
U.S. Nuclear Regulatory Commission



**Privacy Impact Assessment
Employee Medical File (EMF)
Health Emergency Records – NRC SORN 46
Office of the Chief Human Capital Officer (OCHCO)**

**Version 1.1
07/01/2025**

Template Version 2.5 (03/2025)

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Document Revision History

Date	Version	PIA Name/Description	Author
04/01/2024	1.0	Employee Medical File (EMF) Emergency Health Records – NRC SORN 46 Initial Release	Kathrine Bowman
7/1/2025	1.1	Employee Medical File (EMF) Emergency Health Records – NRC SORN 46 Initial Release	Kathrine Bowman

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The agency is subject to the requirements of the E-Government Act and is committed to identifying and addressing privacy risks whenever it develops or makes changes to its information systems. The questions below help determine any privacy risks related to the E-Government Act or later guidance by the Office of Management and Budget (OMB) and the National Institute of Standards and Technology (NIST).

Name/System/Subsystem/Service Name:

Employee Medical File (EMF).

Health Emergency Records – NRC SORN 46.

Data Storage Location (i.e., Database Server, SharePoint, Cloud, Other Government Agency, Power Platform)

SharePoint database.

Date Submitted for review/approval: July 23, 2025.

Note: When completing this PIA do not include any information that would raise security concerns or prevent this document from being made publicly available.

1 Description

1.1 Provide the description of the system/subsystem, technology (i.e., Microsoft Products), program, or other data collections (hereinafter referred to as “project”). Explain the reason the project is being created.

This system is to maintain records necessary and relevant to NRC activities responding to and mitigating high-consequence public health threats, including, but not limited to: COVID-19, diseases and illnesses relating to a public health emergency, pandemic, or other high-consequence public health threat. Records may include, but are not limited to, those applicable health related records needed to understand the impact of an illness or disease on the NRC workforce, to assist the NRC in protecting its workforce from a declared public health emergency, pandemic, or other high-consequence public health threat, as well as those records submitted by NRC personnel, or their lawful representative of such personnel. Information collected may also satisfy requirements resulting from an Executive Order or other Federal law.

Please mark appropriate response below if your project/system will involve the following:

<input type="checkbox"/> PowerApps	<input type="checkbox"/> Artificial Intelligence (AI)
<input type="checkbox"/> Dashboard	<input type="checkbox"/> Public Website
<input checked="" type="checkbox"/> SharePoint	<input type="checkbox"/> Internal Website
<input type="checkbox"/> Cloud Service Provider	<input checked="" type="checkbox"/> Other Email
<input type="checkbox"/> Server/Database Design	

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1.2 Does this privacy impact assessment (PIA) support a proposed new project, proposed modification to an existing project, or other situation? Select options that best apply in table below.

Mark appropriate response.

Status Options	
<input type="checkbox"/>	New system/project
<input checked="" type="checkbox"/>	Modification to an existing system/project. <i>If modifying or making other updates to an existing system/project, provide the ADAMS ML of the existing PIA and describe the modification.</i> ML24138A059
<input checked="" type="checkbox"/>	Annual Review <i>If making minor edits to an existing system/project, briefly describe the changes below.</i> Change to Section 1.3, Points of Contact; Change to #2.1 Authorities – EO 13996 has been revoked
<input type="checkbox"/>	Other (explain)

1.3 Points of Contact: (Do not adjust or change table fields. Annotate N/A if unknown. If multiple individuals need to be added in a certain field, please add lines where necessary.)

Role	Contact Information Name Office/Division/Branch Phone Number
Project Manager(s)	Dorothea Washington, OCHCO 301-415-8409
System Owner/Data Owner or Steward	Dorothea Washington, OCHCO 301-415-8409
ISSM	N/A
Executive Sponsor	Eric Dilworth, OCHCO 301-415-5197
Technical Project Manager	Basia Sall, OCIO 301-415-2174

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2 Authorities and Other Requirements

2.1 What specific legal authorities and/or agreements permit the collection of information for the project?

Provide all statutory and regulatory authorities for operating the project, including the authority to collect the information; NRC internal policy is not a legal authority. Please mark appropriate response in table below.

