

U.S. NUCLEAR REGULATORY COMMISSION

REGION V

Report No. 50-344/90-40
Docket No. 50-344
License No. NPF-1
Licensee: Portland General Electric Company
121 S. W. Salmon Street
Portland, OR 97204
Facility Name: Trojan Nuclear Power Plant
Inspection at: Rainier, Oregon
Inspection conducted: December 10, 1990 - January 3, 1991
Inspectors: T. Sundsmo
Operator Licensing Examiner
R. C. Barr
Senior Resident Inspector, Trojan
L. Miller
Chief, Operations Section

Accompanying personnel: A. Johnson, Enforcement Officer, Region V

Approved by:


D. F. Kirsch, Chief
Reactor Safety Branch

1/10/91
Date

Inspection Summary:

During this inspection, inspection procedure 92700 was used.

Results: Four apparent violations were identified:

- o Certifications that pre-license medical examinations had been completed when in fact the requirements of ANSI/ANS-3.4-1983, "Medical Certification and Monitoring of Personnel Requiring Operator Licenses for Nuclear Power Plants," had not been met.
- o Untimely performance of biennial licensed operator medical examinations, due to deficiencies in two operators' examinations.

- o Failure to notify the NRC of an operator with a disabling condition.
- o Failure to document the results of medical qualifications data. Many medical examinations were not completely documented.

General Conclusions and Specific Findings:

Significant Safety Matters:

These apparent violations indicated a potentially significant lack of attention and accountability towards ensuring that licensed operators were medically qualified for licensed activities. The program to ensure that operators and operator license candidates were medically qualified was determined to be ineffective. The inspection results and licensee corrective actions identified four licensed operators who were not medically qualified.

Summary of Violations: As stated above.

Summary of Deviations: None.

Open Items Summary: None.

DETAILS

1. Personnel

NRC Personnel:

- *# T. Sundsmo, Operator Licensing Examiner
- # R. Barr, Senior Resident Inspector
- # A. Johnson, Region V Enforcement Officer
- *# J. Melfi, Resident Inspector
- # L. Miller, Operations Section Chief, Region V

Licensee Personnel:

- # A. Ankrum, Nuclear Security Department Manager
- *# S. Bauer, Branch Manager, Nuclear Regulation
- *# D. Couch, Performance Monitoring/Events Analysis Engineer
- # J. Cross, Vice President, Nuclear
- # E. Curtis, Surveillance Supervisor, Performance Monitoring/Events Analysis
- *# G. Ellis, Acting Manager, Training
- # L. Grace, Occupational Health Nurse
- # S. Graff, Corporate Occupational Health
- *# D. Hicks, General Manager, Plant Support
- *# W. Nicholson, Operations Manager
- * D. Nordstrom, Branch Manager, Quality Operations
- * M. Peterson, Acting Supervisor of Operator Training
- # M. Quarum, Physician, Legacy
- * W. Robinson, General Manager, Trojan Plant
- # C. Seaman, General Manager, Nuclear Quality Assurance
- * R. Susee, Acting General Manager, Quality Assurance
- * G. Wachs, Training Specialist
- *# T. Walt, General Manager, Technical Functions
- # J. Wiles, Performance Monitoring/Events Analysis
- *# W. Williams, Regulatory Compliance Engineer
- *# C. Yundt, General Manager, Trojan Excellence Program

State of Oregon, Department of Energy:

- # A. Bless, Site Representative
- # V. Sarte

- * Attended the Exit Meeting on December 13, 1990.
- # Attended Entrance/Exit Meetings on January 3, 1991.

