



UNITED STATES  
**NUCLEAR REGULATORY COMMISSION**  
REGION I  
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March 4, 2003

Mr. J. Alan Price, Vice President  
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c/o David W. Dodson, Acting Manager-Licensing  
Dominion Nuclear Connecticut, Inc.  
Millstone Power Station  
Rope Ferry Road  
Waterford, CT 06385

SUBJECT: INSPECTION 05000245/2002013, DOMINION NUCLEAR CONNECTICUT,  
INC., MILLSTONE POWER STATION UNIT 1, WATERFORD, CONNECTICUT

Dear Mr. Price:

On January 28, 2003, the NRC completed an inspection at your Millstone Unit 1 nuclear reactor facility in Waterford, Connecticut, which covered an inspection period that began on July 6, 2002. The findings of the inspection were discussed with Mr. Denny Hicks and members of his staff on January 28, 2003. The enclosed report presents the results of that inspection.

Your radiation protection, radioactive waste shipping, spent fuel pool chemistry, and cold weather preparation programs were inspected during this inspection period. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The programs were generally implemented in a safe manner. However, some human performance issues regarding personnel access controls occurred during the latter part of the inspection period which required licensee management attention. No safety concerns were identified.

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Sincerely,

*/RA/*

Ronald R. Bellamy, Chief  
Decommissioning and Laboratory Branch

Docket No. 05000245  
License No. DPR-21

J. Alan Price  
Dominion Nuclear Connecticut, Inc.

2

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Inspection Report No. 05000245/2002013

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REGION I

INSPECTION REPORT

Inspection No. 05000245/2002013  
Docket No. 05000245  
License No. DPR-21  
Licensee: Dominion Nuclear Connecticut, Inc.  
Location: Millstone Power Station, Unit 1  
Rope Ferry Road  
Waterford, CT 06385  
Inspection Dates: July 6, 2002 - January 28, 2003  
Inspector: John Wray, CHP, Health Physicist  
Robert Prince, Health Physicist  
Approved By: Ronald R. Bellamy, Chief  
Decommissioning and Laboratory Branch  
Division of Nuclear Materials Safety

## **EXECUTIVE SUMMARY**

Dominion Nuclear Connecticut, Inc.  
NRC Inspection Report No. 05000245/2002013

This integrated inspection included aspects of licensee operations and plant support during decommissioning activities. The report covers announced inspections by regional inspectors. No violations were identified.

### **Operations and Decommissioning**

The licensee maintained an effective Spent Fuel Pool (SFP) chemistry control program. Required samples were being taken at the prescribed times and chemistry parameters were being maintained within required limits. Leakage from the SFP was adequately monitored.

The licensee maintained General Employee Training (GET), radiation worker, respiratory protection, and Certified Fuel Handler (CFH) training up-to-date. Qualifications of personnel were commensurate with their responsibilities.

The licensee established an adequate program to maintain the operability of systems and equipment, identified as important to the safe storage of spent fuel, during the cold weather season. Remediation of fungal spores in the drywell was effective and protected the health and safety of plant personnel.

Although overall performance of the project was good, some human performance issues occurred during the latter part of the inspection period which required licensee management attention. No safety concerns were identified.

### **Plant Support and Radiological Controls**

The licensee has provided effective controls to limit exposures of workers to external and internal sources of radiation.

The licensee maintained an effective radioactive material shipping program in compliance with regulatory requirements. The licensee's plans to use the unit 1 evaporator to process low-level radioactive waste water from units 2 and 3 appear to satisfy NRC requirements.

The licensee has maintained an effective self-assessment and program surveillance program with regard to the project. Evaluations were detailed and comprehensive.