Mark with an "X" on all that apply.	Authority	Citation/Reference
<input checked="" type="checkbox"/>	Statute	75 Fed. Reg. 35099 (June 21, 2010), amended 80 Fed. Reg. 74815 (Nov. 30, 2015), also includes 5 U.S.C. chapters 33 and 63 5 U.S.C. 7902, "Safety Programs" 44 U.S.C. 3101; the Religious Freedom Restoration Act of 1993 42 U.S.C. Chapter 21B; Title VII of the Civil Rights Act of 1964, as amended 42 U.S.C. 2000e The Rehabilitation Act of 1973, as amended, 29 U.S.C. 701 <i>et seq.</i> PREVENT Pandemics Act, 42 U.S.C. § 300hh-3, December 29, 2022
<input checked="" type="checkbox"/>	Executive Order	EO 12196, "Occupational Safety and Health Programs for Federal Employees"
<input type="checkbox"/>	Federal Regulation	
<input type="checkbox"/>	Memorandum of Understanding/Agreement	
<input type="checkbox"/>	Other (summarize and provide a copy of relevant portion)	

2.2 Explain how the information will be used under the authority listed above (i.e., enroll employees in a subsidies program to provide subsidy payment).

This information is being collected and maintained to promote the safety of Federal workplaces and the Federal workforce consistent with the above-referenced authorities, the NRC Workplace Safety Plan in conjunction with guidance from Centers for Disease Control and Prevention and the Occupational Safety and Health Administration

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If the project collects Social Security numbers, state why this is necessary and how it will be used.

N/A.

3 Characterization of the Information

In the table below, mark the categories of individuals for whom information is collected.

Category of individual	
<input checked="" type="checkbox"/>	Federal employees
<input type="checkbox"/>	Contractors
<input type="checkbox"/>	Members of the Public (any individual other than a federal employee, consultant, or contractor)
<input type="checkbox"/>	Licensees
<input type="checkbox"/>	Other

In the table below, is a list of the most common types of PII collected. Mark all PII that is collected and stored by the project/system. If there is additional PII not defined in the table below, a comprehensive listing of PII is provided for further reference in ADAMS at the following link: [PII Reference Table 2023](#).

Categories of Information			
<input checked="" type="checkbox"/>	Name	<input type="checkbox"/>	Resume or curriculum vitae
<input type="checkbox"/>	Date of Birth	<input type="checkbox"/>	Driver's License Number
<input type="checkbox"/>	Country of Birth	<input type="checkbox"/>	License Plate Number
<input type="checkbox"/>	Citizenship	<input type="checkbox"/>	Passport number
<input type="checkbox"/>	Nationality	<input type="checkbox"/>	Relatives Information
<input type="checkbox"/>	Race	<input type="checkbox"/>	Taxpayer Identification Number
<input type="checkbox"/>	Home Address	<input type="checkbox"/>	Credit/Debit Card Number
<input type="checkbox"/>	Social Security number (Truncated or Partial)	<input checked="" type="checkbox"/>	Medical/health information
<input type="checkbox"/>	Sex (Male or Female)	<input type="checkbox"/>	Alien Registration Number
<input type="checkbox"/>	Ethnicity	<input type="checkbox"/>	Professional/personal references
<input type="checkbox"/>	Spouse Information	<input type="checkbox"/>	Criminal History
<input type="checkbox"/>	Personal e-mail address	<input type="checkbox"/>	Biometric identifiers (facial images, fingerprints, iris scans)
<input type="checkbox"/>	Personal Bank Account Number	<input type="checkbox"/>	Emergency contact e.g., a third party to contact in case of an emergency
<input type="checkbox"/>	Personal Mobile Number/Home Number	<input type="checkbox"/>	Accommodation/disabilities information
<input type="checkbox"/>	Marital Status	<input type="checkbox"/>	Other EmpID

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Categories of Information			
<input type="checkbox"/>	Children Information		Religious Affiliation
<input type="checkbox"/>	Mother's Maiden Name		

3.1 Describe how the data is collected for the project. (i.e., NRC Form, survey, questionnaire, existing NRC files/ databases, response to a background check).

