

**MEDINA COUNTY RADIOLOGICAL ANNEX**

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## MEDINA COUNTY RADIOLOGICAL ANNEX

### I. PURPOSE

*Identify the aspects, concepts, organizational responsibilities, and resources that will be used to reduce the potential impact of radiological or nuclear incidents in Medina County.*

### II. SITUATION AND ASSUMPTIONS

#### A. Situation

1. *Radioactive materials may occasionally be discovered in scrap yards, landfills, residences, and other places in the public domain. Such unlicensed materials typically have minimal impact to public safety.*
2. *There may be institutions, facilities, or temporary work sites that use, store or transport licensed radioactive materials within the county. Information about such licensees in Medina County can be obtained from the Ohio Department of Health, Bureau of Radiation Protection.*
3. *While many types of incidents involving radioactive materials could occur, the threat of a transportation accident involving radioactive sources is the primary concern for Medina County.*
  - a. *A checklist of items to be reported following a radiological accident is included as Tab 1 of this Annex, Accident Reporting Checklist.*
  - b. *Initial response guidance for incidents involving radioactive materials can be obtained in the Department of Transportation (DOT) North American Emergency Response Guidebook (NAERG).*
  - c. *A decision-making guide for actions to take following a radiological incident is included as Tab 4 of this Annex, Radioactive Materials Accident Flow Chart.*
4. *Medina County could be affected by a terrorism event involving radioactive or nuclear materials. Such events may include Radiological Dispersion Devices (RDD) or Improvised Nuclear Devices (IND).*
  - a. *The detonation of an Improvised Nuclear Weapon (IND) or Radiological Dispersion Device (RDD) would cause a significantly larger radiological hazards than a transportation accident in which radioactive materials are involved.*
  - b. *It is not possible to predict the size of the event or the specific areas that would be directly affected. The number of devices deployed by terrorists could be one or more.*
  - c. *IND detonation preparedness remains a necessary activity as long as stockpiles of nuclear materials exist and the number of nations and/or terrorist organizations with sufficient technological development to produce nuclear weapons continues to grow.*
  - d. *RDD detonation preparedness remains a necessary activity due to the relative ease for a terrorist to acquire materials and construct such a weapon.*

*The detonation of an IND could yield the following:*

- e.1 *Shock wave (overpressure hazards)*
- e.2 *Thermal Pulse (flash effect and fire hazards)*
- e.3 *Radiation pulse (initial gamma and neutron emission hazards)*

- e.4 *Electromagnetic Pulse (damage to sensitive electronics)*
  - e.5 *Radioactive fallout (radiation exposure and particle contamination hazards).*
  - e. *The detonation of a RDD could yield the following:*
    - f.1 *Contamination (localized particulate and downwind plume deposition)*
    - f.2 *Ionizing radiation exposure (doses likely non-lethal)*
    - f.3 *Public perception (panic based on lack of risk perspective)*
  - f. *See Medina County's Terrorism Annex, for more information on terrorism events.*
  - 5. *Radiological incidents will require certain capabilities that are beyond the scope of resources of Medina County.*
  - 6. *Radiological instruments have been issued from the Ohio Emergency Management Agency to Medina County EMA. Medina County EMA has provided such instruments to response organizations See Tab 3, Radiological Equipment Information.*
  - 7. *Nuclear Power Plant emergency response activities are beyond the scope of this Annex. Such activities are identified in the State of Ohio Plan for Emergencies at Licensed Nuclear Facilities.*
- B. Assumptions**
- 1. *Radioactive materials discovered in scrap yards, landfills, residences, and other places in the public domain would likely pose little hazard to people or the environment. Potential hazards may include contamination and exposure.*
  - 2. *Shipments of limited quantities of radioactive materials occasionally become involved in accidents and could yield a release of contents. However, the potential contamination and/or exposure hazard from such events is assumed to be low.*
  - 3. *Large quantities of radioactive materials are shipped in special containers designed to withstand severe accident conditions. Such containers can contain amounts of radioactive material that if released due to accident, could cause serious health and safety issues over large areas due to contamination and/or exposure.*
  - 4. *The detonation of an IND may involve hundreds of thousands of casualties.*
  - 5. *The detonation of an RDD may involve no casualties, but mass panic.*
  - 6. *Medina County will require assistance in the development of a radiological protection system that adequately addresses preparedness, response, and recovery objectives for any radiological event affecting the county.*

