



SELF-STUDY GUIDE PLANT ACCESS TRAINING

SITE: HUDSON

LP #: NGA01F001H, REV. #: 4

PROGRAM: GENERAL ACCESS TRAINING #: NGA

COURSE: PLANT ACCESS #: NGA01

Presentation +
≈7 hours

Other +

Exam =
≈1 hourTotal time
≈8 hours

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- e. Rest.
 - f. Don't offer suggestions or information.
 - g. Don't try to escape.
 - h. Inform captors if hostages need medical assistance.
 - i. Be observant.
 - j. Don't argue with captors.
 - k. Treat captors respectfully.
 - l. Be patient.
 - m. Try not to worry about your family.
5. When a rescue attempt begins, lay face down on the floor and stay there until the action is over. During rescue, expect to:
- a. hear violent loud noises.
 - b. hear commands from the rescue team.
 - c. be handcuffed.
 - d. be asked for identification.
6. Badges
- a. **Unescorted Access** - Issued to workers who have unescorted access to the plant. (Picture)
 - b. **Visitor Access** - Issued to approved plant visitors and must be escorted at all times. (No picture)
 - c. Badges must be worn in accordance with NMC and site rules.
 - d. Report lost or found badges immediately to Security.
7. Violations: Report violations or abnormal security conditions to Security immediately.
- a. Tailgating
 - b. Vital Area door problems
 - c. Opening emergency doors, hatches, or barriers
 - d. Tampering with security barriers.
 - e. Unauthorized badge use.
8. Escorting: Ratios
- a. Work: 1 to 1
 - b. Vital Area: 5 to 1
 - c. Protected Area: 10 to 1
9. Escorting Responsibilities
- a. Maintain positive control.
 - b. Accountability during emergencies.
 - c. Continual Behavioral observation (FFD)
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- c. mutate (or change)
- d. die
- 9. All radiological areas are posted.
 - a. Postings may include signs, placards, ropes, tape, gates, doors, or other barricades.
 - b. Signs have a tri-foil radiation symbol.
 - c. Signs and posting colors are yellow and magenta or black.
- 10. Only authorized and trained personnel may enter radiological areas.
- 11. Report any radiological safety concerns to RP.
- 12. Radiography - Life threatening levels of ionizing radiation can exist in radiography testing areas.
 - a. Radiation ropes, signs, and temporary barriers prevent personnel access into radiography areas.
 - b. Stay clear of any area that is roped off or posted.

XV. Fitness For Duty (FFD): Worker Level

Upon completion of this section, students should be aware of the trustworthiness and reliability requirements for unescorted access to the Protected Area, the importance of being fit for duty, understand the potential consequences of substance abuse, and work in compliance with the station Access Authorization (AA) and Fitness-for-duty (FFD) policies.

Objective PAT91

A. FFD

An individual is fit for duty when he/she is neither mentally or physically impaired from any cause that could adversely affect safe and competent job performance. These impairments could be the result of:

- 1. Dietary conditions
- 2. Physical illness
- 3. Mental illness
- 4. Substance abuse
- 5. Fatigue

B. Requirements

Federal Law requires that each utility licensed to operate a nuclear facility:

- 1. Provide reasonable assurance that station personnel are reliable and trustworthy and are neither under the influence of any substance (legal or illegal) nor mentally impaired from any cause that may adversely affect their ability to safely and competently perform their duties.
- 2. Establish a FFD program to create an environment free of drugs, alcohol, and their effects, and provide individuals with assistance for fitness-for-duty-related problems.

Objective PAT92

C. Negative Impact of Substance Abuse

Substance abusers have the following impacts on business and the public. Abusers:

- 1. Have four times as many accidents.

2. Make five times as many worker compensation claims.
3. Claim three times as many sick benefits.
4. Are absent about twice as often.
5. Make twice as many mistakes.
6. Cause 50 percent of all vehicular accident deaths.
7. Cause 500,000 serious injuries in vehicular accidents each year.

Objective PAT93**D. FFD Policy**

1. Each NMC Site implements NRC Fitness For Duty requirements through site policy and procedures. Attachment 7 lists site-specific FFD procedures for the NMC sites.
2. These policies and procedures apply to any individual granted unescorted access to NMC nuclear plant protected areas or reporting to emergency offsite facilities or technical support centers.
3. Workers must abide by the terms of these policies and procedures.
 - a. Failure by a worker to do so may result in removal from the work site and denial of access.
 - b. Failure by an NMC employee to do so may result in disciplinary action, including suspension and/or termination.
4. Two fundamental policies at all nuclear sites are:
 - a. All personnel must abstain from the consumption of alcohol for at least 5 hours prior to reporting to work and throughout the workday.
 - b. All personnel are prohibited from using any illegal chemical substance and from abusing legal over the counter or prescription medications.

Objective PAT94**E. Implementation**

The primary tools used to implement FFD are:

1. Chemical testing
2. Behavior observation
3. Training
4. Employee Assistance Program (EAP)

Objective PAT95**F. Chemical Testing**

1. The chemical testing program provides a means to detect and deter substance abuse in the workplace. There are four test categories in chemical testing:
 - a. **Pre-access** testing is conducted within 60 days prior to:
 - 1) The initial granting of unescorted access.
 - 2) Assignment to any emergency operations facility or technical support center.
 - b. **Random** testing will be conducted:

