



George S. Thomas
Vice President-Nuclear Production

Public Service of New Hampshire

New Hampshire Yankee Division

NYN- 88131

October 4, 1988

United States Regulatory Commission
Washington, D.C. 20555

Attention: Document Control Desk

References: (a) Facility Operating License NPF-56 and Construction Permit
CPRR-136, Docket Nos. 50-433 and 50-444

(b) FEMA Exercise Report for the June, 1988 FEMA Graded Exercise
of the Offsite Plans and Preparedness for the Seabrook
Nuclear Power Station, dated September 1, 1988

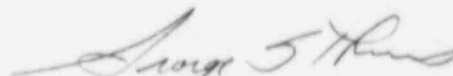
Subject: Responses to the Exercise Report for New Hampshire Yankee
Offsite Response Organization

Gentlemen:

New Hampshire Yankee has reviewed the exercise report referenced above (Reference b). Enclosed are responses to the issues identified in the exercise report which pertain to the New Hampshire Yankee Offsite Response Organization (ORO). The Enclosure provides a listing of the activities planned to resolve the issues identified in the report and an intended completion schedule.

If you require further information regarding the enclosed materials, please contact Mr. Robert E. Sweeney at the New Hampshire Yankee Bethesda Licensing Office, (301) 656-6100, or Mr. Terry L. Harpster at Seabrook Station, (603) 474-9574, extension 2765.

Very truly yours,


George S. Thomas

Enclosures

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cc: Atomic Safety and Licensing Board Service List

Mr. William T. Russell (2 copies)
Regional Administrator
United States Nuclear Regulatory Commission
Region I
475 Allendale Road
King of Prussia, PA 19406

Mr. Henry Vickers, Director (2 copies)
Region I
Federal Emergency Management Agency
J. W. McCormack Building
Boston, MA 02109

Mr. Victor Nerses, Project Manager
Project Directorate I-3
Division of Reactor Projects
United States Nuclear Regulatory Commission
Washington, D.C. 20555

Mr. Richard Lonovan
REP Program Officer
Natural & Technological Hazards
Federal Emergency Management Agency
130 228th Street, Southwest
Bothell, WA 98021-9796

Mr. David G. Ruscitto
NRC Senior Resident Inspector
Seabrook Station
Seabrook, NH 03874

Mr. Richard H. Strome, Director
Office of Emergency Management
State Office Park South
107 Pleasant Street
Concord, NH 03301

Mr. David D. Brown, Director
Maine Emergency Management Agency
State House Station 72
Augusta, ME 04333

Mr. Robert Boulay, Director
Massachusetts Civil Defense Agency
400 Worcester Road
Framingham, MA 01701

ENCLOSURE I TO NYN- 88131

JUNE 1988 EXERCISE
REPORT RESOLUTION TRACKING

Approval:
 O=ORO
 M=Maine
 NH=New Hampshire

REPORT PG.NO.	REFERENCE REPORT ITEM NO.	ISSUE	CORRECTIVE ACTION	APPRV'L	COMPLETION DATE/MILESTONE
204	ORO Objective #3, Issue #1 ARCA	There was a delay at the Staging Area in responding to an impediment to evacuation traffic.	To ensure that the Staging Area Leader maintains command and control, the flexibility to assign an assistant has been added to IP 3.2 in Amendment 6. As necessary, duties may be delegated to ensure immediate response to situations which may arise in an evacuation; i.e., traffic impediment. Training will be provided in next annual cycle.	ORO	Plans & Proc.: Completed 8/1/88 Training: Annual Training Cycle - 1989
207	ORO Objective #4, Issue #1 ARCA	Directives to field workers were not received in the field.	Amendment 6 of IP 2.8 directs the Evacuation Support and Special Vehicle Dispatchers to repeat the directives to field workers. EMS radio will be fixed. The necessary training will be provided in next training cycle.	ORO	Plans & Proc.: Completed 8/1/88 Training: Annual Training Cycle - 1989 EMS radio repair: 6/30/89

