

U. S. NUCLEAR REGULATORY COMMISSION

REGION V

Docket Number: 50-344

Inspection Report Number: 50-344/91-06

License Number: NPF-1

Licensee: Portland General Electric Company
121 S. W. Salmon Street
Portland, Oregon 97204

Facility Name: Trojan Nuclear Plant

Enforcement Conference: January 17, 1991

Submitted by:

L. F. Miller, Jr., Chief, Operations
Section

2-1-91
Date Signed

Approved by:

D. F. Kirsch, Chief, Reactor Safety
Branch

2/1/91
Date Signed

Summary:

Enforcement Conference on January 17, 1991 (Report No. 50-344/91-06)

Areas Discussed:

The purpose of the Enforcement Conference was to discuss the apparent violations that were summarized in NRC Inspection Report No. 50-344/90-40 dated January 11, 1991, regarding the apparent breakdown of the program to ensure the medical qualification of licensed operators.

TROJAN ENFORCEMENT CONFERENCE

1. Meeting Attendees

a. NRC

J. B. Martin, Regional Administrator
L. F. Miller, Jr., Chief, Operations Section
A. D. Johnson, Enforcement Officer
K. E. Perkins, Jr., Deputy Director, Division of Reactor
Safety and Projects
D. F. Kirsch, Chief, Reactor Safety Branch
P. J. Morrill, Chief, Reactor Projects Section 1
T. Sundsmo, Operator Licensing Examiner
J. Dyer, Project Director, Project Directorate 5
R. Bevan, Project Manager, Trojan
R. C. Barr, Senior Resident Inspector
B. A. Boger, Director, Division of Reactor Projects,
Regions III/IV/V

b. Portland General Electric (PGE)

W. M. Higgins, Senior Vice President
J. Cross, Vice President, Nuclear
M. W. Hoffman, Manager, Nuclear Safety and Regulation Department
J. D. Reid, Branch Manager, Quality Services
M. Peterson, Acting Supervisor, Operations Training
S. Sautter, Branch Manager, Nuclear Information
D. Desmarais, Public Information Representative
J. Cross, Vice President, Nuclear
L. Grace, Occupational Health Nurse
D. Hicks, General Manager, Plant Support
W. Nicholson, Operations Manager
M. Quarum, Physician, Legacy
W. Robertson, General Manager, Trojan Plant
C. Seaman, General Manager, Nuclear Quality Assurance
G. Wachs, Training Specialist
T. Walt, General Manager, Technical Functions
J. Wiles, Performance Monitoring/Events Analysis
S. Bauer, Branch Manager, Nuclear Regulation

c. State of Oregon, Department of Energy

H. F. Moomey, Manager, Reactor Safety

2. Trojan Enforcement Conference Details

Mr. Martin opened the meeting by stating that the meeting was an enforcement conference regarding an apparent breakdown of the medical qualifications and records program at Trojan. He further stated that the purpose of the conference was to ensure that there was a complete understanding of the facts, and to ensure that the NRC had all the information needed to determine any necessary enforcement action.

Mr. Miller summarized the history of this problem and the inspection details documented in NRC Inspection Report No. 90-40. Three apparent violations of the medical qualification requirements for licensed operators were discussed:

- ° The apparent failure of PGE to notify the NRC as required when one licensed operator disclosed a medical condition in January, 1988 and again in November, 1989, which caused him to not fully meet the medical qualification requirements for licensed operators.
- ° The apparently incorrect certification on six separate occasions, occurring in 1987, 1988, and 1989, that a total of 12 applicants for an operator license met the medical requirements for initial licensing.
- ° The apparent failure to completely document and maintain the results of medical history and test results (as detailed in Inspection Report 90-40 and Enclosure 3 to this report).

Representatives of PGE then made an extensive presentation. This presentation is provided as Enclosure 2. While PGE representatives did not object to the inspection report's statement of facts, they did offer several observations for the NRC to consider.

- ° Mr. Hicks of PGE stated that the February 1990 meeting referenced on page 3 of the inspection report had been a meeting of interested parties to communicate concerning where problems with medical examinations were considered to exist. Dr. Quarum clarified that, contrary to the report, he had not identified that the existing medical examinations and records might not meet all of the requirements, but only that the records might not meet all of the requirements. The NRC representatives accepted this clarification of the report.
- ° Mr. Hicks detailed that the corrective actions taken and planned by PGE would include a review of other medical examinations than those for operators, as well as a thorough retrospective look at previous medical examinations.
- ° Messrs. Cross and Hicks explained that the certification that medical exams had been properly completed had failed because the emphasis had been on verifying completion of the exam, rather than verifying that all exams given had been complete. Mr. Cross stressed that in the future, he expected more thorough action based on the personal knowledge of the reviewer of the area being reviewed.