Data will be collected in NRC system on NRC digital platforms

3.2 If using a form (paper or web) to collect the information, provide the form number, title and/or a link to the form.

N/A.

3.3 Who provides the information? Is it provided directly from the individual or a third party.

To be provided by employees or their designated representative

3.4 Explain how the accuracy of the data collection is validated. If the project does not check for accuracy, please explain why.

To be provided by employees or their designated representative

3.5 Will PII data be used in a test environment? If so, explain the rationale for this and how the PII information is protected.

N/A.

3.6 What procedures are in place to allow the subject individual to correct inaccurate or erroneous privacy information?

Self-validation or validation completed by designated representative

4 Data Security

4.1 Describe who has access to the data in the project (i.e., internal NRC, system administrators, external agencies, contractors, public).

Program Manager, Chief Human Capital Officer, System Owner/Data Owner/Steward, ISSM, Technical Project Manager

4.2 If the project/system shares information with any other NRC systems, identify the system, what information is being shared and the method of sharing.

N/A.

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4.3 If the project/system connects, receives, or shares information with any external non-NRC partners or systems, identify what is being shared.

N/A.

If so, identify what agreements are in place with the external non-NRC partner or system in the table below.

Agreement Type	
<input type="checkbox"/>	Contract Provide Contract Number:
<input type="checkbox"/>	License Provide License Information:
<input type="checkbox"/>	Memorandum of Understanding Provide ADAMS ML number for MOU:
<input type="checkbox"/>	Other
<input checked="" type="checkbox"/>	None

4.4 Describe how the data is accessed and describe the access control mechanisms that prevent misuse.

Access is restricted to only those who have a need to know.

4.5 Explain how the data is transmitted and how confidentiality is protected (i.e., encrypting the communication or by encrypting the information before it is transmitted).

When data is required to be transmitted for reporting purposes, data will be encrypted in accordance with privacy act requirements.

4.6 Describe where the data is being stored (i.e., NRC, Cloud, Contractor Site).

Data will be stored in NRC developed system on NRC digital platform.

4.7 Explain if the project can be accessed or operated at more than one location.

No.

4.8 Can the project be accessed by a contractor? Have the contractors completed an IT-II investigation? Do they possess an NRC badge?

N/A.

4.9 Explain the auditing measures and technical safeguards in place to prevent misuse of data.

The NRC safeguards records in this system according to applicable rules and policies, including all applicable NRC automated systems security and access policies. The NRC has imposed controls to minimize the risk of compromising the information that is being stored. Users of

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individual computers can only gain access to the data by valid user identification and password. Paper records, if maintained, are in a secure, access-controlled room, with access limited to authorized personnel.

4.10 Describe if the project has the capability to identify, locate, and monitor (i.e., trace/track/observe) individuals.

N/A.

4.11 Define which FISMA boundary this project is part of.

Information Technology Infrastructure (ITI)

4.12 Is there an Authority to Operate (ATO) associated with this project/system?

Authorization Status	
<input type="checkbox"/>	Unknown
<input type="checkbox"/>	No <i>If no, please note that the authorization status must be reported to the Chief Information Security Officer (CISO) and Computer Security Organization (CSO's) Point of Contact (POC) via e-mail quarterly to ensure the authorization remains on track.</i>
<input type="checkbox"/>	In Progress provide the estimated date to receive an ATO. Estimated date: < insert appropriate response >
<input checked="" type="checkbox"/>	Yes Indicate the data impact levels (Low, Moderate, High, Undefined) approved by the Chief Information Security Officer (CISO) Confidentiality - Moderate Integrity - Moderate Availability – Moderate

4.13 Provide the NRC system Enterprise Architecture (EA)/Inventory number. If unknown, contact [EA Service Desk](#) to get the EA/Inventory number.

