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June 29, 1984

RELATED CORRESPONDENC

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Ms. Maureen Mulligan Limerick Ecology Action 762 Queen Street Pottstown, PA 19464

> Re: Limerick Generating Station, Units 1 and 2 Docket Nos. 50-352 & 50-353

Dear Ms. Mulligan:

In accordance with the Board's Order of June 1, 1982, I am forwarding to you copies of correspondence and documents regarding emergency planning among Applicant, NRC Staff, the Commonwealth of Pennsylvania and other responsible governmental agencies. These documents supplement the material which was forwarded by our letter dated June 22, 1984, and provide additional correspondence dated June 20 and June 25, 1984.

Very truly yours,

DSOB

Edward J. Cullen, Jr.

EJC, jr./pkc encs. cc: See Attached Service List 0000g/0006g

> 8407020512 840629 PDR ADOCK 05000352 PDR ADOCK 05000352

cc: Judge Lawrence Brenner (w/o enclosure)
Judge Peter A. Morris (w/o enclosure)
Judge Richard F. Cole (w/o enclosure)
Troy B. Conner, Jr., Esq. (w/enclosure)
Wodgdon, Esq. (w/enclosure)
(w/o enclosure) Mr. Frank R. Romano(w/enclosure)Mr. Robert L. Anthony(w/o enclosure)Zori G. Ferkin, Esq.(w/enclosure)Mr. Thomas Gerusky(w/o enclosure)Director, Penpsylvania Emocration(w/o enclosure) Mr. Thomas Gerusky (w/o enclosure) Director, Pennsylvania Emergency (w/o enclosure) Management Agency Management AgencyCharles W. Elliott, Esq.(w/o enclosure)Angus Love, Esq.(w/o enclosure)David Wersan, Esq.(w/o enclosure)Robert J. Sugarman, Esq.(w/o enclosure)Martha W. Bush, Esq.(w/o enclosure)Spence W. Perry, Esq.(w/o enclosure)Jay M. Gutierrez, Esq.(w/o enclosure)Atomic Safety & Licensing(w/o enclosure) Appeal Board Atomic Safety & Licensing Board Panel Docket & Service Section James Wiggins Timothy R. S. Campbell Timothy R. S. Campbell

(w/o enclosure) (w/enclosure - 3 copies) (w/o enclosure)

(w/o enclosure)



COUNTY OF LEHIGH DEPARTMENT OF PROPERTY SERVICES OFFICE OF CIVIL DEFENSE

COURTHOUSE • P. O. BOX 1548 ALLENTOWN, PENNSYLVANIA 18105 (215) 820-3073

Le.

JERRY DUCKETT CIVIL DEFENSE DIRECTOR

June 20, 1984

Bob Bradshaw Planner/Trainer Energy Consultants 2101 N. Front St. Riverside Office Center 3 Harrisburg, Pa. 17110

Dear Bob:

Just a note to thank you for the time you took in visiting me yesterday.

I appreciate all the information you gave me, and it will certainly prove very helpful. I will wait for your letter and in the meantime, I will send you the information you need on the radios and telephones, as soon as I get it.

Thanks again for everything.

Best wishes, Jerry Dyckett, Director



June 25, 1984

Ms. Monica Phillips, RN Director of Nursing Services Pottstown Memorial Medical Center 1600 E. High Street Pottstown, PA 19464

Dear Ms. Phillips:

Enclosed please find ten (10) copies of a second draft of departmental implementing procedures for your radiological emergency response plan. This second draft incorporates the revisions you desired following your recent review.

Also enclosed are ten (10) copies of revised pages for your radiological emergency response plan itself. This minor revision incorporates the changes we discussed in our most recent meeting, and ensures that the plan and implementing procedures are consistent.

Please review these and advise me of any questions or concerns you may have. I would recommend that the plan and procedures be distributed to key staff prior to the July 18 training program.

As always, thanks for your continued help and support.

John F. Long, Jr.