- ° Mr. Hicks detailed why PGE considered that the specific discrepancies related to four operators who were identified to have been medically unqualified were either not safety significant, or, in the case of Operator #25 (see Inspection Report No. 90-40), minimally safety significant.

The NRC representatives stated that the safety significance of the specific medical discrepancies was that the conditions had not been detected as part of the previously established program, but as a result of prompt corrective action to NRC Inspection 90-40.

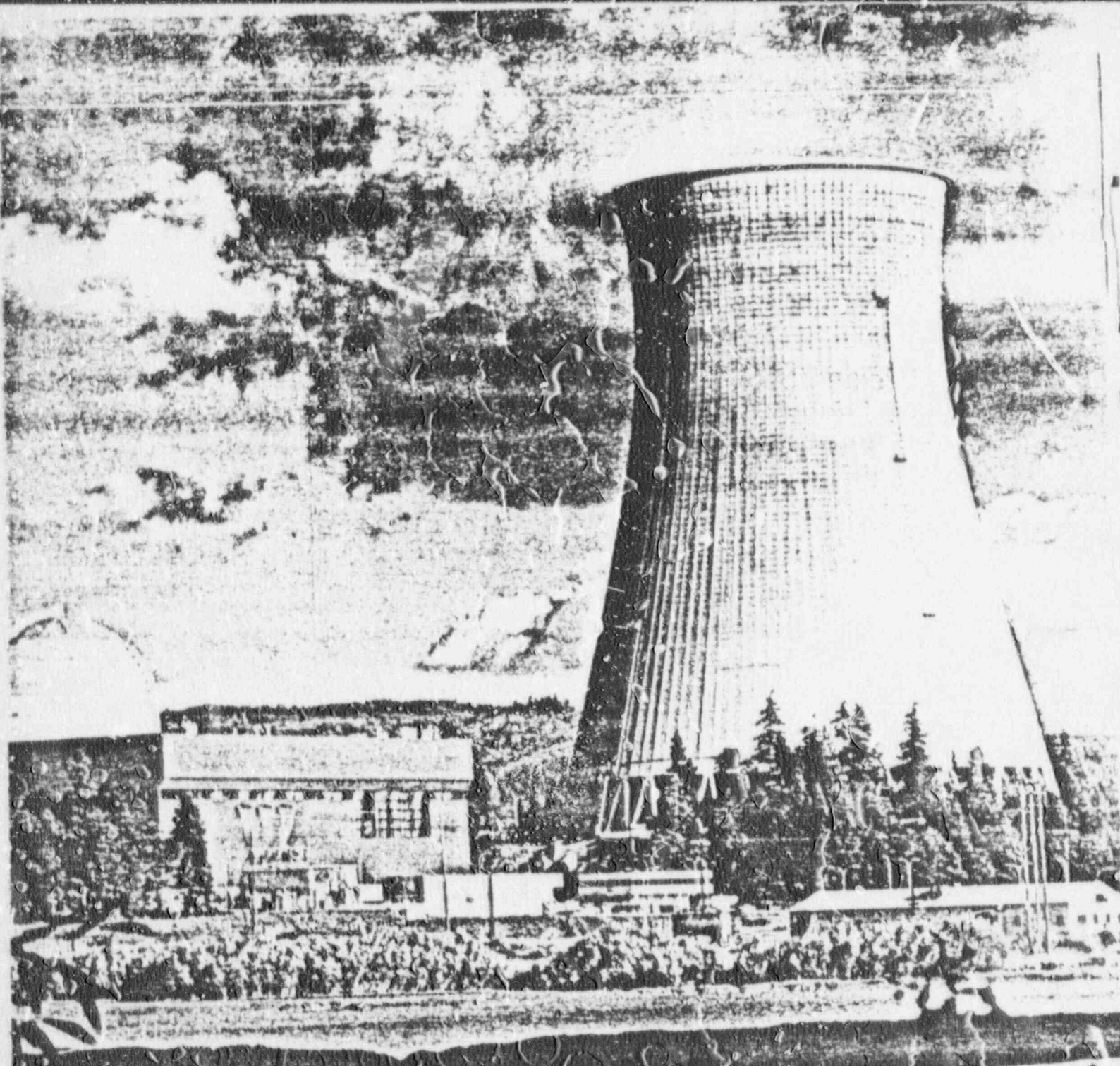
- ° Mr. Hicks provided a letter from a previous site physician which explained that a mistake had been made by him on the examination of this latter case (Operator #25) dated November 2, 1989. The physician claimed that he had inadvertently indicated on the examination that this operator was not medically qualified (see Paragraph 3.g. of Inspection Report 90-40) when in fact, he considered the operator to have been qualified. The NRC acknowledged this statement.