### **III. CONCEPT OF OPERATIONS**

#### **A. General Operations**

- 1. *Notification of response organizations regarding radiological incidents are addressed in section V, D, of this Annex.*
- 2. *Communications issues are addressed in the Medina County EOP, ERF# 3 Communications.*
- 3. *The discovery of unlicensed radiological sources, transportation incidents, or fixed facility incidents where radiological materials are involved fall within the realm of Hazardous Materials emergency response. Actions should be taken in conjunction with the Hazardous Materials Plan, to the Medina County EOP.*
- 4. *A terrorism event involving radiological or nuclear materials would fall within the scope of the Terrorism Annex, to the Medina County EOP. This Radiological Annex addresses the specific concerns of nuclear or radiological terrorism events.*

- a. *Peacetime IND and RDD terrorism preparedness should be ongoing during peacetime. The principal elements include plans, procedures, training, equipping, and exercising response forces.*
- b. *In the event of a serious threat of an IND or RDD attack against the United States, the Homeland Security Advisory System (HSAS) alert level will be adjusted to reflect the situation. Medina County will implement readiness activities according to the HSAS alert level as indicated in the Terrorism Annex to the Medina County EOP.*
- c. *If an incident involving an IND or RDD actually occurs, the Emergency Operations Center at Ohio EMA will provide information on when state and federal-level emergency actions can be undertaken and how to minimize the radiation danger to emergency services personnel.*
- d. *Medina County EMA will activate the Emergency Operations Center to coordinate response activities between the local and state levels.*

**B. National Incident Management System (NIMS)**

1. *The Incident Command System (ICS) is designed around sound business practices that provide a common framework for emergency response. ICS system provides a standardized means to command, control, and coordinate the use of resources and personnel at the scene of the emergency. Concepts and principles for ICS include the use of common terminology, modular organization and other vital services for assignments.*
2. *On February 28, 2003, President Bush issued Homeland Security Presidential Directive-5. HSPD-5 requires all levels of government, first responders, and any employee with emergency-response related responsibilities, which include but are not limited to township trustees, county commissioners; road departments, utilities, etc., adopt NIMS*
3. *Medina County has adopted NIMS and the Incident Command System (ICS). All incidents, regardless of type or size will be managed by an Incident Commander in accordance with the provisions of NIMS. NIMS will be incorporated into existing training and exercise programs.*
4. *The Incident Commander (IC) will be a person from the department, organization or agency responsible to manage the incident. In most situations the IC will be from fire, law enforcement or emergency medical services, however, some incidents could require a non-emergency response agency or department to take command of the scene and designate the IC.*

**C. Disclaimer**

1. *This document was prepared under a grant from the U.S. Department of Homeland Security (DHS) State and Local Government Coordination and Preparedness (SLGCP) office. Points of view or opinions expressed in this document are those of the authors and do not necessarily represent the official position or policies of the U.S. DHS or SLGCP.*

**D. Specific Concepts**

1. *There is a need for swift, efficient, well-coordinated response from all sources; government (local/state/federal) and private (contractors & carriers) as appropriate.*
2. *Responders vary with each incident, depending upon the magnitude of the event, capabilities and limitations. An effective incident command structure is essential between all levels of government and must be maintained at the site and at the EOC/assessment room.*
  - a. *Local authorities are essential to response, making initial emergency action decisions to include site/area security, evacuations, and emergency medical treatment.*
  - b. *State agencies may often provide advanced guidance and expertise along with the legal authority to enforce response decisions.*

