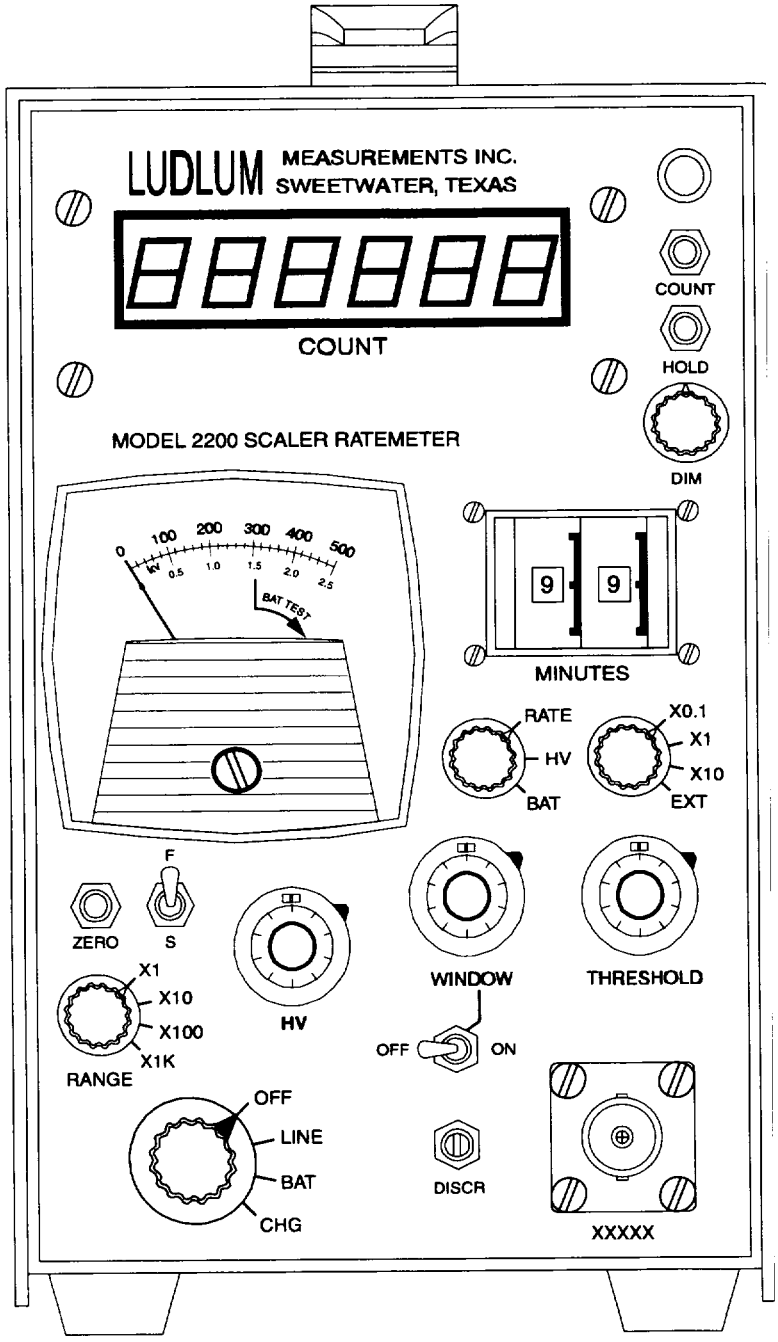
Battery Check
M - set to "BAT"
N - depress testbutton to check battery condition
A - Indicates battery condition on "BAT TEST" scale

HV Adjustment
L - set to "EXT"
C - depress button to start count
P - adjust voltage
A - observe maximum count rate

Count Verification
L - set to "X1"
C - depress button to start count
B - compare counts with acceptance range for the instrument

Operational Check (Ch1)/Operation
O - toggle to "OFF"
I - Ch1 to "ADD;" Ch2 to "OFF"
H - toggle to "BYPASS" for Ch1 and Ch2
G - Ch1 set WINDOW and THRESHOLD in accordance with settings on side of instrument, Ch2 set WINDOW and THRESHOLD to "10.0"
F - toggle to "IN" for Ch1 and "OUT" for Ch2
L - set to "X1"
K - toggle to "LIVE"
D - toggle to "S"
E - set to "SCALER"
J - set to "01" for check set to "05" for sample count
C - depress button to start count