- 1) At various unannounced times including day, night, weekends, and holidays.
 - 2) At an annual rate equal to at least 50 percent of the work force covered by the FFD program.
 - c. **For cause testing** will be conducted:
 - 1) As soon as possible following any observed aberrant behavior and if there is reasonable suspicion that the person is under the influence of drugs or alcohol.
 - 2) After the confirmation of the odor of alcohol.
 - 3) After on-duty accident (or near miss) involving failure (or suspected failure) of an individual's performance and if there is reason to believe the person was under the influence of drugs or alcohol.
 - 4) After receiving credible information that an individual is abusing drugs or alcohol.
 - d. **Follow-up testing** will be performed for:
 - 1) Any individual who is reinstated after testing positive for drugs or alcohol.
 - 2) As recommended by the EAP or Medical Review Officer.
 2. Access to NMC sites will be suspended if a worker refuses to participate in the FFD Testing process.
- G. **Testing Notification**
1. Security/Medical is responsible for the notification and collection process for personnel selected for random testing.
 2. Security/Medical personnel may contact selected workers directly or their supervisor to coordinate a random test time and location.
 - a. Collections should be completed within 2 hours following notification.
 - b. Workers are responsible for reporting to the collection site on time with a valid photo I.D., or immediately notifying collection personnel and their supervisor if unable to arrive at the collection site on time.
 - c. Once you are notified for a random test, you are not allowed to leave the site until the sample is collected. Personnel will only be excused from a random test if a plant emergency is declared.
- H. **Call-Ins**
1. Individuals may be called in as needed for unscheduled work. Individuals are responsible for informing supervision if they have consumed alcohol within the last 5 hours or are not fit for duty for any other reason.
 2. If called in for unscheduled work:
 - a. **Workers** – Report any alcohol consumption within the last 5 hours and whether you feel fit for duty.
 - b. **Supervisor/Caller** – Follow instructions in your site FFD procedures.
 3. Except for extreme emergency conditions, personnel having a BAC of 0.04% or greater, as confirmed by breath analysis, **SHALL NOT** be allowed to enter the protected area or EOF facility.
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4. Individuals that have been called in to work **SHALL NOT** be penalized or disciplined because of a positive test given at the start of the call-in if the individual informs the supervisor of alcohol ingestion within the five-hour abstinence period.

I. Substances Tested For

1. Individuals will be tested for the following substances:
 - a. alcohol
 - b. marijuana
 - c. cocaine
 - d. opiates
 - e. phencyclidine
 - f. amphetamines
2. Urinalysis will be used for all substances except alcohol.
3. A breath alcohol content test will be used for alcohol, and a confirmatory breath alcohol content test will be used if the test result is 0.04% or greater. If any individual's breath alcohol content test is positive, he/she may request a blood test.
4. Individuals should be aware that prescription and over-the-counter medication could impact chemical test results.

Objective PAT96

J. Employee Assistance Program

1. NMC and/or site parent-companies have an EAP to provide:
 - a. short-term counseling
 - b. referral services
 - c. treatment monitoring
2. NMC and parent company employees may request assistance from the EAP (self-referral) or be referred by their supervisor or the company medical staff.
3. If the EAP staff determines that an individual's condition constitutes a hazard to the individual or to others, 10 CFR 26 requires notification of company management even if the employee was self-referred.
4. For additional information on the EAP, contact your supervisor or human resources.
5. To get help, contact the EAP staff directly.

Objective PAT97

K. Effects of Drugs

1. Drugs can have a significant impact on job performance such as:
 - a. impaired judgment.
 - b. impaired vision.
 - c. changes in reflexes.
 - d. reduced analytical ability.

2. Prescribed, and over-the-counter (OTC) medications may have an impact on any testing for chemicals. This also includes commonly purchased over-the-counter drugs such as aspirin and cold or allergy medications. For this reason, it is important that you list all drugs you have taken prior to the test.
3. Individuals with a confirmed positive test due to valid medication will be offered the opportunity to discuss the test with the Medical Review Officer.
4. Use of legal marijuana or hemp-based products shall not constitute a reasonable medical explanation for a positive drug test.
5. Report to your supervisor the use of physician-prescribed or over-the-counter medications that adversely affect your job performance or safety.
 - a. Supervisors may temporarily restrict or modify work assignments accordingly.
 - b. Site Medical Services or the MRO is available for consultation regarding the effects of medications on job performance.

Objective PAT98**L. Medical Review Officer**

1. The Medical Review Officer (MRO) is a licensed physician responsible for evaluating laboratory results generated by NMC's drug & alcohol testing program.
2. The MRO has knowledge of substance abuse disorders and has appropriate medical training to interpret and evaluate an individual's positive test result.
3. Prior to declaring a laboratory result positive, the MRO shall determine whether there is a legitimate medical explanation for the confirmed positive test result other than the unauthorized use of a prohibited drug. The MRO will interview the individual and consider his/her medical history and any other relevant biomedical information in making this determination.
4. For individual's testing positive and/or whose fitness is questioned, the MRO may recommend:
 - a. Assessment elements, including referral to an EAP, substance abuse evaluation, or other appropriate evaluation(s).
 - b. Return to duty requirements, including follow-up testing duration and frequency.

Objective PAT99**M. Consequences for Violations**

1. Individuals who violate the FFD policy are subject to suspension of access and disciplinary action up to and including termination.
2. For NMC employees, see CP 0016, NMC Fitness for Duty Policy for employee administration and disciplinary guidelines.
3. Minimal Activity Restrictions concerning FFD incidents include:
 - a. **Positive employee drug or alcohol test** – Initiate removal from duty, deny unescorted access (minimum 14 days for drug) and determine rehabilitation requirements.
 - b. **Positive non-employee drug or alcohol test** – Initiate removal from duty and deny access for a minimal period of 1-year.
 - c. **Second positive drug test** - Initiate removal from duty and deny access for a minimal period of 3-years.

- d. **Positive drug or alcohol test following a denial of access** - Initiate removal from duty and deny access permanently.
- e. **Alcohol results less than .04 BAC** – Consult site-specific FFD procedures.
- f. **Sale, use, or possession of illegal drugs within the protected area** - Initiate removal from duty and deny access for 5-years.
- g. **Refusal to drug or alcohol test** - – Initiate removal from duty and deny access.

