



Corbin A. McNeill
Senior Vice President
Nuclear Generation

January 4, 1985
IPN-85-01

Director of Nuclear Reactor Regulation
U.S. Nuclear Regulatory Commission
Washington, D.C. 20555

Attention: Mr. Steven A. Varga, Chief
Operating Reactors Branch No. 1
Division of Licensing

Subject: Indian Point 3 Nuclear Power Plant
Docket No. 50-286
Radiological Environmental Technical
Specifications (RETS)

Dear Sir:

The RETS were incorporated into the Indian Point 3 Facility Operating License via Amendment 51, dated December 7, 1984. A review of this amendment has disclosed that a typographical error consisting of a transpose of two entries in Table 3.3-1, was included in the Authority's submittal dated September 30, 1983. The entries which were transposed are the minimum analysis frequency for the batch waste releases of Sr-89, Sr-90 and Fe-55 and the minimum analysis frequency for the continuous releases of principal gamma emitters, Mo-99, Ce-144 and I-131. The corrected Table 3.3-1 is enclosed and reflects that provided by the corresponding table included in NUREG-0472, "Standard Radiological Environmental Technical Specifications For Pressurized Water Reactors".

This matter has been discussed with the Indian Point 3 Project Manager and has been brought to the attention of the Indian Point 3 Resident Inspector. Based on discussions with the Project Manager, it is the Authority's understanding that the corrected Table 3.3-1 will be re-issued by the NRC.

Abol
1/1

Should you or your staff have any questions regarding this matter,
please contact Mr. P. Kokolakis of my staff.

Very truly yours,



Corbin A. McNeill, Jr.
Senior Vice President
Nuclear Generation

cc: Resident Inspector's Office
Indian Point Unit 3
U.S. Nuclear Regulatory Commission
Buchanan, New York 10511

TABLE 3.3-1

RADIOACTIVE LIQUID WASTE SAMPLING AND ANALYSIS PROGRAM

Liquid Release Type	Sampling Frequency	Minimum Analysis Frequency	Type of Activity Analysis	Lower Limit of Detection (LLD) ^a (uCi/ml)
A. Batch Waste Release Tanks ^b	B Each Batch	B Each Batch	Principal Gamma Emitters ^c	5×10^{-7}
			Mo-99, Ce-144	5×10^{-6}
			I-131	1×10^{-6}
	B One Batch/M	M	Disolved and Entrained Gases (Gamma Emitters)	1×10^{-5}
	B Each Batch	M Composite ^d	H-3	1×10^{-5}
			Gross Alpha	1×10^{-7}
	B Each Batch	Q Composite ^d	Sr-89, Sr-90	5×10^{-8}
Fe-55			1×10^{-6}	
B. Continuous Releases ^{e, f}	3/W Composite ^d	W Composite ^d	Principal Gamma Emitters	5×10^{-7}
			Mo-99, Ce-144	5×10^{-6}
			I-131	1×10^{-6}
	M Grab Sample	M	Dissolved and Entrained Gases (Gamma Emitters)	1×10^{-5}
	W Composite ^d	M Composite ^d	H-3	1×10^{-5}
			Gross Alpha	1×10^{-7}
	W Composite ^d	Q Composite ^d	Sr-89, Sr-90	5×10^{-8}
			Fe-55	1×10^{-6}

Frequency Notation

B = Batch
W = Weekly
M = Monthly
Q = Quarterly

Indian Point 3
Nuclear Power Plant
P.O. Box 215
Buchanan, New York 10511
914 739.8200



TO: CONTROL COPY NO.:

FROM: TERRY RYAN DATE:

SUBJECT: INDIAN POINT NO. 3 NUCLEAR POWER PLANT EMERGENCY PLAN AND PROCEDURES DOCUMENT

The enclosed sheets are the revised pages to your Emergency Plan/Procedures Document (assigned controlled copy). Please discard the old sheets, insert the attached sheets, initial and date this routing sheet and return it to Documents Control; Attention: Terry Ryan

In addition, please review the section revision numbers shown on the new index attached to ensure that you have the most recent of each section incorporated into your control copy.

<u>Section</u>	<u>Pages</u>	<u>Date</u>	<u>Initials</u>
INDEX	1, 2		
IP-1040	ALL		
IP-1070	ALL		
IP-1028	Cancelled, 2, 7, ATT. 4B, ATT. 10		
IP-1017	ALL		
Roster I	ALL		
Roster II	ALL		
Roster III	ALL		
IP-1085	REMOVE ALL (CANCELLED)		

A045
1/1

50-286 Superseded Per Rev's to Emergency Plan Implementing
Procedures Dtd 1/2/85 #8501180390 Revised 2/5/85 E.P.V.

