



October 18, 2011
RKB:11:060

Secretary, U.S. Nuclear Regulatory Commission
Attn: Rulemakings and Adjudications Staff
One White Flint North
11555 Rockville Pike
Rockville, Maryland 20852-2738

DOCKETED
USNRC

October 24, 2011 (4:00 pm)

OFFICE OF SECRETARY
RULEMAKINGS AND
ADJUDICATIONS STAFF

Gentlemen:

Subject: 10 CFR Part 20/Annual TEDE limits

AREVA NP is aware that the NRC is considering revisions to its regulations at 10 CFR Part 20, including the possibility of lowering the current TEDE limit of 5 rem. Accordingly, AREVA NP wishes to take this opportunity to request consideration of the following changes to 10 CFR Part 20 by the NRC:

Definitions:

Planning value - An established annual TED below which the licensee seeks to maintain all individual exposures.

Regulation:

Each licensee shall establish a planning value for the maximum annual TED that individuals will normally be allowed to receive under its radiation control program. Planning values of 2 rem or less are acceptable to the NRC without NRC review. Planning values greater than 2 rem and up to 5 rem per calendar year can be established by a licensee but must be submitted to the NRC with sufficient justification and require NRC approval.

Planning values may be exceeded on a case-by-case basis when planned and authorized in advance by the licensee's radiological control program in unusual situations provided an annual TED of 5 rem is not exceeded. Authorizations of TEDs for individuals exceeding planning values shall be documented by the licensee and retained as part of the employee's exposure record.

An annual TED for an individual exceeding a planning value that either was not planned and/or was not authorized in advance requires suitable corrective action.

Examples:

The following hypothetical examples are not intended for inclusion in the regulation but are being provided for clarification of AREVA NP's proposal:

A medical facility employs cardio-radiologists, who cannot perform their required protocols if limited to TEDs much below 5 rem per year. The facility applies for approval from the NRC,

stating that if its cardio-radiologists are not permitted to acquire up to 5 rem annually, patient care will be significantly compromised. The NRC grants approval for the higher planning value of 5 rem per year. The facility sets its planning value at 5 rem a calendar year.

A utility sets its planning value at 2 rem a year, so approval from the NRC is not needed. However, towards the end of the year the utility discovers it needs a vessel inspected by personnel with a particular expertise. The only personnel available have already received a YTD dose of 1900 mrem. It is projected that to perform the inspection using good radiological control practices will expose the inspector to between 400 and 500 mrem. The utility plans the inspection and authorizes an increase in dose for the individual to 2400 mrem for the year. Assuming that the job is performed as planned, there would be no required NRC notification. The NRC would be free to inspect the individual's record to check for compliance.

A plant has set its planning value at 2 rem a year, so NRC approval was not needed. An individual has accumulated 1800 mrem. There is an incident in the plant and the individual received an unplanned dose of 300 mrem, bringing his total to 2100 mrem for the year, above the planning value. The licensee must then investigate and implement adequate corrective action to minimize the possibility of recurrence. Notification of the NRC would not be required. However, the NRC would be free to review 'the situation' in the course of its inspections.

If you would like to discuss any aspects of this proposal further, please call me at 509-375-8638 or email me at Richard.Burklin@areva.com.

Very truly yours,



Richard Burklin, CHP

email: Dr. Donald Cool