



**UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION I**
2100 RENAISSANCE BOULEVARD, SUITE 100
KING OF PRUSSIA, PENNSYLVANIA 19406-2713

April 9, 2013

Mr. Ken Langdon
Vice President
Constellation Energy Nuclear Group, LLC
Nine Mile Point Nuclear Station, LLC
P.O. Box 63
Lycoming, NY 13093-0063

**SUBJECT: NINE MILE POINT NUCLEAR STATION, UNIT 1
LICENSED OPERATOR POSITIVE FITNESS FOR DUTY TEST**

Dear Mr. Langdon:

Your facility reported on April 3, 2013, that an NRC-licensed operator tested positive following a random fitness-for-duty test taken on April 3, 2013. Although we have obtained preliminary information from Jerry Helker of your staff, this letter is a formal request for information pertaining to this occurrence. Please provide, within 30 days of the date of this letter, answers to the questions listed in the enclosure and other records and information on this operator's fitness-for-duty that are relevant to this occurrence. We request that any personal, proprietary, or safeguards information in your response be contained in a separate enclosure and appropriately marked. The affidavit required by 10 CFR 2.390(b) must accompany your response, where applicable.

You should determine whether the operator meets the requirements of 10 CFR 55.33(a)(1). You should ensure that: (1) the operator meets the general health requirements of ANSI/ANS-3.4-1983; (2) the operator does not have a disqualifying condition under Section 5.3 of that standard; and (3) that documentation describing the designated physician's conclusion that the operator meets the requirements of ANSI/ANS-3.4-1983 is available for review by the NRC. If a conditional license is requested per 10 CFR 55.25, that condition should be documented on NRC Form 396 and transmitted to the NRC.

If you determine that the operator no longer meets the medical qualifications described in 10 CFR 55.33(a)(1), then, in accordance with 10 CFR 55.25, you must notify the NRC via a letter of the operator's permanent incapacitation. For example, you must notify the NRC if you determine, based on your employee assistance program in consultation with your designated physician, that the operator can no longer meet the medical criteria of ANSI/ANS-3.4-1983.

The NRC will evaluate the information in your reply to this letter to determine if further action is warranted pursuant to 10 CFR Part 50 or Part 55. The information supplied will be maintained in NRC Privacy Systems of Records-16 and will be subject to the Privacy Act.

If you have any questions concerning this matter, please contact Mr. Donald E. Jackson, Chief, Operations Branch, (610) 337-5306. The requested information should be sent to Mr. Jackson's attention at the U. S. Nuclear Regulatory Commission, Region I, 2100 Renaissance Boulevard, Suite 100, King of Prussia, PA 19406-2713.

K. Langdon

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In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). ADAMS is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

Sincerely,

/RA/

Christopher G. Miller, Director
Division of Reactor Safety

Docket No.: 50-220
Licensee No.: DPR-63

Enclosure:
Fitness-for-Duty Request for Additional Information

cc w/Enclosure: Distribution via ListServ

K. Langdon

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ENCLOSURE

Licensed Operator
Fitness-for-Duty Request for Additional Information

Nine Mile Point Nuclear Station, Unit 1, is requested to provide the following information concerning the fitness-for-duty occurrence of April 3, 2013, regarding the involved licensed operator:

1. Name, Docket Number, and responsibilities of the operator.
2. A summary of the operator's entire fitness-for-duty testing history. Please include the dates and times the operator was tested, the reasons for the tests (i.e., random, for-cause, or follow-up), the results of the tests, including quantification, and the dates that any tests were confirmed positive.
3. Whether the operator used, sold, or possessed illegal drugs. If so, please provide the details of the circumstances surrounding such use, sale, or possession.

OR

Whether the operator consumed alcoholic beverages within the protected area. If so, please provide the details of the circumstances surrounding such consumption.

4. Whether the operator was at the controls or supervising licensed activities while under the influence of illegal drugs or alcohol. If so, please provide the details of the operator's performance of licensed duties while under the influence.
5. Whether the operator fulfilled a position that was required to meet minimum licensed operating staffing requirements (fire brigade, emergency plan operations, etc.) while under the influence.
6. Whether the operator was involved in procedural errors related to this occurrence. If so, please provide the details of the procedural errors and the consequences of the errors.
7. The extent to which you reviewed the operator's past work history, both on the day of the occurrence and prior to April 3, 2013.
8. Your intentions with regard to the operator's resumption of duties under the 10 CFR Part 50 and Part 55 licenses, including your plans for follow-up testing.