JFL/dlt

Enclosures

RADIOLOGICAL EMERGENCY RESPONSE PLAN FOR INCIDENTS AT THE LIMERICK GENERATING STATION

Pottstown Memorial Medical Center

Pottstown, PA 19454

March 1984

Copy Number ____

Draft 3 Rev. 6/84 directed elsewhere by a member of the Emergency Management Team. Members of the Emergency Management Team should report to Emergency Headquarters located in the Associate Nursing Director's Office.

E. Off-Duty Personnel

/il off-duty personnel will be notified and recalled if necessary by their respective Department Directors, or their designates, who maintain lists of their employees' telephone numbers. The Department Directors will be notified according to the "Call Schedule" and it is the responsibility of the Department Director or his/her designate to notify his/her personnel. (Each Department Director will keep a duplicate list of personnel telephone numbers at home. When notified of an emergency, a responsible person in the home may notify personnel while the Department Director responds to the medical center.)

F. Media Relations

All members of the press and public information media will be directed to the Information Center set up in the main lobby. Information will be provided to those persons by the Public Relations Department. All press releases <u>must</u> be cleared through the PMMC President.

G. Emergency Headquarters

Emergency Headquarters will be located in the Nursing Office.

III. CONCEPT OF OPERATIONS

Specific emeryency management responses are dependent upon the "Incident Classification" declared at the Limerick Generating Station. Notification of the incident classification, and of any changes in that classification, will be received from the Montgomery County Office of Emergency Preparedness. Please note that procedures for all classifications are cumulative; that is, procedures for each incident classification include those procedures established for all lower classification.

A. Unusual Event

No formal notification of the declaration of an Unusual Event will be provided by the Montgomery County Office of Emergency Preparedness. No action is required of the hospital unless specifically called upon to assist with treatment of on-site injured or contaminated individuals (reference Atta_hment F, "Procedures for Medical Emergencies Involving Radiation").

B. Alert

1. Assemble Emergency Management Team.

2. Establish Emergency Headquarters in the Nursing Office.

- Perform an immediate update of patient census (reference Attachment D, Tab 1), classifying patients according to the following patient groups:
 - a. Maternity*
 - b. Pediatrics
 - c. Medical/Surgical
 - d. Intensive/Cardiac Care (ICU/CCU)
- Determine patient transportation requirements (reference Attachment D, Tab 1) according to the following transport classifications;
 - a. Ambulance (litter patients)
 - b. Bus (ambulatory patients)
 - c. Truck**
 - d. Helicopter (litter patients)
- Code patient medical record in accordance with transport classification coding as follows:
 - a. A ambulance
 - b. B bus
 - c. T truck
 - d. H helicopter
- Contact designated host facilities (reference Attachment B, Tab 1) to determine host bed availability (reference Attachment D, Tab II).
- Determine total number of medical center staff on duty, by department.
- Determine emergency staffing needs for (a) sheltering, and (b) evacuation.
- Identify patients whose medical status would permit early or temporary discharge.

* Mothers with newborn count as one (1) patient.

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** Limited to patients unable to be made litter-ready and/or requiring bulky support equipment, or when other forms of transportation are not feasible.

- Ensure that adequate supplies for approximately 5 days limited operations are on hand.
- 11. Provide an immediate report of the following to the Montgomery County Medical Coordinator at 215/ :
 - a. Patient census and transportation requirements.
 - b. Host bed availability.
 - c. On-duty staff census.
 - d. Any unmet needs.
- 12. Test emergency power and support systems.
- Stock kitchen with an approximate 5-day supply of canned foods, fruits and juices, disposable plates, cups and utensils.
- Inventory and replenish medications, IV fluids, blood and oxygen supplies for a minimum two (2) day period.
- 15. Inventory and prepare dosimeters and radioprotective drugs (KI).
- C. Site Emergency
 - Prerequisite Perform all appropriate actions outlined under ALERT.
 - 2. Terminate visiting hours for the duration of the emergency.
 - 3. Recall required off-duty personnel.
 - Reassign on-duty staff as deemed appropriate.
 - 5. Discontinue elective surgery and diagnostic admissions.
 - Discharge patients identified as being medically appropriate for discharge by attending physicians or medical disaster chief.
 - Restrict emergency admissions and outpatient studies (treat and release status) referring stabilized patients to hospitals outside the plume exposure pathway EPZ.
 - Consolidate nursing units where possible in order to reduce staff requirements.
 - Prepare a copy of the patient's medical record, attaching a minimum 48-hour requirement of each patient's medications in individual plastic bags.
 - Assemble all required special care patient transportation needs (e.g., portable oxygen/suction apparatus, patient restraints, extra IV fluids, etc.) at the appropriate nursing stations.