APPENDIX A
OPERABILITY INSTRUCTIONS
(Page 8 of 8)
FIGURE 2
LUDLUM MODEL 2200



APPENDIX B
INSTRUCTIONS FOR TESTING EMERGENCY COMMUNICATIONS EQUIPMENT
(Page 1 of 14)

I. Control Rooms

A. Unit 1 Control Room emergency communications equipment is tested in accordance with plant Operating Procedure 1-0010125, "Schedule of Periodic Tests, Checks and Calibrations."

B. Unit 2 Control Room emergency communications equipment is tested in accordance with plant Operating Procedure 2-0010125, "Schedule of Periodic Tests, Checks and Calibrations."

II. Technical Support Center (TSC)

A. Technical Support Center emergency communications equipment is tested in accordance with EPIP-13, "Maintaining Emergency Preparedness - Emergency Exercises, Drills, Tests and Evaluations".

III. Operational Support Center (OSC)

A. "Videolink" - the "Videolink" is a closed circuit audio / visual communications link originating in the TSC with feeds to the OSC and the Emergency Operations Facility.

1. Instructions for Testing

a. Contact someone to go to the TSC to assist with the test of the "Videolink", if not previously arranged.

b. Turn on the television sets in both Rooms 2200 and 2300.

c. Set the channel selector to channel 9 and adjust volume.

d. Request the person in the TSC to provide a test broadcast.

e. Operability is verified if both the video picture and audio output are received on the television sets in both rooms. The picture must be clear and the audio free from static.

f. Record operability status on the inventory form (Attachment 3).

APPENDIX B
INSTRUCTIONS FOR TESTING EMERGENCY COMMUNICATIONS EQUIPMENT
(Page 2 of 14)

III. A. 1. (continued)

g. If the "Videolink" is inoperable (one or both television sets), notify Emergency Planning.

h. Following completion of the tests, turn off the television sets in rooms 2200 and 2300.

IV. Emergency Operations Facility (EOF)

Testing the NRC Emergency Telecommunications System (ETS).

A. Emergency Notification System (ENS)

1. Phone number: (700) 821-0005

2. 3 extensions

a. Room 101, NRC Table

b. Room 101, Recovery Manager Table

c. Room 114

3. Test

a. Check all three phones for dial tone by lifting the handset of the telephone and listening for a dial tone.

b. Using one of the phone extensions, call the NRC Operation Center (NRCOC) by lifting the handset and dialing the first number listed on the sticker located on the telephone cradle. It is necessary to dial a "1" first then the area code followed by the number. If the main number is busy, dial one of the alternate numbers.

c. After the NRCOC Duty Officer answers, inform him as follows: "This is the St. Lucie Emergency Operations Facility. I am conducting a check of the ENS, how do you receive me?" Ask the NRCOC Duty Officer if he wishes to call back, if so give him the telephone number and await the call.

APPENDIX B
INSTRUCTIONS FOR TESTING EMERGENCY COMMUNICATIONS EQUIPMENT
(Page 3 of 14)

IV. A. 3. (continued)

d. The test is passed if (1) all phones have dial tone, (2) the link is operable, and (3) the NRCOC is successfully contacted.

e. Record the test result on the inventory form (Attachment 6).

f. If the test is a failure, see information under Trouble Notification.

B. Health Physics Network (HPN)

1. Phone number: (700) 821-0003

2. 3 extensions

a. Room 101, NRC Table

b. Room 103 (2)

3. Go to step F, Test Procedure

C. Reactor Safety Counterpart Link (RSCL)

1. Phone number: (700) 821-0008

2. 2 extensions

a. Room 101, NRC Table

b. Room 114

3. Go to step F, Test Procedure

APPENDIX B
INSTRUCTIONS FOR TESTING EMERGENCY COMMUNICATIONS EQUIPMENT
(Page 4 of 14)

