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LICENSE NO: SNM-42

LICENSEE: BWX Technologies, Inc.
Nuclear Products Division
Lynchburg, VA

SUBJECT: SAFEGUARDS EVALUATION REPORT FOR BWX TECHNOLOGIES,
INC., EXEMPTION TO LICENSED PHYSICIAN REQUIREMENTS OF
10 CFR PART 73

1.0 BACKGROUND

In several sections, 10 CFR Part 73 requires the licensee to give specified personnel a medical examination to measure physical ability while performing assigned security job duties, and to determine if there are any medical contraindications, as disclosed by the medical examination, to the specified personnel's participation in the required physical fitness training program. By letters dated June 23, 2006, and September 28, 2006, BWX Technologies, Inc. (BWXT) requested an exemption from 10 CFR 73.46(b)(10)(iii) and (iv); 73.46(b)(11)(iii) and (v); 73.46(b)(12)(ii); and Part 73, Appendix B, paragraphs I.B.1.b, I.B.2.b, and I.C requirements, which would allow the use of Nurse Practitioners to perform Security Officer physicals pursuant to the Commonwealth of Virginia Regulations governing the Licensure of Nurse Practitioners found in 18 VAC 90-30-10. Due to the fact that Virginia Law allows a licensed nurse practitioner to engage in practices constituting the practice of medicine in collaboration with and under the medical direction and supervision of a licensed physician, BWXT would like to have the option of utilizing these licensed medical professionals to perform security physicals as required by the Nuclear Regulatory Commission (NRC) regulations.

2.0 DISCUSSION

The staff reviewed the exemption request and 18 VAC 90-30-10 et seq. dated March 22, 2006. In the Commonwealth of Virginia, a licensed nurse practitioner is authorized to engage in practices constituting the practice of medicine in collaboration with and under the medical direction and supervision of a licensed physician (paragraph 18 VAC 90-30-120.A). In paragraph 18 VAC 90-30-10, "Medical direction and supervision" is defined as participation in the development of a written protocol, including provision for periodic review and revision; development of guidelines for availability and ongoing communications, which provide for and

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define consultation among the collaborating parties and the patient; and periodic joint evaluation of services provided (e.g., chart review, and review of patient care outcomes). In paragraph 18 VAC 90-30-10, "Protocol" is defined as a written statement, jointly developed by the collaborating physician(s) and the licensed nurse practitioner(s), that directs and describes the procedures to be followed, and the delegated medical acts appropriate to the specialty practice area to be performed by the licensed nurse practitioner(s) in the care and management of patients.

As a result of the above review, that staff determined that, under the Commonwealth of Virginia law, a licensed nurse practitioner, providing a medical examination, including a determination and written certification that there are no medical contraindications, as disclosed by the medical examination, would do so in accordance with a written protocol. The written protocol, developed in collaboration with the licensed physician(s), would direct and describe the procedures to be followed, and the delegated medical acts, including the determination and written certification required by 10 CFR Part 73. In addition, the staff determined that licensure of a nurse practitioner under 18 VAC 90-30-10 et seq. provides reasonable assurance that the medical examination and determination required by 10 CFR Part 73 would be performed appropriately. Therefore, this exemption does not reduce the effectiveness of the licensee's physical protection plan nor the Commission's regulations.

The staff recommends adding Safeguard Condition 6.8 to read as follows:

SG-6.8 Notwithstanding the requirements of 10 CFR 73.46(b)(10)(iii) and (iv); 73.46(b)(11)(iii) and (v); 73.46(b)(12)(ii); and Part 73, Appendix B, paragraphs I.B.1.b, I.B.2.b, and I.C, the licensee may use nurse practitioners licensed under the Commonwealth of Virginia regulations 18 VAC 90-30-10, et seq., to conduct the required medical examinations.

3.0. ENVIRONMENTAL REVIEW

The NRC staff performed an Environmental Assessment of the proposed action and concluded that allowing licensed nurse practitioners to conduct the required medical examinations would not increase the probability or consequences of accidents previously analyzed and would not affect facility radiation levels or facility radiological effluents. The proposed action will not increase the probability or consequences of accidents. No changes are being made in the types of effluents that may be released off-site. There is no significant increase in the amount of any effluent released off-site. There is no significant increase in occupational or public radiation exposure. Therefore, there are no significant radiological environmental impacts associated with the proposed action.



With regard to potential non-radiological impacts, the proposed action does not have a potential to affect any historic sites because no previously undisturbed area will be affected by the proposed action. The proposed action does not affect non-radiological plant effluents and has no other effect on the environment. Therefore, there are no significant non-radiological environmental impacts associated with the proposed action.

Accordingly, the NRC staff concludes that there are no significant environmental impacts associated with the proposed action and, thus, the proposed action will not have any significant impact to the human environment. The proposed action does not alter the Environmental Assessment for BWXT provided in August 2005 (ML0523603121).

4.0 CONCLUSION

Based on the above, the staff concludes that there is reasonable assurance that the activities to be authorized by the issuance of the exemption to BWXT will not constitute an undue risk to the health and safety of the public, workers, and the environment. The staff recommends approval of the exemption application.

NRC Region II inspection staff has no objection to this proposed action.

PRINCIPAL CONTRIBUTOR

J. Wiebe