2. Background

- a. On December 10-13, 1990, the NRC conducted an announced inspection of the Trojan facility. The inspection was conducted to determine if the facility's licensed operator medical examinations met the requirements established by ANSI/ANS-3.4-1983, "Medical Certification and Monitoring of Personnel Requiring Operator Licenses for Nuclear Power Plants," and applicable portions of 10 CFR 55 and 10 CFR 50. ANSI/ANS-3.4-1983 provides an acceptable method for compliance with the

requirements of 10 CFR 55.21 and 10 CFR 55.53(i) to conduct biennial medical examinations. Federal Regulation 10 CFR 55.23 requires the use of NRC Form 396 to certify the medical fitness of the applicant. NRC Form 396 requires the use of ANSI/ANS-3.4-1983 as the basis for medical examination content.

The NRC returned to the facility on January 3, 1991 as a result of apparent discrepancies identified during the December inspection. These additional records were identified by the Senior Resident Inspector's interview with the supervising physician contracted by the facility. These records were similar to the records provided by the licensee for the inspection during the week of December 10, 1990, but contained the results of additional examinations and documented several medical examination test results not found in the records that were provided for inspection during the week of December 10, 1990. Facility personnel stated that they did not know that these records were being maintained by the contracted physician at the time of the first site visit.

- b. At the beginning of the inspection, the facility had not adequately evaluated the licensed operator medical examinations nor the administrative controls for this program. The facility had revised a draft procedure that significantly modified this program, but had not approved nor implemented this revision. The facility did not consider the licensed operator medical records to be quality related documents, and had not audited these records since a Special Activity Audit in 1983. The facility Quality Assurance (QA) department conducted an audit of the medical records program during this inspection.
- c. Prior to this inspection, several events occurred that identified the requirements of ANSI/ANS-3.4-1983 to the licensee. These events included:
 1. Regulatory Guide 1.134 was issued in April 1987, adopting the standards of ANSI/ANS-3.4-1983. The licensee performed a Regulatory Guide Summary and Licensing Impact Assessment of this guide which concluded that it had no impact because the facility's contract for medical examinations required the use of ANSI/ANS-3.4-1983 standards. The licensee did not perform an audit to verify compliance with the standard.
 2. The facility's In-House Position 1.134 adopted Regulatory Guide 1.134, Revision 2 and endorsed ANSI/ANS-3.4-1983 (without exception). This document became effective January 31, 1990 after being approved by the Manager of Nuclear Safety and Regulation Department (NSRD), Plant Manager, Training Manager and QA Manager. The Training Manager and Operations Supervisor had also signed separate memos in August 1989 to the Manager NSRD stating that the facility was in "Full Compliance" with Regulatory Guide 1.134.

3. In February 1990, at a meeting and through telephone communications between the facility's contracted physician, the facility nurse, and the training specialist assigned oversight of the medical records, the physician and nurse questioned whether the medical records complied with the requirements of ANSI/ANS-3.4-1983. The physician stated that he identified that the existing medical examinations and records might not have met all of the requirements. It was not apparent that any formal point of contact existed for the physician to express these concerns. The inspector identified that the training specialist in charge of the medical records was a subordinate member of the facility's staff, and had not been trained in the requirements of ANSI/ANS-3.4-1983.
4. In August 1990, the NRC issued a Severity Level III Notice of Violation to another Region V facility for deficiencies in its licensed operator medical examination program. Region V management notified all Region V facilities in August 1990 of these discrepancies, which included noncompliance with ANSI/ANS-3.4-1983 standards, failure to meet biennial examination requirements, and failure to notify the NRC of disabled licensed operators. The licensee's Training Manager documented one of these telephone calls and distributed the documentation to seven other members of the plant staff.

Each of these events could have alerted the licensee to the need for a prompt audit of licensed operator medical records.

3. Review of Medical Records for Completeness

- a. The inspector selectively audited the medical records for the 45 licensed operators at the facility. Each operator had from one to four documented medical examinations. These included either a pre-license or license renewal medical examination. The other examinations were conducted to meet the biennial examination requirement.