## TABLE OF CONTENTS

REPORT DETAILS .....	1
<b>I. <u>Operations and Decommissioning Status</u> .....</b>	<b>1</b>
<b>O1 <u>Conduct of Operations</u> .....</b>	<b>1</b>
O1.1 <u>Spent Fuel Pool Activity</u> .....	1
O1.2 <u>Organization, Staffing and Qualifications</u> .....	1
O1.3 <u>Station Freeze Protection Program</u> .....	2
O1.4 <u>Miscellaneous Decommissioning Activities</u> .....	3
<b>II. <u>Plant Support and Radiological Controls</u> .....</b>	<b>4</b>
<b>R1 <u>Radiological Protection Controls</u> .....</b>	<b>4</b>
R1.1 <u>Occupational Exposure Controls</u> .....	4
R1.2 <u>Radioactive Waste Management and Transportation</u> .....	6
R1.3 <u>Radiological Program Self-Assessments and Surveillances</u> .....	7
<b>V. <u>Management Meetings</u> .....</b>	<b>8</b>
<b>X1 <u>Exit Meeting Summary</u> .....</b>	<b>8</b>
<b>X2 <u>Other Meetings</u> .....</b>	<b>8</b>
PARTIAL LIST OF PERSONS CONTACTED .....	9
INSPECTION PROCEDURES USED .....	9
ITEMS OPENED, CLOSED, AND DISCUSSED .....	10
LIST OF ACRONYMS USED .....	10

## REPORT DETAILS

### I. Operations and Decommissioning Status

#### **O1 Conduct of Operations**

##### O1.1 Spent Fuel Pool Activity

###### a. Inspection Scope (60801)

The inspector reviewed the licensee's SFP chemistry program to determine adherence to Technical Specification (TS) and licensee commitments. The inspector also reviewed the licensee's monitoring program for leakage from the SFP.

###### b. Observations

The inspector reviewed procedure SP 852 (Rev 2), "SFP Chemistry Control", written to satisfy the requirements of Defueled TS section 5.6.3. The procedure provided adequate controls to meet regulatory requirements. The appropriate chemistry parameters were identified and sample frequencies appropriately established. The inspector reviewed results of SFP samples for 2001 and 2002. All TS required chemistry samples were taken within the prescribed time period and the data indicated that no fuel pool parameter limits were exceeded. No safety concerns were identified.

The inspector reviewed procedures regarding SFP leakage monitoring and reviewed the spread sheet maintained to determine if a significant leak of SFP water had occurred. The inspector verified that the licensee is tracking pool make-up rates appropriately. Operator logs were reviewed. Daily entries were verified for appropriate parameters including fuel pool level and fuel pool liner leak detectors. Weekly entries for drywell floor drain sump level were observed. No safety concerns were identified.

###### c. Conclusions

The licensee maintained an effective SFP chemistry control program. Required samples were being taken at the prescribed times and chemistry parameters were being maintained within required limits. Leakage from the SFP was adequately monitored.

##### O1.2 Organization, Staffing and Qualifications

###### a. Inspection Scope (36801)

The inspector reviewed the licensee's organization, staffing, and qualifications to determine whether the organization, staffing, and qualifications were in accordance with regulatory requirements.

b. Observations

The licensee's GET, radiation worker, respiratory protection, and CFH training records for selected personnel (both management and technician) were examined. Records for site personnel were adequately administered and maintained. The licensee maintained adequate matrices to ensure personnel are trained for their responsible tasks. Organization charts and staffing numbers were examined. The inspector was informed that additional contract workers and supervision will be added to the existing work force as the project increases work activities. The inspector reviewed qualifications of personnel added to the site organization during this inspection period. No safety concerns were identified.

c. Conclusions

The licensee maintained GET, radiation worker, respiratory protection, and CFH training up-to-date. Qualifications of personnel were commensurate with their responsibilities.

O1.3 Station Freeze Protection Program

a. Inspection Scope (71714)

The inspector evaluated the licensee's preparations to maintain the operability of systems and equipment, identified as important to the safe storage of spent fuel, during the cold weather season. The effectiveness of the remediation of fungal spores in the drywell, which restricted drywell access and delayed completion of cold weather preparations, was also evaluated.

b. Observations

The inspector reviewed procedure OP 213, "Cold Weather Preparation", regarding preparations for cold weather operations at unit 1. The licensee identified a duplicate procedure (OP 2268) written as a unit 2 procedure but included unit one systems and equipment. The inspector verified that this discrepancy had been entered into the licensee's corrective action program and is being appropriately tracked for consolidation. The inspector toured the facility with the cognizant engineer for unit 1 and verified that heat-trace equipment was energized where required and space heaters were appropriately positioned. Equipment and systems important to the safe storage of spent fuel are required to be verified operable in cold weather conditions by remote detection devices and visual verification. The inspector verified that all equipment and systems were verified operable by these two methods except those which needed visual inspections in the drywell.

