



Tennessee Valley Authority, Post Office Box 2000, Decatur, Alabama 35609-2000

October 8, 2002

10 CFR Part 50, App E

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, D.C. 20555-0001

Gentleman:

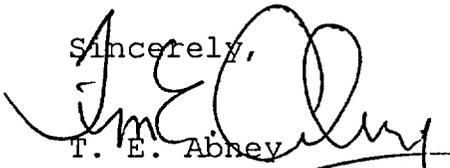
In the Matter of)	Docket Nos. 50-259
Tennessee Valley Authority)	50-260
		50-296

**BROWNS FERRY NUCLEAR PLANT (BFN) - UNITS 1, 2, and 3
EMERGENCY PLAN IMPLEMENTING PROCEDURE (EPIP) REVISION**

TVA is submitting this notification in accordance with the requirements of 10 CFR Part 50, Appendix E, Section V. Specifically, EPIP-10 was revised to Revision 23. The revision has an effective date of September 30, 2002.

The enclosed information is being sent by certified mail. The signed receipt signifies that you have received this information. If you have any questions, please telephone me at (256) 729-2636.

Sincerely,


F. E. Abney
Manager of Licensing
and Industry Affairs

cc: See Page 2

A045

U.S. Nuclear Regulatory Commission
Page 2
October 8, 2002

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ENCLOSURE
TENNESSEE VALLEY AUTHORITY
BROWNS FERRY NUCLEAR PLANT
UNITS 1, 2, AND 3

EMERGENCY PLAN IMPLEMENTING PROCEDURE (EPIP) REVISION
EPIP-10

SEE ATTACHED

GENERAL REVISIONS

GENERIC FILING INSTRUCTIONS

FILE DOCUMENTS AS FOLLOWS:

PAGES TO BE REMOVED

EPIP-10 Revision 22

PAGES TO BE INSERTED

EPIP-10 Revision 23

TENNESSEE VALLEY AUTHORITY

BROWNS FERRY NUCLEAR PLANT

EMERGENCY PLAN IMPLEMENTING PROCEDURE

EPIP-10

MEDICAL EMERGENCY PROCEDURE

REVISION 23

PREPARED BY: T. W. CORNELIUS

PHONE: 2038

RESPONSIBLE ORGANIZATION EMERGENCY PREPAREDNESS

APPROVED BY: GILBERT LITTLE

DATE: 09/27/2002

EFFECTIVE DATE: 09/30/2002

LEVEL OF USE: REFERENCE USE

QUALITY-RELATED

REVISION LOG

Procedure Number EPIP-10

Revision Number 23

Pages Affected: 1,4,5,6

Description of Change

- IC 23 This revision is being conducted to update a telephone number and a reference for contacting a TVA Physician.
Page 9 - Reference change for contacting the TVA Physician. Change from "refer to REND Section K" to "Contact Site Medical Office".
Page 12 - Change cellular phone operator assistance number from "Cellular One - 9-1-800-333-4004" to "Verizon Wireless, 9-1-800-922-0204.
- IC 24 The revision is being conducted to support completion of Problem Evaluation Report 02-003140-000. The revision involves adding a checklist item for the Shift Manager to notify industrial safety of a fatality or catastrophic injury. The revision also implements recommendation 3 from the from Quality Assurance Audit SSA0206, by clarifying Medical Services involvement in responses

MEDICAL EMERGENCY PROCEDURE

1.0 PURPOSE

To provide timely response to medical emergencies at Browns Ferry.

2.0 SCOPE

This procedure applies to Medical Emergency response for both radioactively contaminated and non-radioactively contaminated injured individuals

3.0 INSTRUCTIONS

3.1 Initial Notification by Unit Operator

3.1.1 Upon receiving a Medical Emergency call, the Control Room Unit Operator will:

- Obtain Name of caller.
- Obtain Location of medical emergency.
- Obtain Type of medical emergency.
- Obtain Number of People involved.
- Obtain Telephone Number from caller.