- c. *Private sources may also be involved in a response commitment. Industrial representatives may best understand the characteristics of specific products and equipment, along with handling techniques.*
  - d. *Federal resources may be necessary for large-scale incidents and/or incidents of national significance. Federal resources are coordinated through the Ohio EMA.*
3. *The Ohio Department of Health is the radiation protection and licensing authority in Ohio.*
  4. *The Ohio EMA assumes the primary coordinating role for state and federal agencies.*
- E. *Exposure Control*
1. *During any radiological incident, the Medina County EMA is the primary agency in the county responsible for coordinating such incidents.*
    - a. *The agency will coordinate local response and will work with the ODH Radiological Emergency Response Team and the Ohio EMA through the county EOC, making appropriate radiological assessment and assigning suitable means and measures for the protection of the population, emergency workers, and property.*
    - b. *It will control the distribution of radiological assessment equipment (provided by the State) and assure proper training in the employment of this equipment.*
    - c. *The Medina County EMA will maintain a list of the equipment provided to local response organizations in Tab 3 of this annex.*
  2. *Local agencies receiving assessment equipment will be responsible for maintaining exposure control records for personnel on a 24-hour basis.*
    - a. *DOT Emergency Response Guidebook can be used to determine initial safe zones and evacuation boundaries.*
    - b. *A Responder Dose Record form should be used to document dosimeter readings for each individual responder. Ohio EMA can provide this form.*
    - c. *Recordkeeping is the responsibility of each department. A copy of the Responder Dose Rate Records shall be forwarded to the county EMA Director for proper disposition and follow-up, if necessary.*
    - d. *The incident commander is responsible for ensuring that exposure rates remain as low as reasonably achievable.*
  3. *The Ohio EMA Radiological Instrument Maintenance and Calibration Facility (RMIC) provides radiological detection equipment to each county for use by appropriate local response forces.*
    - a. *A description of the RMI&C facility and its operational policies are outlined in Tab 3.*
    - b. *Guidance for use of radiological instruments is available through Ohio EMA and Ohio Department of Health.*
  4. *Upon completion of emergency assignments, a record of total accumulated dosages and times of exposure will be made for emergency workers.*
    - a. *At a minimum, dosimeters should be read hourly. In areas where elevated exposure rates are encountered, dosimeters should be read more frequently as advised by the Ohio Department of Health.*
    - b. *On-scene, each department's safety officer should record all individual dosages..*
    - c. *These doses should be continually reported to the EOC by the on-scene commander. The EOC will maintain records of these readings.*
    - d. *The dose received by each individual should be kept within the DHS and EPA guidelines for exposure limits. Rotation of emergency responders will be a consideration if estimated individual exposures are projected to exceed the established limits.*

- e. *When lifesaving activities are involved, a maximum limit of 25 R is considered acceptable. This applies only if the exposure is incurred while directly involved in lifesaving activities and the rescuer is a volunteer who has received complete information about the risks involved.*

5. *U.S. EPA dose limits for whole-body exposure to radioactive materials are set as follows:*

<u>Condition</u>	<u>Exposure Limit</u>
(1) <i>Non-life saving / normal events</i>	<i>5 REM</i>
(2) <i>Protection of valuable property</i>	<i>10 REM</i>
(3) <i>Lifesaving or protection of large populations</i>	<i>25 REM</i>
(4) <i>Lifesaving or protection of large populations only on a voluntary basis to persons fully aware of the risks involved.</i>	<i>&gt; 25 REM</i>

**F. Victim Support**

1. *Medical problems take priority over radiological concerns.*
2. *The DOT Emergency Response Guidebook recommends that lifesaving actions and medical treatment be provided immediately.*
3. *Injured persons contaminated by contact with released material are not a serious hazard to health care personnel, equipment, or facilities.*
4. *Ensure that medical personnel are aware of the material(s) involved, take precautions to protect themselves and prevent spread of contamination.*
5. *The presence of other hazardous materials involved in the scene, may alter decontamination priorities.*
6. *Uninjured persons at the scene of a radioactive materials incident who are suspected of being contaminated will be assessed, decontaminated as necessary and transported to a receiving hospital for further medical evaluation / treatment.*
7. *Vehicles and other equipment will be evaluated on a case-by-case basis and decontaminated as appropriate.*
8. *The Incident Commander will be responsible for making decisions about appropriate decontamination methods and processes.*