EMERGENCY PLAN PROCEDURES INDEX REV. 25 (PAGE 1)

<u>Procedure #</u>	<u>Procedure Title</u>	<u>Rev. #</u>	<u>Date</u>
<u>Dose Assessment</u>			
IP-1001	Discussion of the DMR	4	10/83
IP-1002	Determination of the Magnitude of Release	5	12/83
IP-1003	Obtaining Meteorological Data	5	2/84
IP-1004	Midas Computer System-Dose Assessment Models	3	11/82
IP-1005	Planned Disch. of Cont. Atmos. During Accident Conditions	3	2/84
<u>Environmental Monitoring</u>			
IP-1010	In-Plant/Site Perimeter Surveys	4	8/83
IP-1011	Offsite Monitoring	6	3/84
IP-1015	Post Accident Environmental Sampling and Counting	2	11/82
<u>Protective Actions</u>			
IP-1017	Rec. Protective Actions for Offsite Population	2	1/82
IP-1019	Emergency Use of Potassium Iodide	0	6/84
<u>Personnel Injury</u>			
IP-1021	Radiological Medical Emergency	9	3/84
IP-1022	Transport of Contam. Injured Personnel Between Unit 3 & 1	1	11/82
IP-1023	Use and Set-up of Unit 3 Personnel Decon Suite	0	11/82
<u>Damage Assessment</u>			
IP-1025	Repair and Corrective Action Teams	3	8/83
IP-1027	Emergency Personnel Exposure	2	8/83
IP-1028	Core Damage Assessment	0	11/83
<u>Notification and Communication</u>			
IP-1030	Control Room Emergency Notif., Communication & Staffing	10	6/84
IP-1031	Procedure for EOF Emergency Notification & Communications	1	10/83
IP-1038	Use of the Emergency Communications Systems	5	8/83
<u>Emergency Operation Facilities</u>			
IP-1040	Habitability of the Emergency Facilities	5	12/82
IP-1041	Personnel Monitoring of EOF, TSC and OSC Personnel	4	7/82
IP-1045	Technical Support Center	5	8/83
IP-1047	Operations Support Center	7	6/84
<u>Accountability and Evacuation</u>			
IP-1050	Accountability	7	6/84
IP-1053	Evacuation of Site	2	10/83
IP-1054	Search and Rescue Teams	2	8/83

EMERGENCY PLAN PROCEDURES INDEX REV. 25 (PAGE 2)

<u>Procedure #</u>	<u>Procedure Title</u>	<u>Rev. #</u>	<u>Date</u>
<u>Non-Radiological Emergencies</u>			
IP-1055	Fire Emergency	2	2/83
IP-1056	Directing Fire Fighting Personnel in Controlled Areas	2	2/84
IP-1057	Tornado (Hurricane) Emergency	1	10/83
IP-1058	Earthquake Emergency	5	5/83
IP-1059	Air Raid Alert	1	10/83
<u>HP Release Surveys and Decontamination</u>			
IP-1060	Personnel Radiological Check and Decontamination	3	2/84
IP-1063	Vehicle/Equipment Radiological Check and Decontamination	3	3/84
<u>Emergency Equipment and Maintenance</u>			
IP-1070	Periodic Check of Emergency Preparedness Equipment	10	3/84
IP-1076	Beepers	5	6/84
<u>Exercises, Drills and Training</u>			
IP-1080	Conduct of Emergency Exercises and Drills	6	6/84
IP-1085	Emergency Response Training	3	11/82

POWER AUTHORITY OF THE STATE OF NEW YORK

INDIAN POINT NO. 3 NUCLEAR POWER PLANT

P. O. BOX 215 BUCHANAN, N. Y. 10511

TELEPHONE: 914-739-8200



EMERGENCY PLAN PROCEDURES

PROCEDURE NO. IP- 1040

REV. 5

TITLE: HABITABILITY OF THE EMERGENCY FACILITIES

WRITTEN BY: *Linda M. Brown*

REVIEWED BY: *David D. Bell*

PORC REVIEW *J.A. Schiavo* DATE *12/20/82*

APPROVED BY: *John P. Burns* DATE *12/27/82*

EFFECTIVE DATE *12-27-82*

HABITABILITY OF THE EMERGENCY FACILITIES1.0 INTENT

To describe the necessary checks to determine if the radiological conditions of the Emergency Operations Facility (EOF), the Technical Support Center (TSC) and Operations Support Center (OSC) are such that a move to their alternates is required.