The inspector then conducted a detailed review of the medical records for 24 operators selected at random. These records generally documented medical examinations of all operators, and additional fire brigade examinations of operators who were members of the fire brigade. Approximately two-thirds of the facility's licensed operators had received both types of examinations, while one-third had only received an operator examination. This third consisted mostly of shift supervisors, and non-shift senior reactor operators not routinely performing licensed duties.

Enclosure (2) identifies the records reviewed by an operator number assigned by the inspector in order to protect the privacy of the individual. Region V maintains a cross reference identifying each numbered operator by name. Enclosure (3) identifies which operators' medical examinations did not meet the requirements referenced by this report.

Enclosure (2) lists the specific deficiencies identified by the inspector for each medical record examined. Variations between similar types of medical examinations were caused by the use of different forms and inconsistent documentation of test results that were not identified on the forms. The inspector noted that some records did not have certain required tests recorded (e.g., electrocardiogram (ECG), depth perception, urinalysis, etc.) and that many other records inconsistently documented test results in the "Comments" space on the examination form. Also, several different types of medical history questionnaire forms were used for these examinations. One of the forms covered most of the requirements of ANSI/ANS-3.4-1983, while the others addressed only limited portions of the standard. The licensee indicated that the records reflected the medical examinations and tests performed.

- b. Each licensed operator had received some form of medical examination within two years. However, because two operators (operators #3 and #19) had such minimal examinations it was not possible to determine whether they met the requirements of ANSI/ANS-3.4-1983. The medical examinations for these two operators did not test items such as stamina, electrocardiogram (ECG), urinalysis and visual depth perception (see paragraph 3.d). These two operators had not received an adequate examination in three years, and did not meet the biennial examination requirement of 10 CFR 55.21 and 10 CFR 55.53(i).

This is an apparent violation of 10 CFR 55.21 and 10 CFR 55.53(i), which require that each licensed operator receive an examination every two years that meets the requirements of 10 CFR 55.33(a)(1). Enclosure (2) identifies the specific records examined and which portions of the medical examinations were deficient on the dates of the given examinations.

- c. The inspector identified that the medical examinations used to evaluate many licensed operators had not included certain of the following items which are required by ANSI/ANS-3.4-1983. Enclosure (2) identifies the specific medical examination deficiencies.
1. The facility neither prepared nor submitted a required report to the designated medical examiner regarding the operators' work performance, attendance, ineptness, poor judgment, and lack of physical or emotional stamina. (ANSI/ANS-3.4-1983, section 3.2)

The inspector also identified that other psychological information that was being maintained by the licensee for other purposes, such as the Employee Assistance Program, was not evaluated by the physician as part of the licensed operator medical examination. ANSI/ANS-3.4-1983 requires, as part of the medical examination, that the medical examiner disqualify an applicant or licensed operator whenever a history or clinical diagnosis of alcoholism or drug abuse has been established. Facility representatives stated that they provided this type of information to facility managers when they considered it appropriate to do so. Apparently, no formal mechanism existed to identify this type of relevant medical information to the physician prior to his conducting licensed operator medical examinations.

2. Many of the medical history forms, completed by the operators as part of their medical exams, did not identify whether or not the operators had any one of several potentially disqualifying conditions listed in the standard. For example, dermatitis, asthma, and malignant neoplasms (cancer) were not identified on many of the questionnaires except for broad questions asking whether the operators "had any other serious disease?" (ANSI/ANS-3.4-1983, sections 5.3.1, 5.3.4, and 5.3.6)
 3. None of the examinees were tested to assess their sense of smell for products of combustion and tracer or marker gasses. About one-half of the medical history questionnaires did not ask about the sense of smell. (ANSI/ANS-3.4-1983, section 5.4.2)
 4. An evaluation of the examinee's capacity for clear speech was not documented. (ANSI/ANS-3.4-1983, section 5.4.3)
- d. The inspector identified from the medical records that several licensed operators, those who had not received a Fire Brigade Examination (about one third of the operators audited), had apparently not received a medical examination that evaluated the following additional areas which are required by ANSI/ANS-3.4-1983:
1. ANSI/ANS-3.4-1983, section 5.2.1, requires demonstration of the examinee's physical capacity. The standard requires that the examinee shall demonstrate sufficient stamina to allow safe execution of assigned duties.