**G. State Resource Support**

1. *The Ohio Department of Health is the primary state agency for ensuring the health and safety of people and property from radiological incidents in Ohio.*
  - a. *Additional state agency support is available and may be accessed by request through the Ohio EMA.*
  - b. *The additional resources available are identified in the State of Ohio Emergency Operations Plan, Hazardous Materials Incident Annex.*

**H. Federal Support**

1. *Federal Response assets are coordinated through the Ohio EMA in accordance with the State Emergency Operations Plan.*
2. *Ohio EMA will act as a liaison between the County EMA and federal officials involved in the response to a radiological or nuclear incident.*

#### **IV. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES**

##### **A. Hazard Assessment**

1. *Initial radiological assessment is a responsibility of the fire department, acting in concert with other public safety agencies:*
  - a. *Hazardous Materials Teams*
  - b. *Sheriff and/or Police Departments*
  - c. *Health Department and Hospitals*
  - d. *Others, as required*
2. *Ongoing assessment activities may also involve the following:*
  - a. *Engineer or City/Village utility representatives*
  - b. *Facility representatives*
3. *Augmentation may be available from other sources:*
  - a. *Ohio Department of Health (ODH)*
  - b. *Ohio Emergency Management Agency (EMA)*
  - c. *Ohio Environmental Protection Agency (OEPA)*
  - d. *Public Utilities Commission of Ohio (PUCO)*
  - e. *Ohio National Guard (ONG)*
  - f. *Ohio Department of Transportation (ODOT)*
  - g. *Ohio State Fire Marshal (OSFM)*
  - h. *Ohio State Patrol (OSP)*

##### **B. Assignment of Responsibilities**

1. *Medina County EMA:*
  - a. *Support preparation for response to radiological incidents.*
  - b. *Sponsor training courses for first responders and medical personnel.*
  - c. *Provide reference materials for the development of SOGs.*
  - d. *Ensure warning/notification actions.*
  - e. *Notify the Ohio Department of Health.*
  - f. *Notify Ohio EMA and coordinate requests for state-level technical assistance.*
  - g. *Coordinate outside expertise to ensure proper team make-up and capabilities are provided to response forces.*
  - h. *Distribute radiological assessment equipment to law enforcement agencies, fire departments, EMS, public health, hazardous materials team, hospital, and other agencies/sites for emergency use.*
  - i. *Prepare damage assessment reports for submission to the State / Federal Government.*
2. *Law Enforcement Agencies*
  - a. *Receive and transmit NAWAS data (within capabilities).*
  - b. *Provide site security.*
  - c. *Provide escort or transport support.*

3. *Local Fire Departments*
  - a. *Respond in accordance with the local hazardous materials protocols and the Emergency Response Guidebook.*
  - b. *Operate detection and assessment equipment, as available.*
  - c. *Ensure appropriate responder training and familiarity with assessment equipment use.*
4. *Hazardous Materials Team*
  - a. *Advise fire, EMS, and other on-scene responders as requested.*
  - b. *Conduct advanced containment operations on-scene.*
  - c. *Calculate evacuation distances and plume dimensions.*
  - d. *Organize and execute decontamination operations.*
5. *Public Health*
  - a. *Coordinate with the county agricultural agencies and veterinarians.*
  - b. *Provide recommendations to the EOC on protective actions for the public.*
  - c. *Distribution of safety information to the public.*