While inside the drywell for a confined space survey, the licensee identified an industrial hygiene problem. Mold was growing on surfaces and fungal spores were becoming airborne. Breathing zone air samples were taken and concentrations of fungal spores were determined to be as high as 52,000 counts per cubic meter. The outside background is approximately 1000 counts per cubic meter. Occupational Safety and Health Administration (OSHA) and state regulations recommend clean up of an area when airborne fungal spore concentrations are greater than 10 times background. The licensee restricted access to the drywell until a remediation program was established. Cleanup of the spores involved a ten to one



concentration of bleach and after one pass, the concentrations were reduced to levels well below background.

The licensee determined that mold grew on surfaces in cold and dark areas of the plant where high humidity was present. The condition probably had existed from the time of initial unit shutdown but only became known when the project re-initiated work activities. The inspector noted that a program has been established to inspect for mold growth during the year and effect decontamination when appropriate. Health affects on workers vary but can include upper respiratory infection and extensive medical care. The licensee informed the inspector that local communities had identified similar infestations and are remediating the molds in a similar manner as asbestos removal. The inspector verified that the licensee adhered to the OSHA and state "Guidelines on Assessment and Remediation of Fungi in Indoor Environments" and that workers were properly trained and qualified to conduct clean up activities. Following clean up, the licensee completed visual inspection of the cold weather preparations checklist in the drywell. No safety concerns were identified.

c. Conclusions

The licensee established an adequate program to maintain the operability of systems and equipment, identified as important to the safe storage of spent fuel, during the cold weather season. Remediation of fungal spores in the drywell was effective and protected the health and safety of plant personnel.

O1.4 Miscellaneous Decommissioning Activities

a. Inspection Scope (71801)

The inspector reviewed personnel performance on the project and the licensee's response to a series of human performance issues.

b. Observations and Findings

On December 18, 2002, a fire watch employee accessed the unit 1 reactor building without the proper security authorization. The individual was immediately confronted by the security guard assigned to the reactor building and at no time was unattended. The unit 1 reactor building is not a vital area but is controlled as a security protected area. The individual had proper security vital area access to units 2 and 3 but the proper access was not updated for unit 1. The inspector reviewed the licensee's immediate response and corrective actions. No safety concerns were identified.

On January, 28, 2003, a worker entered the Radiologically Controlled Area (RCA) and the reactor building by passing the physical barrier put in place to ensure proper dosimetry and access requirements were satisfied prior to entry. (See section R1.1 of this report and NRC report 50-336/2002-002; 50-423/2002-002 for further details).

On January 29, 2003, the licensee performed a stand down of all unit 1 project work to address these two events and a number of additional minor human performance issues that had been

identified in the past few months. The inspector discussed the tone of the meeting with licensee management and reviewed expectations for worker performance improvements. Future inspections will evaluate results of the licensee's corrective actions. No regulatory concerns were identified.

c. Conclusions

Although overall performance of the project was good, some human performance issues occurred during the latter part of the inspection period which required licensee management attention. No safety concerns were identified.