In addition to a stamina test, ANSI/ANS-3.4-1983, section 5.4.6 recommends the pulmonary capacity tests to help evaluate stamina.
 2. ANSI/ANS-3.4-1983, section 5.4.16, requires an electrocardiogram (ECG).
 3. ANSI/ANS-3.4-1983, section 5.4.16, requires an urinalysis.

4. ANSI/ANS-3.4-1983, section 5.4.5.(4), requires a visual depth perception test.
 5. ANSI/ANS-3.4-1983, sections 5.4.1 and 5.4.10, require an evaluation of the examinee's physical configuration and skin conditions which could prevent wearing personal protective clothing.
- e. The inspector questioned licensee staff members from the Training and Human Resources Departments responsible for maintaining the medical records regarding how the facility ensured that the physicians contracted for these examinations were knowledgeable of the requirements of ANSI/ANS-3.4-1983.

The Acting Training Manager stated that he was not aware of any method used to verify the physicians' knowledge of ANSI/ANS-3.4-1983. The Occupational Health Nurse stated that she occasionally had casual conversations with the supervising physician, before exams were administered, about ANSI/ANS-3.4-1983.

During an interview that the Senior Resident Inspector had with the supervising physician, on December 20, 1990, it was determined that the supervising physician was knowledgeable of the standard. The physician stated he had been conducting licensed operator medical examinations at the facility since October 1989. During this interview, the physician stated that some of the past licensed operator examinations may not have met the ANSI/ANS-3.4-1983 standard. He also stated that he had identified this problem to the training specialist assigned oversight of the medical records in February 1990 and recommended that minimum criteria be established to meet the standard.

The inspector noted that ANSI/ANS-3.4-1983, section 3.1, states that "The designated medical examiner shall be conversant with this standard and should have a general understanding of activities required of a nuclear reactor operator." However, there was no reference to the standards of ANSI/ANS-3.4-1983 on any medical record form or on any form signed by the physicians. The facility apparently had no records or assurance that the physicians who conducted and signed the operator examinations (and fire brigade examinations) were conversant with ANSI/ANS-3.4-1983.

- f. 10 CFR 55.23, requires an authorized representative of the facility (the senior licensee management representative on site) to certify the medical examination of applicants for initial license and license renewal on NRC Form 396. This form certifies "that in reaching this determination the guidance contained in ANSI/ANS-3.4-1983, or ANSI/ANS-15.4-1977 (N380) was followed and that documentation is available for review by NRC." This requirement of 10 CFR 55 became effective May 26, 1987. ANSI/ANS-15.4-1977 is only applicable to research reactors.

About one-half of the medical evaluation certifications made by the licensee contained the deficiencies described in paragraph 3.c, above; about one-half of these records (about one-quarter of audited records) also had the deficiencies described in paragraph 3.d. A specific listing of deficiencies in individual pre-license evaluations is contained in Enclosure (2). These conditions are considered an apparent violation of 10 CFR 55.23.

- g. The inspector identified one operator (operator #25) with a potentially disqualifying medical condition that was not reported to the NRC prior to this inspection. The licensee had evaluated this operator to be medically qualified.

This operator's medical examination on November 2, 1989 identified that he was taking two prescription drugs for migraine headaches. This examination also had the following three blocks checked "YES" by the physician:

"Was there any physique, motor power, range or motion, or dexterity disorder which would not allow ready access to, and safe execution of assigned duties?" - YES

"Was there any condition, habit or practice which might result in sudden or unexpected incapacitation?" - YES

"Was there any mental or physical disability which might cause impaired judgement or motor coordination?" - YES

This condition was not reported to the NRC. On December 18, 1990 as a corrective action resulting from this inspection, the licensee identified this condition as disqualifying. The operator has been removed from licensed duties pending medical evaluation.