3.1.2 If not activated, activate the plant medical/fire alarm. Announce medical emergency location over the plant public address (PA) system, repeating at regular intervals to alert the Medical Emergency Response Team (MERT) to the location until instructed otherwise by Shift Manager or Unit Supervisor.

3.1.3 Notify the Fire Protection Personnel using the Operations/Fire Protection Radio.

3.1.4 Notify the Shift Manager of the emergency.

3.1.4.1 The MERT consist of the following:

- Incident Commander (as defined in FPP)
- Medical/Fire Operation Personnel
- RADCON Personnel (if location of emergency is in a Radiological Controlled Area)
- Nuclear Security Personnel
- Medical Services (as requested)
- Level II Responders (as defined in FPP)

3.0 INSTRUCTIONS (CONTINUED)

3.2 The Shift Manager will:

- 1 **Dispatch** Unit Supervisor or designee to the scene to act as Incident Commander.
- 2 **Establish and Maintain** communication with the Unit Supervisor
- 3 **Notify** the nurse on duty (if requested by the MERT Leader).

3.3 The Incident Commander will:

- 1 **Ensure and Maintain** the MERT Team's passage route.
- 2 **Ensure** that the Shift Manager is keep knowledgeable of the situation
- 3 **Request** the Shift Manager to obtain ambulance as needed.
- 4 **Establish** radio communication with the Shift Manager:
- 5 **Ensure** that plant operations do not impose any hazardous conditions on the injured or Medical Response Team

3.4 The Medical/Fire Operations Personnel will:

- 1 **Provide** medical emergency supplies to the location of the emergency
- 2 **Provide** emergency medical assistance to injured personnel.
3. **Transport** injured personnel as required.
4. **Communicate** applicable support recommendations to the Incident Commander

3.5 The Radiological Control Personnel will:

Assist the medical/fire operations team personnel concerning

- Radiological Protection
- Radiological Protective measures
- Control of Contamination
- As requested

3.6 The Nuclear Security Services Personnel will:

- 1 **Ensure** crowd control
2. **Assist** the Incident Commander

3.0 INSTRUCTIONS (CONTINUED)

3.7 The Medical Services Personnel will when requested:

Respond to medical emergencies to support and assist the Incident Commander.

3.8 The Level II Responders will:

1. Report to fire equipment cages in the Turbine Building elevation 557'.
2. Establish radio or telephone contact with the Incident Commander.
3. Ensure emergency equipment is ready for use.
4. Direct the movement of equipment to the emergency scene.

3.9 All members of the Medical Emergency Response Team proceed to the scene upon hearing the announcement or as directed by the MERT Leader.

3.10 Transport Offsite (If Required)

NOTE: If patient is not contaminated/irradiated, transport to Athens-Limestone Hospital, unless otherwise directed. If patient is contaminated/irradiated, only transport to hospitals listed below:

- Decatur General Hospital (see Attachment D)
- Huntsville Hospital (see Attachment E)

3.10.1 Shift Manager calls for an ambulance from outside ambulance service, if requested by MERT Leader or Incident Commander.

NOTE: See Attachment F for Medical Emergency telephone numbers.

3.10.2 Shift Manager complete Attachment A and provide information to receiving hospital. Forward completed Attachment A to the REP Manager to be filed.

3.10.3 Attachments D, and E give directions to various hospitals

3.0 INSTRUCTIONS (CONTINUED)

3.11 If contamination/irradiation is suspected, RADCON personnel will accompany ambulance, and furnish radiological services as requested

3.12 Follow-Up

3.12.1 EMT/RADCON makes follow-up call to hospital from the ambulance to give/receive additional information concerning patient's condition and estimated time of arrival

3.12.2 Shift Manager is responsible for any further notifications per EPIP-2 through EPIP-5

3.13 TVA Notification

3.13.1 The Shift Manager, should notify BFN Industrial Safety, if someone is ill or injured to the extent they require ambulance transportation to a hospital or if the medical emergency has resulted in a fatality or catastrophic injury (i.e three (3) or more hospitalized).