Objective PAT100**N. Individual Rights**

1. Individuals have the right to refuse a fitness for duty examination and/or required drug and alcohol testing. However, refusal by a worker:
 - a. constitutes insubordination and subjects the worker to immediate removal from the work site.
 - b. results in denial of nuclear access for a minimum period of one year.
 - c. is considered a positive test result for the procedures refused.
2. If a worker refuses a drug and/or alcohol test or tampers with a sample, the Supervisor will initiate a removal from duty in accordance with the site FFD procedures.
3. Workers and job applicants have the right to submit additional information in writing to explain a confirmed positive drug screen result to the MRO within three days of test result notification.
4. Workers and job applicants also may request in writing a copy of drug screen results and/or a retest of the original sample at an NMC DHHS-approved laboratory within five working days of test results notification. The results of the retest will be binding.
5. Workers testing positive for drugs have the right to request in writing a review of any administrative actions and a retest of the original positive specimen and a review of any administrative actions taken as a direct result of a positive test result.
6. Individuals have the right to privacy at the collection site unless there is reason to believe that the individual will tamper, alter, or substitute a specimen.
7. Personal information collected for the FFD program will be protected and will not be disclosed except as required by the appropriate procedure.

Objective PAT101**O. Individual Roles and Responsibilities**

The safety of you, your co-workers and the public is directly affected by your fitness to perform assigned duties.

1. Report to work mentally and physically fit for duty, unimpaired by alcohol or drugs.
2. Notify supervision if you consider yourself not fit for assigned duties.
3. Notify your supervisor of any problems such as mental stress, fatigue, or illness that may affect your fitness-for-duty.
4. Seek assistance for any problems that may affect your ability to safely and competently perform your duties.
5. Abstain from using alcoholic beverages and illegal drugs before the start of the workday, during the work period, during lunch, and during other work breaks. At a minimum, abstain from consuming alcohol for at least 5 hours preceding scheduled work. Remember, alcohol consumed

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prior to the 5-hour period preceding scheduled work, can result in readings at or above .04% BAC during a scheduled working tour.

6. Do not manufacture, distribute, dispense, purchase, possess, or use alcohol or unauthorized controlled substances, or abuse prescription or over-the-counter medication on company premises or while conducting company business off company premises.

Note: Controlled substances include, but are not limited to, narcotics, depressants, amphetamines, hallucinogens and marijuana.

7. Report the loss of drivers license to your supervisor if your position involves driving for company business.
8. Each worker requesting access must report any previous denial of unescorted access, positive chemical test, or involuntary participation in a substance abuse treatment program.
9. Cooperate fully with the chemical-testing program. Failure to do so may result in denial of access and/or termination. Workers refusing to test, including adulterating or substituting specimens, will be denied unescorted access.
10. May be required to report to a designated physician or health care provider for a fitness-for-duty evaluation if supervision is concerned you appear unfit for duty or there is reasonable suspicion that you have violated site FFD Policy.
11. Workers called out for unscheduled work must inform the individual calling of any alcohol consumed within the previous 5 hours or whether they feel unfit for duty.
12. Refer to the NMC FFD Policy and your site procedures for additional information.

Objective PAT102

13. Report to your supervisor as soon as possible, but no later than prior to your next shift, any conviction, arrest and/or charge.
 - a. **Worker:** Notify supervisor and complete the necessary NMC security form for reporting any arrest, charge, or conviction..
 - b. **Supervisor:** Reports information to security.
 - c. **Security:** Evaluates unescorted access status per NMC security procedures.
 - 1) In determining appropriate action following a conviction, arrest and/or charge, NMC will consider your involvement, job assignment, and work record.
 - 2) NMC will also weigh the effect of your involvement upon the conduct of company business and the maintenance of public trust.

OPEX from Security

Title: Falsification of Records

Summary: On September 1, 1994, unescorted access authorization was removed for an individual who had not reported their previous criminal activities on the security questionnaire. Law enforcement officials had informed the superintendent of security that the individual had a prior conviction from another state.

Objective PAT103

14. Notify a supervisor or security if you notice unusual behavior or suspect substance abuse by any worker.
15. Prevent and report actions that threaten company property or co-workers.

Prompt action is required since there is a potential for injuries or reduced plant performance.

16. If you question the fitness of your supervisor, contact another supervisor, manager, or security.

XVI. FFD - Behavior Observation Program

Upon completion of this section, students should be able to recognize and report aberrant individual behavior that could lead to acts detrimental to public health and safety.

Objective PAT104

A. Recognizing Aberrant Behavior

1. Escorts and supervisors must be sensitive to visitors' and workers' performance for indications of aberrant behavior that affects the ability to perform assigned tasks. Specific diagnosis of the cause of impairment is not required before action is taken to prevent acts that could affect the reliability of the plant.
2. Most people behave in a consistent manner. Changes in this pattern can be the result of many possible causes, including health, family and work difficulties. Usually short lived, all of us experience such changes at one time or another. On occasion, the difficulties continue and even intensify.

Objective PAT105

3. Aberrant behavior is behavior deviating from normal behavior (for that individual). We identify changes in behavior by observing, through what we hear, see, smell and touch, around us.
 - a. Many circumstances can lead to aberrant behavior:
 - 1) Stress
 - 2) Physical illness
 - 3) Drug or alcohol use
 - 4) Financial difficulties
 - 5) Psychological problems
 - b. Look for changes in work performance, social interaction, and physical health behaviors.
 - c. Occasional occurrence of these behaviors does not mean there is a problem. Focus on a pattern of behavior linked to performance problems.
 - d. If a visitor's behavior causes you concern about personnel or plant safety, contact supervision or security and escort the worker out of the Protected Area.