This is an apparent violation of 10 CFR 50.74 and 10 CFR 55.25, which require that the facility operator notify the NRC within 30 days of learning of the diagnosis that a licensed operator has a disqualifying disability. The facility operator (PGE) failed to identify that this medical condition was disqualifying, did not remove the operator from licensed duty, and did not notify the NRC within 30 days. This operator is identified in Enclosure (2).

- h. The inspector also identified one operator (operator #17) that had been diagnosed to have possible coronary disease. The facility determined that this operator was medically qualified for licensed duties based on recommendations from their contracted physician and a cardiologist. During the inspection, this operator's record was reviewed by the NRC regional medical consultant, who recommended that this operator not be allowed to conduct licensed duties without another qualified operator present. The NRC issued this operator a No-Solo license restriction pending further medical evaluation. The facility stated that it would provide the NRC with further medical information about this operator's medical condition.

4. Review of Medical Records - Maintenance of Records

- a. During the inspection week of December 10, 1990 the facility licensee provided medical records for 45 licensed operators. The licensee staff stated that these were the complete records that documented the operators' medical histories.

Subsequently, on December 20, 1990, the Senior Resident Inspector interviewed the supervising physician that the licensee had contracted to perform the medical examinations. The physician stated that he had additional records which he had maintained in his office. The physician also stated that the inspector was the first person to ask him if any additional records existed.

- b. On January 3, 1991 the inspectors returned to the facility to audit the additional records and confirm information received after the initial inspection. The "additional records" were about five times the volume of the records initially provided for inspection. These records documented additional examinations, and test results not contained in the initial records. Review of the additional records reduced the number of deficiencies previously identified by over 50%. Enclosures (2) and (3) were developed after review of all available medical records.

The facility staff were questioned regarding why these records were not provided for the first inspection week. Apparently, no one on the licensee's staff, contacted during the first week of inspection, knew that these additional records existed.

5. Review of Medical Records - Completeness of Examinations

The inspector evaluated the completeness and legibility of the medical examinations. The facility had not considered these records to be quality related documents and, thus, had not formally audited these records until this inspection.

- a. The medical records audited by the inspector had the following discrepancies:
1. One medical record incorrectly documented that an operator who normally wore glasses had 20/20 uncorrected vision. This operator's license had already been conditioned to provide for wearing corrective lenses during the performance of licensed duties.
 2. The medical examination page used to record the physician's signature and evaluation of the examinee did not identify which operator was being examined. This form was stapled to other documents containing the operator's name.
 3. Nine operator medical records had the "Physician's Summary and Elaboration of the Medical History From Front of Report" block left blank.

4. For eight operators, the medical examinations were incomplete in that one or more of the blocks were left blank, including those for Heart, Vascular, Pupils, Ears, Weight, and Cross Visual Field.
5. One medical record contained a Fire Brigade Medical Examination that was only half completed and not signed by the physician.

These deficiencies are apparent violations of 10 CFR 55.27 which requires that the facility licensee document and maintain the results of licensed operators' medical examinations for their current license period.

- b. The inspector had discussions with the General Manager, Quality Assurance, Acting Training Manager, and the Occupational Health Nurse to determine if any auditing or program reviews had been conducted by the facility licensee. The only identified review of these records which these personnel could recall was an informal check by the Nurse when the records were received from the contracted medical group.
- c. The inspector questioned the facility licensee whether the licensed operator medical records were considered to be quality related documents, as defined by their Nuclear Quality Assurance Program, PGE-8010. The inspector observed that the facility had not maintained these records as quality related documents. During the Exit Meeting held on December 13, 1990 the licensee stated that documentation relating to licensed operator medical examinations would be controlled as quality related material and that related procedures would be expeditiously revised to reflect this change.

