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Title			Revision No
Activation of the RAC			12
Applicability/Scope		USAGE LEVEL	Effective Date
All TMI RAC Emergency Response Pers	sonnel	2	11/27/02
This document is within QA plan scope	X Yes	No	
50 59 Applicable	X Yes	No.	

# List of Effective Pages

<u>Page</u>	<u>Revision</u>	<u>Page</u>	<u>Revision</u>	<u>Page</u>	Revision	<u>Page</u>	<u>Revision</u>
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	TMI - Unit 1 Emergency Procedure	EPIP-TMI07
Title		Revision No.
Activation of the RAC		12

# 1.0 PURPOSE

The purpose of this procedure is to provide guidelines for the Radiological Assessment Coordinator (RAC) to activate the radiological assessment function.

# 2.0 APPLICABILITY/SCOPE

This procedure is applicable to the TMI Radiological Assessment Coordinator and Radiological Support Personnel.

# 3.0 **DEFINITIONS**

None

# 4.0 **RESPONSIBILITIES**

- 4.1 The on-shift RAC is responsible for implementing Exhibit 1.
- 4.2 The Initial Response Emergency Organization (IREO) (RAC) is responsible for implementing Exhibit 2.
- 4.3 Radiological Support Personnel are responsible for implementing Exhibits 3 through Exhibits 5

# √5.0 PROCEDURE

- 5.1 This procedure is to be initiated upon declaration of any Emergency Classification specified in the Emergency Plan or when directed by the Emergency Director.
- 5.2 Emergency Actions

# NOTE

The steps in this section are based on the expected sequence of activation of the RAC. The actual sequence should be based on when qualified personnel arrive in the facility.

A The on-shift RAC shall activate the radiological assessment function by reporting to the Control Room and performing the steps in the on-shift RAC checklist (Exhibit 1)

						Number
	Title				TMI - Unit 1 Emergency Procedure	EPIP-TMI07 Revision No
<i>ر</i>		ation o	f the RA	C		12
			В.	function actions I Radiolog	O RAC shall relieve the on-shift RAC and direct the raby assigning appropriate personnel to assume those isted for those positions as follows (in the absence of gical Assessment Coordinator shall assume these positions for those positions):	positions and perform the appropriate personnel, the
				•	Radiological Assessment Coordinator (RAC):	
					Report to Emergency Control Center and perform (Exhibit 2).	the RAC Checklist
				•	Radiological Engineering Support:	
					Report to the Emergency Control Center and com Engineering Support Checklist (Exhibit 3)	plete the Radiological
				•	Radiological Line Communicator (RAC Support S	Staff):
					Report to the Emergency Control Center and com Communicator Checklist (Exhibit 4).	plete the Radiological Line
				•	RAC/OSC Communicator (RAC Support Staff):	
_	/				Report to the Emergency Control Center and com Communicator Checklist (Exhibit 5).	plete the RAC/OSC
		5.3	Final Cor	nditions		
			5.3.1		ological assessment function is operational with the detional. Communications are established.	esired positions manned
		5.4	Post Eve	nt Actions	3	
			5.4.1	workday Field Op	ntory of the RAC Area of the ECC is required to be per of following the end of the event. The inventory is the re- perations. Notify the Manager, Rad Con Field Ops. of by in accordance with Procedure TEP-ADM-1300.01, No dness.	esponsibility of Rad Con the need to perform the
	6.0	REFER	RENCES			
		6.1	TMI Eme	rgency Pl	an	
		6.2	TMI Eme	rgency Pl	an Implementing Procedures	
		6.3	6610-PLI	N-4200.02	2, Emergency Dose Calculation Manual (EDCM)	

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	TMI - Unit 1 Emergency Procedure	EPIP-TMI07
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# 7.0 **EXHIBITS**

- Exhibit 1 On-Shift RAC Checklist
- Exhibit 2 IREO Duty Roster RAC Checklist
- Exhibit 3 Radiological Engineering Support Checklist
- Exhibit 4 Radiological Line Communicator Checklist
- Exhibit 5 RAC/OSC Communicator Checklist

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## **On-Shift RAC Checklist**

The On-Shift RAC should perform the following until relieved by the IREO RAC or by a more senior qualified individual. This checklist need not be completed by the On-Shift RAC prior to turnover per Step 1.11.