2.0 PROCEDURE FOR THE EOF:

- 2.1 The Emergency Director, or the Radiological Assistant Team Leader upon arrival at the EOF, will immediately call the Unit No. 3 Control Room to confer with the Shift Supervisor on whether or not the EOF has been involved in the plume since the start of the emergency, and if so, for how long.
- 2.2 Interrogate the Meteorological system at the EOF to determine if the meteorological conditions have prevailed for the past hour.
- 2.3 Follow guidance in section 3.0.
- 2.4 The EOF will be considered tenable after careful consideration of the following:
 - 2.4.1 Radiation fields inside and outside the EOF.
 - 2.4.2 Meteorological Conditions at the time
 - a) Plume direction
 - b) Atmospheric Stability
 - c) Weather forecast obtained from the National Weather Service at [REDACTED]
- 2.5 If the decision is made to relocate to the Alternate Emergency Operation Facility (AEOF), the Emergency Director will notify the Control Room and request that the Plant Operations Manager assume Emergency Director control and communication activities. The POM, after assuming the role of the ED, should then assure the following positions are assigned: Communicator and Radiological Assessment Team Leader. The Flowchart for the EOF communications (IP-1030) should be used by the POM (ED) and his staff during this transition period. When the AEOF has been established and can resume those responsibilities, the Emergency Director at the AEOF will notify the Control Room (POM) and will again assume ED control and communication activities.

3.0 PROCEDURE FOR THE EOF, TSC, AND OSC

- 3.1 The Emergency Locker should be unlocked.
- 3.2 If the emergency is one where radiological conditions are expected, the radiation monitoring equipment should be put in use immediately.
- 3.3 An initial survey should be made for beta and gamma fields, and results recorded in the log book.

- 3.4 If at the PF perform beta and gamma survey outside the building. Record readings in the log book.
- 3.5 After the initial survey, an H.P. technician may be contacted (through the OSC) to discuss and/or set up further monitoring equipment.
- 3.6 The results of the radiation surveys are to be analyzed, and an evaluation of potential radiation hazard is to be made by Radiological Assessment personnel, Health Physics personnel or the Facility supervisor.
- 3.7 Check Radiological conditions frequently and record all readings in log book.
- 3.8 Monitoring for personnel should be in accordance with IP-1041.

4.0 HABITABILITY GUIDANCE

Various factors and conditions must be considered when deciding on the Habitability of the Operation Facilities and Centers. Whole body, beta and iodine doses must be measured and evaluated along with the accident conditions and circumstances.

The basic factor to consider is whether or not the accident is under control: is the radiological release terminated? or will stop it shortly? or, is the release expected to continue for hours or days? The duration of expected release, along with advantages and disadvantages of moving, must be considered. The following is offered as general guidance:

4.1 Whole Body and Beta Doses

Fields	Considerations	Maximum acceptable total dose for a 10 hr. release	
		WB	β *
10 mR/hr	move if feasible	100 mR	300 mR
100 mR/hr	move if at all possible	1000mR	3000mR
500 mR/hr	move	5000 mR	15000 mR

* β = 3 x WB rather than 6 x WB
because the lens of the eye has
been factored into the calculation.

4.2 Iodine Doses

From the Iodine sample taken the concentration of I-131 can be determined and from this the dose of I-131 is determined.

$$\text{Dose} = \text{Concentration} \times 1.5 \times 10^6 \times \text{hr breathed} = \text{Rem thyroid}$$

If the dose is 1 R or greater, distribution of KI should be considered.
If the dose is $\geq 5 \rightarrow 25R$ KI should be given.

If doses are greater than 25R give KI and re-evaluate the dose to the thyroid on that basis. Then make the determination of whether or not to evacuate the facility or center and relocate.

- 4.3 The Radiological Assessment Team should be consulted for recommendations and dose projections prior to any relocation of the Operation Facilities.

Indian Point 3
Nuclear Power Plant
P.O. Box 215
Buchanan, New York 10511
914 739.8200



New York Power
Authority

EMERGENCY PLAN PROCEDURES

PROCEDURE NO IP- 1070 REV. 10

TITLE" PERIODIC CHECK OF EMERGENCY PREPAREDNESS EQUIPMENT

This procedure has been extensively revised

WRITTEN BY: David D. Bell
REVIEWED BY: [Signature]
PORC REVIEW: [Signature] DATE 2/23/84
APPROVED BY: [Signature] DATE 2/23/84
EFFECTIVE DATE: 3/5/84

PERIODIC CHECK OF EMERGENCY PREPAREDNESS EQUIPMENT1.0 INTENT

To describe the method for periodic checking of emergency equipment stored in Emergency Operation Facilities and Centers, Emergency Vehicles, Unit 3 Control Room and Command Guard House, and Peekskill Community Hospital.