IV. (continued)

D. Protective Measures Counterpart Link (PMCL)

1. Phone number: (700) 821-0006

2. 2 extensions

a. Room 101, NRC Table

b. Room 114

3. Go to step F, Test Procedure.

E. Management Counterpart Link (MCL)

1. Phone number: (700) 821-0004

2. 2 extensions

a. Room 101, NRC Table

b. Room 114

3. Go to step F, Test Procedure

F. Test Procedure for HPN, RSCL, PMCL and MCL.

1. For each communication link, do the following:

a. Check all extensions for dial tone by lifting the handset of the telephone and listening for a dial tone.

b. Check link operability by using the phones on the NRC Table in Room 101. Each link must be able to call-out and receive a call to pass. Use the following call scheme:

HPN: Dial 700-821-0008

RSCL: Dial 700-821-0006

PMCL: Dial 700-821-0004

MCL: Dial 700-821-0003

APPENDIX B
INSTRUCTIONS FOR TESTING EMERGENCY COMMUNICATIONS EQUIPMENT
(Page 5 of 14)

IV. F. 1. (continued)

c. The test is passed if (1) all phones have dial tone and (2) the link is operable.

d. Record the test result on the inventory form (Attachment 6) for each communication link.

e. If the test is a failure, see information under Trouble Notification.

G. Local Area Network (LAN)

1. Phone number: (700) 821-0007.

2. 1 extension

a. Room 114

3. Test

a. Check the telephone line by plugging in a telephone, lifting the handset and listening for a dial tone.

H. Trouble Notification

1. If any aspect of the Emergency Telecommunications System is inoperable notify the NRC Operations Center in Rockville, Maryland by using a commercial telephone and dialing one of the following numbers:

1-(301) 951-0550

1-(301) 816-5100

2. Provide the following information (per IN 86-97):

a. Name of contact - Donna Calabrese or Rick Walker

b. Phone number of contact - Donna Calabrese (772) 467-7185

Rick Walker (772) 467-7170

APPENDIX B
INSTRUCTIONS FOR TESTING EMERGENCY COMMUNICATIONS EQUIPMENT
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IV. H. 2. (continued)

c. Location of contact - FPL / PSL
6501 S. Ocean Drive
Jensen Beach, Florida
34957

d. Any other information that would expedite repair, if known or as requested.

3. Notify Donna Calabrese or Rick Walker.

I. The Local Government Radio (LGR) has two low band radio frequencies utilized by St. Lucie County, Martin County, the St. Lucie Plant Control Rooms, the Technical Support Center and the Emergency Operations Facility. This is a backup to the State Hot Ring Down Phone Circuit.

There are two Motorola Command Series radios, one set to the primary channel, F2 (39.180 MHz, State channel 1) and the other set to the secondary channel, F1 (39.100 MHz, State channel 2). The test includes testing both channels with the Unit 1 Control Room, the Unit 2 Control Room, and the Technical Support Center.

CAUTION
To safeguard against potential damage resulting from lightning striking the EOF, power cords for the LGR and HP Off-Site Channel Radios are left disconnected when not in use. The phone cables to each radio are NOT to be disconnected.

1. Powering Up the Radio:

a. Plug the power cord from each radio unit into the wall outlets behind the table. The F2 light will illuminate.

b. Ensure the phone cable from each radio is plugged into one of the 3 phone jacks on the wall behind the table. All the jacks are wired for all 3 radios (LGR F1, LGR F2, and Department of Health (DOH)). (The DOH radio is NOT included in this test).

APPENDIX B
INSTRUCTIONS FOR TESTING EMERGENCY COMMUNICATIONS EQUIPMENT
(Page 7 of 14)

IV. I. (continued)

NOTE
Prior to commencing the testing with the Control Rooms, contact someone at the plant to go to the TSC to assist with testing of the TSC radios.

2. Instructions for Testing:

Control Rooms

a. Call one of the Plant St. Lucie Control Rooms and ask them to standby for testing the LGR.

b. Begin by testing the radio which is set to channel F2, the channel normally monitored by the Control Rooms.

c. The radio may be operated either by depressing the "transmit" button on the console or by removing the handset and depressing the "push-to-talk" bar in the handset. The "xmit" light is lit during transmission. Transmit the following: "St. Lucie Unit 1 or 2 (whichever you arranged to test with), this is St. Lucie EOF, come in please, over." Following acknowledgement from the Control Room, continue with: "St. Lucie Plant, this is the St. Lucie EOF conducting a communications test, how do you read, over?" If the Control Room confirms clear transmission and you can confirm clear reception of the response, then have the radio switched to channel F1, following termination of the message, and standby for a test. End the transmission with: "This is St. Lucie EOF, out." If transmission is unsuccessful, call the Control Room and have the radio switched to channel F1. Proceed to the next step.

