

### Sub-Element 3.b— Implementation of KI Decision

<p><b>What the Policy Says</b></p>	<p><b>Intent</b>  NUREG-0654 provides that OROs should have the capability to provide radioprotective drugs for emergency workers, institutionalized individuals, and, if in the plan and/or procedures, to the general public for whom immediate evacuation may not be feasible, very difficult, or significantly delayed. While it is necessary for OROs to have the capability to provide KI to emergency workers and institutionalized individuals, the provision of KI to the general public is an ORO option and is reflected in ORO's plans and procedures. Provisions should include the availability of adequate quantities, storage, and means of the distribution of radioprotective drugs.</p> <p><b>Criterion 3.b.1:</b> KI and appropriate instructions are available should a decision to recommend use of KI be made. Appropriate record keeping of the administration of KI for emergency workers and institutionalized individuals is maintained. (NUREG-0654, J.10.e)</p> <p><b>Minimum Frequency</b>  Criterion 3.b.1 is to be evaluated once in 6 years. It should be demonstrated in every biennial exercise by some organizations and should be demonstrated at least once every 6 years by every ORO with responsibility for implementation of KI decision.</p> <p><b>Extent of Play</b>  Offsite Response Organizations (ORO) should demonstrate the capability to make KI available to emergency workers, institutionalized individuals, and, where provided for in the ORO plan and/or procedures, to members of the general public. OROs should demonstrate the capability to accomplish distribution of KI consistent with decisions made. Organizations should have the capability to develop and maintain lists of emergency workers and institutionalized individuals who have ingested KI, including documentation of the date(s) and time(s) they were instructed to ingest KI. The ingestion of KI recommended by the designated ORO health official is voluntary. For evaluation purposes, the actual ingestion of KI is not necessary. OROs should demonstrate the capability to formulate and disseminate appropriate instructions on the use of KI for those advised to take it. If a recommendation is made for the general public to take KI, appropriate information should be provided to the public by the means of notification specified in the ORO's plan and/or procedures.</p> <p>Emergency workers should demonstrate the basic knowledge of procedures for the use of KI whether or not the scenario drives the use of KI. This can be accomplished by an interview with the evaluator.</p> <p>All activities must be based on the ORO's plans and procedures and completed as they would be in an actual emergency, unless noted above or otherwise indicated in the extent of play agreement.</p>
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	<p>Although it is desirable for all emergency workers to each have a direct-reading dosimeter, there may be situations where team members will be in close proximity to each other during the entire mission and adequate control of exposure can be effected for all members of the team by one dosimeter worn by the team leader. Emergency workers who are assigned to low exposure rate areas, for example, at reception centers, counting laboratories, emergency operations centers, and communications centers, may have individual direct-reading dosimeters or they may be monitored by dosimeters strategically placed in the work area. It should be noted that, even in these situations, each team member must still have their own permanent record dosimetry. Individuals without specific radiological response missions, such as farmers for animal care, essential utility service personnel, or other members of the public who must re-enter an evacuated area following or during the plume passage, should be limited to the lowest radiological exposure commensurate with completing their missions.</p> <p>All activities must be based on the ORO's plans and procedures and completed as they would be in an actual emergency, unless noted above or otherwise indicated in the extent of play agreement.</p>
<p><b>Preparing to Evaluate This Criterion</b></p>	<p>Before the exercise, determine, according to the ORO's plan/procedures and the Extent of Play agreement:</p> <ul style="list-style-type: none"> <li>• Will they provide KI to the general public?</li> <li>• How will they distribute KI to those who require it?</li> <li>• How will those (other than the general public) who ingest KI record that information (including time and date). How will the ORO keep track of the information?</li> <li>• How will the decision to take KI be disseminated to emergency workers, institutionalized individuals, and, if applicable, the general public?</li> <li>• Are there instructions for the use of KI, including: <ul style="list-style-type: none"> <li>➢ Reason for taking KI,</li> <li>➢ Dosages and time period within which KI should be taken, and</li> <li>➢ Possible side effects.</li> </ul> </li> </ul>
<p><b>During the Exercise</b></p>	<p>During the exercise, in addition to evaluating activities related to the items listed above, be sure to:</p> <ul style="list-style-type: none"> <li>• Note how KI is distributed to those who may need to take it. Note whether instructions on the use of KI were included with the KI.</li> <li>• Note how the decision to take KI was disseminated to emergency workers, institutionalized individuals, and, if applicable, to the general public.</li> <li>• Note whether the ORO has a method of tracking who, other than the general public, ingested KI and when.</li> <li>• Determine if emergency workers have a basic knowledge of procedures for ingestion and recording the use of KI, even if the scenario does not drive the use of KI. (This can be accomplished by interview.)</li> </ul>