2.0 LOCATIONS OF STORED EQUIPMENT

- Emergency Operation Facility (EOF)
- Alternate Emergency Operation Facility (AEOF)
- Emergency Vehicle (EV)
- Alternate Emergency Vehicle (AEV)
- NYPA Command Guard House (CGH)
- Unit 3 Control Room (CR)
- Unit 3 Technical Support Center (TSC)
- Unit 3 Operation Support Center (OSC)
- Peekskill Community Hospital

3.0 DISCUSSION

- 3.1 Con Edison shall check the emergency equipment located in the lockers in the EOF, AEOF, EV and AEV on a monthly basis and after each drill. Con Edison Environmental Health and Safety Department Procedure 99.301, Periodic Check of Stored Emergency Equipments and Supplies will be used.
- 3.2 Con Edison personnel will perform the following communication checks in accordance with Con Edison Environmental Health and Safety Department Procedure 99.303 Periodic Check of Emergency Radios, Telephones, and Outdoor Assembly Alarm).
 - Con Ed frequency radios (EOF, AEOF, CR-2, CR-3, CE-CGH, 2 emergency vehicles).
 - Con Ed walkie-talkie radios
 - Con Ed Emergency Site Assembly Alarm
 - County Hot Line (RECS) Telephones (EOF, CR-2, CR-3)
 - Direct line telephones (EOF, CR-2, CR-3, AEOF)
 - Con Ed TSC/EOF/CR automatic ring telephones
 - NYPA push button phones in EOF
 - NRC (ENS) phones in EOF and AEOF

- 3.3 Following completion of the above checks, Con Edison shall forward copies of the completed checklists of equipment and supplies to the IP-3 RES Department for review and filing.
- 3.4 The IP-3 Safety Supervisor shall assure emergency first aid equipment is checked in conformance with surveillance test 3PT-M48. It is also the responsibility of the Safety Department to check, and replace as necessary, all of the air supplied and/or oxygen generating respiratory equipment.
- 3.5 IP-3 Health Physics personnel shall check the emergency equipment lockers in the IP-3 CR, OSC, TSC, CGH and Peekskill Community Hospital Decon Room on a monthly basis and after each drill. Health Physics is also responsible for changing film badges and/or TLD's at these locations on a monthly basis. In addition, Health Physics will conduct the monthly communication checks as specified on the check-off lists included in this procedure (Attachment 1).

4.0 PROCEDURE

- 4.1 The IP-3 Performance and Reliability Group shall issue notice on a monthly basis to the Asst. to the Radiological and Environmental Services Superintendent (ARESS) stating when the periodic check of equipment is due.
- 4.2 The ARESS shall attach a copy of this procedure (IP-1070) to the notice and forward it to the Health Physics Supervisor who, in turn, will assign the inventory check to an HP(s).
- 4.3 Using the check off lists (Attachment 1 of this procedure), the HP(s) performing the checks shall:
 - 4.3.1 Obtain permission from the Shift Supervisor (SS) or Senior Reactor Operator (SRO) to conduct this procedure. The SS or SRO shall sign page 1 of Attachment 1 indicating his permission to conduct the test.
 - 4.3.2 Obtain permission from the Emergency Room Representative at the Peekskill Community Hospital to conduct the inventory at that facility. The Emergency Room Representative shall sign page 1 of Attachment 1 indicating his permission to conduct the test.
 - 4.3.3. Indicate that each piece of equipment is present by placing a check (✓) next to the item on the check off list.
 - 4.3.4 Perform a functional inspection and/or battery test on equipment as indicated.
 - 4.3.5 Indicate any appropriate comments next to each item found defective.
 - 4.3.6 Note the calibration due date in the appropriate column for instruments and counters.
 - 4.3.7 Replace defective and/or missing equipment and report it to the ARESS.
 - 4.3.8 Replace any equipment if its' calibration will expire before the next scheduled check.
 - 4.3.9. Submit completed test to the SS for review and signature.

4.4 The SS shall:

- 4.4.1 Review the test results
- 4.4.2 Sign page 1 of Attachment 1 indicating review
- 4.4.3 Log as appropriate
- 4.4.4 Return to the ARESS

4.5 The ARESS shall:

- 4.5.1 Review the test results
- 4.5.2 Ensure all required equipment/supplies are available and operational.
- 4.5.3 Sign page 1 of Attachment 1 indicating review
- 4.5.4 Forward to the Performance and Reliability Group for filing.

