

MANUAL HARD COPY DISTRIBUTION

DOCUMENT TRANSMITTAL 2003-58864

USER INFORMATION:

~~GERLACH\*ROSE M EMPL#:28401 CA#: 0363  
 Address: NUCSA2  
 Phone#: 254-2194~~

TRANSMITTAL INFORMATION:

TO: ~~GERLACH\*ROSE M~~ 12/12/2003  
 LOCATION: DOCUMENT CONTROL DESK  
 FROM: NUCLEAR RECORDS DOCUMENT CONTROL CENTER  
 (NUCSA-2)  
 THE FOLLOWING CHANGES HAVE OCCURRED TO THE HARDCOPY  
 OR ELECTRONIC MANUAL ASSIGNED TO YOU:

207 - 207 - SITE SUPPORT MANAGER: EMERGENCY PLAN-  
POSITION SPECIFIC PROCEDURE

REMOVE MANUAL TABLE OF CONTENTS DATE: 11/12/2003

ADD MANUAL TABLE OF CONTENTS DATE: 12/11/2003

CATEGORY: PROCEDURES TYPE: EP  
 ID: EP-PS-207  
 REPLACE: REV:11

REPLACE: REV:11

REMOVE: PCAF 2003-1617 REV: N/A

ADD: PCAF 2003-1617 REV: N/A

UPDATES FOR HARD COPY MANUALS WILL BE DISTRIBUTED  
 WITHIN 5 DAYS IN ACCORDANCE WITH DEPARTMENT  
 PROCEDURES. PLEASE MAKE ALL CHANGES AND  
 ACKNOWLEDGE COMPLETE IN YOUR NIMS INBOX UPON  
 RECEIPT OF HARD COPY. FOR ELECTRONIC MANUAL USERS,  
 ELECTRONICALLY REVIEW THE APPROPRIATE DOCUMENTS AND  
 ACKNOWLEDGE COMPLETE IN YOUR NIMS INBOX.

A045

Control # \_\_\_\_\_

**EMERGENCY NOTIFICATION REPORT**

1. Call Status:  THIS IS A DRILL  THIS IS AN ACTUAL EVENT

2. This is: \_\_\_\_\_ at Susquehanna Steam Electric Station.  
(Communicator's Name)

My telephone number is: \_\_\_\_\_ Notification time is: \_\_\_\_\_  
(Callback telephone number) (Time notification initiated)

3. EMERGENCY CLASSIFICATION:

- UNUSUAL EVENT
- ALERT
- The event has been terminated.
- SITE AREA EMERGENCY
- GENERAL EMERGENCY

UNIT:  ONE  TWO  ONE & TWO

Declaration Time: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Time classification/ termination declared) (Date classification/ termination declared)

THIS REPRESENTS A/VAN:  INITIAL DECLARATION  ESCALATION  NO CHANGE } IN CLASSIFICATION STATUS

4. The Emergency Action Level (EAL) Number is: \_\_\_\_\_

BRIEF NON-TECHNICAL DESCRIPTION OF THE EVENT:

- For initial declaration, static update, or escalation, provide current classification EAL number only.
- For significant events, or when directed by the ED, RM, or EOFSS, provide a brief description.
- For termination, write emergency has been terminated.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. THERE IS:  No  AN AIRBORNE  A LIQUID } NON-ROUTINE RADIOLOGICAL RELEASE IN PROGRESS

6. WIND DIRECTION IS FROM: \_\_\_\_\_ WIND SPEED IS: \_\_\_\_\_ mph.  
(Data from 10 meter meteorological tower, available on PICSY.)