EA# 20090005.

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5 Privacy Act Determination

5.1 Is the data collected retrieved by a personal identifier?

Mark the appropriate response.

Response	
<input checked="" type="checkbox"/>	Yes, the PII is retrieved by a personal identifier (i.e., individual's name, address, SSN, or other unique number, etc.) <input checked="" type="checkbox"/> List the identifiers that will be used to retrieve the information on the individual. Employee Name, EmpID
<input type="checkbox"/>	No, the PII is not retrieved by a personal identifier. <input type="checkbox"/> If no, explain how the data is retrieved from the project.

5.2 For all collections where the information is retrieved by a personal identifier, the Privacy Act requires that the agency publish a System of Record Notice (SORN) in the Federal Register. As per the Privacy Act of 1974, "the term 'system of records' means a group of any records under the control of any agency from which information is retrieved by the name of the individual or by some other personal identifier assigned to the individual.

Mark the appropriate response in the table below.

Response	
<input checked="" type="checkbox"/>	Yes, this system is covered by an existing SORN. (See existing SORNs: https://www.nrc.gov/reading-rm/foia/privacy-systems.html) Provide the SORN name, number, (List all SORNs that apply): Health Emergency Records – NRC 46
<input type="checkbox"/>	SORN is in progress
<input type="checkbox"/>	SORN needs to be created
<input type="checkbox"/>	Unaware of an existing SORN
<input type="checkbox"/>	No, this system is not a system of records and a SORN is not applicable.

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5.3 When an individual is asked to provide personal data (i.e., form, webpage, survey), is a Privacy Act Statement (PAS) provided?

A Privacy Act Statement is a disclosure statement required to appear on documents used by agencies when an individual is asked to provide personal data. It is required for any forms, surveys, or other documents, including electronic forms, used to solicit personal information from individuals that will be maintained in a system of records.

Mark the appropriate response.

Options	
<input type="checkbox"/>	Privacy Act Statement (Insert link to Privacy Act Statement (PAS) for each form, webpage or survey etc.)
<input checked="" type="checkbox"/>	Not Applicable – but will be provided when needed
<input type="checkbox"/>	Unknown

5.4 Is providing the PII mandatory or voluntary? What is the effect on the individual by not providing the information?

PII is mandatory to track employee compliance with Federal mandate to provide applicable health related medical information. Not providing PII (employee name) would hinder NRC from monitoring employee compliance with law.

6 Records and Information Management-Retention and Disposal

The National Archives and Records Administration (NARA), in collaboration with federal agencies, approves whether records are **Temporary** (eligible at some point for destruction/deletion because they no longer have business value) or **Permanent** (eligible at some point to be transferred to the National Archives because of historical or evidential significance). Records/data and information with historical value, identified as having a “permanent” disposition, are transferred to the National Archives of the United States at the end of their retention period. All other records identified as having a “temporary” disposition are destroyed at the end of their retention period in accordance with the NARA Records Schedule or the General Records Schedule.

These determinations are made through records retention schedules and NARA statutes (44 United States Code (U.S.C.), 36 Code of Federation Regulations (CFR)). Under 36 CFR, agencies are required to establish procedures for addressing Records and Information Management (RIM) requirements. This includes strategies for establishing and managing recordkeeping requirements and disposition instructions before approving new electronic information systems or enhancements to existing systems.

The following questions are intended to determine whether the records/data and information in the system have approved records retention schedules and disposition instructions, whether the

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system incorporates RIM strategies including support for [NARA's Universal Electronic Records Management \(ERM\) requirements](#), and if a mitigation strategy is needed to ensure compliance.

If the project/system:

- Does not have an approved records retention schedule and/or
- Does not have an *automated* RIM functionality,
- Involves a cloud solution,
- And/or if there are additional questions regarding Records and Information Management - Retention and Disposal, please contact the NRC Records staff at ITIMPolicy.Resource@nrc.gov for further guidance.