4.6 The Performance and Reliability Group shall file and maintain all test results as required by IP-3 Tech. Specs.

EMERGENCY LOCKER AND EQUIPMENT INVENTORY REVIEW AND SIGNATURE

1. Permission to initiate test: _____
Shift Supervisor/Senior Reactor Operator Date

2. Permission to inspect inventory at Peekskill Community Hospital:

Emergency Room Representative Date

3. Review of test results: _____
Shift Supervisor/Senior Reactor Operator Date

ARESS Date

EQUIPMENT LOCATED INSIDE UNIT 3 CONTROL ROOM

CHECK OFF LIST

No.	Equipment	Present	Operational Check	Calibration Due	Comments
<u>AIR SAMPLING & COUNTING</u>					
1	HD-28B sampler/totalizer		*		
1	SPA-3/MS-2 iodine counter w/shield		*		
1	frisker(RM-14) with HP-210 or 260 probe		*		
1	box air filters for HD-28B		N/A	N/A	
1	box charcoal cartridges		N/A	N/A	
12	silver zeolite cartridges		N/A	N/A	
1	check source SPA-3 (Ba-133)		*	N/A	
5	packs smears		N/A	N/A	
5	packs gauze wipes		N/A	N/A	
1	pair tweezers		N/A	N/A	
	Planchetts		N/A	N/A	
	Smear Envelopes		N/A	N/A	
4	Air sample heads for HD-28B		N/A	N/A	
<u>PORTABLE SURVEY INSTRUMENTS</u>					
1	RO-2 or equivalent ionization chamber		*		
1	RO-2A or equivalent ionization chamber		*		
1	E-530 GM survey instrument or equivalent		*		
<u>DOSIMETRY</u>					
20	film badges and/or TLD's		N/A		
20	0-200 mR dosimeters		* zero		
20	0-500 mR dosimeters		* zero		
20	0-5 R dosimeters		* zero		
2	dosimeter chargers		*	N/A	
1	set AA spare batteries		*	N/A	
<u>RESPIRATOR PROTECTION</u>					
2	bottles Control Room breathing air		N/A	N/A	
10	air masks with pressure demand regulators		N/A	N/A	
3	manifolds		N/A	N/A	
3	regulators for large bottle manifolds		N/A	N/A	
6	lengths of 50' hose		N/A	N/A	
100	bottles KI (14 doses/bottle)		N/A	N/A	

EQUIPMENT LOCATED INSIDE UNIT 3 CONTROL ROOM

CHECK OFF LIST (CON'T)

No.	Equipment	Present	Operational Check	Calibration Due	Comments
<u>TELEPHONES</u>					
-	Control Room Emergency Notification System (ENS) telephone (to NRC)		*	N/A	
-	Shift Supervisor's Office ENS (to NRC)		*	N/A	
-	County Hot Line telephone		NYS will Test	N/A	
-	Assorted Direct Lines		*	N/A	
-	NAWAS Telephone		NYS will Test	N/A	
<u>RADIOS</u>					
-	Con Edison Radio		None Required	N/A	
-	County Radio		None Required	N/A	
-	NYPA Security Radio w/Plectron		None Required	N/A	
<u>MISCELLANEOUS</u>					
1	NYPA Emergency Plan Book		N/A	N/A	
1	NYPA Emerg. Plan Procedure Book		N/A	N/A	
1	Book of Forms		N/A	N/A	
1	Site Map		N/A	N/A	
1	10 Mile Map		N/A	N/A	
1	Overlays for 10 Mile Map		N/A	N/A	
2	Log Books		N/A	N/A	
-	Radioactive Caution Signs		N/A	N/A	
3	Voice Amplifiers		Check by Battery/ Test	N/A	
1	Battery Tester		N/A	N/A	
2	Step-off pads		N/A	N/A	
2	Telephone Headsets		*	N/A	
1	Calculator		*	N/A	
1	HP85 Dose Assessment Tape				
1	Book-"Decon & Treatment at Peekskill Hospital"				

* = Operation Check is Required

** = Respirator Inspection (As per RE-HPI-11.16)

Dates Test Performed

Signature of Checker:

EQUIPMENT LOCATED OUTSIDE UNIT 3 CONTROL ROOM

CHECK OFF LIST

No.	Equipment	Present	Operational Check	Calibration Due	Comments
<u>RESPIRATORY PROTECTION</u>					
12	Full & half-face respirators		**	N/A	
24	Combination cartridges		N/A	N/A	
4	SCBA, (401 pressure demand)		N/A	N/A	
6	Spare air bottles for SCBA		N/A	N/A	
<u>ANTI "C"</u>					
12	Sets Anti-"C" clothing		N/A	N/A	
-	extra shoe covers (high & low)		N/A	N/A	
-	extra surgeons gloves		N/A	N/A	

Date Test Performed:

Signature of Checker:

EQUIPMENT LOCATED IN THE TECHNICAL AND OPERATIONS SUPPORT CENTER

CHECK OFF LIST

No.	Equipment	Present	Operational Check	Calibration Due	Comments
<u>AIR SAMPLING & COUNTING EQUIPMENT</u>					
1	HD-28B sampler/totalizer		*		
1	SPA-3/MS-2 iodine counter w/shield		*		
1	AMS-2 continuous air monitor		*		
1	Triton		*		
3	friskers (RM-14) w/HP-210 or 260 probe		*		
1	box air filters AMS-2		N/A	N/A	
1	box air filters HD-28B		N/A	N/A	
20	charcoal cartridges		N/A	N/A	
25	silver zeolite cartridges		N/A	N/A	
2	extra rolls of chart paper (AMS-2)		N/A	N/A	
2	pair tweezers		N/A	N/A	
1	check source SPA-3 (Ba-133)		*	N/A	
30	packs smears		N/A	N/A	
5	packs gauze wipes		N/A	N/A	
	Planchettes		N/A	N/A	
	Smear Envelopes		N/A	N/A	
4	Air Sample heads for HD-28B		N/A	N/A	
<u>PORTABLE SURVEY INSTRUMENTS</u>					
1	RO-2 or equivalent ionization chamber		*		
1	E-530 GM survey instrument or equivalent		*		
2	RO-2A or equivalent ionization chamber		*		
2	Teletectors		*		
<u>DOSIMETRY</u>					
20	film badges and/or TLD's		N/A		
25	0-200 mR dosimeters		* zero		
25	0-500 mR dosimeters		* zero		
25	0-1 R dosimeters		* zero		
25	0-5 R dosimeters		* zero		
8	0-50 R dosimeters		* zero		
9	0-200 R dosimeters		* zero		
9	0-1000 R dosimeters		* zero		
2	dosimeter chargers		*	N/A	
2	sets AA spare batteries		*	N/A	
<u>RESPIRATORY PROTECTION</u>					
25	full face respirators		**	N/A	
50	combination cartridges		N/A	N/A	
4	SCBA		N/A	N/A	
200	bottles KI (14 doses each bottle)		N/A	N/A	
4	spare air bottles (SCBA) in Fire Brigade Room		N/A	N/A	

EQUIPMENT LOCATED IN THE TECHNICAL AND OPERATIONS SUPPORT CENTER

CHECK OFF LIST (CONT'D)

No.	Equipment	Present	Operational Check	Calibration Due	Comments
<u>ANTI-C</u>					
24	Set Anti-"C" clothing		N/A	N/A	
-	extra surgeons gloves		N/A	N/A	
-	extra shoe covers (high & low)		N/A	N/A	
2	Step off pads		N/A	N/A	
<u>TSC/OSC TELEPHONES</u>					
3	Telephone headsets (2 in TSC, 1 in OSC)		*	N/A	
	NYPAs extensions		*	N/A	
	Outside lines		*	N/A	
1	Emergency Notification System (ENS) telephone (NRC)		*	N/A	
1	Direct line to WPO		*	N/A	
1	Direct line to CR III/EOF/OSC/TSC		*	N/A	
1	Direct line to EOF		*	N/A	
<u>RADIOS</u>					
8	HT-220 Handy Talkies [REDACTED] MHZ (Emergency Plan Frequency) (OSC)		***	N/A	
2	Con Ed Handy Talkies (1 in OSC, 1 in TSC)		****	N/A	
1	Base Station [REDACTED] MHZ)		*****	N/A	
4	Model HT RR-2 duplex head sets w/throat mike		batt/check	N/A	

*** NOTE: To test the HT-220 handy talkies [REDACTED]

- 1) Call security in the control room and ask them to switch to Frequency 2. Test handy talkies.
- 2) Call security at main command post and ask them to switch to Frequency 2. Test handy talkies.

**** NOTE: Test the Con Ed security frequency Handy Talkie (Frequency 2) by calling the Unit 3 Control Room prior to test.