## NOTE

The <u>bold underlined</u> steps below are particularly important in the early stages of an emergency. They should be performed promptly and in an orderly manner.

- 1.1 <u>Energize the RAC Computer</u>
- 1.2 <u>Start a log</u> of activities performed.
- 1.3 <u>Call out additional resources</u> if they are needed. If no additional resources are needed at this time, skip the step but reconsider it later as needs change.
  - 1.3.1 For the duty roster RAC, determine from the Emergency Director (ED) if the duty roster has been called out. If not, get the RAC's phone number from the ED and call him/her.
  - 1.3.2 For call-out of additional R.C. Techs, obtain (or have someone obtain) phone numbers from the Rad Con Field Ops phone list and call (or have someone call) the needed techs.
- 1.4 <u>Determine release pathway.</u> Consult with the ED or his/her designee to determine the pathway of any radioactive releases from the plant.

## NOTE

Refer to the Emergency Dose Assessment User's Manual section of the EDCM located in the RAC locker for guidance in performing dose projections.

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1.5 Obtain and validate the initial dose projection within 15 minutes.

#### NOTE

Dose projections should be performed even in cases involving a declared emergency of a non-radiological nature.

- 1.5.1 Select the RAC Spreadsheet icon from the desktop of the RAC Computer.
- 1.5.2 Go to the release pathway specified by the ED.
  - 1.5 2.1 Select the Update Plant Data option to import PPM and Met Data
  - 1.5 2.2 If the pathway is being monitored by an RMS monitor, use the RMS option for that pathway.
  - 1.5 2.3 If the pathway is not being monitored by an RMS monitor, use the leak rate option for that pathway.
  - 1.5 2.4 Verify that the PPM and Met Data is current (15 minutes old or less). If not, all data will need to be input manually.
  - 1.5.2.5 Enter data not available from the PPM as specified by the input sheet.
  - 1.5.2.6 Edit any PPM or Met Data that is not believed to be accurate.
  - 1.5 2.7 Print dose projection
- 1.5.3 Validate the dose projection by performing the following checks:
  - Verify that the correct release pathway is being used.
  - Verify that the monitor input data is accurate and appropriate (e.g. no calibrations in progress)
  - Verify the release duration with the ED.
  - Verify that the dose projection results are consistent with other indications.
- 1.5.4 Save the dose projection to the LAN.
- 1.5.5 **Use the Total Dose Option to verify no other pathways are contributing to the offsite dose.**
- 1.5.6 **If power is lost to the RAC computer,** request assistance from Operations in obtaining power. An extension cord is available in the RAC locker.
- 1.6 Review the dose projection with the ED. Ensure the ED understands the nature of the dose projection (e.g. bounding calculation, contingency projection, "what-if", etc.) and the precision or uncertainty associated with the dose projection.
- 1.7 Review the Emergency Classification with the ED as it relates to current radiological parameters and evaluate the need to escalate to a higher classification

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- 1.8 Advise the ED on any of the following issues if they apply. Skip any that do not apply but reconsider them as the emergency conditions change.
  - Protective Action Recommendations (PAR) (see the PAR logic diagram in procedure EPIP-TMI-.02, Emergency Direction, available from the ED).
  - On-site assembly and site evacuation of non-essential personnel (see the table at the end
    of this exhibit for guidance).

# NOTE

The automated Emergency Report Form that is produced by ED automatically suggests assembly location and evacuation routes contained on the table in this exhibit.