- 11. Prioritize patients for evacuation, according to the following ranking:
 - a. Maternity
 - b. Pediatrics
 - c. *Medical/Surgical
 - d. *Intensive/Cardiac Care (ICU/CCU)
- 12. Notify host facilities (reference Attachment B, Tab I) of incident and status, confirming bed availability and reserving available beds for patient evacuees. Request additional beds through the Montgomery County Medical Coordinator at 215/_____, if required.
- Confirm transportation resources through the Montgomery County Medical Coordinator and assure that transportation providers have been readied for dispatch.
- 14. Instruct staff in the procedures for distribution and use of radiation dosimeters and administration of radioprotective drugs (sufficient quantities of dosimeters and radioprotective drugs will be maintained on hand in the hospital. Dosimeters will be provided for 50% of total staff (emergency staffing levels) and potassium iodide will be provided for 50% of staff and 100% of patients.
- 15. Time permitting, notify patients' `amilies of possible patient evacuation, providing name/location of the host facility, or temporary administrative headquarters should the specific host facility be unknown.
- D. General Emergency
 - Prerequisite Perform all appropriate actions outlined under ALERT and SITE EMERGENCY.
 - Await Protective Action Guidelines from the Montgomery County Office of Emergency Preparedness and proceed accordingly. Such guidelines will consist of either:
 - a. Sheltering (reference Section IV) or,
 - b. Evacuation, if evacuation can be completed prior to significant releases of radioactive material to the Plume Exposure Pathway EPZ (reference Section V).

^{*} Patients aged 55 years or older or considered too critical for transport should be considered candidates for sheltering rather than evacuation.

IV. SHELTERING PROCEDURES

- A. Remain indoors with all windows closed.
- B. Adjust heating/ventilation/air conditioning systems to eliminate or minimize the intake of outside air.
- C. Distribute dosimeters to designated emergency staff.
- D. Upon the direction of the Secretary of Health, distribute radioprotective drugs and advise staff to administer them to themselves in accordance with the instructions received with said drugs.

Radioprotective drugs should be administered to patients only upon the direction of the patient's attending physician.

V. EVACUATION PROCEDURES

A. Authority

An order to evacuate the facility can be made only be the Governor of Pennsylvania and/or the Pottstown Memorial Medical Center President (or highest-ranking member of the Emergency Management Team). A recommendation to evacuate the facility can be made by the Governor of Pennsylvania and/or the highest-ranking county or municipal elected official for all or part of their respective jurisdictions.

B. Required Coordination

Any evacuation outside the medical center complex must be coordinated with the Montgomery County Office of Emergency Preparedness and the Emergency Response Team of the Pennsylvania Department of Health, through the Montgomery County Medical Coordinator at 215/

C. General Procedures

- Contact designated host facilities (reference Attachment B, Tab I), and notify of incident, confirming bed availability, commissioning available beds for patient evacuees and determining requirements for accommodating transfer of staff. <u>NOTE:</u> Staff should only be assigned to host facility at the <u>host facility's request</u>. Request further additional beds from the Montgomery County Medical Coordinator at 215/______,
- Confirm the dispatch of required transportation from the Montgomery County Medical Coordinator at 215/
- 3. Update each patient's chart.
- 4. Update patient's bagged medications as required.