Objective PAT106

B. Indicators of Aberrant Behavior

1. Work Performance.

Worker's on-the-job behaviors and work habits have a direct impact on efficient and effective task accomplishment. Example indicators of possible drug use or aberrant behavior include:

- a. Has work QUALITY or QUANTITY changed?
 - 1) Greatly changed speed of working
 - 2) Changed level of work involvement

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- b. Has the worker made more MISTAKES or BAD JUDGMENTS?
 - 1) Has numerous accidents
 - 2) Laughs off errors or reprimands
 - 3) Denies mistakes
 - 4) Unnecessarily condemns self for mistakes
- c. Does the worker have more difficulty CONCENTRATING or remaining ATTENTIVE?
 - 1) Forgets important or obvious things
 - 2) Acts without thinking
 - 3) Daydreams too much
 - 4) Signs of dozing off
 - 5) Difficulty following procedures
 - 6) Startle response when addressed or with sudden noise
 - 7) Slow or confused verbal or behavioral responding
- d. Is the worker ABSENT "ON THE JOB?"
 - 1) Wanders around the plant a lot
 - 2) Takes excessively long breaks and lunches
 - 3) Avoids a part of the plant because of fear
 - 4) Gets sick while at work
- e. Does the worker adhere to COMPANY POLICY?
 - 1) Steals or damages property
 - 2) Disregards rules
 - 3) Bends rules
- f. Have you noticed the worker becoming OVERCAUTIOUS?
 - 1) Overreacts to normal conditions
 - 2) Freezes or disappears in an emergency
 - 3) Overly concerned about details/accuracy
 - 4) Double-checks work too much
- g. Has the worker become OVERZEALOUS?
 - 1) Never takes breaks
 - 2) Comes to work early
 - 3) Hangs around after shift
 - 4) Volunteers for excessive amounts of overtime
 - 5) Holds grudges/sulks

- h. Does the worker engage in a lot of RISK-TAKING?
 - 1) Drives recklessly
 - 2) Operates equipment carelessly on or off the job
 - 3) Shows poor judgment in dangerous physical activities
 - 4) Gambles a lot
 - i. Has the worker's COOPERATION with CO-WORKERS changed?
 - 1) Refuses to share equipment/information
 - 2) Refuses to take directions
 - 3) Refuses to accept help from others
 - j. Has the worker become lax in supervisory duties (as applicable)?
 - 1) Issues conflicting instructions to employees
 - 2) Use co-workers time and skills to cover responsibilities clearly within job description
 - 3) Submits incomplete reports and data
 - 4) Mismanages budgets
 - 5) Fails to coordinate schedules
2. Social Interaction.
- Type and quality of worker's relationship with co-workers might affect team performance.
- a. Does the worker appear LESS SOCIABLE?
 - 1) Isolated/withdrawn
 - 2) Smiles and talks to self
 - 3) Refuses social contact
 - 4) Lacks a sense of humor
 - 5) Overly suspicious of others
 - 6) Holds grudges/sulks
 - b. Has the worker become TOO SOCIABLE?
 - 1) Talks too much with co-workers
 - 2) Plays pranks/jokes
 - 3) Monopolizes conversations
 - 4) Inappropriate sex behavior
 - 5) Flashes money
 - c. Are there CHANGES in the worker's choice of FRIENDS?
 - 1) Especially for breaks/lunch or transportation
 - 2) Only those younger or easily dominated
 - 3) Has separate set of friends just for drinking or gambling
-
-

- d. Are there changes in the way OTHER WORKERS REACT to the worker?
 - 1) Ignore or avoid
 - 2) Get angry with
 - 3) Become condescending
 - 4) Complain about
 - 5) Mistrust
 - e. Does the worker show more ANGER?
 - 1) Impatient
 - 2) Overreacts to real/imagined criticism
 - 3) Irritable/argumentative
 - 4) Physical fights
 - 5) Temper outbursts
 - f. Does the worker try to MANIPULATE OTHERS?
 - 1) Brags/exaggerates/show off
 - 2) Acts naïve or innocent
 - 3) Lies
 - 4) Borrows money
 - g. Have you noticed changes in the worker SPEECH BEHAVIOR & CONTENT?
 - 1) Talks slower/faster
 - 2) Talks more/less
 - 3) Stammers
 - 4) Jumps from topic t topic
 - 5) Talks about hopeless future
 - 6) Preoccupied with suicide, disasters, destruction
 - 7) Never chats about family/interests
 - h. Does the WORKER have more COMPLAINTS about:
 - 1) Physical ailments
 - 2) Back pain/muscle aches
 - 3) Co-workers or superiors
 - 4) Being ignored/left out
 - 5) Family/money problems
 - 6) Lack of privileges
 - 7) Filling out required forms
 - 8) Or, has stopped complaining
-
-

3. Personal Health Behavior.

Worker's physical and emotional states might affect work behavior.

- a. Are you aware of signs of NERVES or EMOTIONAL UPSET?
 - 1) Headaches
 - 2) Startles easily
 - 3) Cries easily
 - 4) Shaky voice
- b. Does the worker use ALCOHOL or DRUGS differently?
 - 1) Drinks too much
 - 2) Smells of alcohol
 - 3) Preoccupied with drinking or drugs
 - 4) Gulps drinks, especially first couple
 - 5) Encourages others to use
- c. Does the worker show or report signs of FATIGUE?
 - 1) Sleepiness, yawning, tired eyes, legs
 - 2) Decreased energy level
 - 3) Feeling of malaise or lack of motivation, verbalizes or shows no desire and/or lack of interest in activity
 - 4) Restlessness/fidgeting
 - 5) Lethargic, listless or disinterested in surroundings
 - 6) Poor pallor (color): bluish/gray around mouth and lips
 - 7) Shortness of breath/dizziness/pain/signs of extreme stress with exertion
 - 8) Increased irritability or anxiety or impatience
- d. Are you aware of changes in DAILY LIVING ROUTINE?
 - 1) Sleep difficulties
 - 2) Change in amount/pattern of eating
 - 3) Rigidly follows same pattern without reason
- e. Changes in worker's general APPEARANCE?
 - 1) Appears better/more poorly groomed
 - 2) Walks differently (slower/stumble)
 - 3) Change in posture
- f. Have you noticed changes in the worker's BODY or LIMBS?
 - 1) Shaky hands or twitching
 - 2) Weight loss/gain