- Contaminated and/or injured employees and any decontamination efforts.
- 1.9 <u>Consider dispatching a field monitoring team</u> if the dose projection indicates the potential for abnormal radiological conditions off-site.
  - 1.9.1 To activate field teams:
    - Perform radio checks with the field team(s)
    - Assign and record field team designations (e.g. Alpha, Bravo, etc.)
    - Obtain and record names and SSN's for all field team members.
    - Obtain and record year-to-date TEDE for all field team members.
    - Inform team members of the current wind direction and speed and display it on the EPZ map.
  - 1.9.2 **Field monitoring team placement and direction**: consider the following guidelines for placing and directing field team(s).
    - A. For ground level releases (highest doses projected at site boundary) -
      - Place the first field team downwind at the site boundary.
      - Place the second team (if dispatched) off-site, downwind and as near to the site as possible

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- B For elevated releases (highest doses projected at some distance from the site) -
  - Place the first field team downwind at the location where the highest dose is projected.
  - Place the second team (if dispatched) downwind nearer to the site than the first team (results from this team aid in determining if the plume touched down closer than projected)
- C. Instruct the team(s) to scan across the plume and attempt to locate plume centerline.
  - Provide a definite start point, direction of travel and an end point for scanning (e.g. "scan for plume centerline starting at NNE31, travel toward the Southeast passing through NE31 and continue to ENE31").
- 1.10 BRP call back: Within 45 minutes of event declaration notify the ECC Communications Coordinator whether the BRP has called back to the RAC.
- 1.11 Provide a turnover to the IREO RAC upon arrival.

# EXHIBIT 1 On-Shift RAC Checklist

# Guidelines for Selection of On-Site Emergency Assembly Area and Evacuation Route for Non-Essential Personnel

Wind Direction (from)	On-Site Emergency Assembly Area To Use	Route to Emergency Assembly Area	Gate To Be Used For Site Evacuation	Off-Site Remote Assembly Area To Be Used For Site Evacuation
1° to 80°	Warehouse 1	Personnel in the NOB, OSF, Protected Area and other locations near Unit 1 use most direct route to Warehouse 1.	North Gate	Training Center
		Personnel in the Unit 2 Admin Bldg, Bldg 222, Transportation and other locations near Unit 2 travel by personal vehicle to Warehouse 1.		
81° to 170°	Warehouse 3	Personnel in the NOB, OSF, Protected Area and other locations near Unit 1 walk to Warehouse 3 via the East side of the plant.	North Gate	Training Center
)		Personnel in the Unit 2 Admin Bldg, Bldg 222, Transportation and other locations near Unit 2 use most direct route to Warehouse 3.		
171° to 240°	Warehouse 3	Personnel in the NOB, OSF, Protected Area and other locations near Unit 1 should go directly to their personal vehicles and drive to the parking lot south of the Unit 2 Admin Bldg and then walk to Warehouse 3.	South Gate	Training Center
		Personnel in the Unit 2 Admin Bldg, Bldg 222, Transportation and other locations near Unit 2 should use the most direct route to Warehouse 3.		
241° to 320°	Warehouse 1	All site personnel should take the most direct route to Warehouse 1.	North Gate	Training Center or EOF (see Note )
321° to 360°	Warehouse 1	All site personnel should take the most direct route to Warehouse 1.	North Gate	Training Center

# NOTE

Use the Training Center as the Off-Site Remote Assembly Area unless the Dose Projection between the Exclusion Area Boundary and 1 mile is greater than 5 mREM/hr CDE or 1 mREM/hr TEDE.

Number TMI - Unit 1 **Emergency Procedure** EPIP-TMI-.07 Title Revision No **Activation of the RAC** 12 **EXHIBIT 2** Page 1 of 5 **IREO Duty Roster RAC Checklist** The IREO RAC should perform the following upon reporting to the Emergency Control Center: 1.0 1.1 Obtain a turnover from the On-Shift RAC if staffed. If the on-shift RAC position was not staffed skip to Step 1.2. 1.2 Review Exhibit 1 and ensure applicable steps have been implemented. NOTE The following steps should be considered and, if needed, implemented. These steps need not be performed in the sequence listed and may be performed multiple times. The RAC should periodically review this checklist to ensure that necessary steps are being performed. Α Assign personnel to staff positions described in Exhibits 3 through 5. B. Maintain a log of activities performed. Refer to the Emer. Dose Assessment User's Manual contained in the EDCM (Ref. 6 3) C. for dose assessment guidance. D. Review dose projections with the ED. Ensure the ED understands the nature of the dose projection (e.g. bounding calculation, contingency projection, "what-if", etc.) and the precision or uncertainty associated with the dose projection. E. Advise the ED on: Protective Action Recommendations (PAR) (see the PAR logic diagram in procedure EPIP-TMI-.02, Emergency Direction, available from the ED) On-site assembly and site evacuation of non-essential personnel (see the table at the end of this exhibit for quidance). Radiological conditions: In-plant (including habitability concerns in emergency facilities), On-site and Off-site