The applicability of 10 CFR 50 Appendix B to licensed operator medical records is being evaluated by the NRC.

6. Licensee Corrective Actions

The concerns identified in this report were brought to the attention of licensee and NRC management on December 11, 1990. On December 12, 1990, the licensee determined that all licensed operators would receive a new medical examination that met the minimum requirements established by ANSI/ANS-3.4-1983. The licensee initiated medical examinations during the evening of December 12, 1990 using a revised medical examination form. The licensee required that all operators have a medical examination meeting ANSI/ANS-3.4-1983 requirements prior to going on shift.

These corrective examinations identified three operators that did not meet ANSI/ANS-3.4-1983 medical requirements: one operator (operator #25) was taking prescribed medications for migraine headaches, one operator (operator #1) had no sense of smell, and one operator (operator #26) failed the treadmill (stamina), blood pressure, and resting heart rate tests. The licensee has removed these operators from licensed duties pending appropriate evaluation of these potentially disqualifying medical conditions.

7. Exit Meetings

The inspectors met with licensee representatives (see Paragraph 1) on December 13, 1990 and again on January 3, 1991 to summarize the scope and results of the inspection, and the potential violations which had been identified. Licensee representatives acknowledged the findings of the inspection, and made the commitments indicated below.

During the Exit Meeting held on January 3, 1991 the licensee agreed to conduct an audit of past licensed operator medical examinations from 1987 to 1990 to determine if any additional operators had been diagnosed as having a potentially disqualifying medical condition. The licensee stated that this type of audit had already been initiated.

TROJAN MEDICAL RECORDS SUMMARY (Operator names on file at Region V)

ENCLOSURE (2)

1 = The identified area did NOT meet ANSI/ANS-3.4-1983 standards.
 0 = The identified area appears to meet ANSI/ANS-3.4-1983 standards.

OPERATOR NAME	MEDICAL DATE	CERTIFICATION DATE	ANSI/ANS-3.4-1983 Referenced Section Number									TOTALS
			3.2 Psychl.	5.3 History	5.4.2 Smell	5.4.3 Speech	5.2.1 Stemina	5.4.16 ECG	5.4.16 Urinal.	5.4.5 Visual	5.4.1 & 10 Skin	
Operator #1	2/16/89	4/18/89	1	1	1	1	0	0	0	0	0	4
Operator #2	8/14/87	10/6/87	1	1	1	1	1	1	0	1	1	8
Current			1	1	1	1	1	1	0	1	1	8
Operator #3	11/13/87	12/17/87	1	1	1	1	1	1	1	1	1	9
Current			1	1	1	1	1	1	1	1	1	9
Operator #4	2/12/88	3/21/88	1	0	0	0	0	0	0	0	0	1
Current			1	0	0	0	0	0	0	0	0	1
Operator #5	2/10/88	3/21/88	1	0	0	0	0	0	0	0	0	1
Current			1	0	0	0	0	0	0	0	0	1
Operator #6	10/18/88	11/29/88	1	0	0	0	1	0	v	0	0	2
Current			1	0	0	0	1	0	1	0	0	3
Operator #7	2/11/88	3/21/88	1	0	0	0	0	0	0	0	0	1
Current			1	0	0	0	0	0	0	0	0	1
Operator #8	3/1/90	6/21/90	1	0	0	0	0	0	0	0	0	1
Operator #9	1/23/87	Old 396	1	1	1	1	1	1	0	0	1	7
Current			1	0	0	0	0	0	0	0	0	1
Operator #10 *	10/17/88	11/29/88	1	0	0	0	0	0	0	0	0	1
Current			1	0	0	0	0	0	0	0	0	1
Operator #11	4/7/89	4/18/89	1	0	0	0	0	0	0	0	0	1
Operator #12	10/21/87	12/17/87	1	0	0	0	0	0	0	0	0	1
Current			1	0	0	0	0	0	0	0	0	1
Operator #13	2/26/90	6/21/90	1	1	1	1	1	1	1	1	1	9
Current			1	1	1	1	0	0	0	0	0	4
Operator #14	7/29/87	7/29/87	1	1	1	1	1	1	1	1	1	9
Current			1	0	0	0	0	0	0	0	0	1
Operator #15	10/21/88	11/29/88	1	1	1	1	1	0	0	0	0	5
Current			1	1	1	1	1	1	1	1	1	9
Operator #16	2/13/89	4/18/89	1	0	0	0	0	0	0	0	0	1
Operator #17	2/26/90	6/21/90	1	1	1		0	0	0	0	0	4
Operator #18	1/11/88	3/21/88	1	1	1		0	0	0	0	0	4
Current			1	1	1	1	0	0	0	0	0	4
Operator #19	9/1/87	10/6/87	1	1	1	1	1	1	1	0	1	8
Current			1	1	1	1	1	1	1	1	1	9
Operator #20	10/13/88	11/29/88	1	0	0	0	0	0	0	0	0	1
Current			1	0	0	0	0	0	0	0	0	1
Operator #21	2/26/90	6/21/90	1	1	1	1	0	0	0	0	0	4
Operator #22	1/27/88	1/26/87	1	0	0	0	0	0	0	0	0	1
Current			1	0	0	0	0	0	0	0	0	1
Operator #23	2/23/90	6/21/90	1	1	1	1	0	0	0	0	0	4
Operator #24 *	2/24/89	4/18/89	1	1	1	1	1	1	1	1	1	9
Current			1	0	0	0	0	0	0	0	0	1
TOTALS			41	19	19	19	14	11	9	9	11	
AVERAGE OF RECORDS (%)			100%	46%	46%	46%	34%	27%	22%	22%	27%	