3.13.2 RADCON should notify the TVA Physician Representative (refer to the REND, Section K) any time TVA personnel are suspected of receiving radiation exposure in excess of the recommended TVA occupational exposure limits

3.13.3 Notify the Operations Duty Specialist (751-1700) of all offsite ambulance responses, regardless of emergency or non-emergency requests

4.0 ATTACHMENTS

Attachment A - Medical Emergency Notification Form (SHIFT MANAGER)

Attachment B - Patient Care Guidelines

Attachment C - Procedure for Cytogenetics Blood Studies By REAC/TS

Attachment D - Typical Layout of Decatur General Hospital

Attachment E - Typical Layout of Huntsville Hospital

Attachment F - Medical Emergency Telephone Numbers

ATTACHMENT A
(Page 1 of 1)
MEDICAL EMERGENCY NOTIFICATION FORM

Reported By (Shift Manager / Unit Supervisor) _____

Date: ___/___/___

Time of Injury: _____

Hospital: _____

Individual Contacted: _____

Time Contacted: _____

Total number of Victims: _____

Victim(s) Name	Condition	Type of Injury
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The Victim(s) is (Check all that apply, or list the number of victims for each)

- Not a Radiation Accident Victim
- Potentially Contaminated (Survey incomplete due to injuries)
- Contaminated with radioactive material
- Irradiated (over-exposed) whole body dose is _____ Rem

If Contaminated, are levels known at this time? Yes No

• If yes, provide the following information:

1. Level of Contamination _____ (CPM) or (MRAD/Hr) - Circle one
2. Type of Contamination Alpha, Beta, or Beta/Gamma

Is Internal Contamination Expected? Yes No

• If yes By Inhalation, Open Wounds, Ingestion, or Other

Isotopes:

- Isotopes are unknown at this time.
- Isotopes are known and are as follows _____

Estimated Time of Arrival, (If Known) ETA = _____

Operations Duty Specialist Notification

Notify the Operations Duty Specialist (751-1700) of all offsite ambulance responses, regardless of emergency or non-emergency requests

Industrial Safety Notification

If the medical emergency has resulted in either an ambulance transportation to a hospital, or a fatality or catastrophic injury (i.e. three (3) or more hospitalized), then notify Industrial Safety, if on duty, at extension 7839. If Industrial Safety is not on duty then notify the Operations Duty Specialist and request the "On-Call" Industrial Safety representative be contacted and informed of medical emergency.

ATTACHMENT B
(Page 1 of 3)
PATIENT CARE GUIDELINES

1.0 GENERAL

- 1.1 First aid and emergency medical care should be provided for onsite to preserve life and to minimize injury and suffering.
- 1.2 The Medical Emergency Response Team (MERT) will take appropriate action as directed by the Team Leader
- 1.3 If requested, the nurse should assist from outside any contamination zone unless the medical condition of the patient necessitates her/his presence
- 1.4 As applicable a doctor should be consulted when further professional attention is needed.
- 1.5 The care of persons known or suspected to be associated with radiation exposure or contamination will be coordinated with the RADCON representative. The essential aims of the MERT-RADCON team are
 - a. Minimize the injury and further radiation exposure to the victim
 - b. Protect attending personnel from excessive and unnecessary radiation exposure
 - c. Control spread of radioactivity contamination
 - d. Assess and document the patient's radiological exposure.
 - e. Immediate lifesaving and disability limiting procedures will take precedence over noncritical decontamination and dosimetry assessment procedures
- 1.6 Coordinate, the care, disposition, and reporting of all injuries known or suspected to be associated with excess levels of radiation exposure or contamination with the CECC, when staffed

2.0 NONCONTAMINATED - NONIRRADIATED

When it is known that the patient is not contaminated and has not been overexposed to radiation, advise the patient, ambulance crew, receiving hospital, and attending physician of the absence of Radiological Complications.