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## **EXHIBIT 2**

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#### NOTE

Consideration should be given to locations on-site where personnel may remain. Examples are:

- Security Posts
- Warehouses
- Communications
- Medical
  - Employee doses and emergency dose extensions.
  - Contaminated employees, decontamination efforts and any use of Thyroid Blocking agent.
- F. **Emergency classifications:** Recommend emergency classifications to the ED based on radiological conditions and Emergency Action Levels (EAL).
- G. Fuel damage assessment: Provide any necessary assistance to the TSC for the assessment of fuel damage and report results to the ED.

### NOTE

While the RAC should provide assistance to the TSC in assessing the degree of core damage, the 'official' damage assessment values will be determined by the TSC.

H. Primary to secondary leak rate determination: If a primary to secondary leak exists, use the Emer. Dose Assessment User's Manual contained in the EDCM (Ref. 6 3) to assist in determining primary to secondary leak rate. Coordinate with the TSC in making this determination.

# **NOTE**

While the RAC should provide assistance to the TSC in estimating the primary to secondary leak rate, the 'official' leak rate values will be determined by the TSC.

- I. When the EACC is staffed turn over field monitoring teams to the EACC.
- J Dose projection/field readings comparison: use the following guidance for comparing field readings (field team or Reuter Stokes readings) and dose projections.
  - If field readings are within a factor of 10 less than (and <u>not</u> more than) the corresponding projected value, a very good correlation exist between the two.
  - Field iodine sample results, after being converted to thyroid dose rate (CDE per hour), can be directly compared to projected thyroid dose rate.

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	<ul> <li>Field team closed window dose rates and Reuter compared with DDE values in dose projections.</li> </ul>	Stokes readings can be
	<ul> <li>There is no dose projection value that correspond window readings. Open window readings that are readings indicate that the plume is at ground leve</li> </ul>	e higher than closed window
K.	Samples: Consider the need for special samples (e.g. MAP-provide more precise source term data for dose projections.	5, CATPASS, RCS-PAS) to
	<ul> <li>Samples taken directly from the effluent pathway MAP-5, etc) provide the most precise source term</li> </ul>	
	<ul> <li>A sample from the Reactor Building atmosphere ( the precision of source term data for releases from will likely be less precise than effluent samples.</li> </ul>	
J	<ul> <li>RCS sample results are useful in determining the can be used to improve the precision of the source than effluent samples.</li> </ul>	
	NOTE	
	The Emer. Dose Assessment User's Manual contained in the EDC (Ref. 6.3) provides guidance on which sample(s) to obtain under vacconditions.	i i
L.	Communication with BRP: Establish communication with the Protection (BRP) and provide TMI dose projections to them.	e Bureau of Radiological
M.	Communication with NRC: If the NRC requests continuous Health Physics Network (HPN), establish and maintain comm them and:	
	Assign an extra RAC staff member as soon as or	e is available or,

in-plant survéys and samples

Coordinate all Radiological Controls activities on-site, including:

N.

Request an additional communicator from the ED Assistant.

Personnel dose monitoring and control (including dose extensions).

Access control to areas affected by the emergency.

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- O. **Thyroid Blocking:** Implement the Thyroid Blocking procedure (EPIP-COM-.44) if it is anticipated that person(s) will be exposed to quantities of radioiodine sufficient to cause a thyroid dose of 25 REM (CDE) or greater.
- P. Interface with the Group Leader- Radiological and Environmental Controls (GL-R&EC) regarding:
  - Dose projections
  - In-plant and on-site conditions
  - Protective actions
- Q. Recommend source term reduction techniques appropriate to the release pathway (e.g. RB spray, raising OTSG levels, etc). See the Emergency Dose Assessment User's Manual in Ref 6.3 for specific information
- R Evaluate the need for eating and drinking restrictions in-plant.
  - If results of habitability monitoring allow, recommend that the E.D. lift restrictions, as needed.
  - Ensure habitability monitoring continues.
- S. Review radiological information in press releases. Specific examples of radiological information that should <u>not</u> be included in press releases are:
  - Dose projections
  - Protective action recommendations
  - Technical terms
  - Acronyms and abbreviations
- T. Trend effluent release data, RMS, sample results, field team readings and dose projections.
- U. **Establish a watch bill** to cover the RAC and all staff positions on a 24 hour-per-day basis.