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- Prepare a roster of patients, their destinations and mode of transportation. Provide copies of the roster for host facilities and the Montgomery County Medical Coordinator.
- 6. Assemble patients, together with medical records, medication, personal items and other necessary medical support equipment at departure areas according to assigned transport status:
 - Ambulance cases will be assembled at the emergency department entrance.
 - b. Bus/van cases will be assembled at the main entrance.
 - c. Truck cases will be assembled at the rear loading dock.
 - Helicopter cases will be assembled at the emergency department entrance.
- 7. Establish external traffic control for departure areas.
- Assign staff to multiple-patient evacuation vehicles as deemed appropriate.
- 9. Distribute evacuation route maps (reference Attachment B, Tab II) to drivers unfamiliar with the route of travel and final destination, after confirming the evacuation route with the Montgomery County Medical Coordinator at 215/
- Dispatch designated staff to establish a temporary administrative headquarters at the primary host facility, and make necessary arrangements to relocate staff where necessary.
- 11. Assist patients into appropriate transportation vehicles.
- 12. Secure the medical center complex via shutdown of all mechanical, electrical and physical plant systems, with the exception of sprinkler and alarm systems; label and secure patient valuables, and secure files, drug and valuables lockers.
- 13. Notify the Montgomery County Medical Coordinator at 215/_______ of the relocation site selected as the temporary administrative headquarters, indicating that evacuation is complete, and depart with the medical center complex locked and secured.

VI. DE-ESCALATION OF INCIDENT

Upon notification from the Montgomery County Office of Emergency Preparedness that the Incident Classification for the Limerick Generating Station has been de-escalated, the Pottstown Memorial Medical Center President should oversee the orderly return of the facility to the level of preparation indicated by the new incident classification. The spacific steps to be taken and the sequence in which they are taken shall be determined by the Pottstown Memorial Medical Center President.

VII. REENTRY

Notification that the evacuated area is safe for reoccupation will be reviewed from the Monthomery County OEP.

Prior co initiating the reoccupation of the medical center, a safety inspection of the evacuated complex and surrounding areas shall be performed by the Pottstown Memorial Medical Center President, the Director of Maintenance, and other department heads as deemed necessary. Upon the determination that reoccupation of the medical center complex is considered safe, department managers and the Emergency Management Team shall ensure that the facility is fully prepared to assume normal operations prior to reoccupation. All supplies should be replenished prior to initiating the reoccupation. When the facility is fully prepared, emergency headquarters will be reestablished in the Associate Nursing Director's Office and the Pottstown Memorial Medical Center President will coordinate transportation and reoccupation through the Montgomery County Office of Emergency Preparedness.

VIII. PLAN MAINTENANCE AND DISTRIBUTION

- A. Maintenance
 - The Medical Center President is responsible for ensuring the currency of the Medical Center RERP, including the development and distribution of all changes, as well as accomplishing an annual review.
 - All changes to the Pottstown Memorial Medical Center RERP shall be coordinated through the Montgomery County Office of Emergency Preparedness.
 - 3. The current date shall be placed on any page that is changed.
- B. Distribution
 - Montgomery County EOC (copies to accommodate distribution to PEMA and Philadelphia Electric Company)

Copy Numbers 1-4

4 copies

 Pottstown Borough Emergency Management Coordinator

Copy Number 5

1 copy

3. Pottstown Memorial Medical Center Staff

Draft 3 Rev. 6/84

DEPARTMENTAL IMPLEMENTING PROCEDURES POTTSTOWN MEMORIAL MEDICAL CENTER RADIOLOGICAL EMERGENCY RESPONSE PLAN

I. INTRODUCTION

These procedures are designed to accompany and complement the Pottstown Memorial Medical Center's Radiological Emergency Response Plan (RERP) for incidents at the Limerick Generating Station.

Each department has specific procedures to enable implementation of the RERP. All procedures are geared to the four incident classifications used to classify an incident at the Limerick Generating Station. For more detail on nuclear incidents and the incident classifications, please refer to Section I of the Pottstown Memorial Medical Center RERP.

The responsibility for the direction and control of these implementing procedures rests with the respective department director or senior department staff person on duty.

The responsibility for the overall direction and control of the Pottstown Memorial Medical Center's response to an incident at the Limerick Generating Station rests with the Pottstown Memorial Medical Center President, his designated alternate, or the senior staff person on duty.

II. ADMINISTRATION

A. Unusual Event

No action necessary unless the facility is called upon to treat onsite injured personnel from the Limerick Generating Station.