With respect to the latter two items above, subsequent to the meeting, Region V's medical consultant reviewed operator #25's medical records. He concluded that the operator had not been medically qualified since 1988 when the condition was first disclosed by the operator on his medical history. The NRC medical consultant has also requested additional medical information to determine whether or not a "no solo" restriction on the operator's license would be an adequate restriction of his license.

The facility stated that a report of the potentially disqualifying conditions identified in December, 1990 of each of these operators would be sent to Region V.

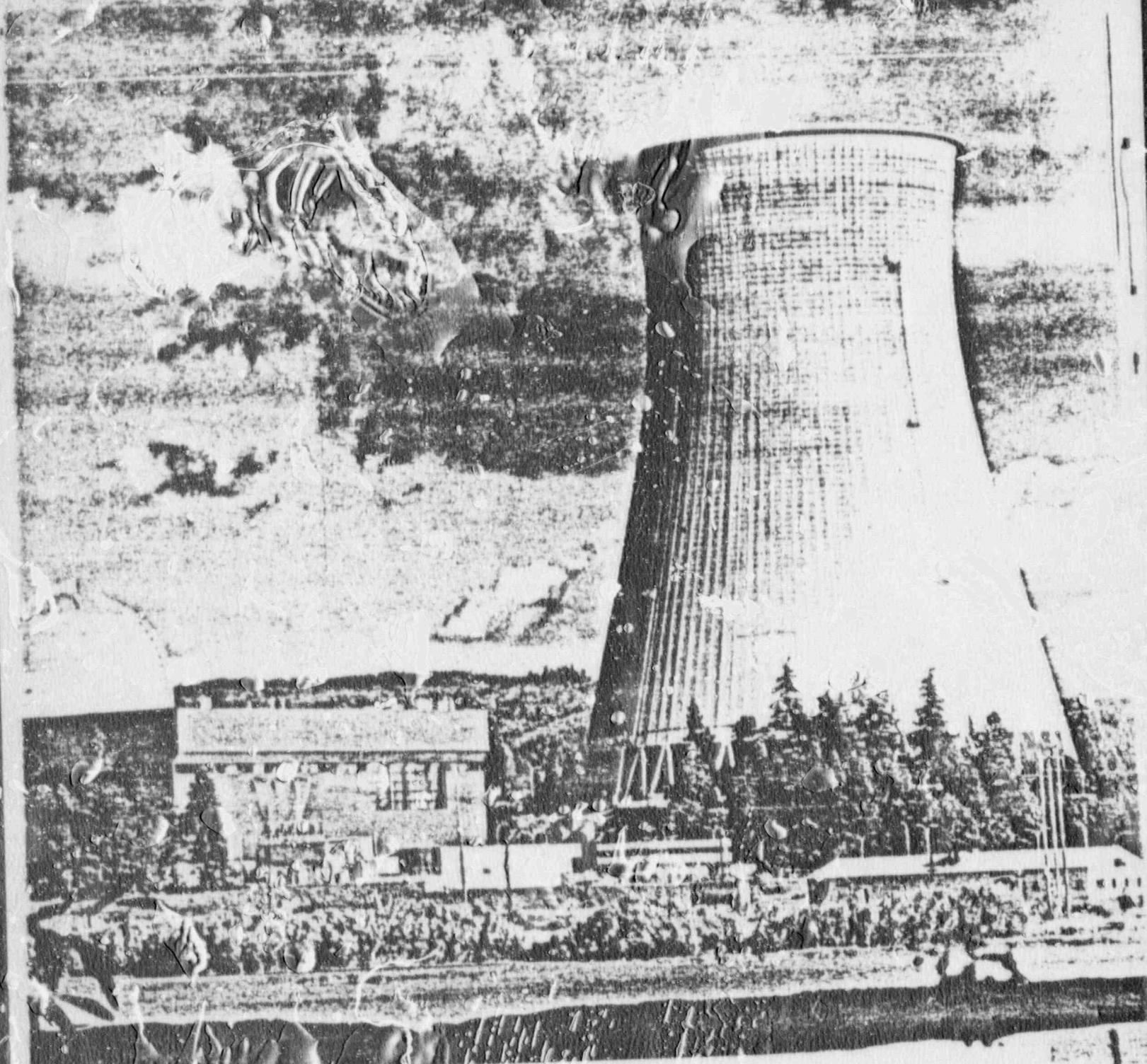
PGE stated that additional guidance to licensed operators would be provided to ensure that they understood their personal responsibilities regarding medical qualification. This action was to be in addition to the other corrective actions discussed in Enclosure 2.