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209	ORO Objective #5, Issue #1 ARCA	Status boards were not available in the Media Center Staff work area.	All Media Center displays will be upgraded to support resolution of this comment. Training on the use of Media Center displays for the staff will be provided during the next training cycle.	ORO	Facilities: 6/30/89 Training: Annual Training Cycle - 1989
210	ORO Objective #6, Issue #1 ARCA	The reading of dosimeters at 15 minute intervals was not accomplished in a minority of cases, in spite of the 15 minute radio tone to promote dosimeter reading. This was a more frequent problem for the drivers of vehicles.	Appropriate Training will be provided to bus drivers and route guides concerning reading of dosimetry and recording exposure.	ORO	Training: Annual Training Cycle - 1989
217	ORO Objective #13, Issue #1 ARCA	One of the EBS messages contained some inconsistencies. One of the news releases contained an error.	Training will be provided to staff to review message content for consistency and accuracy.	ORO	Training: Annual Training Cycle - 1989
218	ORO Objective #13, Issue #2 ARCA	EBS messages and press releases were sometimes withheld from distribution to the media relations and rumor control staff at the JTIC pending receipt of approved copy as news release from the Media Center.	Amendment 6 of IP 2.12 provides a parallel distribution process for messages and press releases to the Media Center and JTIC, once approved. Training will be provided in next cycle.	ORO	Plans & Proc.: Completed 8/1/88 Training: Annual Training Cycle - 1989
218	ORO Objective #13, Issue #3 ARFI	At the Media Center and at the JTIC, it was not always easy to tell which releases were EBS messages and which weren't.	Staff will be trained to use correct letterhead.	ORO	Training: Annual Training Cycle - 1989

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220	ORO Objective #14, Issue #1 ARFI	Information and instructions were distributed in such a way that it was possible for all copies of a given release to be gone without this fact being apparent.	The revised Media Center displays will include a posting mechanism for EBS messages/press releases.	ORO	Facilities: 6/30/89
222	ORO Objective #16, Issue #1 ARCA	Some briefings by dosimetry record keepers to Emergency Workers did not include possible side effects from ingesting KI, or what to do if side effects occur. Information materials provided to the home-bound individuals did not include this information.	KI supplies are accompanied with an appropriate information sheet which will be distributed with the tablets (when procured). See Attachment 1 for sample. Training will be provided to dosimetry record keepers.	ORO	Info Sheet: Prior to Operations above 5% Power Training: Annual Training Cycle - 1989
222	ORO Objective #16, Issue #2 ARCA	Some route guides assigned to school evacuation did not tell their bus drivers (2 of 4) that the use of KI had been recommended, nor did they tell the bus drivers that they had simulated taking KI.	Training for Route Guides will be provided concerning exposure control/KI administration.	ORO	Training: Annual Training Cycle - 1989
224	ORO Objective #18, Issue #1 ARCA	Some Route Guides encountered difficulty in reading their maps. The main problem seems to be a lack of detail on the maps.	Maps will be upgraded as necessary to ensure they are clean, concise and accurate. Training will be provided in the next annual cycle.	ORO	Maps: 6/30/89 Training: Annual Training Cycle - 1989

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226	ORO Objective #19, Issue #1 ARCA	Some Route Guides did not insist that the bus drivers follow the designated routes. Other route guides gave directions to bus drivers to deviate from designated routes.	IP2.10, Attachments 3 and 4 will be revised to include specific instructions to follow prescribed routes. Route Guides & bus drivers will be provided additional training.	ORO	Plans & Proc.: 1989 Update Training: Annual Training Cycle - 1989
226	ORO Objective #19, Issue #2 ARCA	Some of the maps contained incomplete instructions or detail for locating day care centers and nurseries.	Maps will be upgraded, as necessary, to ensure they are clean, concise and accurate.	ORO	Maps: 6/30/89
228	ORO Objective #21, Issue #1 ARCA	Some maps for directing evacuees from reception centers to congregate care center had inadequate instructions, inconsistencies, etc.	Maps will be upgraded, as necessary, to ensure they are clean, concise and accurate.	ORO	Maps: 6/30/89
228	ORO Objective #22, Issue #1 ARCA	The data base for congregate care centers (cccs) and the current procedure does not indicate which ccCs cannot accommodate handicapped persons who evacuate by themselves or with families or friends.	Amendment 6 of Appendix M incorporated the indication of which ccc could not accommodate the handicapped. Training of personnel will occur during next annual cycle.	ORO	Plans & Proc.: Completed 8/1/88 Training: Annual Training Cycle - 1989