B. Alert

- 1. Notify all members of the Emergency Management Team:
- a. President
- b. Medical Disaster Chief
- c. Director of Nursing Services
- d. Director of Maintenance
- e. Chief of Security
- f. Director of Public Relations
- Establish Emergency Headquarters in the Associate Nursing Director's Office and so notify the telephone/paying operator.
 - 3. Obtain an updated on-duty staff census from all department directors.
 - 4. Obtain a current patient census and patient transportation requirements from the Director of Nursing Services.
- 5. In conjunction with the Emergency Management Team, determine minimum emergency staffing needs for <u>sheltering</u> and <u>evacuation</u> protective actions.
 - 6. Call designated host facilities, notifying them of the ALERT and requesting information on bed availability for PMMC patients in the event of an evacuation:

Reading Hospital and Medical Center (215) 378-6000 Contact: James Gronseth, President

Community General Hospital (Reading) (215) 376-4881 Contact: Michael Boyle, Assistant Administrator

_____ Saint Joseph Hospital (Reading) (215) 278-2000 Contact: Sister Frances Anne, President

7. Direct Central Service to inventory medical and housekeeping supplies to ensure that an approximate five-day supply is on hand.

8. Ensure that Pharmacy has inventoried essential medications and that a two-day supply is on hand.

 Direct I.V. Therapy to inventory essential supplies to ensure that a two-day supply is on hand.

- 10. Direct Nutrition Services to inventory foodstuffs to ensure that an approximate five-day supply (with the exception of perishables) is on hand.
- 11. Direct the Laboratory to inventory blood supplies to ensure that an approximate five-day supply is on hand.
- 12. Direct Respiratory Therapy to inventory oxygen supplies to ensure that an approximate five-day supply is on hand.
 - 13. Report the following information to the Montgomery County Medical Group/Coordinator at 1-631- :
 - a. Patient census and transportation requirements
 - ____ b. On-duty staff census
 - _____ c. Availability of beds at host facilities
 - _____ d. Any unmet needs

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Update and report this information every 8 hours.

- _____14. Confirm that Maintenance has tested and ensured the operation of the emergency generator.
- C. Site Emergency
- 1. Complete actions numbered 1, 2, 3, 4, 5, 7, 9, 10, 11, 12, 13, and 14 listed under ALERT unless previously completed.
- 2. Terminate visiting hours for the duration of the emergency, following usual procedures.
- 3. Advise the Medical Disaster Chief to discontinue elective surgery and diagnostic admissions, restricting emergency admissions and outpatient studies (treat and release status) and referring stabilized patients to hospitals located outside the plume exposure pathway EPZ.
- Direct the Medical Disaster Chief to authorize the discharge of patients as deemed medically appropriate.
- 5. Ensure that the Director of Nursing Services is consolidating patient units where possible in order to reduce staffing requirements.
- 6. Confirm that Pharmacy is preparing and packaging patient medications for a two-day period and that unit nursing personnel have attached packaged medications to patient charts.
 - 7. Confirm that the Medical Disaster Chief and Director of Nursing Services are prioritizing patients for evacuation.
 - Call designated host facilities, notifying them of the SITE EMERGENCY, confirming the availability of reception beds and

reserving those beds for PMMC patients in the event of an evacuation.

- a. Reading Hospital and Medical Center (215) 378-6000
 - b. Community General Hospital (215) 376-4881
- c. Saint Joseph Hospita! (215) 278-2000
- 9. Call the Montgomery County Medical Group/Coordinator at 1-631- , providing updated information as available, obtaining their confirmation that adequate transportation resources have been committed and readied for dispatch, and reporting any unmet needs.
- 10. Direct staff from Radiology to distribute radiation dosimeters to all personnel, and instruct all personnel in the use of dosimeters.
- 11. Time permitting, direct Public Relations personnel to notify the families of PMMC patients of the current situation and the location of reception facilities should an evacuation occur.

D. General Emergency

- 1. Complete actions numbered 1, 2, 3, 4, 5, 7, 9, 10, 11, and 12 listed under ALERT, and actions numbered 2, 3, 4, 5, 6, 7, and 10 listed under SITE EMERGENCY.
- 2. Maintain operations as per SITE EMERGENCY unless protective action recommendations are received from the Montgomery County Office of Emergency Preparedness.