Mr. Martin summarized for the NRC that the apparent significance of this inspection was that it indicated that PGE had not taken the many opportunities which were provided to remedy the programmatic problems prior to the NRC inspection. Mr. Cross agreed with this statement.



TROJAN
NUCLEAR PLANT

NRC ENFORCEMENT MEETING
JANUARY 17, 1991



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ENFORCEMENT CONFERENCE

TROJAN NUCLEAR PLANT

RAINIER, OREGON

JANUARY 17, 1991

EVENT:

- THE LICENSED OPERATOR MEDICAL EXAM PROCESS DID NOT MEET THE STANDARDS OF ANSI/ANS 3.4-1983 AND FAILED TO DETECT POTENTIAL DISQUALIFYING/RESTRICTING MEDICAL CONDITIONS FOR FOUR LICENSED OPERATORS.
- SOME OF THESE OPERATORS STOOD SHIFT DUTIES WHEN THEY SHOULD HAVE BEEN POTENTIALLY DISQUALIFIED OR RESTRICTED.
- SOME OPERATORS EXCEEDED THE REQUIRED 2-YEAR INTERVAL BETWEEN EXAMS BY UP TO 48 DAYS.

CHRONOLOGY:

- 5/26/87 REGULATION CHANGED REQUIRING CERTIFICATION OF MEDICAL EXAMINATION BY FACILITY OPERATOR VERSUS SENDING MEDICAL INFORMATION TO NRC FOR REVIEW.
- 1/18/88 QUALITY ASSURANCE INITIATED NCAR ON REGULATORY GUIDE POLICY MANUAL NOT UPDATED IN A TIMELY MANNER ON REGULATORY GUIDE 1.134, ET AL.
- 10/28/88 OPERATOR "D" COMMENCED TAKING A MEDICATION TO CONTROL SEVERE HEADACHES THAT IN CONJUNCTION WITH OTHER MEDICATION COULD IMPAIR JUDGMENT.
- 2/16/89 OPERATOR "C" PASSES AN NRC LICENSE AND FIRE BRIGADE PHYSICAL EXAM WITH THE CONGENITAL CONDITION OF NO ODOR DETECTION.

CHRONOLOGY: (continued)

- 7/89 OPERATOR "C" COMMENCES STANDING PROFICIENCY AND FILL-IN LICENSE DUTIES.
- 9/89 OPERATOR "D" REMOVED FROM SHIFT DUTIES TO DO OPERATIONAL SUPPORT TASKS DUE TO HIS PERFORMANCE.
- 11/2/89 OPERATOR "D" NOTES USE OF NEW MEDICATION ON NRC LICENSE RENEWAL PHYSICAL EXAM MEDICAL HISTORY, DOES NOT CAUSE CONCERN ON PART OF EXAMINING PHYSICIAN - NO RESTRICTION/DISQUALIFICATION.
- 2/90 MEETING - TRAINING/OPERATIONS/SECURITY/FIRE PROTECTION/PGE MEDICAL/MEDICAL CONTRACTOR TO IMPROVE COMMUNICATIONS, SCHEDULING, EFFICIENCY OF MEDICAL EXAM PROCESS. CONCERN NOTED ON LICENSE PHYSICALS DOCUMENTATION RESULTED IN COMMENCEMENT OF PROTOCOL AND FORM REVISION.

CHRONOLOGY: (continued)

- 2/90 OPERATOR "A" REFERRED TO CARDIOLOGIST FOR ISCHEMIC HEART DISEASE EVALUATION BASED ON ANOMALY NOTED DURING PHYSICAL.
- 4/90 OPERATOR "A" EVALUATED MEDICALLY QUALIFIED WITH NO RESTRICTIONS BASED ON CARDIOLOGIST DETERMINATION OF NO ISCHEMIA.
- 8/90 TELECON - MILLER (NRC)/NICHOLS (PGE - TRAINING) - DISCUSSED SOME PALO VERDE MEDICAL ISSUES.
- 9/90 OPERATOR "C" TRANSFERS TO TRAINING DEPARTMENT AND NO LONGER STANDS SHIFT DUTY.
- 10/90 QA MEMO OUTLINING SOME ASPECTS OF PALO VERDE LEVEL III NOV DISTRIBUTED TO TROJAN GENERAL MANAGERS AND THENCE TO TRAINING.
- 11/90 NRC REGIONAL ADMINISTRATOR INFORMS VP NUCLEAR ON PALO VERDE MEDICAL EXAM PROBLEM.