## **II. Plant Support and Radiological Controls**

### **R1 Radiological Protection Controls**

#### R1.1 Occupational Exposure Controls

a. Inspection Scope (83750)

The inspector reviewed the licensee's program to determine the capability to monitor and control radiation exposure to employees and to determine adequacy of the licensee's radiation protection program under various conditions. The inspection consisted of observations and interviews with selected radiation protection supervisors and staff.

b. Observations

The inspector reviewed the external dosimetry program for unit 1. The program and procedures are shared with the licensee's operating units 2 and 3. The inspector toured the Thermoluminescent Dosimetry (TLD) lab with the cognizant licensee supervisor and discussed the program capabilities in assessing external exposures at unit 1. The TLD system is National Voluntary Laboratory Accreditation Program (NAVLAP) certified and is appropriate to measure expected doses. Selected dose assessments for personnel exposed to discrete particles were reviewed and determined to be comprehensive and thorough. The inspector reviewed personnel exposure data for 2002. No worker was exposed to radiation in excess of regulatory limits. The licensee spent 4.028 person-rem in 2002 compared to the annual goal of 5 person-rem. The licensee has established a unit 1 personnel exposure goal of 15 person-rem for 2003 which includes significant decommissioning work. The inspector attended an As Low As Reasonably Achievable (ALARA) committee meeting where the 2003 dose goal was presented and identified no safety concerns.

On January 28, 2003, a contract worker entered the RCA and proceeded to his work location on the refuel floor inside a posted high radiation area without an electronic dosimeter (ED) and not on an Radiation Work Permit (RWP). This event was self identified and entered into the licensee's corrective action program. Entrance into the RCA involves a physical barrier which requires placement of an ED to activate a turnstile, thereby admitting the individual. The licensee immediately initiated an investigation. On February 6, 2003, the licensee informed the inspector, by telephone, that a similar incident had occurred at Unit 2. NRC enforcement action

will be addressed for the unit 1 event in conjunction with the unit 2 event (see NRC report 50-336/2002-002; 50-423/2002-002).

The inspector observed work activities associated with Control Rod Blade Guide (CRBG) removal and packaging. These activities were conducted on the 108' elevation of the reactor building and involved the removal of the CRBGs from the reactor cavity pool. Personnel developed a routine process that was observed to be conducted in an effective manner. There was close coordination between the work crews and Health Physics (HP) personnel.

Radiological work and contamination control practices were adequate. Areas potentially impacted by residual water dripping off of the CRBGs as they were removed from the cavity were routinely mopped. Contamination surveys (both large area floor swipes and smears) were periodically performed in work areas to confirm contamination levels. Individuals were observed frequently changing their outer work gloves, especially after handling the CRBGs, throughout the process. Once disassembled, yokes were wrapped and removed from the work area in a timely manner. Physical barriers were present around the reactor cavity and the CRBG preparation and packaging area to minimize the spread of contamination.

Work area dose rates were closely monitored. HP technicians were positioned on the fuel bridge, in the preparation area and outside the immediate work area to monitor dose rates during critical evolutions. In addition, four area radiation monitors were located at strategic locations with alarm set points of 10 mrem/hour. The HP log was reviewed and it was noted that the four area radiation monitors were successfully source checked at the start of the shift. Radiation levels were effectively monitored during the entire operation to ensure that no unforeseen radiation levels were encountered. Radiation surveys were comprehensive and performed in a deliberate and careful manner. High Radiation Areas were properly posted and access controlled appropriate. The use of lead shielding and water shields were effectively utilized to minimize personnel exposures. Exposure estimates for the activity were recently revised downward from an original dose estimate of 2.5 rem to 2.0 rem based on in-progress reviews.

Airborne contamination levels were monitored via two continuous air monitors which were available and observed to be operable and within current calibration. One unit was located adjacent to the reactor cavity in the work area while the second unit monitored general airborne contamination levels on the 108' elevation, about 20' from the work areas. In addition, a local air sampler was stationed and operable in the CRBG preparation area.

Industrial safety practices were noted to be adequate. All fuel bridge movements were announced prior to moving the fuel bridge, rigging and crane activities were well coordinated and hydrolazing work properly controlled.

Current copies of applicable procedures and Work Package documents were available to workers in the immediate work location. The job supervisor demonstrated a good working knowledge of these documents and was familiar with the contents and requirements of the work package.