NOTES: The dated exam listed for each operator audited is either a pre-license or renewal examination. Only examinations conducted within six months of the LICENSE DATE were considered.

The "Current" examination includes medical examinations conducted after the pre-license exam, but within the last two years.

* License has been recently terminated or removed from active status by request of facility.

LISTING OF INACCURATE FACILITY CERTIFICATIONS
AND OPERATORS NOT MEDICALLY QUALIFIED

1. The following operators were determined to be not medically qualified by the standards of ANSI/ANS-3.4-1983:

OPERATOR IDENTIFICATION	PROBLEM IDENTIFIED BY	ACTION TAKEN
a. Operator #1	Facility	Removed from licensed duties. Medical evaluation & NRC notification pending.
b. Operator #17	NRC	No-Solo license condition issued. Pending medical evaluations.
c. Operator #25	Facility	Removed from licensed duties. Medical evaluation & NRC notification pending.
d. Operator #26	Facility	Removed from licensed duties. Medical evaluation & NRC notification pending.

2. The facility was determined to have made inaccurate certifications, required by 10 CFR 55.23, that the following operators had received medical examinations following the guidance of ANSI/ANS-3.4-1983:

OPERATOR IDENTIFICATION	DATE OF FACILITY CERTIFICATION
a. Operator #1	4/18/89
b. Operator #2	10/6/87
c. Operator #3	12/17/87
d. Operator #13	6/21/90
e. Operator #14	6/21/90
f. Operator #15	11/29/88
g. Operator #17	6/21/90
h. Operator #18	3/21/88
i. Operator #19	10/6/87
j. Operator #21	6/21/90
k. Operator #23	6/21/90
l. Operator #24	4/18/89

3. The facility failed to make appropriate NRC notification required by 10 CFR 55.25 for Operator #25. This operator had disqualifying conditions identified on his 1989 operator medical examination.
4. Operators #3 and #19 exceeded the requirement of 10 CFR 55.21 and 10 CFR 55.53(i) to receive a medical examination every two years.