If the project/system has a record retention schedule or an automated RIM functionality, please complete the questions below.

6.1 Does this project map to an applicable retention schedule in NRC's Comprehensive Records Disposition Schedule (NUREG-0910), or NARA's General Records Schedules?

<input type="checkbox"/>	NUREG-0910, "NRC Comprehensive Records Disposition Schedule
<input checked="" type="checkbox"/>	NARA's General Records Schedules
<input type="checkbox"/>	Unscheduled

6.2 If so, cite the schedule number, approved disposition, and describe how this is accomplished.

System Name (include sub-systems, platforms, or other locations where the same data resides)	Employee Medical File (EMF) Emergency Health Records – NRC SORN 46
	GRS 2.7 Item 010 – Clinic scheduling records GRS 2.7 – Item 063 – Vaccination attestations and proof of vaccinations records. Federal employees and contractors
Records Retention Schedule Number(s)	GRS 2.7 item 070 – Non-occupational individual medical case files GRS 2.7 item 080 – Non-occupational health and wellness program records

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Approved Disposition Instructions	<p><u>GRS 2.7 item 010 (DAA-GRS-2017-0010-0001)</u> Clinic scheduling records. Temporary. Destroy when 3 years old, but longer retention is authorized if needed for business use.</p> <p><u>GRS 2.7 – Item 063 (DAA-GRS-2021-0003-0001)</u> Temporary. Destroy when 3 years old.</p> <p><u>GRS 2.7 item 070 (DAA-GRS-2017-0010-0012)</u> Non-occupational individual case files. Temporary. Destroy 10 years after the most recent encounter, but longer retention is authorized if needed for business use</p> <p><u>GRS 2.7 item 080 (DAA-GRS-2017-0010-0013)</u> Non-occupational health and wellness program records. Temporary. Destroy 3 years after the project/activity/or transaction is completed or superseded, but longer retention is authorized if needed for business use.</p>
Is there a current automated functionality or a manual process to support RIM requirements? This includes the ability to apply records retention and disposition policies in the system(s) to support records accessibility, reliability, integrity, and disposition.	<p>To the extent applicable, to ensure compliance with Americans with Disabilities Act, the Rehabilitation Act, and the Genetic Information Nondiscrimination Act of 2008, medical information must be “maintained on separate forms and in separate medical files and be treated as a confidential medical record.” <u>42 U.S.C. 12112(d)(3)(B); 42 U.S.C. sec 2000ff-5(a); 29 CFR 1630.14(b)(1), (c)(1),(d)(4)(i); and 29 CFR 1635.9(a)</u>. This means that medical information and documents must be stored separately from other personnel records. As such, the NRC must keep medical records for at least 1 year from creation date. <u>29 CFR 1602.14</u>. Further, records compiled under this system of records notice will be maintained in accordance with the National Archives and Records Administration General Records Schedule (GRS) 2.7, Employee Health and Safety Records, Items 010, 070, or 080 to the extent applicable.</p>

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Disposition of Temporary Records Will the records/data or a composite be automatically or manually deleted once they reach their approved retention?	Information will be managed in SharePoint or in MS Exchange (Emails) Employee Medical File (EMF) Emergency Health Records –will be assessed using the Records and Information (RIM) Certification process. The structured process will provide criteria aligned with the Suggested Rating to accurately reflect the system's ability to support records management requirements.
Disposition of Permanent Records Will the records be exported to an approved format and transferred to the National Archives based on approved retention and disposition instructions? If so, what formats will be used? <u>NRC Transfer Guidance</u> <u>(Information and Records Management Guideline - IRMG)</u>	Records will not be transferred to National Archives. Records will be maintained internally and purged when no longer needed or records destruction time frame is reached.

Note: Information in *Section 6, Records and Information Management-Retention and Disposal* does not need to be fully resolved for final approval of the privacy impact assessment.