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- 3) Nail biting
- 4) Cold, sweaty hands
- 5) Sweating, especially non-seasonal
- g. Has the worker had any GASTROINTESTINAL changes?
 - 1) Nausea/vomiting
 - 2) Stomach aches
 - 3) Frequent trips to bathroom
 - 4) Excessive use of antacids, coffee/tea or other liquids, aspirin, cigarettes
- h. Does the worker have any CARDIOVASCULAR difficulties?
 - 1) Dizziness/fainting
 - 2) Breathing irregularities
- i. Have you noticed any changes in worker's THINKING PATTERN?
 - 1) Hallucinations (see things that aren't there)
 - 2) Delusions (false beliefs)
 - 3) Bizarre or unusual ideas

Objective PAT107

- 4. Signs and symptoms of drug use/alcohol abuse include the following indicators:
 - a. Regular use of street, trade or other drug names in communication
 - b. Physical, psychological signs
 - c. Overdose effects
 - d. Withdrawal syndrome
- 5. Smell of alcohol is reason to question fitness for duty.
 - a. You are responsible for reporting immediately the smell of alcohol on any worker.
 - 1) **Workers and/or Escorts** – Report your observation to supervisor or security.
 - 2) **Supervisors** – Initiate a “for-cause” test and removal from duty in accordance with site FFD procedures.
 - b. Failure to report the smell of alcohol is considered a violation of the FFD Program and will result in denial of unescorted access.

Objective PAT108

- 6. Recognizing Drugs, Sales and Distribution
 - a. In addition to alcohol, other commonly used drugs should be recognized, such as:
 - 1) marijuana
 - 2) cocaine
 - 3) stimulants
 - 4) depressants

- 5) hallucinogens
- 6) narcotics
- b. Individuals should be sensitive to any attempt to sell or distribute drugs on company property.
 - 1) There is no typical drug dealer.
 - 2) Drug dealers come from all parts of society.
 - 3) Drug sale or transfer can take place quickly, involving nothing more than a casual personal exchange.
- c. Escorts and all site workers need to be aware of locations where drugs can be concealed:
 - 1) Clothing – pockets, socks, shoes, underwear, hard-hats, caps.
 - 2) Personal containers – briefcases, purses, lunch boxes
 - 3) Tobacco packages – cigarette and chewing tobacco packs

Objective PAT109

- 7. Recognizing behaviors adverse to safe operation and security of the facility:
 - a. Unusual interest in or predisposition towards security
 - b. Operations activities outside the scope of one's normal work assignments
 - c. Frequent unexplained absence from work assignments
 - d. Unusual or inadequate response when confronted about being in a plant or office location outside of the worker's usual scope of work
 - e. Unusual views or opinions that might be directly or indirectly threatening to a nuclear facility

Objective PAT110**C. Reporting Potential Problems**

- 1. **Workers and/or Escorts:** Immediately notify supervisor or security if:
 - a. you notice unusual or aberrant behavior
 - b. you question the fitness of any person
 - c. a person's behavior indicates drug or alcohol use
 - d. a person is a threat to him/herself or others
 - e. you become aware by any means of any use, sale, distribution, or possession of alcohol or drugs onsite or on the job
- 2. **Supervisors:** Document, evaluate, and act on the information in accordance with the site's FFD procedures.

XVII. FFD - Manager/Supervisor Responsibilities

Upon completion of this section, students should be aware of a supervisor's responsibility and recognize individual behavioral changes which, if left unattended, could lead to acts detrimental to public health and safety.

Objective PAT111**A. Manager/Supervisor Roles**

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1. Managers and supervisors are in frequent contact with their personnel and are most familiar with their normal behavior patterns. Therefore, they are in the best position to detect long term changes in individuals' behavior and to initiate appropriate corrective action.
2. Managers and supervisors have the responsibility for the continued observation of assigned individuals and initiating action for degraded behavior that could affect the safety and reliability of the plant.

B. Manager/Supervisor Responsibility

Managers and supervisors have specific responsibility in the company's fitness-for-duty program and Behavior Observation Program (BOP) for:

1. Observing assigned individuals' behavior patterns over time.
2. Observing other workers and reporting any aberrant behavior detected.
3. When calling a worker in for unscheduled work, supervisors shall determine in accordance with site FFD procedures whether the worker has consumed alcohol within the last 5 hours or feels unfit for duty.
4. When contacted, coordinate random test times for direct reports.
5. Informing the Site Access Authorization Lead of any worker reporting an arrest, charge, or conviction.
6. Notifying the Site Access Authorization Lead when it is anticipated that a direct report is expected to be outside the behavior observation program for a period greater than 30 days.
7. Responding in accordance with site FFD procedures when observing or suspecting that an individual is "unfit for duty".
8. Initiating a mandatory EAP referral where behavior-related performance problems are observed.
9. Understanding the roles and responsibilities of Medical Services, Security, EAP, and the MRO.
10. Contacting Security immediately when they become aware of any threat to the plant or plant personnel.
11. Contacting the EAP if a worker is in a mental state where they may be a hazard to themselves.
12. Refer to the NMC FFD Policy and your site FFD procedures for additional information.

Objective PAT112**C. Roles of Others**

1. Security is responsible for:
 - a. Developing and administering the FFD Program.
 - b. Developing and maintaining site policies and procedures.
 - c. Providing personnel to perform drug and alcohol testing (unless provided by site Medical).
 - d. Establishing an FFD denial review process.
 - e. Providing the MRO required for drug and alcohol testing (unless provided by site Medical).
 - f. Providing laboratory drug testing services (unless provided by site Medical).
 - g. Administering the random testing program.
 - h. Coordinating EAP referrals.

