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Federal Emergency Management Agency

Washington, D.C. 20472

MAR 3 1986

MEMORANDUM FOR: Edward L. Jordan
 Director, Division of Emergency Preparedness
 and Engineering Response
 Office of Inspection and Enforcement
 U.S. Nuclear Regulatory Commission

FROM: *Richard W. Grimm*
 Richard W. Grimm
 Assistant Associate Director
 Office of Natural and Technological
 Hazards Programs

SUBJECT: Medical Services Information for the Braidwood
 Nuclear Power Station

Attached are copies of the following: Attachment 1 to Map E, Braidwood Nuclear Power Station (NPS) Medical Facility Identification List, Illinois Plan for Radiological Accidents (IPRA), Volume VII (Preliminary Revision 0, August 1985); Grundy County Basic Plan, Chapter 2, Section A, IPRA, Braidwood NPS, Volume VII; Will County Basic Plan, Chapter 2, Section A, IPRA, Braidwood NPS, Volume VII; Kankakee County Basic Plan, Chapter 2, Section A, IPRA, Braidwood NPS, Volume VII; and, the State General Plan, Chapter 5, Section D, IPRA, Volume I, March 1982. This information is confirmation that a list of medical facilities has been identified for the Braidwood NPS. Other related and supporting arrangements and services are also identified.

Attachments
 As Stated

1E 35/11

8603100091 860303
 PDR ADOCK 05000456
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Source: Alloway Plan for Radiological Accidents
 Braidwood Power Station, Volume VII, Map E, Attachment 1
 Preliminary Review 0, August 1985

Attachment 1 to Map E

BRAIDWOOD NUCLEAR POWER STATION
 MEDICAL FACILITY IDENTIFICATION LIST

#	SECTOR	M-RING	FACILITY	#	SECTOR	M-RING	FACILITY
1	A	35	Mercy Ctr. for Health Care Serv. 1325 N. Highland Avenue Aurora, IL 60506 312/859-2222	2	A	40	Copley Memorial Hospital Lincoln and Weston Avenues Aurora, IL 60507 312/844-1000
3	A	45	Central DuPage Hospital 0 N 025 Winfield Road Winfield, IL 60190 312/682-1600	4	A	45	Geneva Comm. Hospital 416 South Second Street Geneva, IL 60134 312/232-0771
5	A	50	Delnor Hospital 975 North 5th Avenue Saint Charles, IL 60174 312/584-3300	6	B	25	St. Joseph Hospital 333 North Madison Street Joliet, IL 60435 815/725-7133
7	B	40	Good Samaritan Hospital 3815 Highland Avenue Downers Grove, IL 60515 312/963-5900	8	B	40	Suburban Cook Co. TB San. District 55th and County Line Road Hinsdale, IL 60521 312/323-5800
9	B	45	LaGrange Comm. Mem. Gen. Hosp. 5101 South Willow Springs Rd. LaGrange, IL 60525 312/352-1200	10	B	45	Glendale Heights Comm. Hospital 1505 Jill Court Glen Ellyn, IL 60137 312/858-9700
11	B	50	MacNeal Memorial Hospital 3249 South Oak Park Avenue Berwyn, IL 60402 312/795-9100	12	B	50	Elmhurst Memorial Hospital Avon Rd. & Schiller Street Elmhurst, IL 60126 312/833-1400

