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63FR 38865  
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RULES & DIR. BRANCH  
US NRC

September 14, 1998  
RC-98-0165

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Mr. David L. Meyer  
Chief, Rules Review and Directives Branch  
Mail Stop T-6 D69  
Office of Administration  
United States Nuclear Regulatory Commission  
Washington, DC 20555-0001

Dear Mr. Meyer:

Subject: VIRGIL C. SUMMER NUCLEAR STATION  
DOCKET NO. 50/395  
OPERATING LICENSE NO. NPF-12  
DRAFT NUREG-1633 COMMENTS

South Carolina Electric and Gas submits these comments in response to the subject notice. We have reviewed draft NUREG-1633, "Assessment of the Use of Potassium Iodide (KI) As a Protective Action During Severe Reactor Accidents," (63 Fed. Reg. 38865, July 20, 1998). The draft NUREG reviews the historical use, technical basis, and industry experiences with KI as a supplemental protective action for the general public.

Draft NUREG-1633 supports the industry position that "considering" stockpiling or predistribution of KI as a protective action will not add any significant public health and safety benefit to the adequate level of protection currently provided by existing emergency planning at and around commercial nuclear power plants. SCE&G urges the NRC to reconsider its approval of the proposed rulemaking petition.

SCE&G endorses the draft NUREG which concludes careful consideration should be given to whether the use of KI for the public during an emergency is advantageous. SCE&G agrees with the staff's assessment in SECY 98-061, "Staff Options for Resolving a Petition for Rulemaking Relating to Reevaluation of the Policy Regarding the Use of Potassium Iodide (KI) by the General Public After a Severe Accident at a Nuclear Power Plant." We endorse Option 2. This option recommends denying the petition and supports the FRPPC policy statement discussed in COMSECY 97-028 which maintains that evacuation and sheltering are the primary protective actions.

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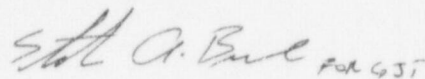
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If administered promptly, KI can be effective in blocking the thyroid and preventing radioiodine uptakes. The population most at risk in the situation are children through age 15. However, most emergency plans suggest precautionary evacuation of schools and day care facilities at declaration of a Site Area Emergency. Under these conditions, there is no imminent release of radioactive material that will exceed EPA Protective Action Guidelines beyond the site boundary. If children are evacuated, there is no opportunity to further reduce risk through distribution of potassium iodide.

A major impediment to KI distribution to school children is coordination and administration of the program, e.g., the actual decision-making process to administer KI or evacuate, parental approval and record keeping, identification and mitigation of allergic reactions, and the availability of a qualified medical professional to administer the potassium iodide.

The U.S. federal agencies, nuclear industry, state and local emergency response organizations have developed the most effective and sophisticated emergency preparedness plans in the world. The U.S. model recognizes that evacuating an area is the most effective response for protecting the public health and safety. Where evacuations are performed, potassium iodide would not add any measure of safety to this proven approach, and could actually complicate and hinder emergency response.

Very truly yours,

Handwritten signature of Gary J. Taylor in black ink, with the initials "GJT" written at the end.

Gary J. Taylor

RAM/GJT/vjk

c: J. L. Skolds  
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RTS (NRG 1633)  
File (811.10)  
DMS (RC-98-0165)