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TO: ~~FLAIM\*LAUREL~~ B 08/23/2002  
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THE FOLLOWING CHANGES HAVE OCCURRED TO THE HARDCOPY  
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134 - HEALTH PHYSICS RADIOMAN: EMERGENCY PLAN  
POSITION SPECIFIC INSTRUCTION

REMOVE MANUAL TABLE OF CONTENTS DATE: 05/28/2002

ADD MANUAL TABLE OF CONTENTS DATE: 08/22/2002

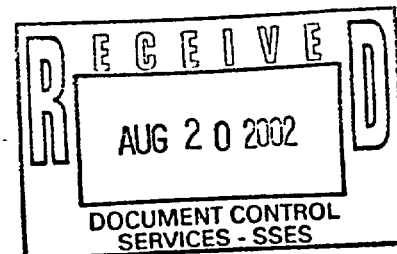
CATEGORY: PROCEDURES TYPE: EP  
ID: EP-PS-134  
ADD: PCAF 2002-1551 REV: N/A

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ELECTRONICALLY REVIEW THE APPROPRIATE DOCUMENTS AND  
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AX 45

# PROCEDURE CHANGE PROCESS FORM

1. PCAF NO. <u>2002-1551</u>	2. PAGE 1 OF <u>255</u>	3. PROC. NO. <u>EP-PS-134</u> REV. <u>0</u>
4. FORMS REVISED <u>C R 1</u> , - <u>R</u> , - <u>R</u> , - <u>R</u> , - <u>R</u> , - <u>R</u>		
5. PROCEDURE TITLE HEALTH PHYSICS RADIOMAN		
6. REQUESTED CHANGE PERIODIC REVIEW <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES INCORPORATE PCAFS <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES # _____ # _____ # _____ # _____ REVISION <input type="checkbox"/> PCAF <input checked="" type="checkbox"/> DELETION <input type="checkbox"/> (CHECK ONE ONLY)		
7. SUMMARY OF / REASON FOR CHANGE TAB C now provides instructions in items 4. & 5. for re-booting the system when <sup>RMS</sup> BWM is not operational. Reference AR 411616.		
Continued <input type="checkbox"/>		
8. DETERMINE COMMITTEE REVIEW REQUIREMENTS (Refer to Section 6.1.4) PORC REVIEW REQ'D? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES		9. PORC MTG# _____
<b>BLOCKS 11 THRU 16 ARE ON PAGE 2 OF FORM</b>		
17. <u>R. C. Kessler</u> <u>254-3414</u> / <u>07/26/2002</u> PREPARER ETN DATE (Print or Type)		18. COMMUNICATION OF CHANGE REQUIRED? <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES (TYPE) <u>HP-HI-038</u>
19. <u>[Signature]</u> RESPONSIBLE SUPERVISOR <u>8/9/02</u> DATE		SIGNATURE ATTESTS THAT RESPONSIBLE SUPERVISOR HAS CONDUCTED QADR AND TECHNICAL REVIEW UNLESS OTHERWISE DOCUMENTED IN BLOCK 16 OR ATTACHED REVIEW FORMS. CROSS DISCIPLINE REVIEW (IF REQUIRED) HAS BEEN COMPLETED BY SIGNATURE IN BLOCK 16 OR ATTACHED REVIEW FORMS.
20. <u>[Signature]</u> FUM APPROVAL <u>8-12-02</u> <u>FUM</u> DATE <u>C. G. Smith Jr. Greenwood 8/9/02</u>		
21. RESPONSIBLE APPROVER _____ INITIALS DATE		ENTER N/A IF FUM HAS APPROVAL AUTHORITY



## PROCEDURE CHANGE PROCESS FORM

1. PCAF NO 2002-1551 | 2. PAGE 2 OF 235 | 3. PROC. NO. EP-PS-134 - REV. 0

11. This question documents the outcome of the 50.59 and 72.48 Review required by NDAP-QA-0726. Either 11a, b, c or d must be checked "YES" and the appropriate form attached or referenced.
- a. This change is an Administrative Correction for which 50.59 and 72.48 are not applicable. ☐ YES ☒ N/A
- b. This change is a change to any surveillance, maintenance or administrative procedure for which 50.59 and 72.48 are not applicable. ☒ YES ☐ N/A *A-01-732*
- c. This change is bounded by a 50.59/72.48 Screen/Evaluation, therefore, no new 50.59/72.48 Evaluation is required. ☐ YES ☒ N/A  
Screen/Evaluation No. \_\_\_\_\_
- d. 50.59 and/or 72.48 are applicable to this change and a 50.59/72.48 Screen/Evaluation is attached. ☐ YES ☒ N/A
12. This change is consistent with the FSAR or an FSAR change is required. ☒ YES  
Change Request No. \_\_\_\_\_
13. Should this change be reviewed for potential effects on Training Needs or Material? ☐ YES ☒ NO  
If YES, enter an Action Item @ NIMS/Action/Gen Work Mech/PICN
14. Is a Surveillance Procedure Review Checklist required per NDAP-QA-0722? ☐ YES ☒ NO
15. Is a Special, Infrequent or Complex Test/Evolution Analysis Form required per NDAP-QA-0320? (SICT/E form does not need to be attached.) ☐ YES ☒ NO