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230	ORO Objective #23, Issue #1 ARCA	Ambulance attendants need additional hands-on training on the procedures for contamination control.	Training on procedures for contamination control will be provided to ambulance attendants.	ORO	Training: Annual Training Cycle - 1989
230	ORO Objective #23, Issue #2 ARCA	Ambulance designated attendants need to be provided with maps showing locations of hospitals to which they may transport patients. The procedure should be revised to cover transport of a patient with life-threatening injuries to the nearest hospital or nearest designated hospital.	Maps to identify all hospitals and those which are MS-1 will be developed. Procedures will be reviewed and revised, as necessary, for the 1989 update.	ORO	Maps: 6/30/89 Plans & Proc.: 1989 Update
231	ORO Objective #24, Issue #1 ARCA	Medical and nursing Staff members do not fully understand the biological effects of radiation and the significance of "counts per minute" contamination, and millirem per hour dose rate.	Additional training will be provided.	ORO	Training: Annual Training Cycle - 1989
232	ORO Objective #25, Issue #1 ARFI	EWF personnel monitors did not read dosimetry and check themselves for contamination at frequent intervals.	Additional training will be provided to EWF personnel concerning exposure control.	ORO	Training: Annual Training Cycle - 1989

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243	ORO Other, Issue #1	According to the plan, one Special Population Liaison is assigned to each community. This staff level could result in excessive time required to notify special populations of the status of the emergency situation and to coordinate their transportation needs.	The procedures have been revised in Amendment 6 to assign the Special Population Liaisons permanently to the Staging Area and to allow the flexibility to assist each other in making notifications. Training will be provided in the next annual cycle.	ORO	Plans & Proc.: Completed 8/1/88 Training: Annual Training Cycle - 1989
243	ORO Other, Issue #2	According to the plan, one School Liaison is assigned to each community. This staffing level could result in excessive time required to notify schools and day care centers of the status of the emergency situation and to coordinate their transportation needs.	The procedures have been revised in Amendment 6 to assign the School Liaisons permanently to the Staging Area and to allow flexibility to assist each other in making notifications. Training will be provided in the next annual cycle.	ORO	Plans & Proc.: Completed 8/1/88 Training: Annual Training Cycle - 1989
244	ORO Other, Issue #3	There were some excessively long periods during which no media questions were answered; i.e., the lack of update briefings by the Media Relations Floor Liaison in between formal briefings.	A NHY Onsite Response Position coordinates the timing of press briefing. This procedure will be reviewed and training will be provided, in the next annual cycle, to address informal briefings.	ORO	Training: Annual Training Cycle - 1989

Patient Package Insert For

THYRO-BLOCK®
TABLETS

(POTASSIUM IODIDE TABLETS, USP)

(pronounced *poe-TASS-e-um EYE-on-dyed*)
(abbreviated: KI)

TAKE POTASSIUM IODIDE ONLY WHEN PUBLIC HEALTH OFFICIALS TELL YOU. IN A RADIATION EMERGENCY, RADIOACTIVE IODINE COULD BE RELEASED INTO THE AIR. POTASSIUM IODIDE (A FORM OF IODINE) CAN HELP PROTECT YOU.