7. Conclusion:  THIS IS A DRILL  THIS IS AN ACTUAL EVENT

APPROVED: \_\_\_\_\_ Time: \_\_\_\_\_ Date: \_\_\_\_\_  
(ED, RM, or EOFSS) (Time form approved) (Date form approved)

Affected Unit \_\_\_\_\_

Control No. \_\_\_\_\_

**PROTECTIVE ACTION RECOMMENDATION FORM  
SUSQUEHANNA STEAM ELECTRIC STATION**

This is a Drill       This is an Actual Event      Preparer: \_\_\_\_\_

<b>The EMERGENCY CLASSIFICATION is:</b>			
<input type="checkbox"/> Unusual Event	<input type="checkbox"/> Alert	<input type="checkbox"/> Site Area Emergency	<input type="checkbox"/> General Emergency

Basis: EAL # \_\_\_\_\_

**This represents:**

Initial Classification     Escalation     Reduction     No Change in the Classification Status

**Emergency Action(s) implemented onsite:**

- None
- Local Area Evacuation
- Site Accountability
- Evacuation of non-essential personnel
- KI to onsite personnel
- Other \_\_\_\_\_

Bases: \_\_\_\_\_

<b>The PROTECTIVE ACTION RECOMMENDATION is:</b>	
<input type="checkbox"/> No Protective Action Recommendation Required	
<input type="checkbox"/> Evacuate 0-2 miles and Shelter 2-10 miles and advise citizens to take KI in accordance with the State's emergency plans.	<input type="checkbox"/> Divert Danville Drinking Water*
<input type="checkbox"/> Evacuate 0-10 miles and advise citizens to take KI in accordance with the State's emergency plans	<input type="checkbox"/> Relocation
	<input type="checkbox"/> Control of Access
	<input type="checkbox"/> Contamination Controls/Decon
	<input type="checkbox"/> Other _____
*Expected arrival of release at Danville: _____	
This represents: <input type="checkbox"/> Initial <input type="checkbox"/> Change <input type="checkbox"/> No Change in the Protective Action Recommendation	

The BASIS for the Protective Action Recommendation is:

Plant Status

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Status of Radioactive Release: Event-related release in progress?  Yes  No

Total Site Release Rate	Airborne	Liquid
< Tech Requirements Limit	<input type="checkbox"/>	<input type="checkbox"/>
≥ Tech Requirements Limit	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: TRM Limits ( $\mu\text{Ci}/\text{min}$ ): Noble Gas  $1.00\text{E}+6$ ; Iodine  $1.04\text{E}+2$ ; Particulate  $7.72\text{E}+2$  (Airborne releases)

Based on:  Effluent Monitors  Field Measurements  Engineering Judgement

Data measured in the field confirm release rate estimations:  Yes  No  N/A

Weather Conditions: Wind Speed \_\_\_\_\_ Wind Direction \_\_\_\_\_

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Dose Projections:  TEDE > 1 rem or thyroid CDE > 5 rem at 2 miles  
 TEDE > 1 rem or thyroid CDE > 5 rem at EPB  
 TEDE ≤ 1 rem and thyroid CDE ≤ 5 rem at EPB

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Other:

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Approval: \_\_\_\_\_ Date/Time: \_\_\_\_\_

Emergency Director or Recovery Manager approval required if change in Classification or Protective Action Recommendation.  
 RPC or DASU approval if no change in the Classification or Protective Action Recommendation.

Transmittal:  Verbal  Electronic  Both

Communicated To:

NAME	AGENCY	DATE/TIME

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MESSAGE

MESSAGE ORIGIN \_\_\_\_\_ MESSAGE NO. \_\_\_\_\_

TIME \_\_\_\_\_ DATE \_\_\_\_\_ PRIORITY \_\_\_\_\_

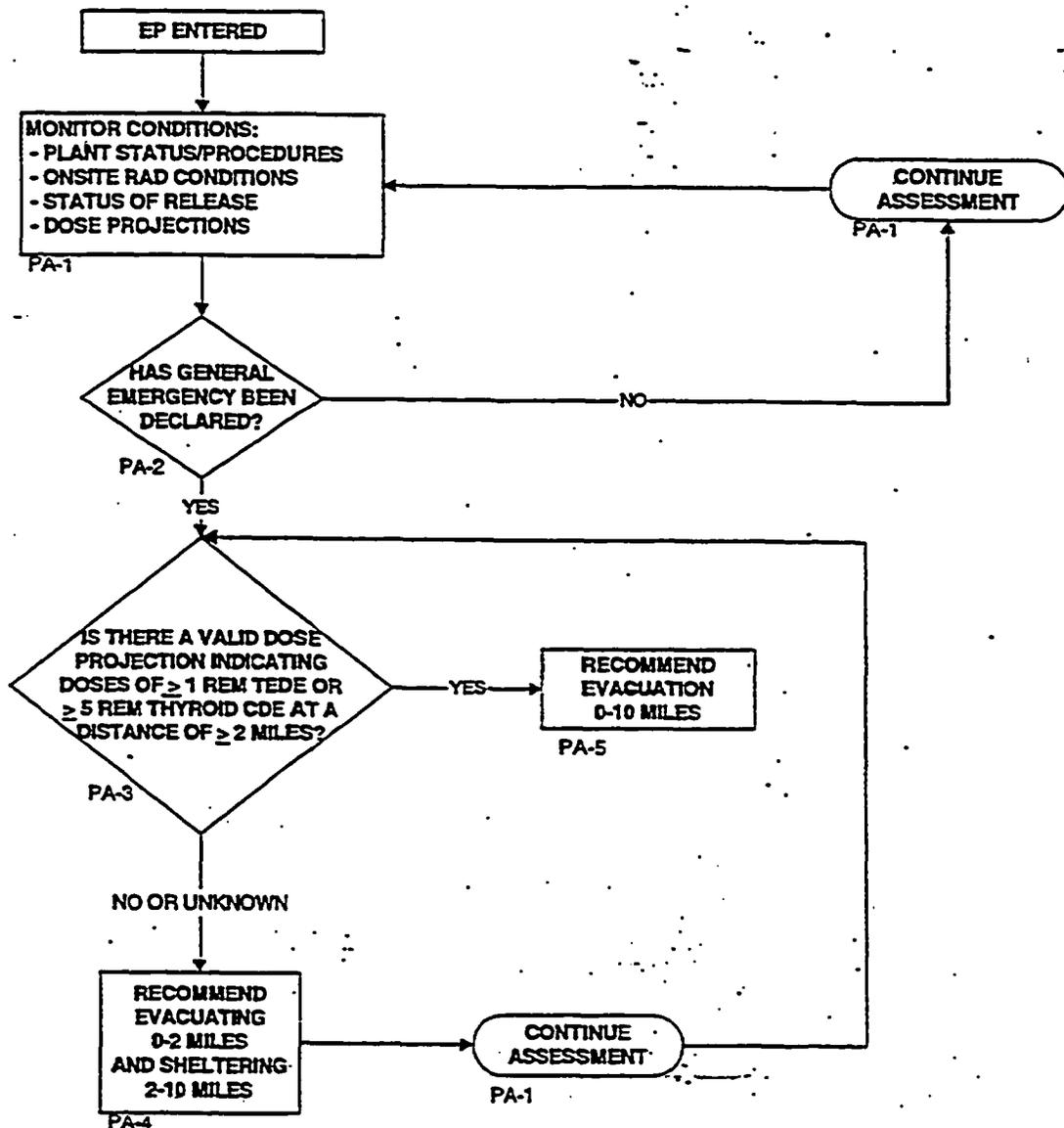
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REPLY

ORIGINATOR OF REPLY \_\_\_\_\_ TRANSMISSION TIME \_\_\_\_\_

TRANSMITTED TO \_\_\_\_\_ TRANSMISSION DATE \_\_\_\_\_



- NOTES:**
1. PA-4 CAN BE USED TO REFER TO SECTION 4.1 OF THE PROCEDURE FOR MORE DETAILED INFORMATION ON THE ACTION TO BE TAKEN.
  2. DOSE PROJECTIONS DO NOT INCLUDE DOSE ALREADY RECEIVED.
  3. TEDE - WHOLE BODY (TEDE) IS THE SUM OF EFFECTIVE DOSE EQUIVALENT RESULTING FROM EXPOSURE TO EXTERNAL SOURCES, THE COMMITTED EFFECTIVE DOSE EQUIVALENT (CEDE) FROM ALL SIGNIFICANT INHALATION PATHWAYS AND THE DOSE DUE TO GROUND DEPOSITION.
  4. CDE - COMMITTED DOSE EQUIVALENT TO THE CHILD THYROID.