3. Protective Action: Sheltering

- a. Ensure that the following actions are being implemented:
- All exterior doors and windows are securely closed.
- (2) Where possible, all forced air heating, ventilation and air conditioning systems are adjusted to minimize or eliminate the intake of outside air.
- b. If so directed by the Secretary of Health, advise the Medical Disaster Chief to instruct staff to administer radioprotective drugs to themselves and to patients (only if so ordered by the attending physician) in accordance with directions previously received.
- _____ c. Report any problems or unmet needs to the Montgomery County Medical Group/Coordinator at 1-631-
- 4. Protective Action: Evacuation
- a. Call designated host facilities, notifying them of the evacuation and commissioning available beds to the maximum needed. (Make detailed arrangements regarding the transfer of any PMMC personnel and temporary staff privileges for PMMC physician staff.)
 - b. Call the Montgomery County Medical Group/Coordinator at 1-631-, immediately reporting any unmet host bed needs and confirming that they have dispatched adequate transportation resources.
 - c. Ensure that the following actions are being implemented:
 - (1) Patients, copies of patient charts, transfer forms and bagged patient medications are being readied in patient care units.

- (2) As evacuation vehicles arrive, patients are being assembled and evacuated as follows:
 - (a) Ambulance evacuees are assembled in the first floor main corridor and evacuated through the ER and doctors' entrance into ambulances.
 - (b) Bus evacuees are assembled in the main lobby and evacuated through the front entrance into buses.
 - (c) Truck evacuees are assembled in the ground floor corridor and evacuated through the rear loading dock into trucks.
- (d) Helicopter evacuees are assembled in the first floor main corridor and evacuated through the ER and doctors' entrance to helicopters.

NOTE: Copies of patient charts, transfer forms, bagged medications, personal items and necessary support equipment are to be assembled and removed with patients.

- (3) Security personnel are providing external traffic direction and control within the PMMC campus.
- (4) Patient care personnel (as available) are assigned to accompany bus evacuees.
- (5) All transportation providers are provided with maps showing evacuation routes and host facilities.
- d. Dispatch the Managing Director and/or other Administration staff to designated reception facilities to facilitate evacuee arrival and processing.

- e. When the evacuation is complete, ensure that Maintenance shuts down all mechanical, electrical and physical plant systems, with the exception of sprinkler and alarm systems and the heating system in cold weather.
- f. Secure records by locking all desks and file cabinets, following usual weekend procedures.
- g. Ensure that all medication cabinets are locked per normal procedures.
- h. Time permitting, secure residents' valuables left behind in the safe or other secure location, depositing an inventory list in a separate locked file.
 - i. Call the Montgomery County Medical Group/Coordinator at 1-631-, notifying of the relocation site selected as temporary administrative headquarters, indicating that the evacuation is complete and depart with all files and the facility locked and secured.

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III. NURSING SERVICES

A. Unusual Event

No action necessary unless called upon to treat on-site injured personnel from the Limerick Generating Station (reference Attachment E to the basic plan for procedures concerning medical emergencies involving radiation).

B. Alert

- 1. Director of Nursing Services (or senior nurse on duty):
- a. Recall off-duty staff as deemed necessary.
- b. Provide an updated on-duty nursing staff census to the Disaster Chief located in Emergency Headquarters in the Associate Nursing Director's Office.
- c. Prepare a staffing schedule to assure 24 hour/day provision of adequate patient care services using a nursing staff complement of approximately 1/2 that normally scheduled.
- d. Compile updated patient census and patient transportation needs information as received from nursing units and relay to the Disaster Chief, classifying patients according to the following patient groups:
 - (1) Maternity*
 - (2) Pediatrics (children & adolescents)
 - (3) Medical/Surgical
 - (4) ICU/CCU
- * Mothers with newborn count as one (1) patient.