Unit _____ to [REDACTED]

***** NOTE: Test base station by contacting HT-220 handy talkies.
(Be sure base station is on frequency 2)

EQUIPMENT LOCATED IN THE TECHNICAL AND OPERATIONS SUPPORT CENTER

CHECK OFF LIST (CONT'D)

No.	Equipment	Present	Operational Check	Calibration Due	Comments
<u>MISCELLANEOUS</u>					
2	Emergency Plan Books (1 in TSC, 1 in OSC)		N/A	N/A	
2	Emergency Plan Procedures Books		N/A	N/A	
2	Books of Forms (1 in TSC, 1 in OSC)		N/A	N/A	
2	Log Books		N/A	N/A	
2	triple outlet extension cords		N/A	N/A	
1	area map		N/A	N/A	
1	site map		N/A	N/A	
2	flashlights with spare batteries		N/A	N/A	
1	H.P. Controlled Proc. Book		N/A	N/A	
-	Radioactive Caution Signs		N/A	N/A	
1	Headquarters Emergency Plan (TSC)		N/A	N/A	
1	Calculator		*	N/A	
2	Stopwatches		*	N/A	
1	Racal-Vadic Acoustic Coupler Modem		N/A	N/A	

* = Operation Check is Required

** = Respirator Inspection (As per RE-HPI-11.16)

Date Test Performed:

Signature of Checker:

EQUIPMENT IN COMMAND GUARD HOUSE (UNIT 3)

CHECKOFF LIST

No. Equipment	Present	Operational	Calibration	Comments
		Check	Due	
40 - Film Badges and/or TLD's		N/A	N/A	
50 - 500 mR dosimeters		*		
10 - 5 R dosimeters		*		
1 - Dosimeter Charger		*	N/A	
10 - H/Face respirator with Iodine Filters		**	N/A	
1 - 100 bottles KI Tablets		N/A	N/A	
8 - Anti-C clothing kits		N/A	N/A	
2 - Emergency Notification & Call-in Books		N/A	N/A	
1 - Box Surgical Gloves		N/A	N/A	
- Yellow herculite for ambulance floor		N/A	N/A	
1 - E-530 GM Survey Meter or equivalent		*		
1 - RM-14 Frisker with HP-210 or 260 probe		*		

NOTE: Test the Con Ed Security frequency walkie-talkie (Frequency 2) by individually contacting the Unit 3 Control Room. Notify Unit 3 Control Room by phone prior to the test

Test:	Unit		*	N/A	
	Unit		*	N/A	

* = Operational check required
** = Respirator Inspection (As per RE-HPI-11.16)

Signature of Checker

Date

EQUIPMENT LOCATED AT PEEKSKILL COMMUNITY HOSPITAL DECON ROOM

CHECK OFF LIST

NO.	EQUIPMENT	PRESENT	COMMENTS
1	Mobile Storage Cart		
1	Stainless Steel Cart		
1	4 Outlet Power Box		
1	Lead Pig		
-	Precut Yellow Herculite for Decon Room		
1	Roll Yellow Herculite for Hallway Floor		
-	Green Herculite for Outside Decon Room		
200	Yellow Plastic Booties		
200	Disposable Hoods		
40	Disposable Gowns		
1	Step-off Pad		
2	30 Gal. White Poly Waste Collection Containers		
2	25 Ft. Extension Cords		
9	"Caution - Contam. Area" signs		
1	Roll Large Clear Poly Bags		
10	Large Yellow Poly "Rad. Material" Bags		
10	Small Yellow Poly "Rad. Material" Bags		
1	Razor Knife		
5	Rolls Yellow Tape		
5	Rolls Masking Tape		
1	Washdown Stretcher		
1	Flexible Drain Hose for Washdown Stretcher		
1	Green Garden Hose with Washdown Fitting		
1	Decon Supplies (2 Boxes)		
1	Sampling Kit (2 Boxes)		
3	Boxes Surgical Gloves		
3	5 Gal. Yellow Poly Waste Water Collection Jugs		
1	Wall Clock		
1	Roll Saran Wrap		
80	Disposable Towels		
50Ft.	1/2" Tygon Tubing		
1	Bung Wrench		
2	Filter Rigs		
8	Lengths Rad. Rope with Clips		
1	E-530		
2	Friskers (RM-14 with HP-210 Probe)		
12	0-500 mR Dosimeters		
12	0-200 mR Dosimeters		
1	Dosimeter Charger		
10	TLD Badges		
20	TLD Rings		
1	Roll White Herculite		
12	Protective Clothing Packages		
4	Metal Stanchions for roping off ambulance		
1	Roll Rad. Rope for roping off ambulance		

Signature of Checker

Date

POWER AUTHORITY OF THE STATE OF NEW YORK
INDIAN POINT NO. 3 NUCLEAR POWER PLANT
P. O. BOX 215 BUCHANAN, N. Y. 10511
TELEPHONE: 914-739-8200



EMERGENCY PLAN PROCEDURES

PROCEDURE NO. IP- IP-1017 REV. 2

TITLE: RECOMMENDATION OF PROTECTIVE ACTIONS FOR THE OFF SITE POPULATION

WRITTEN BY: *Frank M. Johnson*
REVIEWED BY: *Dennis Quinn*
PORC REVIEW *W. H. ...* DATE *1/14/82*
APPROVED BY: *John E. ...* DATE *1/13/82*
EFFECTIVE DATE *1-13-82*

IP-1017

RECOMMENDATION OF PROTECTIVE ACTIONS
FOR THE OFFSITE POPULATION

1.0 INTENT

This procedure describes the methods to be used by the Shift Supervisor/ Emergency Director to determine the protective actions to recommend to the offsite authorities (State and County) whenever there is an accident or condition at Indian Point that may have offsite Radiological consequences.

