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SCE&G
A SCANA COMPANY

August 24, 1999
RC-99-0172

Secretary of the Commission
U. S. Nuclear Regulatory Commission
Washington, DC 20555

Attention: Rulemakings and Adjudications Staff

Gentlemen:

Gary J. Taylor
Vice President
Nuclear Operations

Subject: VIRGIL C. SUMMER NUCLEAR STATION
DOCKET NO. 50/395
OPERATING LICENSE NO. NPF-12
Proposed Rule: CONSIDERATION OF POTASSIUM IODIDE IN EMERGENCY PLANS (64 FED. REG. 31737, JUNE 14, 1999)
REQUEST FOR COMMENTS

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South Carolina Electric and Gas submits these comments on behalf of South Carolina Electric and Gas (SCE&G). We have reviewed the proposed rulemaking to amend the emergency planning standard in 10 CFR 50.47 (64 Fed. Reg. 31737 - June 14, 1999). The proposed petition recommends that the planning standard for protective actions require explicit consideration of the prophylactic use of potassium iodide (KI) for the general public.

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 proposed rule.

SCE&G has given thorough consideration to the use of KI for the general public during an emergency. SCE&G maintains that evacuation and sheltering are the primary protective actions and are the best means to assure public health and safety in the unlikely event of a general emergency with a significant radiological release at a nuclear power plant.

It is understood that if administered promptly, KI can be effective in blocking the thyroid and preventing radioiodine uptakes. The population most at risk in the situation is children through age 15. However, emergency plans recommend precautionary evacuation of schools and day care facilities at declaration of a Sire 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.

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Events and circumstances that would make evacuation difficult would also hinder the distribution of KI to the public, even from a locally stored stockpile. This would also have a negative effect of putting limited emergency response workers, who would have the added responsibility for the distribution of the drug to the public, at even greater risk through unnecessary additional exposure. Therefore, a stockpile of KI is not effective as an immediate and supplemental measure of protection.

Predistribution of KI, through over the counter availability of the drug, as suggested, will also have negative effects. Public perception could easily regard taking a pill makes them immune to the effects of radiation. This perception would tend to make the public less sensitive to the need to evacuate. Evacuation, the only true mechanism of protection from exposure to all radioactive isotopes, would become even more difficult and thereby less effective. There may also be associated time delays to evacuation time estimates due to the self-administering of KI at home. Delays in evacuation could mean the difference between personal and vehicular contamination and would contribute to the spread any resultant loose surface contamination.

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 US federal agencies, nuclear industry, state and local emergency response organizations have developed the most effective and sophisticated emergency preparedness plans in the world. The US 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.

Should you have questions, please call Mr. Ricky Myers at (803) 345-4384.

Very truly yours,

Gary J. Taylor

RAM/GJT/dr

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