APPENDIX B
INSTRUCTIONS FOR TESTING EMERGENCY COMMUNICATIONS EQUIPMENT
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IV. I. 2. (continued)

d. Now test the radio which is set to channel F1. Transmit the following: "St. Lucie Plant, this is St. Lucie EOF, come in please, over." Following acknowledgement from the Control Room, continue with: "St. Lucie Plant, this is the St. Lucie EOF conducting a communications test, how do you read, over?" If the Control Room confirms a clear transmission and you can confirm clear reception of the response, then end the transmission with: "This concludes this communications test, reset the radio to channel F2, this is St. Lucie EOF, KNGR 874 over and out." If transmission is unsuccessful, call the Control Room and have the radio reset to channel F2. Proceed to the next step.

e. Record operability status on the inventory form (Attachment 6).

f. If one or both channels of the system is / are inoperable, then notify Emergency Preparedness.

g. Repeat the test procedure in Steps c - f above with the other Control Room.

Technical Support Center

a. Contact someone at the plant to go to the TSC to assist with the radio test, if not previously arranged.

b. Begin by testing the radio which is set to channel F2, the channel the radio in the TSC is set on.

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IV. I. 2. (continued)

c. Transmit the following: "St. Lucie TSC, this is St. Lucie EOF, come in please, over." Following acknowledgement from the TSC, continue with: "St. Lucie TSC, this is the St. Lucie EOF conducting a communications test, how do you read, over?" If the TSC confirms clear transmission and you can confirm clear reception of the response, then have the radio switched to channel F1 (by depressing the "F1 / F2" button), following termination of the message, and standby for a test. End the transmission with: "This is St. Lucie EOF, out." If transmission is unsuccessful, call the TSC and have the radio switched to channel F1. Proceed to the next step.

d. Now test the radio which is set to channel F1. Transmit the following: "St. Lucie TSC, this is St. Lucie EOF, come in please, over." Following acknowledgement from the TSC, continue with: "St. Lucie TSC, this is St. Lucie EOF conducting a communications test, how do you read, over?" If the TSC confirms a clear transmission and you can confirm clear reception of the response, then end the transmission with: "This concludes this communications test, reset the radio to channel F2, this is St. Lucie EOF KNGR 874 over and out." If transmission is unsuccessful, call the TSC and have the radio reset to channel F2. Proceed to the next step.

e. Record operability status on the inventory form (Attachment 6).

f. If one or both channels of the system is / are inoperable, then notify Emergency Preparedness.

3. Powering Down the Radio:

a. Unplug both radios from the wall outlets.

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IV. (continued)

J. HP Off-site Channel is a unique 900 MHz channel (TX 939.9375 - RX 900.9375) for communications with the off-site Field Monitoring Teams. The radio is a Motorola Spectra which has been set up so that the HP Off-site Channel is the "home" channel, but it has also been programmed for other channels of the plant 900 MHz trunking system.

1. Powering Up the Radio:

   a. Plug the power cord into the wall outlet behind the table.

   b. Press the red button on the speaker box (Astron RS-12S) to the up position, button will illuminate.

   c. Depress the "pwr" button on the Spectra radio.

2. Instructions for Testing:

   a. Contact someone at the plant to go to the TSC to assist with the radio test, if not previously arranged.

   b. The home channel is "off-site," if this channel is not selected (on the LED), then depress the "sel" button until "off-site" shows in the display.

   c. Press the transmit side (with the lightning bolt) of the microphone base and announce: "St. Lucie TSC, this is the St. Lucie EOF, come in please, over." Following acknowledgement from the TSC, continue with: "St. Lucie TSC, this is the St. Lucie EOF conducting a communications test, how do you read?" If the TSC confirms clear transmission and you can confirm clear reception of the response, then end the transmission with: "This concludes this communications test, this is St. Lucie EOF, WMIF 540 over and out."

   d. Record operability status on the inventory form (Attachment 6).

   e. If the radio is inoperable, then notify Emergency Preparedness.