PAR Decision at:

\_\_\_\_\_/\_\_\_\_\_  
(Time) (Date)

By:

PEMA notified at:

\_\_\_\_\_  
(Time)

By:

NRC notified at:

\_\_\_\_\_  
(Time)

PAR LIQUID RELEASES

RADIONUCLIDE	Isotopic Limit (uCi/ml)
Ag-110m	1.1E <sup>-6</sup>
As-76	7.2E <sup>-7</sup>
Ba-140	1.1E <sup>-6</sup>
Ce-141	3.6E <sup>-6</sup>
Co-58	1.1E <sup>-4</sup>
Co-60	1.2E <sup>-6</sup>
Cr-51	7.2E <sup>-5</sup>
Cs-134	2.4E <sup>-4</sup>
Cs-137	2.4E <sup>-6</sup>
Fe-55	2.4E <sup>-5</sup>
Fe-59	2.4E <sup>-6</sup>
H-3	2.4E <sup>-2</sup>
I-129	1.2E <sup>-8</sup>
I-131	3.6E <sup>-8</sup>
La-140	7.2E <sup>-7</sup>
Mn-54	3.6E <sup>-6</sup>
Mo-99	7.2E <sup>-6</sup>
Na-22	4.8E <sup>-6</sup>
Nb-95	3.6E <sup>-6</sup>
Ni-59	3.6E <sup>-6</sup>
Ni-63	6.0E <sup>-7</sup>
P-32	3.6E <sup>-7</sup>
Ru-103	2.4E <sup>-6</sup>
Ru-106	3.6E <sup>-7</sup>
Sb-124	7.2E <sup>-7</sup>
Sb-125	3.6E <sup>-6</sup>
Sr-89	2.4E <sup>-7</sup>
Sr-90	9.6E <sup>-8</sup>
Tc-99m	1.1E <sup>-5</sup>
Y-90	7.2E <sup>-7</sup>
Zn-65	3.6E <sup>-6</sup>
Zr-95	2.4E <sup>-6</sup>

ENTRY:  
INDICATIONS OF A POTENTIAL LIQUID RELEASE  
- UNSOLUBLE RADWASTE TANK RELEASE  
- LEAK TO COOLING TOWER BASIN  
- LEAK TO SPRAY POND

PL-1

ENSURE CHEM/ESD TAKES AND ANALYZES SAMPLES

PL-2

IS RELEASE > OR = TECH REQUIREMENTS (AT RELEASE POINT)?

PL-3

NO ACTION REQUIRED

CONTINUE MONITORING

RAD PERSONNEL NOTIFY DANVILLE AND BRP THAT A RELEASE HAS OCCURRED

PL-4

CHEM/FTD EVALUATES RELEASE vs PAG

PL-5

DOES RELEASE EXCEED ANY OF THE TABLE LIMITS OR DOES THE SUM OF FRACTIONS EXCEED 1.0 AT DANVILLE?

PL-6

RAD PERSONNEL NOTIFY DANVILLE THAT NO PAR IS REQUIRED

PL-8

RAD PERSONNEL NOTIFY DEP/BRP FOR DANVILLE TO DIVERT DRINKING WATER SUPPLY & ESTIMATED TIME OF ARRIVAL OF RELEASE AT DANVILLE

PL-7

NOTES:

1. PL-4 CAN BE USED TO REFER TO SECTION 4.2 OF THE PROCEDURE FOR MORE DETAILED INFORMATION ON THE ACTION TO BE TAKEN.
2. CALLS TO DANVILLE ARE COURTESY INFORMATION CALLS ONLY. PROTECTIVE ACTION RECOMMENDATION CALLS MUST BE MADE BY DEP/BRP.

PAR Decision at:

\_\_\_\_\_/\_\_\_\_\_  
(Time) (Date)

By:

\_\_\_\_\_

PEMA notified at:

\_\_\_\_\_  
(Time)

By:

\_\_\_\_\_

NRC notified at:

\_\_\_\_\_  
(Time)