7 Paperwork Reduction Act

The Paperwork Reduction Act (PRA) of 1995 requires that agencies obtain an Office of Management and Budget (OMB) approval in the form of a "control number"—before promulgating a paper form, website, surveys, questionnaires, or electronic submission from 10 or more members of the public. If the data collection is from federal employees regarding work-related duties, then a PRA clearance is not necessary.

7.1 Will the project be collecting any information from 10 or more persons who are not Federal employees?

N/A.

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7.2 Is there any collection of information addressed to all or a substantial majority of an industry (i.e., Fuel Fabrication Facilities or Fuel Cycle Facilities)?

For compliance with a Federal mandate, it is more likely than not that the impact would be to all Federal Employees but that would be determined by the Federal mandate (i.e. Executive Order (EO) from the President)

7.3 Is the collection of information required by a rule of general applicability?

No.

Note: For information collection (OMB clearances) questions: contact the NRC's Clearance Officer. Additional guidance can be found on the NRC's internal Information Collections Web page at: <https://intranet.nrc.gov/ocio/33456>.

STOP HERE - The remaining pages will be completed by the Privacy Officer, Records Management, and Information Collections Team.

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8 Privacy Act Determination

Project/System Name: Employee Medical File (EMF)

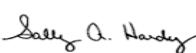
Submitting Office: OCHCO

Privacy Officer Review

Review Results		Action Items
<input type="checkbox"/>	This project/system does not contain PII .	No further action is necessary for Privacy.
<input type="checkbox"/>	This project/system does contain PII ; the Privacy Act does NOT apply, since information is NOT retrieved by a personal identifier.	Must be protected with restricted access to those with a valid need-to-know.
<input checked="" type="checkbox"/>	This project/system does contain PII ; the Privacy Act does apply .	SORN is required - Information is retrieved by a personal identifier.

Comments:

Covered by Health Emergency Records – NRC 46.

Reviewer's Name	Title
 Signed by Hardy, Sally on 09/24/25	Privacy Officer

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9 OMB Clearance Determination

NRC Clearance Officer Review

Review Results	
<input checked="" type="checkbox"/>	No OMB clearance is needed.
<input type="checkbox"/>	OMB clearance is needed.
<input type="checkbox"/>	Currently has OMB Clearance. Clearance No._____

Comments:

The system does not need an OMB clearance as it is only a repository of medical information and is not the instrument the agency uses to collect that information. If the agency collects information provided by a non-Federal medical provider, that information collection will need to be approved by OMB.

Reviewer's Name	Title
 Signed by Cullison, David on 09/24/25	Agency Clearance Officer

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10 Records Retention and Disposal Schedule Determination

Records Information Management Review

Review Results	
<input type="checkbox"/>	No record schedule required.
<input type="checkbox"/>	Additional information is needed to complete assessment.
<input type="checkbox"/>	Needs to be scheduled.
<input checked="" type="checkbox"/>	Existing records retention and disposition schedule covers the system - no modifications needed.

Comments:

Reviewer's Name	Title
 Signed by Dove, Marna on 09/11/25	Sr. Program Analyst, Electronic Records Manager
 Signed by Williams, Lisa on 09/24/25	Records and Information Management Specialist

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11 Review and Concurrence

Review Results	
<input type="checkbox"/>	This project/system does not collect, maintain, or disseminate information in identifiable form.
<input checked="" type="checkbox"/>	This project/system does collect, maintain, or disseminate information in identifiable form.

I concur with the Privacy Act, Information Collections, and Records Management reviews.



Signed by Nalabandian, Garo
on 12/04/25

Director
Chief Information Security Officer
Cyber Information Security Division
Office of the Chief Information Officer

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ADDITIONAL ACTION ITEMS/CONCERNS

Name of Project/System:	
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Date CISD received PIA for review:	Date CISD completed PIA review:
August 13, 2025	September 24, 2025
Action Items/Concerns:	