ATTACHMENT B
(Page 2 of 3)
PATIENT CARE GUIDELINES

3.0 IRRADIATED-NONCONTAMINATED

- 3.1 Remove the victim from further exposure providing only essential first aid in the process, then direct attention to medical care of other physical injuries
- 3.2 Medical care of the radiation exposure is governed by the medical status of the patient and the findings of the RADCON representative. The treatment of illness or physical injury takes precedence over treatment for radiation exposure.
- 3.3 Individuals who have received an acute total-body radiation exposure greater than 5 Rem should have hematological studies performed to detect chromosomal aberrations or other changes in blood constituent. REACTS can provide this service and should be contacted by the attending physician.
- 3.4 Advise all involved personnel of radiological conditions.

4.0 CONTAMINATED PATIENTS

- 4.1 The patient should be given initial emergency care by the medical emergency response team. All decontamination that the medical status of the patient will allow should be accomplished. The appropriate sequence of care must be determined on an individual basis by the medical-RADCON team. The injured person will be transported and treated in one of two ways:
 - a. If the person is severely injured, they may be transported directly to Huntsville Hospital or Decatur General Hospital. Every reasonable effort should be made to reduce the radioactive contamination level to less than 0.5 rem per hour at one foot. Spread of contamination may be minimized by removing the patient's excess clothing and wrapping him in a sheet, as his injuries permit.
 - b. In cases of less severe injuries, the patient will be sent to the personnel decontamination facility in the service building (or radwaste building, if stretcher bound) treated in the emergency treatment area or transferred to Huntsville Hospital or Decatur General Hospital.

ATTACHMENT B
(Page 3 of 3)
PATIENT CARE GUIDELINES

4.0 CONTAMINATED PATIENTS (Continued)

- 4.2 The RADCON representative will collect, identify, label, and analyze all biological specimens as required and deemed necessary. He will obtain the injured person's personal dosimetry and replace with equivalent dosimetry if appropriate.
- 4.3 The RADCON group will control contamination during transportation to the receiving hospital.
- 4.4 Advise all involved personnel of Radiological conditions.

ATTACHMENT C
PROCEDURE FOR CYTOGENETICS BLOOD STUDIES BY REAC/TS

TVA has an agreement with the Radiation Emergency Assistance Center/Training Site (REAC/TS) Cytogenetics Laboratory for support services including a white blood cell (lymphocyte) culture for dose assessment of whole-body exposures to ionizing radiation.

Upon the order of a physician, and in coordination with a health physicist, REAC/TS shall be contacted to request and coordinate the shipment and return of a blood sample kit. This kit contains all necessary collection, shipping, and instruction materials. The kit is provided by REAC/TS to promote optimal test results by use of controlled sample handling materials.

KEY INFORMATION ON CYTOGENETIC BLOOD STUDIES:

WHEN: Upon the order of a responsible physician, with verification that known or suspected ionizing radiation exposure (acute whole-body) exceeds 5 REM.

FREQUENCY: Once, unless directed otherwise by REAC/TS or physician.

