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THE FOLLOWING CHANGES HAVE OCCURRED TO THE HARDCOPY
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249 - 249 - EOF DOSE CALCULATOR

REMOVE MANUAL TABLE OF CONTENTS DATE: 09/25/2002

ADD MANUAL TABLE OF CONTENTS DATE: 10/25/2002

CATEGORY: PROCEDURES TYPE: EP
ID: EP-PS-249
ADD: PCAF 2002-1660 REV: N/A

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A045

PROCEDURE CHANGE PROCESS FORM

1. PCAF NO. <u>2002-1660</u>	2. PAGE 1 OF <u>3</u>	3. PROC. NO. <u>EP-PS-249</u> REV. <u>0</u>
4. FORMS REVISED - <u>C</u> R <u>1</u> , - <u> </u> R <u> </u> , - <u> </u> R <u> </u> , - <u> </u> R <u> </u> , - <u> </u> R <u> </u> , - <u> </u> R <u> </u>		
5. PROCEDURE TITLE EOF DOSE CALCULATOR: Emergency-Plan-Position-Specific Instruction		
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 # <u> </u> # <u> </u> # <u> </u> # <u> </u> REVISION <input type="checkbox"/> PCAF <input checked="" type="checkbox"/> DELETION <input type="checkbox"/> (CHECK ONE ONLY)		
7. SUMMARY OF / REASON FOR CHANGE Tab C: * section 1b: Revised to state: Report SPING total release rate(s) changes. * section 1b 1), change from Data invalid, (white), to Data suspect, (white). <div style="text-align: right;">Continued <input type="checkbox"/></div>		
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# <u>NA</u>
BLOCKS 11 THRU 16 ARE ON PAGE 2 OF FORM		
17. <u>W. F. Tabor</u> / <u>3665</u> / <u>10/24/2002</u> PREPARER / ETN / DATE (Print or Type)	18. COMMUNICATION OF CHANGE REQUIRED? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES (TYPE) <u> </u>	
19. <u>R.L. Doty per e-mail</u> / <u>10-23-02</u> RESPONSIBLE SUPERVISOR / 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>J. Allen Threewood</u> / <u>10/24/02</u> FUM APPROVAL / DATE		
21. RESPONSIBLE APPROVER <u>NA</u> INITIALS	ENTER N/A IF FUM HAS APPROVAL AUTHORITY <u> </u> DATE	

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PROCEDURE CHANGE PROCESS FORM

1. PCAF NO. 2002-1660 | 2. PAGE 2 OF 3 | 3. PROC. NO. EP-PS-249 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
- 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 <u>10 CFR 50.54g</u>	<u>William Debor</u>	<u>10-24-02</u>

* 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. ⁽⁵⁸⁾

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

MAJOR TASK:

Monitor PICSY (MET/VENT screen), notifying the Dose Assessment Staffer and Dose Assessment Supervisor of significant changes.

SPECIFIC TASKS:

HOW:

1. Monitor PICSY MET/VENT Screen.

HELP

**METEOROLOGICAL DATA
ACQUISITION
See TAB 1**

1a. Report met conditions that affect monitoring strategy currently in use to the Dose Assessment Supervisor and Dose Assessment Staffer.

- 1) Wind shift greater than 90°
- 2) Wind change that alters affected sector
- 3) Rain or snow
- 4) Change of two or more stability classes based on Δt or sigma theta data.

1b. ^{Report} SPING total release rate(s) change.

- 1) Data ^{suspect} ~~invalid~~ (white)
- 2) Release criteria exceeded
- 3) EAL 15.1 or 15.2 criteria exceeded
- 4) Trend indicating potential for increase of release.

PCAF