The RWP for this activity (RWP 121) was reviewed and established adequate controls for the work conditions. The RWP had two associated sub-steps. One step (Step 1) limited work to

less than tech spec radiation levels (i.e., less than 1 rem/hour); while Step 2 covered activities when dose rates exceeded 1 rem/hour. These controls were confirmed by the initial under water survey. If dose rates exceeded 1 rem/hour for a CRBG, the set was placed back into storage and retrieved at a later time under Step 2 controls. No safety concerns were identified.

c. Conclusions

The licensee has provided effective controls to limit exposures of workers to external and internal sources of radiation.

R1.2 Radioactive Waste Management and Transportation

a. Inspection Scope (86750)

The inspector reviewed selected records of radioactive waste shipments for the calendar year 2002 to determine compliance to NRC and Department of Transportation (DOT) regulations. A proposal to use the unit 1 evaporator to process waste water from units 2 and 3 was also reviewed.

b. Observations

For most of calendar year 2002, the licensee was restricted by the State of South Carolina from shipping waste to the Barnwell Low-Level Radioactive Waste Burial facility because of past regulatory violations. The inspector reviewed a letter from the Division of Waste Management, Bureau of Land and Waste Management, State of South Carolina, dated October 23, 2002, which lifted the restriction. A total of 4 shipments of radioactive material and waste containing 0.9 curies of total activity were made from Millstone unit 1 in the year 2002. The shipments transferred trash and waste filters. The licensee made one shipment of un-used but contaminated blade guides in a Type A package. The licensee ships waste from units 2 and 3 with that from unit 1 at times to make efficient use of vehicle capacities. The inspector discussed the process by which the licensee tracks waste by unit of origin and determined that an adequate system has been developed to appropriately track waste streams. On December 15, 2002, Chem-Nuclear, operators of Barnwell, notified Dominion Nuclear Connecticut that waste shipment 1202-11638 (14-195H cask) was not properly labeled in accordance with 49CFR172.400 for LSA material greater than A2 quantities shipped in a DOT 7A Type package. Since this shipment contained waste filters from units 1, 2, and 3, NRC enforcement action will be addressed during an inspection of the operating units (see NRC report 50-336/2002-002; 50-423/2002-002).

The inspector reviewed package dose rate survey data, radioactive material labeling, total activity, nuclide distributions, manifests, hazard waste classification, 10CFR61 documentation, and final truck surveys where applicable. Documentation satisfied regulatory requirements. No safety concerns were identified.

The unit 1 evaporator was installed following cold and dark conditions to process waste sump water in a batch operational mode. The licensee proposes to collect low-level radioactive, high conductivity waste water from units 2 and 3 and process the waste water through the unit 1 evaporator. At present, the waste water from units 2 and 3 is collected and disposed of at an

offsite facility by truck. The inspector reviewed the 10CFR50.59 screening documents. The licensee will not use decommissioning funds for the processing of unit 2 or 3 waste water and will submit required license change documentation. No safety concerns were identified.

c. Conclusions

The licensee maintained an effective radioactive material shipping program in compliance with regulatory requirements. The licensee's plans to use the unit 1 evaporator to process low-level radioactive waste water from units 2 and 3 appear to satisfy NRC requirements.

R1.3 Radiological Program Self-Assessments and Surveillances

a. Inspection Scope (40801)

The inspector reviewed the licensee's program for self-assessment and surveillances of the radiation protection program.

b. Observations and Findings

The inspector reviewed and discussed several self assessments and Nuclear Oversight surveillances that were related to the radiation protection program. The documents reviewed were:

MPS-OP-02-017, "Unit 1 Spent Fuel Pool Work"  
MPS-SA-02-009, "Radioactive Material Control"  
MPS-SA-02-001, "Dosimetry Laboratory Operations"

The inspector determined that the surveillances and audits were comprehensive and detailed. Technical evaluations were thorough and suggestions for program enhancements were adequately addressed to management. No safety concerns were identified.

c. Conclusions

The licensee has maintained an effective self-assessment and program surveillance program with regard to the project. Evaluations were detailed and comprehensive.

**V. Management Meetings**

**X1 Exit Meeting Summary**

The inspectors met with licensee management representatives following each site visit during the inspection period and discussed the results of the inspection. The licensee acknowledged the findings presented.