CHRONOLOGY: (continued)

- 12/10/90 NRC AUDIT BEGINS
- 12/12/90 NRC INSPECTION DETERMINES DEFICIENCIES IN LICENSED OPERATOR PHYSICAL EXAMS. DECISION TO CONDUCT LICENSE PHYSICALS ON ALL OPERATORS PRIOR TO NEXT SHIFT WITH NEW PROTOCOL ENSURING ANS 3.4 COMPLIANCE.
- 12/17/90 OPERATOR "B" RESTRICTED FROM PERFORMING LICENSED DUTIES DUE TO HIGH BLOOD PRESSURE, POOR PHYSICAL CONDITION, AND FEAR OF HEIGHTS.
- 12/17/90 OPERATOR "C" RESTRICTED FROM PERFORMING LICENSED DUTIES DUE TO A CONGENITAL INABILITY TO SMELL UNTIL RESTRICTION "NO SOLO" PLACED ON LICENSE.

CHRONOLOGY: (continued)

- 12/18/90 OPERATOR "D" RESTRICTED FROM PERFORMING LICENSED DUTIES DUE TO SEVERE HEADACHES AND THE MEDICATIONS USED TO CONTROL THEM.
- 12/21/90 PHYSICALS COMPLETE. WATCH STANDERS COMPLETED PRIOR TO SHIFT WORK.
- 12/28/90 OPERATOR "A" RESTRICTED BY NRC TO "NO SOLO" OPERATION BASED UPON A CARDIOVASCULAR ANOMALY UPON REVIEW OF MEDICAL RECORDS BY NRC REGIONAL MEDICAL CONSULTANT.
- 1/3/91 NRC AUDIT EXIT.

IMMEDIATE CORRECTIVE ACTIONS:

- PHYSICAL PROTOCOL DRAFT VERIFIED IN ACCORDANCE WITH ANS 3.4 AND APPROVED. (COMPLETE 12/12/90)
- ALL ON-SHIFT LICENSED OPERATORS GIVEN ANS 3.4 PHYSICALS PRIOR TO RETURNING TO SHIFT. (EFFECTIVE 2300 12/12/90 - COMPLETE 12/21/90)
- THREE NON-SHIFT LICENSED OPERATORS DISQUALIFIED FROM LICENSED DUTIES PENDING MEDICAL RESOLUTION. (COMPLETE 12/18/90)

FOLLOW-UP CORRECTIVE ACTIONS:

- EVENT REVIEW TEAM (TRAINING, NSRD, OPERATIONS, QA) ASSESSING REPORTABILITY, CAUSES, CORRECTIVE ACTION, SAFETY SIGNIFICANCE OF EVENT. (DRAFT REPORT COMPLETE)

FOLLOW-UP CORRECTIVE ACTIONS: (continued)

- REPORTED CHANGE IN MEDICALLY DISQUALIFIED OPERATOR STATUS PER 10 CFR 50.74. (COMPLETE 1/10/91)
- PROTOCOL FOR NRC LICENSE, FIRE BRIGADE, AND SECURITY PHYSICALS REVISED TO ENSURE REGULATORY COMPLIANCE, ACCOUNTABILITY, ADEQUACY AS A QA RECORD, AND COMPLETENESS OF REVIEW. (COMPLETE 1/11/91)
- SENT COPIES OF MEDICAL EXAMINATION PROTOCOL AND PROCEDURES TO OTHER REGION V FACILITIES. (COMPLETE 1/15/91)
- REVIEW LICENSED OPERATOR MEDICAL RECORDS FOR EXAMS CONDUCTED TO SUPPORT LICENSE INITIAL/RENEWAL/UPGRADE SINCE 5/87. (COMPLETE 1/15/91) NO CURRENT WATCH STANDERS WERE IDENTIFIED THAT SHOULD HAVE BEEN DISQUALIFIED OR RESTRICTED.

FOLLOW-UP CORRECTIVE ACTIONS: (continued)

- REVIEW OTHER AREAS REQUIRING MEDICAL EXAMS TO ENSURE STANDARDS MET (I.E., FIRE BRIGADE, SECURITY). (2/15/91)
- REVIEW FITNESS-FOR-DUTY PROCEDURES TO ENSURE PRESCRIPTION AND NON-PRESCRIPTION DRUGS ARE REPORTED TO SUPERVISORS, AS APPROPRIATE. (COMPLETE 1/11/91)
- REVISE FFD PROCEDURES AND TRAIN SUPERVISORS ON APPROPRIATE ACTIONS UPON RECEIVING PRESCRIPTION DRUG USE INFORMATION BY EMPLOYEES. (4/30/91)
- HOST A CONFERENCE OF REGION V MEDICAL/TRAINING PERSONNEL TO PROVIDE LESSONS LEARNED TO OTHER FACILITIES (WILL TENTATIVELY SCHEDULE 3/91).