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INSTRUCTIONS FOR TESTING EMERGENCY COMMUNICATIONS EQUIPMENT
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IV. J. (continued)

3. Powering Down the Radio:

a. Depress the "pwr" button on the Spectra radio.

b. Press red button of the speaker box to the down position (light will extinguish).

c. Unplug the power cord from the wall outlet.

K. The State Warning Point (SWP) Hot Ring Down (HRD) circuit is a dedicated phone system linking the State agencies, St. Lucie County and Martin County with the Plant Control Rooms, Technical Support Center and the Emergency Operations Facility.

1. Instructions for Testing.

a. Go to the Division of Emergency Management's office Room 108, in the EOF and locate the phone labeled Hot Ring Down (HRD).

b. Pick up the handset and dial the State Warning Point (SWP) in Tallahassee. This is done by dialing 100. The State Warning Point Duty Officer will acknowledge by saying, "This is State Warning Point, go ahead." You in turn will announce "This is St. Lucie EOF, I am conducting a communications check, how do you receive me? The State will acknowledge. Request the State Warning Point to call you back on Station number 123.

c. Self test procedure for additional extensions.

(1) Conduct a self test on 2 extensions.

A. Extension 120 in the conference room

B. Extensions 122 and 124 in the bull pen

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IV. K. 1. c. (continued)

(2) To perform the self test, adjust the volume control to the mid-range position. Lift the handset and press the push to talk bar while speaking into the handset mouthpiece. You should hear yourself in the handset earpiece (this is called sidetone). Now locate the black button on the rear of the telephone next to the power connector. Activate the test mode by holding this button down while simultaneously depressing the push to talk bar and speaking into the handset mouthpiece. Voice should now be heard in the speaker.

Satisfactory completion of the self test is determined when the presence of sidetone is detected while pressing the push to talk bar and speaking into the handset, and when a loopback of the speaker's voice is heard in the loudspeaker while pressing the test switch located on the rear of the terminal. The self test is a complete audio loopback of the terminal's audio circuits up to, but not including, the line matching transformers. As such, this test is a good method to evaluate instrument performance.

d. Record operability status on the inventory form (Attachment 6).

e. If the system is inoperable, notify Emergency Preparedness.

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IV. (continued)

L. "Videolink" - the "Videolink" is a closed circuit audio / visual communications link originating in the TSC with feeds to the OSC and the EOF.

1. Instructions for Testing

a. Contact someone at the plant to go to the TSC to assist with the test of the "Videolink", if not previously arranged.

b. Obtain key #14 from the keybox in room 107. The key to the keybox is located on the wall next to the box.

c. Use key #14 to unlock room 132.

d. Turn on the master video switch located in the rack mount cabinet.

e. In the "Bullpen", room 101, turn on the two television sets using the remote controls (one for each television set) on the Recovery Manager's table.

f. Set the channel selector to channel 7 and adjust volume.

g. Request the person in the TSC to provide a test broadcast.

h. Operability is verified if both the video picture and the audio output are received on both television sets. The picture must be clear and the audio free from static.

i. Record operability status on the inventory form (Attachment 6).

j. If the "Videolink" is inoperable (one or both television sets), notify Emergency Planning.

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IV. L. 1. (continued)

k. Following the completion of the test:

1. Turn off both television sets in room 101.

2. Turn off the master video switch in room 132.

3. Lock room 132.

4. Return key #14 to the keybox.

V. Site Assembly Station

A. Conduct functional check of the Site Assembly Station (SAS) telephone located on the west wall.

1. Place a local call and request a call back to ensure that the phone works properly.

2. Record operability status on the inventory form (Attachment 4).

3. If the phone is inoperable, notify Emergency Planning.

APPENDIX C
FAX TEST FOR EOF MACHINES
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TO: EP DEPT

467-7500

THIS IS A TEST FROM:_____

DATE:____/____/____

APPENDIX D
COPIER TEST FOR EOF MACHINES
(Page 1 of 1)

TEST DATE:____/____/____

TEST PERFORMED BY:_____