- i. Assisting supervision in removal of personnel from the site for FFD or other performance concerns if aid is requested by plant supervision.
- 2. Site Medical Services (as applicable) is responsible for:
 - a. Performing drug and alcohol collections.
 - b. Providing information on over-the-counter and prescription drugs effects.
 - c. Receiving drug test results and supporting the MRO in laboratory drug test results.
- 3. The MRO is responsible for:
 - a. Determining confirmatory drug test results exceeding standards as positive or negative.
 - b. Concurring with the resolution of appeals resulting from confirmed positive tests.
 - c. Recommending return to duty requirements.
 - d. Determining frequency of follow-up testing.
 - e. Providing health and safety information.
- 4. The Employee Assistance Program is responsible for:
 - a. Providing assistance to employees with:
 - 1) Drug or alcohol problems.
 - 2) Personal problems that could affect fitness for duty.
 - b. EAP strives for early intervention and provides for confidential assistance.
 - c. Providing short-term counseling, referral services and treatment monitoring to employees with problems that could adversely affect their performance.

Objective PAT113**D. Documenting Behavior Concerns**

- 1. Most people behave in a consistent manner.
 - a. Changes in this pattern can be the result of many possible causes including health, family, and work difficulties.
 - b. All of us experience short-lived changes at one time or another.
 - c. On occasion the difficulties continue and even intensify.
- 2. Although all nuclear plant personnel have the responsibility to recognize and report aberrant behavior, supervisors must document any continued ongoing individual behavioral problems and initiate action when appropriate.
- 3. A supervisor's responsibility is to recognize declining job performance, caused by behavioral problems, in its early stages and to respond promptly and constructively.
- 4. When continued or repetitive patterns of behavior problems begin to appear, early documentation is very valuable and often necessary.
 - a. Documentation is necessary to assure fair and equal treatment, and to justify actions taken to correct problems.
 - b. Documentation should encompass timely & objective notation of specific behavior observed.

E. Addressing Behavioral Problems

Poor work performance should be dealt with as a performance problem, not a FFD problem, unless there is evidence to indicate the worker has a FFD problem. Supervisors should refer to NMC FFD Policy and site FFD procedures for additional information and specific instructions for addressing problems.

1. Evaluating FFD Information

- a. Attempt to learn as much detail as you can from the information source (i.e., date, time, location, description of people/events).
- b. As soon as possible obtain the assistance of another supervisor or security personnel.
- c. Evaluate the credibility of the information. Consider:
 - 1) Is the information believable?
 - 2) Are there any inconsistencies in the information?
 - 3) Is the information verifiable? Can someone or something confirm the accuracy of the information?
 - 4) If the source of the information is a third-party, is their reason for providing the information sensible? If the source is an anonymous caller, ask the caller why they want to remain anonymous. Does the reason make sense?
- d. You are not expected to be an expert investigator. If you are uncertain as to the credibility of information, contact site Security for assistance.

2. If the information/observation indicates the worker may not meet fitness for duty policy requirements (e.g. may not be mentally or physically fit for duty, or has been involved in an accident) proceed as follows:

- a. When possible, obtain the assistance of another supervisor or a reliable, independent witness.
- b. In the presence of the assisting supervisor or witness, inform the worker of the behavior that indicates the worker may not be fit for duty.
- c. Request an explanation of observed behavior from the worker.
- d. Initiate for-cause testing & removal from duty in accordance with site FFD procedures if the behavior:
 - 1) Indicates reasonable suspicion of drug or alcohol use, or
 - 2) Is sufficiently aberrant (e.g. disrupts workplace, endangers self or others, or the safe operation of the plant),
 - 3) Meets post-accident test requirements.

3. If the behavior is due to an isolated instance of fatigue, stress, illness, or a temporary physical impairment:

- a. The worker may be assigned to other duties or sent home (do not allow workers to drive home if you are concerned about their driving safety).
- b. If you send an employee home, record the remainder of the day as paid time off.

4. If you are uncertain whether the worker meets fitness for duty policy requirements (e.g., you have reason to question worker's mental or physical fitness). Consider:
 - a. Increasing observation of the worker to determine if there is a fitness for duty concern,
 - b. Calling Security, Human Resources or the EAP to seek a professional opinion on the situation.

Objective PAT114**F. Removing Access to the Protected Area**

1. Action must be taken to remove a worker from the protected area when a supervisor becomes aware of a worker's behavior that indicates drug or alcohol use or is sufficiently aberrant (i.e., disrupts workplace, endangers self or others, or the safe operation of the plant). Contact Security immediately if assistance is needed or the individual is hostile.
2. Initiate an FFD for cause test and removal from duty in accordance with site FFD procedures:
 - a. Advise the employee you are concerned with their health and want them to participate in an FFD test.
 - b. Arrange for transportation of the worker to the test site.
 - c. If employee refuses the test, the test will be considered positive and access will be denied.
 - d. Employee may request support but no delays will be tolerated.
 - e. Advise the employee that unescorted access will be suspended pending results of the FFD test.
 - f. Ensure the employee is escorted home safely.
 - g. Ensure all removal from duty actions are completed, including informing security to suspend unescorted access, document and perform required notifications.

Objective PAT115**G. Employee Assistance Program**

1. Supervisors should coordinate referrals to the EAP in accordance with the NMC FFD Policy and site FFD procedures. The EAP is an employee benefit that supervision should encourage workers to voluntarily use for personal issues before job performance is affected.
2. Referrals should be made when:
 - a. Behavior changes are negatively affecting job performance and the employee does NOT appear willing or capable of correcting the behavior.
 - b. There is a significant reliability or FFD problem, as indicated by behavior changes with or without job performance deterioration.
3. Supervisors should rely on EAP personnel to diagnose problems the worker does not self disclose.