IF YOU ARE TOLD TO TAKE THIS MEDICINE, TAKE IT ONE TIME EVERY 24 HOURS. DO NOT TAKE IT MORE OFTEN. MORE WILL NOT HELP YOU AND MAY INCREASE THE RISK OF SIDE EFFECTS. **DO NOT TAKE THIS DRUG IF YOU KNOW YOU ARE ALLERGIC TO IODIDE.** (SEE SIDE EFFECTS BELOW.)

INDICATIONS

THYROID BLOCKING IN A RADIATION EMERGENCY ONLY.

DIRECTIONS FOR USE

Use only as directed by State or local public health authorities in the event of a radiation emergency.

DOSE

Tablets: **ADULTS AND CHILDREN 1 YEAR OF AGE OR OLDER:** One (1) tablet once a day. Crush for small children.
BABIES UNDER 1 YEAR OF AGE: One-half (1/2) tablet once a day. Crush first.

Take for 10 days unless directed otherwise by State or local public health authorities.

Store at controlled room temperature between 15° and 30°C (59° to 86°F). Keep container tightly closed and protect from light.

WARNING

Potassium iodide should not be used by people allergic to iodide. Keep out of the reach of children. In case of overdose or allergic reaction, contact a physician or the public health authority.

DESCRIPTION

Each THYRO-BLOCK® TABLET contains 130 mg of potassium iodide. Other ingredients: magnesium stearate, microcrystalline cellulose, silica gel, sodium thiosulfate.

HOW POTASSIUM IODIDE WORKS

Certain forms of iodine help your thyroid gland work right. Most people get the iodine they need from foods, like iodized salt or fish. The thyroid can "store" or hold only a certain amount of iodine.

In a radiation emergency, radioactive iodine may be released in the air. This material may be breathed or swallowed. It may enter the thyroid gland and damage it. The damage would probably not show itself for years. Children are most likely to have thyroid damage.

If you take potassium iodide, it will fill up your thyroid gland. This reduces the chance that harmful radioactive iodine will enter the thyroid gland.

WHO SHOULD NOT TAKE POTASSIUM IODIDE

The only people who should not take potassium iodide are people who know they are allergic to iodide. You may take potassium iodide even if you are taking medicines for a thyroid problem (for example, a thyroid hormone or anti-thyroid drug). Pregnant and nursing women and babies and children may also take this drug.

HOW AND WHEN TO TAKE POTASSIUM IODIDE

Potassium Iodide should be taken as soon as possible after public health officials tell you. You should take one dose every 24 hours. More will not help you because the thyroid can "hold" only limited amounts of iodine. Larger doses will increase the risk of side effects. You will probably be told not to take the drug for more than 10 days.

SIDE EFFECTS

Usually, side effects of potassium iodide happen when people take higher doses for a long time. You should be careful not to take more than the recommended dose or take it for longer than you are told. Side effects are unlikely because of the low dose and the short time you will be taking the drug.

Possible side effects include skin rashes, swelling of the salivary glands, and "iodism" (metallic taste, burning mouth and throat, sore teeth and gums, symptoms of a head cold, and sometimes stomach upset and diarrhea).

A few people have an allergic reaction with more serious symptoms. These could be fever and joint pains, or swelling of parts of the face and body and at times severe shortness of breath requiring immediate medical attention.

Taking iodide may rarely cause overactivity of the thyroid gland, underactivity of the thyroid gland, or enlargement of the thyroid gland (goiter).

WHAT TO DO IF SIDE EFFECTS OCCUR

If the side effects are severe or if you have an allergic reaction, stop taking potassium iodide. Then, if possible, call a doctor or public health authority for instructions.

HOW SUPPLIED

THYRO-BLOCK® TABLETS (Potassium Iodide Tablets, USP) bottles of 14 tablets (NDC 0037-0472-20). Each white, round, scored tablet contains 130 mg potassium iodide.

WALLACE LABORATORIES

Division of
CARTER-WALLACE, P.C.
Cranbury, New Jersey 08512