13	B	50	Loyola University Medical Ctr. 2160 South First Avenue Maywood, IL 60153 312/531-3927	14	B	45	Gottlieb Memorial Hospital 8700 East North Avenue Melrose Park, IL 60160 312/681-3200
15	B	50	St. Annes Hospital West 365 East North Avenue Melrose Park, IL 60164 312/345-8100	16	B	50	Oak Park Hospital 520 S. Maple Avenue Oak Park, IL 60304 312/383-9300
17	C	40	South Suburban Hospital 178th S. & Kedzie Avenue Hazel Crest, IL 60429 312/799-8000	18	C	40	Palos Comm. Hospital McCarthy Road & 80th Avenue Palos Heights, IL 60463 312/568-3000
19	C	40	Ingalls Memorial Hospital One Ingalls Drive Harvey, IL 60426 312/333-2300	20	C	45	Christ Hospital 4440 West 95th Street Oak Lawn, IL 60453 312/425-8000
21	C	45	Little Co. of Mary Hosp., Inc. 2800 W. 7th Street Evergreen Park, IL 60642 312/422-6200	22	D	40	St. James Hospital 1423 Chicago Road Chicago Heights, IL 60411 312/756-1000
23	F	25	Riverside Medical Center 350 North Wall Street Kankakee, IL 60901 815/933-1671	24	F	25	St. Mary's Hospital 500 West Court Street Kankakee, IL 60901 815/937-2490
25	G	45	Iroquois Memorial Hospital 200 Fairman Street Watseka, IL 60970 815/432-5201	26	K	40	Fairbury Hospital 519 South Fifth Street Fairbury, IL 61739 815/692-2346
27	L	35	St. James Hospital 610 East Water Street Pontiac, IL 61764 815/842-2828	28	M	35	St. Mary's Hospital 111 E. Spring Street Streator, IL 61364 815/673-2311

29 N 50 IL. Valley Comm. Hospital
925 West Street
Peru, IL 61354
815/223-3300

30 Q 15

Morris Hospital
150 West High Street
Morris, IL 60450
815/942-2932

31 Q 35 Sandwich Comm. Hospital
11 East Pleasant Avenue
Sandwich, IL 60548
815/786-8484

A. Functional Summary Descriptions

This section describes the five major functions expected to be part of an emergency response. These functions are described as follows:

Accident Assessment is the evaluation of the consequences of the release of radioactive materials from a fixed nuclear facility.

Initial Notification refers to the methods and priorities for disseminating emergency information and requesting assistance on a 24-hour basis. Primary and secondary communication links are established between the fixed nuclear facility, State agencies, counties and municipalities. The NARS, a direct line telephone circuit, is the established link between the fixed nuclear facility, the STATE OF ILLINOIS and the counties within the EPZ. Emergency information is disseminated through the NARS to State and county agencies. Municipalities are notified of the emergency through radio frequency and commercial telephone by the GRUNDY COUNTY SHERIFF'S DISPATCHER. Provisions exist between the fixed nuclear facility, the State of Illinois, and the county and municipalities for receiving and/or requesting information on a 24-hour basis. The notification process is designed to warn the affected population within a 45 minute time period. Emergency response agencies communicate with the public by using sirens, mobile PA systems, telephones and radios. The initial notification message is designed to instruct the public to tune to WJOL (1340 AM) or WLLI (96.7 FM) (Grundy County will also use WCSJ 1550 AM and WCSJ 104.7 FM) for the appropriate emergency actions to be taken (See Vol. 1, Ch. 2).

Command and Coordination is the identification of the individual who will have overall responsibility within each governmental unit and designation of the agency that will coordinate the emergency activities.

Protective Actions are the specific actions taken by Federal, State and local authorities to minimize radiation exposure to the local populace during a nuclear incident. They include take shelter, evacuation, traffic and access control, and food, water and milk control.

Take Shelter is the notification of the public via the Braidwood Station EPZ Prompt Notification System, mobile PA systems and commercial radio, to take shelter in their homes, stores or places of business, and to remain there until it is safe to go outside. Relocation may be recommended for special cases within an affected area such as visitors to a beach, park or a golf course.

Evacuation is the notification of the public living within a potentially affected area, via the Braidwood Station EPZ Prompt Notification System, mobile PA systems and commercial radio, to leave their homes and go to a Congregate Care Shelter where they will remain until it is safe to return. Evacuation will include coordination of transportation for the public in the affected areas and the direction of traffic and access control.