XVIII. Interim Summary**A. FFD - All Workers**

1. An individual is fit for duty when he/she is neither mentally nor physically impaired from any cause that could adversely affect safe and competent job performance. These impairments could be the result of:

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- a. Dietary conditions
 - b. Illness
 - c. Substance abuse
 - d. Fatigue
 - e. Stress
2. Requirements and Responsibilities
- a. Comply with site FFD policies and procedures.
 - b. Report to work fit for duty.
 - c. Inform supervisor if otherwise.
 - d. Do not use alcohol at least 5 hours before work.
 - e. Comply with chemical testing program.
 - f. Report the following to your Supervisor:
 - 1) Prescription medications that may affect your job performance.
 - 2) Arrests, charges, or convictions.
 - 3) Previous denial of unescorted access, positive chemical test, or involuntary participation in substance abuse program.
 - g. Do not manufacture, distribute, dispense, purchase, possess, or use alcohol or unauthorized controlled substances, or abuse prescription or over-the-counter medication on company premises or while conducting company business off company premises.
3. NMC FFD Program has 4 parts.
- a. Chemical testing
 - b. Behavioral observation
 - c. Training
 - d. Employee Assistance Program
4. Four types of chemical testing.
- a. Pre-access
 - b. Random
 - c. For cause
 - d. Follow-up
5. BAC of .04% or greater is a violation of FFD
6. MRO is a licensed physician who evaluates positive test results.
7. Individuals who violate FFD are subject suspension of access, and disciplinary actions up to and including termination.
8. Workers have the following rights in the FFD program.
- a. Right to privacy at collection site.

- b. Right to refuse testing (treated as an FFD violation)
- c. Provide information to explain positive test results.
- d. Right to request retest of the same sample.

B. Behavior Observation Program

1. All workers are to be aware of aberrant behavior from coworkers, visitors, and supervisors.
 - a. Aberrant behavior is behavior that deviates from someone's normal behavior.
 - b. Aberrant behavior can manifest itself through work performance, social interaction, and personal health behaviors.
2. All workers need to recognize drug use, sale, and distribution.
 - a. The smell of alcohol is reason to question FFD.
 - b. Contact supervisor or security if you notice unusual behavior, question the fitness of any worker, or suspect the sale, use, or possession of drugs.

C. FFD - Supervisors/Managers

Supervisors have the following responsibilities under FFD.

1. Behavior Observation Program.
2. Document possible behavior concerns.
3. Initiate EAP referral for behavioral-related performance problems.
4. When contacted, coordinate random test times for workers.
5. Respond to worker FFD violations in accordance with the site FFD procedures.

REVIEW

The following questions are designed to help you review and study for your exam.

1. What can poor housekeeping lead to?
2. What does **STAR** stand for and when is it used?
3. What is the major difference between a nuclear plant and a coal plant?
4. What is a MSDS?
5. Where can you find a MSDS?
6. How do you report an emergency on site?
7. When calling to report a fire, what information should you provide?
8. What should you do if you hear a fire alarm in the plant?
9. What are some examples of hot work?
10. Who is responsible for quality?
11. Where can you find out how to contact the NRC?
12. What is tailgating?
13. What should you do if you find an unescorted visitor on site?
14. What colors are normally used to identify a Radiologically Controlled Area?
15. Who is allowed to enter a Radiologically Controlled Area?
16. What does it mean when you are fit-for-duty?
17. What is everyone's number one FFD requirement?
18. Who should you contact if you have a concern regarding a visitor's FFD?
19. Name some of the information workers must report to their Supervisors regarding FFD?

REVIEW ANSWERS

1. Safety and FME problems.
2. STAR: Stop, Think, Act, Review is used for Self-checking. Use STAR before performing any task.
3. Fuel that is used to heat the water.
4. A MSDS provides safety, handling, storage, and disposal information for chemicals used on site.
5. Talk to your Supervisor or access the NMC web site.
6. Call the site emergency number.
7. Your name, fire location and description, whether there are injured personnel.
8. Listen to the plant announcement, avoid the fire area, evacuate if you are requested to do so.
9. Welding, cutting, grinding.
10. Everyone.
11. NRC form-3 posted on site.
12. Entering a Vital Area without "carding in".
13. Take control of the visitor and call Security.
14. Yellow and magenta, or yellow and black
15. Only qualified radiation workers or workers specially authorized by RP.
16. You are not impaired in any way that could affect you safely performing your job.
17. Report to work fit-for-duty.
18. Your supervisor and/or Security.
19. Prescription drugs that may affect job performance; arrests, charges, or convictions; loss of driver's license.

Attachment 7: FFD Site-specific Procedures

| FFD Event * | DAEC | MNGP PINGP | KNPP | PBNP | Palisades |
|--|-------------|-----------------------|---|---|---|
| Call-in for unscheduled work | ACP 101.6 | FFD Handbook | GNP 1.4.3 | NP 1.7.18 | FFD-01 |
| Aberrant behavior or suspect FFD violation | ACP 101.6 | FFD Handbook | GNP 1.4.4 | NP 1.7.5 | FFD-01 |
| Odor of alcohol | ACP 101.6 | FFD Handbook | GNP 1.4.4 | NP 1.7.19 | FFD-01 |
| Accidents | ACP 101.6 | FFD Handbook | GNP 1.4.4 | NP 1.7.19 | FFD-WLP-02 |
| BAC: >.02 < .04% | ACP 101.6 | FFD Handbook | GNP 1.4.3 For-cause and security officers only | NP 1.7.19 For-cause and security officers only | FFD-01 Pre-access & For-cause test: > .005% is positive. Permanent access denial |
| Positive drug or alcohol test | ACP 101.6 | FFD Handbook | GNP 1.4.5 | NP 1.7.5 | FFD-WLP-05 Employee: Follow-up or For-cause permanent access denial Non-employee: immediate unfavorable termination of unescorted access. |
| Refusal to drug and/or alcohol test | ACP 101.6 | FFD Handbook | GNP 1.4.4 | NP 1.7.5 | FFD-WLP-05 |
| Initiating mandatory EAP referrals – Contact: | EAP | FFD Mgr. | EAP and Security | EAP and Security | Security |

* Additional access restrictions may apply based on site or NMC Access Authorization Program requirements. All actions are as allowed under state law and disciplinary measures may require additional sanctions.