- 2. Unit Nursing Staff
- a. The head nurse or charge nurse on duty in each unit should prepare an updated patient census and classify patients' transportation needs according to the Patient Classification System. Each patient's chart should be coded by transportation status as follows:
 - (1) A: Ambulance
 - (2) B: Bus
 - (3) T: Truck¹
 - (4) H: Helicopter
 - b. Provide the updated patient census and transportation information to the Director of Nursing Services in Emergency Headquarters, located in the nursing office.
- C. Site Emergency
 - 1. Director of Nursing Services (or senior nurse on duty):
 - a. Complete all actions listed under ALERT.
 - b. Consolidate patient units as necessary to deal with staff shortages.
 - c. Prepare a priority list for patient evacuation according to the following ranking:

First Priority: Maternity (mothers with newborn count as one (1) patient) Second Priority: Pediatrics Third Priority: Medical/Surgical Fourth Priority: ICU/CCU

¹ Limited to patients unable to be made litter-ready and/or requiring bulky support equipment, or when other forms of transportation are not feasible.

- 2. Unit Nursing Staff
- a. Complete all actions listed under ALERT.
- b. Prepare a copy of the patient's chart and nursing care plans, attaching bagged two-day supplies of patient medications.
 - c. Assemble all required special care patient transportation needs (wheelchairs, portable oxygen apparatus, patient restraints, etc.) at or near nursing stations.
 - _ d. Code disaster tags with individual patients' transport status (A, B, T, H) and attach to all patients.
 - e. Receive dosimeters and radioprotective drugs when distributed. Attach dosimeters to clothing as instructed. DU NUT take radioprotective drugs unless specifically directed.

D. General Emergency

- 1. Director of Nursing Services
- a. Complete all actions listed under ALERT and SITE EMERGENCY.
- b. Maintain operations as per SITE EMERGENCY unless instructed otherwise by the Disaster Chief.
- c. If Sheltering is the recommended protective action, maintain operations as directed by the Disaster Chief.
 - d. If Evacuation is the recommended protective action, the Director of Nursing Services shall be responsible for overseeing the assembling of patient evacuees in departure areas and for directing unit nursing staff to assemble and evacuate patients, as space in departure areas allows. The

Director of Nursing Services shall also ensure that a master list of evacuees, mode of transport, and host facility is prepared for all patients. Nursing staff should be assigned to accompany bus evacuees as available.

- 2. Unit Nursing Staff
 - a. Complete all actions listed under ALERT and SITE EMERGENCY.
 - b. Maintain operations as per SITE EMERGENCY unless instructed otherwise by the Director of Nursing Services.
 - c. If Sheltering is the recommended protective action:
 - (1) Close all exterior doors and windows.
 - (2) Remain inside the building for the duration of the sheltering advisory.
 - (3) If so directed by the Medical Disaster Chief, administer radioprotective drugs to yourself and patients (only if so ordered by the attending physician).
 - d. If Evacuation is the recommended protective action:
 - (1) Prepare patients with clean clothing, personal effects, copies of medical charts and nursing care plans, transfer forms, disaster tags and bagged medications.
 - (2) As your unit is notified by the Director of Nursing Services, assemble evacuees as follows:
 - * Ambulance evacuees assemble in main floor corridor.
 - Bus evacuees assemble in main lobby.

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Draft 2

- Truck evacuees assemble in ground floor corridor.
- Helicopter evacuees assemble in main floor corridor.
- (3) The charge nurse in each unit should prepare a list of patient evacuees, mode of transportation and final destination, to be forwarded to the Director of Nursing when the evacuation is complete.
- (4) Nursing staff should accompany evacuees as directed by the Director of Nursing Services.

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- IV. MEDICAL RECORDS
 - A. Unusual Event

No action necessary.

- B. Alert
- Provide a current on-duty departmental staff census to the Disaster Chief in Emergency Headquarters, located in the Associate Nursing Director's office.
- Recall off-duty staff as necessary.
- Provide disaster tags to nursing units.
- C. Site Emergency
- Complete all actions listed for ALERT.
- 2. Provide assistance to other departments as directed by the Disaster Chief.
 - D. General Emergency
- Complete all actions listed for ALERT and SITE EMERGENCY.
 - 2. If sheltering is the recommended protective action, ensure that all windows and exterior doors in the department are closed.
 - 3. If evacuation is the recommended protective action, secure and lock all medical records and other files.