2.0 DISCUSSION

2.1 Recommendations for protective actions to offsite agencies are found in the "Initiating Condition and Emergency Action Levels" Table.

- a) Initiating conditions have been appropriately corresponded to recommended protective actions.
- b) Where no protective action recommendations have been made it implies there is no need to take any immediate protective actions. Standing by for any changes may be appropriate.

REMINDER: When protective action recommendations are made for offsite action, appropriate steps should be taken for onsite personnel.

2.2 The decision to make protective action recommendations to the offsite population should be made by the Emergency Director (Shift Supervisor during the initial stages of an emergency).

2.3 During the initial notification process (IP-1030) and using EP-Form #8, protective action recommendations should be relayed to offsite agencies.

2.4 To provide more detailed protective action recommendations refer to:

- a) Section 3.0 for Actual Releases
- b) Section 4.0, Based on Plant Parameters
- c) Section 5.0, Recommendations for the Food Pathway

NOTE: When protective action recommendations have been made for the offsite population, the food pathway should be given consideration.

2.5 After the EOF is staffed, the decisions to make protective action recommendations to offsite agencies should be made by the Emergency Director, with input from the Radiological Assessment Team Leader.

STATEMENT: The Power Authority shall make recommendations to the State on protective actions based on in-plant assessments and plant parameters, however, the decision to initiate the recommended protective actions is the responsibility of the State and Local authorities.

3.0 ACTUAL RELEASE
PROTECTIVE ACTION RECOMMENDATIONS

3.1 Do dose calculations in IP-1002 within 15 minutes.

NOTE: Dose calculations within the first 15 minutes will be based on:

- 1) Assumed I/NG ratio
- 2) Actual meteorology
- 3) Actual or estimated duration of release

Protective actions may be based on this initial calculation (duration of the release should be actual or realistic). The calculation should be repeated when a chem sample is obtained, and protective actions reconsidered on that basis.

3.2 Assess dose at the site boundary and recommend protective actions based on the following:

<u>Dose at Site Boundary (REM)</u>	<u>Protective Actions *</u>
a) Less than 1 Rem Whole Body Less than 5 Rem Thyroid	No immediate action necessary
b) 1-5 Rem Whole Body 5-25 Rem Thyroid	Shelter to 5 miles Consider evacuation out to 2 miles, particularly for children and pregnant women.
c) Greater than 5 Rem Whole Body Greater than 25 Rem Thyroid	Evacuate to 2 miles, and evacuate affected <u>sectors</u> out to the point the dose is less than 5 Rem Whole Body and 25 Rem Thyroid. Shelter affected sectors out to the point where the dose is less than 1 Rem Whole Body, 5 Rem Thyroid. Consider evacuation of children and pregnant women in this area.

*3.3 When deciding to evacuate consider and weigh the following:

- a) Duration of release
- b) Time it would take to evacuate
- c) Exposure persons would receive during the evacuation

If it would not offer a substantial benefit to evacuate, sheltering should be continued.

4.0 BASED ON PLANT PARAMETERS:
RECOMMEND PROTECTIVE ACTIONS

4.1 Protective Action recommendations made on the basis of plant parameters (no release) should be made if the following are both applicable:

a) Fuel Damage

and

b) Anticipated loss of Containment integrity.

5.0 FOOD PATHWAY PROTECTIVE ACTIONS

5.1 Pasture:

- a) Removal of lactating dairy animals from contaminated pasture and substitution of uncontaminated stored feed.
- b) Substitute source of uncontaminated water.

5.2 Milk:

- a) Withhold milk from market to allow radioactive decay of short lived radionuclides.
- b) Prolonged milk storage at reduced temperatures following ultra-high temperature pasturization.
- c) Diversion of fluid milk for production of dry whole milk, non-fat dry milk, butter or evaporated milk.

5.3 Fruits and Vegetables:

- a) Washing, brushing, scrubbing or peeling to remove surface contamination.
- b) Preservation by canning, freezing and dehydration or storage to permit radioactive decay of short lived radionuclides.

5.4 Grains:

- a) Milling
- b) Polishing

5.5 Meat & Meat Products:

Consider on a case by case basis.

5.6 Other Food Products:

Process to remove surface contamination.