Traffic and Access Control is the provision of traffic control during an evacuation and the establishment of barriers by use of roadblocks or other means to prevent entrance into evacuated and/or sheltered areas.

Food, Water and Milk Control is the sampling, radioactivity testing and restriction of public consumption of food, water and milk until the concentrations of radioactivity have decreased to safe levels.

Parallel Actions include informing the public, radiation exposure control, law enforcement and crime prevention, fire and rescue operations, emergency medical services, social services and re-entry.

Public Information is the method by which the public is kept informed of the nature and consequences of a nuclear incident before, during and after such an incident has occurred. Spokespersons have been designated for each governmental body within GRUNDY COUNTY (See Ch. 2, Section E.1). For a more complete discussion of Public Information, see Ch. 2, Section K. and Vol. I, Ch. 8.

Radiation Exposure Control is the control of personnel activities to reduce or prevent unnecessary radiation exposure or contamination and to keep accurate records of the exposures incurred by evacuees and emergency workers. IDNS is responsible for all aspects of radiation exposure control. Controls have been established for evaluation of projected exposure patterns through conduct of radiation surveys, monitoring of personnel exposures with concurrent documentation, decontamination procedures and recommendations for the administration of KI (See Vol. I, Ch. 5).

Law Enforcement and Crime Prevention is the deployment of resources to maintain civil order during and/or after a nuclear incident.

Fire and Rescue is the deployment of resources for fire fighting/prevention activities and/or emergency rescue operations.

Emergency Medical Services are the provisions for transportation and treatment of personnel during a radiological emergency. Hospitals with the capability of receiving and treating injured contaminated personnel are identified on Map E at the back of this plan.

Social Services are the provision of food, clothing, shelter and routine medical services for evacuees.

Re-entry is the notification and transportation of evacuees returning home once safe levels of radiation have been reached. IDNS is responsible for determining when evacuees may re-enter (See Vol. I, Ch. 5).

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Chapter 5. Technical Functions

- e. Meteorological instruments.
- f. Site geology consultants regarding stratigraphy, aquifers and surface/ground water.
- g. Water use data.

D. Illinois Department of Public Health
General Operation and Responsibilities

Responsibility

The Illinois Department of Public Health is mandated to protect the public health and safety. The Department will have primary responsibility for assuring the safety of the food supply and dairy products. In addition, the Department will provide assistance in planning and implementing the evacuation of health care facilities, obtaining emergency medical services where needed, assuring safe, healthful living conditions at evacuation sites and providing additional consultation and technical assistance as required.

Initial Notification

The Department Emergency Officer will receive initial notification of the incident from the ESDA dispatcher. The Emergency Officer or his back-up is accessible on a 24 hour basis by telephone or pager. Upon receipt of the initial information, the Department Emergency Officer will contact the Director of Public Health by telephone, followed by the Regional Health Officer and other key Department staff. The specific procedure is identified in IDPH-SOP-1.

Command and Coordination

The Director of Public Health maintains overall responsibility for decision making during the incident. Following the initial notification, the Department Emergency Officer will report to the State ESDA EOC and from that location will coordinate the information flow from the EOC to and from Department staff. Immediate telephone access to the Director will be maintained to enable the timely flow of priority information.



The Department maintains eight Regional Offices. A Regional Health Officer is administratively responsible for the activities of each Region. The Regional Health Officer will provide overall coordination of the field effort. The Regional Health Officer or his designee EOC following initial notification to maintain constant contact by telephone or radio with DNS and/or the Illinois ESDA EOC in Springfield and local EOC's.

Division Regional Office Supervisors from the Division's of Food, Drugs and Dairies, Engineering and Sanitation, and Emergency Medical Services will be responsible for technical assistance in their respective programs and will maintain contact with the Regional Health Officer. The Regional Health Officer will in turn be responsible for communication from the field to the Department Emergency Officer.