- V. PHARMACY
 - A. Unusual Event

No action necessary.

- B. Alert
- Recall off-duty staff as necessary.
 - Provide a current on-duty departmental staff census to the Disaster Chief in the Emergency Headquarters, located in the Associate Nursing Director's Office.
- Inventory medications to ensure that a 2-day minimum supply of essential medications is on hand.
- 4. Inventory supplies of potassium iodide to ensure that adequate supplies are on hand for 50% of employees and 100% of patients.
 - C. Site Emergency
- Complete all actions listed for ALERT.
- 2. Prepare 2-day supplies of patient medications in individual bags and provide to appropriate nursing units.
- 3. Distribute potassium iodide to staff and nursing units with directions for administration.
- Assist other departments as directed by the Disaster Chief or department head.
- D. General Emergency
 - Complete all actions listed for ALERT and SITE EMERGENCY.

- 2. If sheltering is recommended, ensure that any windows and exterior doors in the department are closed.
- 3. If evacuation is directed, ensure that all essential medications have been packaged and sent to patient care units, and secure the Pharmacy per normal procedures.

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VI. MAINTENANCE

A. Unusual Event

No action necessary.

B. Alert

- Provide an updated on-duty staff census to the Disaster Chief.
- Recall off-duty staff as required.
- Test the emergency generator for proper operation.
- 4. Assist elsewhere as directed by the Disaster Chief or department head.
- C. Site Emergen y
- Complete all actions listed under ALERT.
 - D. General Emergency
 - Complete all actions listed under ALERT.
 - 2. If sheltering is recommended:
 - a. Ensure that all exterior doors and windows in the hospital are securely closed.
 - b. When possible, adjust all heat, ventilation and air conditioning systems to minimize or eliminate the intake of outside air.
 - _____ c. Assist elsewhere as directed by the Disaster Chief or department head.

VI-1

- 3. If evacuation is recommended or ordered:
- a. Assist Security personnel in providing traffic control outside the hospital. Traffic should be directed as follows:
 - Buses all buses should be assembled in the front drive for loading at the front entrance.
 - (2) Ambulances all ambulances should be directed to the ER area for loading at the ER and doctors' entrance.
 - (3) Other vehicles other vehicles such as trucks should be assembled in the rear of the hospital for loading by way of the loading dock.
- b. Provide evacuation route maps to all transportation providers.
- c. Assist elsewhere as directed.
 - d. When directed by the Disaster Chief, shut down all mechanical, electrical and physical plant systems with the exception of sprinkler and alarm systems and the heating system in cold weather.
- e. Assist the Chief of Security as directed in securing the building and depart when directed.

- VII. SECURITY
 - A. Unusual Event

No action necessary.

B. Alert

- Chief of Security should report to Emergency Headquarters in the Associate Nursing Director's Office.
- Recall off-duty staff as required.
- Respond as directed by the Disaster Chief or Chief of Security.
 - C. Site Emergency
- Complete all actions listed under ALERT.
- Assist as needed in escorting visitors out of the building when visiting hours are terminated.
 - 3. Lock all outside doors except Doctor's entrance, Emergency Department, Lobby and loading dock. Station one staff person at each entrance to control access.
 - D. General Emergency
- Complete all actions listed under SITE EMERGENCY.
 - 2. If sheltering is recommended:
 - a. Continue to provide security to the hospital complex.

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- 3. If evacuation is recommended or ordered:
 - With the assistance of Maintenance and Housekeeping personnel, provide traffic control outside the hospital complex. Traffic should be directed as follows:
 - Buses all buses should be assembled in the front drive for loading by way of front entrance.
 - (2) Ambulances all ambulances should be directed to the ER area for loading by way of ER and doctors' entrance.
 - (3) Other vehicles other vehicles such as trucks should be assembled in the rear of the hospital for loading by way of the loading dock.
 - b. Provide one person each to number 3, 4, and 5 elevators.
 These elevators will be operated by Security personnel <u>only</u> and will be used to evacuate patients.
 - c. When directed by the Disaster Chief, secure all outside doors and windows and depart.