# EXHIBIT 2 IREO Duty Roster RAC Checklist

# Guidelines for Selection of On-Site Emergency Assembly Area and Evacuation Route for Non-Essential Personnel

Wind Direction (from)	On-Site Emergency Assembly Area To Use	Route to Emergency Assembly Area	Gate To Be Used For Site Evacuation	Off-Site Remote Assembly Area To Be Used For Site Evacuation
1º to 80º	Warehouse 1	Personnel in the NOB, OSF, Protected Area and other locations near Unit 1 use most direct route to Warehouse 1.  Personnel in the Unit 2 Admin Bldg, Bldg 222, Transportation and other locations near Unit 2 travel by personal vehicle to	North Gate	Training Center
81° to 170°	Warehouse 3	Warehouse 1.  Personnel in the NOB, OSF, Protected Area and other locations near Unit 1 walk to Warehouse 3 via the East side of the plant.  Personnel in the Unit 2 Admin Bldg, Bldg 222, Transportation and other locations near Unit 2 use most direct route to Warehouse 3.	North Gate	Training Center
171° to 240°	Warehouse 3	Personnel in the NOB, OSF, Protected Area and other locations near Unit 1 should go directly to their personal vehicles and drive to the parking lot south of the Unit 2 Admin Bldg and then walk to Warehouse 3.  Personnel in the Unit 2 Admin Bldg, Bldg 222, Transportation and other locations near Unit 2 should use the most direct route to Warehouse 3.	South Gate	Training Center
241° to 320°	Warehouse 1	All site personnel should take the most direct route to Warehouse 1.	North Gate	Training Center or EOF (see Note )
321° to 360°	Warehouse 1	All site personnel should take the most direct route to Warehouse 1.	North Gate	Training Center

# NOTE

Use the Training Center as the Off-Site Remote Assembly Area unless the Dose Projection between the Exclusion Area Boundary and 1 mile is greater than 5 mREM/hr CDE or 1 mREM/hr TEDE.

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	Radiolo	gical Engineering Support Engineer Checklist	
1.0 Perform	n the following:		
		NOTE	
	These steps ne performed multi	teps should be considered and, if needed, impleme eed not be performed in the sequence listed and ma iple times. The RESE should periodically review th sure that necessary steps are being performed.	ay be
A.	Start a log of activiti	ies performed	
В.	Perform dose proje	ections using the RAC computer.	
		NOTE	
		ns should be performed even in cases involving a de	eclared
J		he Emergency Dose Assessment User's Manua for guidance.	I contained in the EDCM
	• Validate o	dose projections. Perform the following checks in	coordination with the RAC:
	-	Verify that the correct release pathway is being u	ised.
	-	Verify that the monitor input data is accurate and calibrations in progress)	appropriate (e.g. no
	-	Verify the release duration.	
	-	Verify that the dose projection results are consist	ent with other indications.
	-	Verify that the PPM and Met data are not more the	nan 15 minutes old.
		is lost to the RAC computer, request assistance from extension cord is available in the RAC locker.	rom Operations in obtaining
C.	Save validated dos	se projections to the LAN.	
D.	Determine and log	the time of reactor shut down.	
E.	Communicate with	the GL-R&EC and the EACC.	
F.	Trend dose project	tions.	

Generate source term data: Edit input parameters and input sample results to refine the source

G.

term.