Central Office staff and other field personnel will also receive direction from and maintain communication with the Emergency Officer to provide a centralized source of information gathering and dissemination.

Protective Actions

The primary responsibility of the Department of Public Health during evacuation will be assisting in the handling of health care facilities (hospitals and nursing homes) as requested by local officials. Additional assistance in evacuation was provided during the planning phase.

Regional emergency medical services staff will be on 24 hour call, as in their normal daily operation, and can provide assistance in patient transport, transfer or obtaining specialized medical care. Such assistance will be provided in accordance with established procedures, through the Illinois Trauma System.

Additional Department staff will be at the scene of the incident to assist in the evacuation process.

Upon notification of the IDPH Emergency Officer of a suspected or confirmed release of radiation, by DNS, supervisory personnel from the Division of Food, Drugs and Dairies will be notified. These supervisors as identified in IDPH-SOP-1 will then be assigned to the service of RAFT Command. In cooperation with RAFT Command, based on the recommendations of DNS, milk and food field staff will assist in the identification and proper disposition of food and/or dairy products. Actions may include embargo or issuance of an order for destruction of the product.

Detailed procedures for activities in food, water and milk control are provided in IDPH-SOP-2 and IDPH-SOP-3.

Upon initial notification of the incident, the IDPH radiation laboratory staff will be instructed to utilize all available staff and instrumentation for assisting IDNS.

REAC Command will then communicate directly with the laboratory staff to meet their needs for laboratory support.

Parallel Actions

IDPH will have three distinct responsibilities relative to emergency medical services (EMS).

1. Routine EMS activities involving, assisting hospitals in patient transfer to specialized medical facilities.
 - a. These activities will be performed as under normal conditions by the EMS Coordinator designated. A communication scheme to handle such emergencies are presently established in existing operating policies and procedures.
2. Referral of patients for additional evaluation and treatment following radiation exposure.



- a. A Regional EMS staff member will be assigned to the location of the DNS Radiation Exposure Control Officer to coordinate the transport of patients and contact with selected hospitals capable of providing services necessary for internal decontamination of exposed workers or the public. Based on the degree of contamination, as determined by DNS, the number of exposed persons and the number of patients an individual facility can handle, the EMS staff person will direct those exposed to the appropriate facility. A listing of the hospitals with adequate facilities will be available at the Exposure Control location.
3. The Division of EMS, Regional Coordinator will be available to provide any additional services needed during the incident and to coordinate the activities of other EMS field staff. Initial notification by the Regional Coordinator will include all staff within the 50 mile radius of the accident site. Regional staff will remain on alert throughout the incident to provide any assistance necessary.

EMS Communications

This coordination is accomplished through an organized, comprehensive communication system which is called MERCI (Medical Emergency Communication of Illinois). MERCI comprises all EMS communications, including radio, telephone, and telemetry. The foundation of this system is the ambulance to hospital radio communications capability. Medical radio base stations serve all Illinois and vicinity hospitals through radio, telephone and telephone-radio patches.

This system gives every hospital in Illinois radio communication capabilities with 1,500 ambulances and virtually assures patient delivery coordination.

Medical Facilities

The Division of Emergency Medical Services and Highway Safety initiated the regionalization and categorization of hospitals in 1971. This regionalization was accomplished by identifying medical facility emergency department capabilities and the designation of some 50 trauma and specialized trauma centers throughout the state.

In planning for a radiological accident, hospitals were additionally classified relative to their capability to handle radiation exposed patients. Hospitals with nuclear medicine programs that have specific capability and training for evaluation of radiation exposure and uptake and bed space to retain contaminated patients are identified in IDPH SOP-4. Ambulance services that are available for transporting victims to treatment facilities are identified in IDPH SOP-4.

IDPH staff will continue their efforts through re-entry particularly with reference to surveillance of milk and food supplies. Such products will be declared fit for human consumption in each evacuated sector prior to re-entry. Declaration of fitness will result from analyses performed by DNS.