## **V. DIRECTION AND CONTROL**

- A. *Emergency Operations Center*
  1. *Radiological incidents in Medina County will be managed through the activated Emergency Operations Center with cooperative efforts of the public health, hazardous materials, fire, law enforcement, and emergency management representatives.*
  2. *See the Medina County EOP, ERF# 1 - Direction and Control for more information on the function of the EOC.*
- B. *On-Scene Actions*
  1. *Fire department and law enforcement officials, using an incident command structure, will be the primary responders, until the arrival of special response teams. The following steps are recommended for on-scene responders at a radiological incident:*
    - a. *Refer to the Emergency Response Guidebook, Guide 163 for initial information on health, fire or explosion, protective clothing, evacuation, fire, spills or leaks, and first aid.*
    - b. *Restrict the area of the Incident*
    - c. *Keep the general public as far as possible/practical from the incident scene.*
    - d. *Keep upwind of fire/smoke to the maximum extent possible.*
    - e. *Downwind evacuations should be considered.*
    - f. *Perform necessary lifesaving measures*
    - g. *Using appropriate personal protective equipment (PPE), remove exposed or injured persons from the contaminated area to a safe area.*
    - h. *Ensure proper decontamination procedures are followed to reduce exposure and limit the spread of contaminants.*
    - i. *Physicians and/or hospitals shall be notified that patients have been exposed to radiation and may potentially be contaminated.*
    - j. *This information is to be relayed by the transporting service or local public safety agency.*

C. Firefighting

1. If there is a fire or danger of fire, assistance should be summoned according to department procedures as needed.
2. All potentially contaminated material should be handled with mechanical means, and using protective gear (gloves, suits, air packs, etc.) in order to avoid contact with or inhalation of radioactive materials.
3. Tools used at the scene should be treated as “contaminated” until they have been evaluated and decontaminated if necessary.
4. Clothing should be contained in marked bags and held in an isolated area until such time as it can be safely addressed.
5. With fires, two potential hazards may exist regarding nuclides: destroyed packaging materials containing the radioactive material, and the vaporization of the sources. Although the possibility of either event is remote, it is important that departmental plans and training consider them.

D. Notifications

1. The following notifications should be made immediately following the discovery of a radiological or nuclear incident:

<i>Notification Matrix</i>		<i>Transportation</i>	<i>Terrorism</i>
<i>Local Law, Fire, EMS</i>	<i>911</i>	X	X
<i>Local Hazardous Materials Response Team</i>	<i>911</i>	X	X
<i>Local Hospital</i>	<i>MC Resource Book Tab 25</i>	X	X
<i>Ohio Department of Health</i>	<i>(614) 722 - 7221</i>	X	X
<i>Ohio Emergency Management Agency</i>	<i>(614) 889 - 7150</i>	X	X
<i>Ohio National Guard, 52<sup>nd</sup> CST</i>	<i>(614) 336 - 6597</i>		X
<i>Ohio Environmental Protection Agency</i>	<i>(800) 282 - 9378</i>	X	X
<i>Public Utilities Commission of Ohio</i>	<i>(614) 644 - 5479</i>	X	
<i>National Response Center *(if RQ is involved)</i>	<i>(800) 424 - 8802</i>	X*	

E. Radiological Assessment

1. Fire departments, the Medina County HazMat Team, and the EMA Office have radiological assessment equipment. Detection and assessment operations should be conducted at any suspected radiological incident.
2. Advanced capability can be provided by the ODH Radiological Bureau of Radiation Protection, Ohio National Guard's Civil Support Team, or the Ohio EMA.