**X2 Other Meetings**

Licensee management representatives met with Region I staff and management and staff from the NRC Spent Fuel Project Office on December 12, 2002, in the Region I office. The meeting was open to the public. The Millstone site, as well as the State of Connecticut Department of Environmental Protection office, the Millstone resident inspector's office, and the Hartford Courant and the New London Day Times newspapers were linked to the meeting by telephone. A number of private citizens attended the meeting, including a member of the Connecticut Coalition Against Millstone. At the meeting, the licensee notified the NRC of their plans to construct and operate an independent spent fuel storage installation (ISFSI) at the Millstone Power Station. The licensee stated that they plan to store spent fuel in the NUHOMS dry cask storage system under the general licensing provisions of 10 CFR Part 72 and expect to start loading casks with unit 2 spent fuel in 2005. Although preliminary designs do not include use of the ISFSI for unit 1 spent fuel, once built, the facility may be used for unit 1 spent fuel if permanent relocation to a permanent repository does not occur. Construction activities may begin in 2004. A copy of the licensee's handout is enclosed. Further information about this meeting, including a list of attendees, is located in the Agency Documents Access and Management Systems (ADAMS), reference number ML023300601.

## PARTIAL LIST OF PERSONS CONTACTED

### Licensee

\*D. Hicks, Director, Nuclear Safety & Licensing  
\*S. Sarver, Director, Operations and Maintenance  
D. Meekhoff, Supervisor, Operations Support  
\*R. Griffin, Manager, Radiation Protection and Chemistry  
A. Johnson, Supervisor, HP Technical Support  
\*J. E. Laine, Supervisor, Radiation Protection  
\*J. Kunze, Supervisor, Nuclear Operations  
D. Cleary, Supervisor, Nuclear Oversight  
\*P. Tulba, Supervisor, Waste Services  
R. Leach, Staff Health Physicist  
T. Petit, Project Manager, Engineering  
\*P. Quinlan, Senior Engineer, Nuclear Projects  
J. Olson, Unit 1 Project Supervisor  
\*F. A. Perry, Radiation Protection Shift Supervisor  
F. T. Perry, Radiation Protection  
D. Regan, Radiation Protection, Supervisor ALARA  
R. King, Radiation Protection, ALARA  
R. Harnal, ISFSI Project Manager  
\*P. Willoughby, Supervisor, Licensing  
\*M. Jaworsky, Senior Licensing Engineer  
J. Smith, Operations Security Supervisor  
\*J. Campbell, Manager, Protection Services

\*Denotes attendance at the onsite exit meeting held on January 28, 2003

## INSPECTION PROCEDURES USED

36801	Organization, Management, & Cost Controls at Permanently Shutdown Reactors
40801	Self-Assessments, Auditing, and Corrective action
60801	Spent Fuel Pool Safety at Permanently Shutdown Reactors
71714	Cold Weather Preparations
71801	Decommissioning Performance and Status at Permanently Shutdown Reactors
83750	Occupational Radiation Exposure
86750	Solid Radwaste Management and Transportation

## ITEMS OPENED, CLOSED, AND DISCUSSED

Opened

None

Closed

None

Discussed

None

### **LIST OF ACRONYMS USED**

ADAMS	Agency Documents Access and Management Systems
ALARA	As Low As Reasonably Achievable
CFH	Certified Fuel Handler
CFR	Code of Federal Regulations
CRBG	Control Rod Blade Guide
D&LB	Decommissioning and Laboratory Branch
DNMS	Division of Nuclear Materials and Safety
DOT	Department of Transportation
ED	Electronic Dosimeter
GET	General Employee Training
HP	Health Physics
ISFSI	Independent Spent Fuel Storage Installation
NAVLAP	National Voluntary Laboratory Accreditation Program
OSHA	Occupational Safety and Health Administration
PDR	Public Document Room
RCA	Radiologically Controlled Area
RWP	Radiation Work Permit
RP	Radiation Protection
SFP	Spent Fuel Pool
TLD	Thermoluminescent Dosimetry
TS	Technical Specification