Attachment 8: Information On Drugs/Alcohol

EFFECTS OF ALCOHOL AND CONTROLLED SUSTANCES

| Drugs | Trade or Other Names | Physical Dependence | Psychological Dependence | Tolerance | Possible Effects | Effects of Overdose | Withdrawal Syndrome |
|----------------------|--|---------------------|--------------------------|-----------|--|---------------------|----------------------------|
| NARCOTICS | | | | | | | |
| Opium | Dover's Powder, Parexode, Parepectolin | High | High | Yes | Euphoria, | Slow and | Watery Eyes, Runny |
| Morphine | Morphine, Pectoral Syrup | High | High | Yes | Drowsiness, | Shallow | Nose, Yawning, Loss |
| Codeine | Codeine, Empirin Compound with Codeine, Robitussin A-C | Moderate | Moderate | Yes | Respiratory | Breathing, | of Appetite, Irritability, |
| Heroin | | High | High | Yes | Depress | Clammy Skin, | Tremors, Panic, Chills |
| Hydromorphone | Diacetylmorphine, Smack, horse | High | High | Yes | Constricted Pupils, | Convulsions, | and Sweating, |
| Meperidine | Dialaudid | High | High | Yes | Nausea | Coma, Possible | Cramps, Nausea |
| (Pethidine) | Demerol, Pethadol | High | High | Yes | | Death | |
| Methadone | Dolophine, Methadone, Methadone | | | | | | |
| DEPRESSANTS | | | | | | | |
| Choral Hydrate | Noctec, Somnos | Moderate | Moderate | Possible | Slurred Speech, | Shallow | Anxiety, Insomnia, |
| Barbiturates | Amobarbital, Phenobarbital, Butisol, Phenobarbital, Secobarbital, Tuinal Doriden | High-Moderate | High-Moderate | Yes | Disorientation, | Respiration, | Tremors, Delirium |
| Glutethimide | Optimil, Parest, Quaalude, Somnafac, Sopor | High | High | Yes | Drunken Behavior without Odor of Alcohol | Cold and | Convulsions, Possible |
| Methaqualone | Alivan, Axene, Clonopin, Dalmane, Diazepam, Librium, Serux, | High | High | Yes | | Clammy skin, | Death |
| Benzodiazepines | Tranxene, Valium, Verstran | Low | Low | Yes | | Dilated Pupils, | |
| | | | | | | Weak and Rapid | |
| | | | | | | Pulse, Coma, | |
| | | | | | | Possible Death | |
| STIMULANTS | | | | | | | |
| Cocaine | Coke, Flake, Snow | Possible | High | Possible | Increased | Agitation, | Apathy, long Periods |
| Crack Cocaine | Base, Crack, Freebase, Gravel, Rock, White Tomado | Possible | High | Possible | Alertness, | Increase in Body | of Sleep, Irritability, |
| Amphetamines | Biphedamine, Delocobese, Desoxyn, Dexedrine, Mediatric | Possible | High | Yes | Excitation, | Temperature, | Depression, |
| | Preludin | | | | Euphoria, Increased | Hallucinations, | Disorientation |
| Phenmetrazine | Ritalin | Possible | High | Yes | Pulse Rate, and | Convulsions, | |
| Methylphenidate | | Possible | High | Yes | Blood Pressure, | Possible Death | |
| | | | | | Insomnia, Loss of | | |
| | | | | | Appetite | | |
| HALLUCINOGENS | | | | | | | |
| LSD | Acid, Microdot | None | Degree | Yes | Illusions and | Longer More | Withdrawal Syndrome |
| Mescaline and | Mesc, Buttons, Cactus | None | Unknown | Yes | Hallucinations, Poor | Intense "Trip" | not Reported |
| Peyote | 2.5-DMA, PMA, STP, MDA, MDMA, TMA, DOM, DOB | Unknown | Degree | Yes | Perception of Time | Episodes, | |
| Amphetamine | PCP, Angel Dust, Hog | Degree | Unknown | Yes | and Distance | Psychosis, | |
| Variants | PCE, PCPy, TCP | Unknown | Degree | Yes | | Possible Death | |
| Phencyclidine | | Degree | Unknown | | | | |
| Phencyclidine | | Unknown | High | | | | |
| Analog | | | Degree | | | | |
| | | | Unknown | | | | |

Retention: Life of policy + 10yrs.
Retain in: Training Program File

Disposition: Reviewer and Approver

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| Drugs | Trade or Other Names | Physical Dependence | Psychological Dependence | Tolerance | Possible Effects | Effects of Overdose | Withdrawal Syndrome |
|---|--|--|----------------------------------|-------------------|--|---|--|
| CANNABIS | | | | | | | |
| Drugs | Trade or Other Names | Physical Dependence | Psychological Dependence | Tolerance | Possible Effects | Effects of Overdose | Withdrawal Syndrome |
| Marijuana Tetrahydrocannabinol Hashish Hashish Oil | Pot, Acapulco Gold, Grass, Reefer, Sinaemilla, Thai Ticks THC Hash, Hash Oil Weed, Chronic, Ganja | Degree Unknown Degree Unknown Degree Unknown Degree Unknown | Moderate Moderate Moderate | Yes Yes Yes | Euphoria, Relaxed inhibitions, Increased Appetite, Disoriented Behavior | Fatigue, Paranoia, Possible Psychosis | Insomnia, Hyperactivity, Decreased Appetite Occasionally Reported |
| ALCOHOL | | | | | | | |
| Alcohol | Beer, Liquor, Wine, Spirits | High | High | Yes | Slurred Speech, Disorientation, Slowed Reflexes, Red Eyes, Poor Motor Skills, Odor of Alcohol | Poor Judgement, Perception, Disorientation, Confusion, Coma, Possible Death | Delirium Tremens (D T's) Depression, Convulsions, Panic, Possible Death |