3. *Use care to contain runoff from decontamination operations. See the Medina County Hazardous Materials Plan (Tab 3) for further information.*
4. *Eating, drinking, smoking, or chewing in the incident area is prohibited.*

*F. Decontamination*

1. *Contact the Ohio Department of Health, Bureau of Radiation Protection for information on and oversight of decontamination efforts.*
2. *Radiological assessment should follow each decontamination procedure to determine if further action is required.*

## **VI. CONTINUITY OF GOVERNMENT**

- A. *Lines of succession for agencies with responsibility for radiological incidents are maintained inter jurisdictional SOGs and in the Medina County EOP, ERF# 1 - Direction & Control.*
- B. *Refer to the Medina County COOP for the Relocation & Safeguarding of Vital Records, and the Medina County EOP, ERF# 12, Resource Management.*

## **VII. ADMINISTRATION AND LOGISTICS**

*A. Training*

1. *Radiological awareness training can be requested, as needed, for response agencies in Medina County from the Ohio EMA. Operations and Technician-level training courses are available through the U.S Department of Homeland Security's Office of Domestic Preparedness Program (ODP).*
2. *Annual refresher training will be encouraged for those who have previously completed radiological courses.*
3. *Ohio EMA is the primary provider of emergency responder radiological training for Medina County; However, FEMA and ODP also offer radiological training programs.*
4. *The Ohio Department of Health is the primary provider of hospital radiological training.*

*B. Exercises*

1. *Exercises dealing with radiological events may be developed at the request of any response agency or at the discretion of the Medina County EMA. The Ohio EMA can provide assistance in the development and delivery of such exercises.*

*C. Equipment*

1. *Radiological assessment equipment (Tab 32 MC Resource Book) is located throughout Medina County and is rotated and maintained on a bi-annual schedule. See Tab 3 for further equipment information.*
2. *Fire departments possess structural firefighter's protective clothing and instrumentation to perform certain tasks in a radiological environment. This may not be disposable and must be subject to decontamination or outright replacement.*

## **VIII. PLAN DEVELOPMENT AND MAINTENANCE**

- A. *Primary organizations listed in this annex are responsible for reviewing it and submitting new, or updated, information to the Medina County EMA Director, based upon assessments of exercises, actual events, or changes in governmental structure, assignments, or offices.*

- B. *Organizations with radiological protection duties are responsible for maintaining their own SOGs, mutual aid agreements, 24-hour recall personnel rosters, and resource listings.*
- C. *The County Medina County EMA Director is responsible for printing and distribution of changes, revisions, and updates to this annex to all departments, agencies and organizations retaining a copy of this plan.*

**IX. AUTHORITIES AND REFERENCES**

A. *Authorities*

- 1. *29 CFR 1910.120*
- 2. *National Fire Protection Association (NFPA) 472 and 473*
- 3. *Also see Section IX.A of the Basic Plan.*

B. *References*

- 1. *National Council of Radiation Protection (NCRP) – Report #138 (Terrorism Incidents Involving Radioactive Materials)*
- 2. *US EPA – Report #400 (Protective Limits)*
- 3. *North American Emergency Response Guidebook, 2004*
- 4. *CPG 2-1, Radiological Defense Preparedness, Sep 1989*
- 5. *Application of Protective Action Guides for Radiological Dispersion Devices and Improvised Nuclear Device Incidents, 2006.*
- 6. *Target Capabilities List 2.0, Homeland Security, 2005*

**X. ADDENDA**

- Tab 1 - Reporting Checklist*
- Tab 2 - Radiological Incident Categories*
- Tab 3 - Radiological Equipment Record*
- Tab 4 - Initial Actions Flowchart*

**XI. AUTHENTICATION**

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*Medina County EMA Director*

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*Date*

<b>TAB 1 - EMERGENCY REPORTING CHECKLIST</b>
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- I. *If radiological materials are involved, or suspected to be involved in any incident, ensure that notifications are made to:*
  - A. *Local emergency response forces (Haz-Mat, fire, law, EMS, and hospital)*
  - B. *Ohio Department of Health 614.722.7221*
  - C. *Ohio Emergency Management Agency 614.889.7150*
  