16. Reviews may be documented below or by attaching Document Review Forms NDAP-QA-0101-1.

REVIEW	REVIEWED BY WITH NO COMMENTS	DATE
QADR	_____	_____
TECHNICAL REVIEW	_____	_____
REACTOR ENGINEERING/NUCLEAR FUELS *	_____	_____
IST **	_____	_____
OPERATIONS	_____	_____
NUCLEAR SYSTEMS ENGINEERING	_____	_____
NUCLEAR MODIFICATIONS	_____	_____
MAINTENANCE	_____	_____
HEALTH PHYSICS	_____	_____
NUCLEAR TECHNOLOGY	_____	_____
CHEMISTRY	_____	_____
OTHER _____	_____	_____

\* Required for changes that affect, or have potential for affecting core reactivity, nuclear fuel, core power level indication or impact the thermal power heat balance. <sup>(58)</sup>

\*\* Required for changes to Section XI Inservice Test Acceptance Criteria.

**MAJOR TASK:**

Radiological Monitoring with RMS partially operational:

- Loss of Locational Telemetry  
and/or
- Loss of Radiological Telemetry

**NOTE:**

This TAB provides guidance for the two most likely reasons RMS will be in a *partially operational* condition. The intent is for this guidance to be used in conjunction with the normal monitoring strategy specified in TAB B.

If a different RMS deficiency occurs that also results in RMS being put in a *partially operational* condition, consult with the TSC Dose Calculator, RPC, or the oncoming FTD in the EOF to determine a means of compensating for the deficiency and enabling the continued use of RMS.

**SPECIFIC TASKS:**

**HOW:**

**1. Loss of Locational Telemetry**

1a. In the event you are permanently unable to track OSCAR's location on the Mobile Survey Plot Screen (MSPS):

- (1) Manually track OSCAR's location on the large area map in the TSC.
- (2) Communicate monitoring location instructions via radio using the **Onsite Emergency Monitoring Locations** form located in TAB 1.
- (3) Record sectors traversed by OSCAR in the **Radioman's Log**.

1b. With OSCAR's gamma or iodine channels selected on the MSPS, the associated radiological data (*Current Rate* and *Peak*) will still be displayed on the left side of the screen. Reports can still be generated and printed as specified in TAB 1, Section 2.

**SPECIFIC TASKS:**

**HOW:**

**2. Loss of Radiological Telemetry**

2a. In this case you will still be able to see OSCAR's location marker displayed on the MSPS, but there will **not** be any radiological data displayed on the left side of the screen.

- (1) Track OSCAR's location by monitoring the MSPS.
- (2) Direct OSCAR to communicate the radiological survey data to you via radio or cell phone.
- (3) Record the radiological survey data reported by OSCAR on the *Survey Data Form (with RMS Partially Operable)* located in TAB 2 and give to TSC Dose Calculator.

**HELP**

**Survey Data Form - RMS  
Partially Operable  
See TAB 2**

**3. Loss of both Locational AND Radiological Telemetry**

3a. First hit the [F8] key (this will transfer the RMS display source from the TSC to the EOF via phone line). If this results in the recovery of radiological and/or locational telemetry, then the prior telemetry loss was due to a problem with the local repeater at the TSC.

Continue management of OSCAR via the EOF display.

**NOTE:**

Since all RMS data and commands are now being communicated via phone line, expect a short time delay with RMS operations

**SPECIFIC TASKS:****HOW:**

- 3b. If transferal of the RMS display source does not work, simultaneously follow the guidance outlined above in steps 1 and 2.
4. RMS System "locked-up" (i.e. system no longer responding to commands).
- 4a. Attempt to restart RMS system by simultaneously depressing the CONTROL-ALT-DELETE Keys.
- 4b. The system restart is completely automatic and takes about 10 minutes. When startup completed, access Mobile Survey Plot and verify RMS operability by following steps 1.2 – 1.7 of TAB 1.
- NOTE: Until RMS operability restored, conduct field monitoring via TAB D.**
5. If RMS Keyboard is "locked-up" (i.e. depressing the CONTROL-ALT-DELETE fails to restart the system), shutdown then restart RMS System.
- 5a. Open the access door (located directly under keyboard) to the base station housing and locate the PC tower.
- 5b. Depress the POWER button to turn the power off, wait 20 – 30 seconds, then depress the POWER button again to restart.
- 5c. The system restart is completely automatic and takes about 10 minutes. When startup completed, access Mobile Survey Plot and verify RMS operability by following steps 1.2 – 1.7 of TAB 1.
- NOTE: Until RMS operability restored, conduct field monitoring via TAB D.**
6. If at any point the RMS equipment inside the OSCAR Van is determined to be inoperable, then continue radiological monitoring in accordance with TAB D.