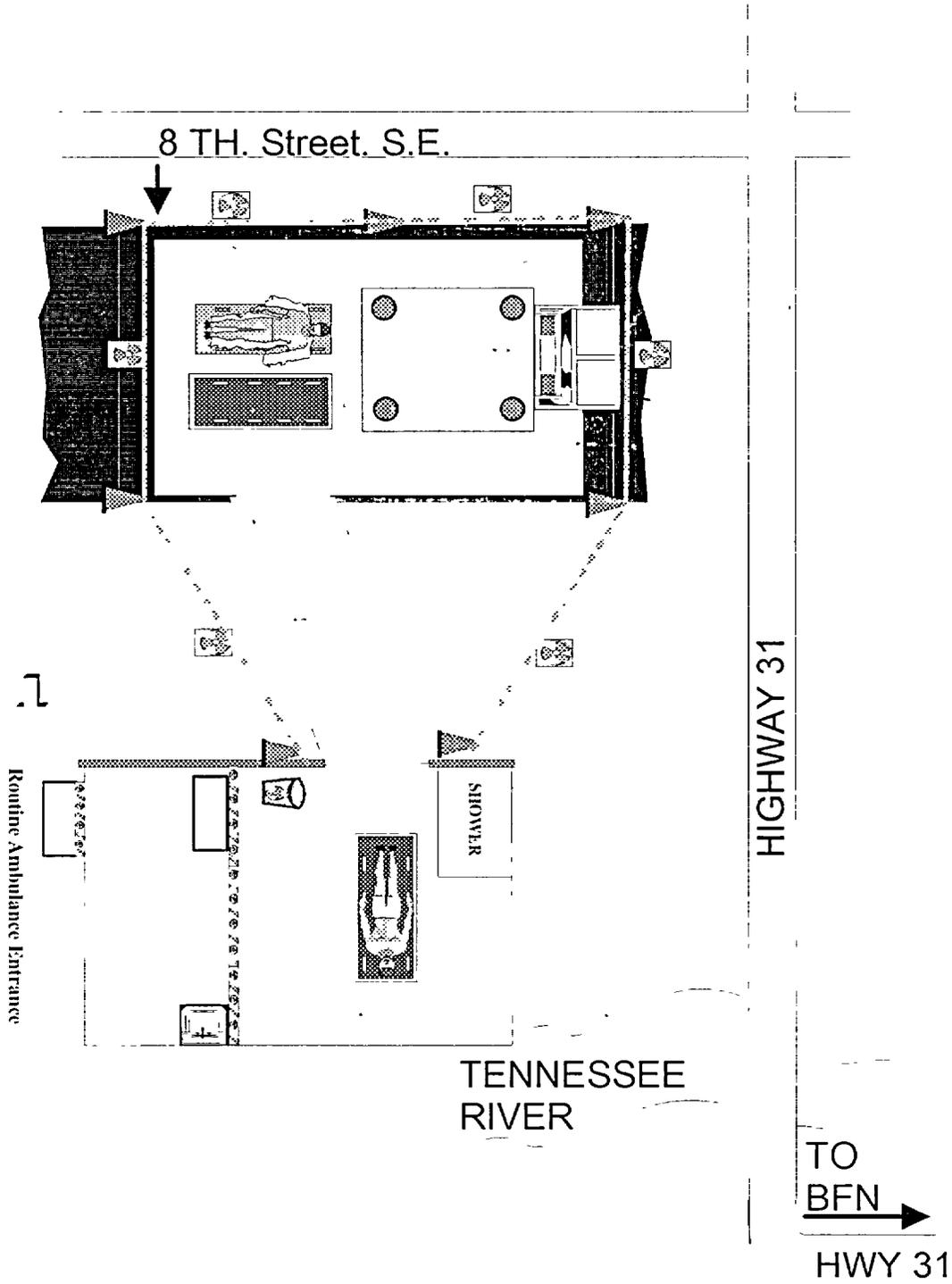
TO REQUEST KIT: Attending physician should contact:
REAC/TS, attention Cytogenetics Laboratory

COORDINATE RESULTS WITH:

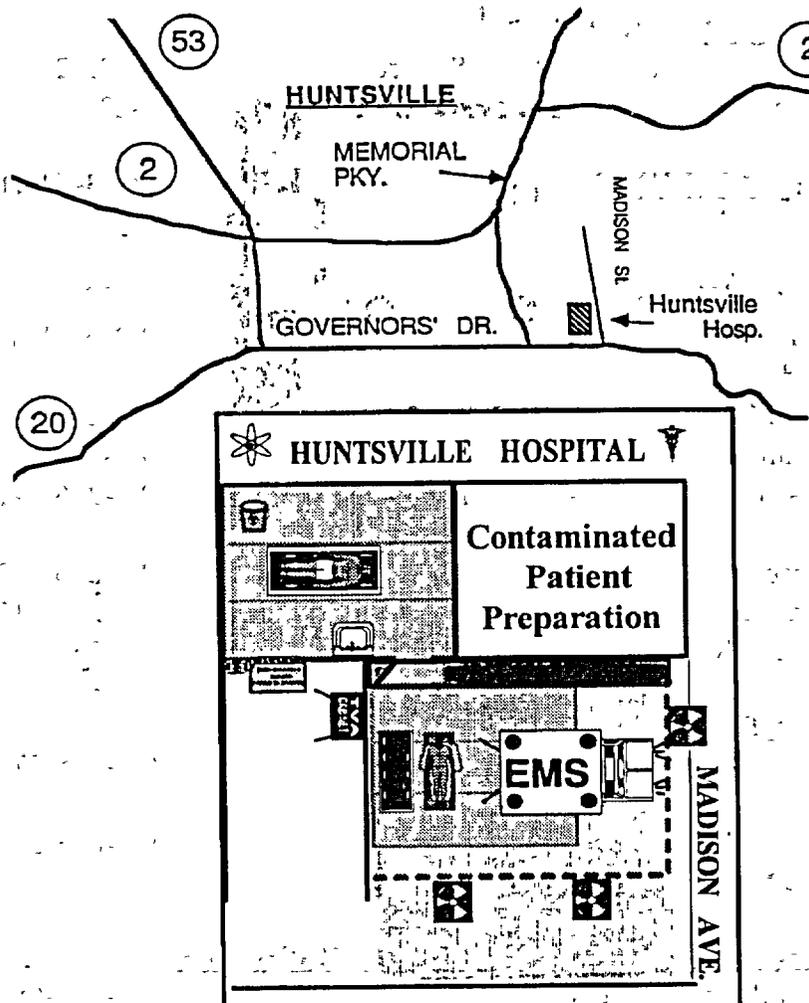
TVA Physician Representative
(Contact Site Medical Office)

SHIPMENT. Refer to instruction sheet in REAC/TS kit. Kit is designed as return shipping container, complete with chemical ice pack. REAC/TS recommends air shipment, however, undelayed method of shipment by TVA services may be considered if coordinated with REAC/TS.

ATTACHMENT D
(Page 1 of 1)
Typical Layout of Decatur Hospital



ATTACHMENT E
(Page 1 of 1)
Typical Layout of Huntsville Hospital



ATTACHMENT F
(Page 1 of 1)
MEDICAL EMERGENCY TELEPHONE NUMBERS

BROWNS FERRY

- Medical Station 4747, 2700
- TVA Emergency Services/Ambulance Rescue 3313, 2491

LOCAL AMBULANCE SERVICE

- Athens-Limestone Hospital Ambulance Service 9-232-2525
- Athens, Alabama 9-233-9159

HEAR SYSTEM FREQUENCY

155 340MHz

HOSPITALS

- Athens - Limestone Hospital 9-233-9155
- Athens, Alabama 9-233-9151

- Decatur General Hospital 9-1-256-341-2174
- Decatur, Alabama 9-1-256-341-2175
(Use only if other numbers are busy) 9-1-256-341-2000

- Huntsville, Hospital 9-1-256-517-8137
- Huntsville, Alabama 9-1-256-517-8139
(Use only if other numbers are busy) 9-1-256-517-8020

REAC/TS OAK RIDGE, TENNESSEE

- Day Shift (8 a.m. - 4:30 p.m.) 9-1-865-576-3131

- After Hours 9-1-865-576-1005
Ask for REAC/TS

TVA-BFN-EMERGENCY VEHICLE CELLULAR PHONES

- Huntsville Area Roamer Access 9-1-256-656-7626
- "Verizon Wireless" Assistance Operator 9-1-800-922-0204
- BFN-Ambulance Cellular Phone 9-1-256-656-0137
- BFN-REP Truck #5 9-1-256-508-4872
- BFN-REP Truck #6 9-1-256-656-9623

LAST PAGE