- II. *Below is a guideline for information to be transmitted when requesting assistance or reporting a radiological incident to the proper authority.*
  - A. *Identify the fact that you are calling about a radioactive materials incident.*
  - B. *Location and brief nature of the incident, including description of package(s).*
  - C. *Injured victims? Yes / No*
    - 1. *Injured victim(s) suspected to be contaminated or exposed?*
  - D. *Evidence of release of radioactive material(s)?*
  - E. *Evidence of any other hazardous materials involved?*
  - F. *Carrier and shipper and/or consignee.*
  - G. *Terrain and weather.*
  - H. *Personnel and equipment on the scene and actions under way.*
  - I. *Your name and call back phone number.*
  - J. *If readily available from shipping papers, labels, or package markings, the following will be of value. (Do not delay your call for assistance to obtain this information, you can always call back.)*
    - 1. *Shipper's name*
    - 2. *Radioisotope(s)*
    - 3. *Number of curies*
    - 4. *White I, Yellow II, or Yellow III labels*
    - 5. *Transport index (TI) of package(s)*
    - 6. *Physical and chemical form*
    - 7. *Package identification (specification Type A or B, certification number, exemption number, etc.)*
  
- IV. *If emergency responders have radiation survey meters and have been properly trained in their use, indicate types of instruments used and readings obtained. However, do not delay communications to get this information.*

**TAB 2 - RADIOLOGICAL INCIDENT CATEGORIES**

<b>Category</b>	<b>Description</b>	<b>Example</b>
1a	<i>A minor radiological event occurring in the public domain, not immediately associated with a radioactive materials licensee, with no radiation fields in excess of 100 mrem/hr at 30 cm.</i>	<i>Pipe scale discovered in a scrapyards; I-131 discovered in a landfill, or other radioactive material discovered at a non-licensee's private residence or historic material at a formerly utilized site.</i>
1b	<i>A radiological event occurring in the public domain, not immediately associated with a radioactive materials licensee, with radiation fields greater than 100 mrem/hr at 30 cm, but no activation of a component of the State's Emergency Operations Plan.</i>	<i>An unshielded Cs-137 sealed source discovered at a scrap yard.</i>
2a	<i>A radiological event involving a radioactive materials licensee with minor public or worker health consequences.</i>	<i>Events involving a licensee such as: Lost, damaged, or irretrievable source; Minor overexposure; Minor injury with contamination; Equipment failure; Fire, tornado; or other minor events involving the licensee's facility</i>
2b	<i>An event involving a radioactive materials licensee with significant public or worker health consequences.</i>	<i>Events similar to category 2a except with significant public or worker health consequences – usually involving larger quantities of radioactive material or less control by licensee.</i>
3a	<i>A radiological event involving Hazardous Material resulting in the activation of a component the State's Emergency Operations Plan.</i>	<i>Any Category 1, 2a, or 2b event that becomes elevated to the point where State's Emergency Operations Plan is activated.</i>
3b	<i>A radiological event involving a Nuclear Power Plant resulting in the activation of a component the State's Emergency Operations Plan.</i>	<i>An event involving: Davis-Besse Nuclear Power Station Perry Nuclear Power Plant Beaver Valley Power Station</i>
3c	<i>A radiological event involving a Transportation Accident resulting in the activation of a component the State's Emergency Operations Plan.</i>	<i>Transport vehicle accident involving: Spent fuel, HLW, DUF6, Nuclear Weapon (Involving SST or transport aircraft resulting in contamination or low order detonation only, no high order detonation)</i>
3d	<i>A radiological event involving a criminal contamination or exposure in the public domain resulting in the activation of a component the State's Emergency Operations Plan.</i>	<i>Radiological Dispersal Device Radiological Exposure Device</i>
4	<i>Nuclear Weapon Detonation</i>	
5	<i>Hospital Assistance Request</i>	<i>A request by a receiving hospital emergency room for Bureau health physics assistance in dealing with radiologically contaminated patients.</i>



**TAB 4 - INITIAL ACTIONS FOR RADIOLOGICAL INCIDENTS**

*These guidelines are intended for use by emergency response personnel that are properly trained and equipped to perform functions in accident scenes where radioactive materials are suspected or known to be present. These actions are intended to be guidance for **initial** actions. Actions beyond the initial response phase will be evaluated and determined by the Incident Commander.*