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- H. **Met. and forecast data**: Obtain current meteorological data and weather forecast data (short and long term) from the EACC for:
  - Dose projections (e.g. "what if" projections)
  - Plume tracking
  - Site evacuation planning
  - Off-site protective action planning
- I. Evaluate the following inputs to verify that dose projections reflect actual conditions:
  - Plant conditions
  - RMS data
  - RCS activity
  - Spiking factors
  - Meteorological data.
- J. Confirm dose projections by comparing with field team readings and/or Reuter Stokes readings.
  - If field readings are within a factor of 10 less than, and not more than, the corresponding projected value a very good correlation exits.
  - Field iodine sample results, after being converted to thyroid dose rate (CDE per hour), should only be compared to projected thyroid dose rate.
  - Field team closed window dose rates and Reuter Stokes readings can be compared with DDE values in dose projections.
  - There is no dose projection value that corresponds directly to field team open window readings. Open window readings that are higher than closed window readings indicate that the plume is at ground level at that location.
- K. Discuss Protective Action Recommendations (PAR) and Protective Action Guidelines (PAG) with the RAC.
  - The PAR logic diagram is contained in procedure EPIP-TMI-.02, Emergency Direction, available from the ED.
- L. **Perform "what if" dose projections** based on potential or anticipated:
  - Plant status changes
  - Meteorological changes

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- M. Coordinate with the TSC. Assist the RAC in coordinating with the TSC for:
  - Primary to secondary leak rate determination. Use the Emergency Dose Assessment User's Manual (Ref. 6.3) for guidance.
  - Fuel damage class determination.
    - The TSC will produce the "official" damage class value.
    - Provide input using the guidance in Emergency Dose Assessment User's Manual (Ref. 6.3)
    - Update dose projection system as appropriate.

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## **Radiological Line Communicator Checklist**

1.0 Perform the following.

## NOTE

The following steps should be considered and, if needed, implemented. These steps need not be performed in the sequence listed and may be performed multiple times. The Radiological Line Communicator should periodically review this checklist to ensure that necessary steps are being performed.

- A. Maintain a log of information sent and received.
- B. Communicate with the following:
  - Group Leader Radiological and Environmental Controls (GL-R&EC) at the EOF
  - Bureau of Radiological Protection (BRP)
  - Nuclear Regulatory Commission (on the HPN line)
- C Provide a briefing on current plant status and recent changes to all persons on the Radiological Line.
- D. Pass requests from the RAC for off-site support to the EOF. Examples are
  - Rad Con Technicians from other plants
  - Equipment (e.g., radiation monitors, etc.)
  - Whole Body Counting
- E. If the NRC requests continuous communication on the HPN, establish and maintain communication on the HPN with them and request the RAC:
  - Assign an extra RAC staff member to man the HPN as soon as one is available or.
  - Obtain an additional communicator for the HPN from the ED Assistant.

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#### **RAC/OSC Communicator Checklist**

# 1.0 Perform the following:

#### **NOTE**

The following steps should be considered and, if needed, implemented. These steps need not be performed in the sequence listed and may be performed multiple times. The RAC/OSC Communicator should periodically review this checklist to ensure that necessary steps are being performed

- A. Communicate between RAC and OSC
- B. Communicate with the Remote Assembly Area Personnel
- C. Maintain a Log of activities performed
- D. Provide Event Update to Rad Con Personnel in OSC
- E. Collect information on contaminated/injured personnel
- F. Handle requests for:
  - Activation of on/offsite field teams
  - In-Plant Radiological data, (surveys dose rates, contamination levels)
  - Medical emergency information
  - Search and Rescue Information
  - Repair Team Information
  - Vehicle/Personnel Contamination Surveys for Site Evacuation.
- G. Interface for obtaining accident samples and sample results:
  - CATPASS: Containment Atmospheric Post Accident Sampling System
  - MAP-5: Particulate and Radioiodine Sample System on effluent pathways
  - RCS PASS: Reactor Coolant System Post Accident Sampling System
  - Radiation Monitoring System (RMS) samples for particulate, radioiodine, noble gas and tritium
  - Other plant samples as required (OTSG, secondary)

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- H. Provide Guidance from RAC on in-plant radiological controls
  - Keep OSC updated on events that may alter radiological conditions in the plant
  - Radiation Controls e g., posting of Turbine Building
- I. Obtain data on:
  - Skin contaminations levels and location of contamination
  - Dose extensions extension limits, purpose of extensions, personnel receiving extensions
  - Personnel injuries any radiological concerns
- J. Provide priority from the RAC to the Chemistry Coordinator on accident samples and analysis.