ROOT CAUSES:

- REGULATORY CHANGE PROCESS DID NOT GO FAR ENOUGH TO ENSURE THE PHYSICIAN PROVIDED SERVICES IN COMPLIANCE WITH ANS 3.4.
- VERIFICATION OF DOCUMENTS AS SIGNIFIED BY LINE MANAGEMENT SIGNATURES DID NOT DETECT MISSING REQUIREMENTS.
- NO ONE FUNCTIONAL GROUP OR INDIVIDUAL WAS CLEARLY ASSIGNED OR FELT ACCOUNTABLE FOR LICENSED OPERATOR MEDICAL REQUIREMENTS.

CONTRIBUTING CAUSES:

- POOR COMMUNICATIONS/FEEDBACK RESULTED IN NUMEROUS MISSED OPPORTUNITIES TO DETECT AND CORRECT PROBLEM.
- QUALITY ASSURANCE AUDIT PROCESS HAS NOT ADDRESSED OPERATOR MEDICAL EXAMS SINCE 1983. AUDIT FOLLOW UP DID NOT OCCUR TO RESOLVE REGULATORY CHANGES IN OPERATOR MEDICAL EXAMS (NCAR H87-95).

ROOT CAUSES:

- REGULATORY CHANGE PROCESS DID NOT GO FAR ENOUGH TO ENSURE THE PHYSICIAN PROVIDED SERVICES IN COMPLIANCE WITH ANS 3.4.

CORRECTIVE ACTIONS:

- REVISED INCOMING CORRESPONDENCE PROCEDURE TO PROVIDE MEANS FOR PROCESSING (INCLUDING TRACKING AND INDEPENDENT VERIFICATION) OF RULE CHANGES ON INTERIM BASIS. (COMPLETE 1/15/91)
- REVISE REGULATORY GUIDE PROCEDURE TO PROVIDE VERIFICATION OF IMPLEMENTATION. (2/8/91)
- DEVELOP NEW PROCEDURE FOR PROCESSING RULE CHANGES. (2/28/91)
- VERIFY IMPLEMENTATION OF A SAMPLE OF LICENSING BASIS REGULATORY GUIDES. (12/15/91)

CORRECTIVE ACTIONS: (continued)

- REVIEW IMPLEMENTATION OF A SAMPLE OF NEW RULES AND REVISIONS OVER PAST 3 YEARS. (12/15/91)

ROOT CAUSES:

- VERIFICATION OF DOCUMENTS AS SIGNIFIED BY LINE MANAGEMENT SIGNATURES DID NOT DETECT MISSING REQUIREMENTS.

CORRECTIVE ACTIONS:

- DISCUSS VERIFICATION OF DOCUMENTS BY LINE MANAGEMENT (INITIALLY CONDUCTED BY VP SUMMER 1990, SCHEDULED AGAIN 1/91)
- VERIFICATION PACKAGES PREPARED FOR VP CORRESPONDENCE TO NRC. (IMPLEMENTED 10/90)

ROOT CAUSES:

- NO ONE FUNCTIONAL GROUP OR INDIVIDUAL WAS CLEARLY ASSIGNED OR FELT ACCOUNTABLE FOR LICENSED OPERATOR MEDICAL REQUIREMENTS.

CORRECTIVE ACTIONS:

- ESTABLISHED GENERAL MANAGER, PLANT SUPPORT ACCOUNTABLE FOR MEDICAL EXAMS AND AS THE SINGLE POINT OF CONTACT FOR PROBLEM RESOLUTION BETWEEN TROJAN AND CORPORATE MEDICAL. (COMPLETE 1/3/91)
- REVISE PROCEDURES TO CLEARLY ASSIGN ACCOUNTABILITY FOR LICENSED OPERATOR MEDICAL REQUIREMENTS. (2/15/91)

CONTRIBUTING CAUSES:

- POOR COMMUNICATIONS/FEEDBACK RESULTED IN NUMEROUS MISSED OPPORTUNITIES TO DETECT AND CORRECT PROBLEM.

CORRECTIVE ACTIONS:

- PROCESS NOVs (ALL REGION V, OTHER REGION, SEVERITY LEVEL III AND ABOVE) THROUGH OPERATING EXPERIENCE REVIEW PROGRAM (OERP). (INITIATED 1/16/91)
- DISCUSS ISSUE WITH TROJAN MANAGERS, INCLUDING MISSED WARNINGS, COMMUNICATIONS, LESSONS LEARNED, ETC. (SCHEDULED 1/91)

CONTRIBUTING CAUSES:

- QUALITY ASSURANCE AUDIT PROCESS HAS NOT ADDRESSED OPERATOR MEDICAL EXAMS SINCE 1983. AUDIT FOLLOW UP DID NOT OCCUR TO RESOLVE REGULATORY CHANGES IN OPERATOR MEDICAL EXAMS (NCAR H87-95).

CORRECTIVE ACTIONS:

- FUTURE QA AUDITS WILL INCLUDE VERIFICATION OF TRAINING AND QUALIFICATION REQUIREMENTS, INCLUDING COMPLIANCE/COMMITMENTS. (IMPLEMENTED 1/15/91)
- ESTABLISH A FOLLOW-UP TRACKING SYSTEM FOR AUDIT FINDINGS (2/15/91)
- QA DEVELOP AND IMPLEMENT AN "AUDIT ELEMENT" LIST FOR AUDIT AREAS. (12/31/91)

SAFETY SIGNIFICANCE

OPERATOR "A"

- MEDICAL CONDITION: NRC EVALUATED ISCHEMIC HEART DISEASE (POTENTIAL FOR HEART ATTACK OR SUDDEN INCAPACITATION).
- RESTRICTION/DISQUALIFICATION ACTION: "NO SOLO".
- INVESTIGATION RESULTS:
 - STOOD WATCHES THROUGHOUT PERIOD IN QUESTION (2/90-12/90).
 - NEVER STOOD SOLO WATCHES IN MODES 1-4. POTENTIAL DURING MODES 5 AND 6 DURING 1990 REFUELING OUTAGE TO BE ALONE IN CONTROL ROOM. UNABLE TO DETERMINE.
 - CONDITION PREVIOUSLY EVALUATED 4/90 BY CARDIOLOGIST REFERRAL - "NO ZONES OF ISCHEMIA", "HEALTHY PERSON". "DID NOT HAVE SIGNIFICANT CARDIOVASCULAR DISEASE", "COULD PARTICIPATE IN THE FIRE BRIGADE [MORE PHYSICALLY DEMANDING THAN LICENSE DUTIES] WITHOUT ANY RESTRICTIONS".
- CONCLUSION
 - NO SAFETY SIGNIFICANCE.

OPERATOR "B"

- MEDICAL CONDITION: HIGH BLOOD PRESSURE AND ELEVATED PULSE, POOR PHYSICAL FITNESS, FEAR OF HEIGHTS.
- RESTRICTION/DISQUALIFICATION RECOMMENDATION: "DISQUALIFIED".
- INVESTIGATION RESULTS:
 - NO WATCHES STOOD SINCE 12/86.
- CONCLUSION:
 - NO SAFETY SIGNIFICANCE.

OPERATOR "C"

- MEDICAL CONDITION: NO SENSE OF SMELL.
- RESTRICTION/DISQUALIFICATION RECOMMENDATION: "NO SOLO".
- INVESTIGATION RESULTS:
 - STOOD WATCH 13 MONTHS IN PROFICIENCY/FILL-IN CAPACITY.
 - POTENTIAL DURING MODES 5 AND 6 DURING 1990 REFUELING OUTAGE TO BE ALONE IN THE CONTROL ROOM. DOES NOT RECALL EVER BEING ALONE.
 - SMOKE AND TOXIC GAS MONITOR BACKUP.
 - HAS ABILITY TO DETECT IRRITANTS.
- CONCLUSION:
 - NO SAFETY SIGNIFICANCE.

OPERATOR "D"

- MEDICAL CONDITION: SEVERE HEADACHES WITH MEDICATION TO CONTROL THEM CAUSING POTENTIAL IMPAIRMENT OF JUDGMENT, MENTAL ALERTNESS, PHYSICAL MOBILITY AND COORDINATION.
- RESTRICTION/DISQUALIFICATION RECOMMENDATION: "DISQUALIFIED".
- INVESTIGATION RESULTS:
 - SEVERE HEADACHES FOR SEVERAL YEARS INCOMPLETELY DIAGNOSED AND NOT BELIEVED DISABLING ON PREVIOUS PHYSICAL EXAMS.
 - COMMENCED TRIAVIL (MEDICATION OF MOST IMPAIRMENT POTENTIAL) 10/88.

Operator "D": (continued)

- STOOD WATCHES UNTIL 9/89.
- REMOVED FROM SHIFT DUTIES FOR PERFORMANCE.
- SUPERVISOR DID NOT NOTE SIGNIFICANT CHANGES IN PERFORMANCE DURING LAST YEAR OF WATCH STANDING (YEAR OF TRIAVIL USE).
- SUGGESTS MINIMAL IMPAIRMENT.
- STOOD OCCASIONAL WATCHES AS SHIFT SUPERVISOR AS PART OF 4-MAN TEAM.
- MIXED MEDICAL OPINION:
 - WAS QUALIFIED BY TWO DIFFERENT PHYSICIANS WITH MEDICAL CONDITION AND MEDICATION CONSIDERED (1/88 AND 11/89).

Operator "D": (continued)

- PERSONAL PHYSICIAN PRESCRIBING MEDICATION DOES NOT CONSIDER INAPPROPRIATE FOR JOB.
- SOME OTHER PHYSICIANS CONSULTED WERE LESS CONCERNED, BUT IN DR. QUARUM'S OPINION WERE NOT PRESENTED WITH SUFFICIENT INFORMATION OR HAD SUFFICIENT KNOWLEDGE OF ANS 3.4 AND LICENSED OPERATOR DUTIES TO MAKE AN INFORMED MEDICAL OPINION.
- CONCLUSION:
 - MEDICATION PROBABLY HAD SOME UNMEASURED AFFECT ON OPERATOR.
 - BASED UPON SUPERVISORY INPUT, TEAM SUPPORT, AND MEDICAL EXAMS THAT CONSIDERED HIS MEDICAL CONDITION AND MEDICATION DURING HIS WATCH STANDING PERIOD - MINIMAL SAFETY SIGNIFICANCE.

OPERATOR NUMBER	MEDICAL EXAM DATES	
Operator #1	2/16/89 2/27/90	Block for sight test (method used) left blank. Blocks for (physician's summary of overall condition) and sight test (method used) were left blank.
Operator #2	8/14/87 7/5/89	Block for (eyes, general) left blank. Blocks 20, 21, and 22 for documenting specific exam results (mental/physical incapacitating conditions) were left blank.
Operator #3	11/13/87 10/24/89	Block for (physician's summary of overall condition) left blank. Blocks for hearing and sight tests (method used), (ear drums), and (physician's summary of overall condition) were left blank.
Operator #4	2/12/88 10/10/89	Block for (physician's summary of overall condition) left blank. Blocks for (ophthalmoscopic), (eyes, general), (ears, general), (vascular system), and sight test (method used) were left blank.
Operator #5	2/10/88 10/10/89	Block for (physician's summary of overall condition) left blank. Blocks for (cross visual field) and sight test (method used) left blank.
Operator #6	10/18/88 2/27/90	Block for (physician's summary of overall condition) and (physician's summary of medical history) left blank. Blocks for (physician's summary of overall condition), (heart), (vascular), and sight test (method used) were left blank.
Operator #7	2/11/88	Block for (physician's summary of overall condition) left blank.
Operator #8	3/1/90	Blocks for (physician's summary of overall condition) and sight test (method used) left blank.
Operator #9	4/21/89 5/14/90	Block 4 documents uncorrected vision as 20/20, contrary to other examinations and current license restriction. Block for (physician's summary of overall condition) left blank. Block for (physician's summary of overall condition), (physician's summary of medical history), (pupils), and sight test (method used) were left blank.
Operator #10*	10/17/88	Block for (physician's summary of overall condition) and (physician's summary of medical history) left blank.
Operator #11	4/7/89	Fire Brigade examination form, apparently used for NRC Form 396 certification, was only half completed, and not signed by the physician; sight test (method used) block left blank.
Operator #13	2/26/90	Blocks for (physician's summary of overall condition) and eye sight (method used) left blank.
Operator #15	10/21/88	Block for (physician's summary of overall condition) left blank.
Operator #16	2/13/89	Blocks for (physician's summary of overall condition) and sight test (method used) left blank.
Operator #17	2/26/90	Blocks for (physician's summary of overall condition) and sight test (method used) left blank.
Operator #20	10/13/88 2/26/90	Block for (physician's summary of medical history) left blank. Block for (physician's summary of overall condition) left blank.
Operator #21	2/26/90	Blocks for (physician's summary of overall condition) and sight test (method used) left blank.
Operator #23	2/23/90	Blocks for (physician's summary of overall condition), (physician's summary of medical history), and sight test (method used) were left blank.
Operator #24*	2/24/89	Block for sight test (method used) left blank.

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