I. INTRODUCTION

A. A major radiological incident at a Nuclear Power Plant (NPP) may create an emergency situation that exceeds local capabilities for transporting and medically treating individuals who have become contaminated or injured as a result of the incident. Plans and procedures for reinforcing local capabilities are therefore necessary.

B. The provision of medical and public health support in the event of a NPP radiological incident involves the treatment of radiation-related injuries as well as associated routine injuries in the field, and at reception centers, shelters or designated medical facilities.

C. Development of plans for the provision of health and medical support is a joint State and county responsibility. County Emergency Operations Plans and Annex 3 (Medical and Public Health Support) of each NPP Site Specific Plan identifies transportation resources and medical facilities to be used for the treatment of contaminated/injured individuals.

II. PURPOSE

Outline the policies and procedures for the provision of medical and public health support in the event of an incident at a NPP.

III. CONCEPT OF OPERATIONS

A. Upon notification of a radiological incident at a NPP, county officials will commit all available local emergency medical transportation vehicles to transport radiologically contaminated/injured individuals from the affected areas to designated medical facilities.

B. Appropriate letters of agreement have been obtained with local, primary and backup hospitals having the capability for evaluation of radiation exposure and uptake, including assurance that persons providing medical services are adequately prepared to handle radiologically contaminated injured individuals. Counties will seek medical assistance first with the primary hospital, then the backup prior to requesting assistance from other sources.

C. If additional support is required, ESF-8 (Health and Medical Services) will coordinate through the South Carolina Department of Health and Environmental Control (SCDHEC) to the affected Regional Health Services Emergency Preparedness Coordinators to assist in contacting and coordinating additional emergency transportation resources throughout the State.
IV. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. Responsibilities

1. SCDHEC Agency Coordination Center (ACC)
   a. Maintains liaison and coordinates with SCDHEC’s affected Region Health Services Emergency Preparedness Coordinators and other SCDHEC Health Region Emergency Preparedness Coordinators as needed.
   b. Coordinates support of other SCDHEC Health Region emergency medical transportation resources as needed.
   c. SCDHEC EMS Director
      (1) Maintains listing of all EMS resources throughout the State.
      (2) Contacts and requests deployment of these resources as needed.

2. ESF-8 (Health and Medical Services)
   a. Contacts ACC for information regarding pool of statewide EMS resources.
   b. Maintains liaison and coordinates with ACC should additional state EMS resources be required in the affected Regions.
   c. Coordinates with the State Emergency Operations Center (SEOC) Logistics for additional transportation resources when SCDHEC emergency medical transportation resources are exhausted.

3. Affected County Health Region(s) Emergency Preparedness Coordinator
   a. Contacts and coordinates additional emergency medical transportation resources within the Region as needed.
   b. Contacts SCDHEC Agency Coordination Center (ACC) to request support as needed.
   c. Contacts ACC to request additional support as required.
   d. Maintain liaison and coordinate with County Emergency Preparedness Directors within the affected Region.

4. Affected SCDHEC Health Region Emergency Preparedness Coordinators
a. Maintain liaison and coordinate with County Emergency Preparedness Directors within the affected Region.

b. Request and coordinate additional emergency medical transportation resources within the affected Region as needed.

c. Contact adjacent SCDHEC Regions to request support as needed. (See Attachment B for Region Map.)

d. Contact ESF-8 (Health and Medical Services) at the SEOC if additional emergency transportation resources are required.

5. SCDHEC Emergency Preparedness Coordinator

   a. Coordinates ESF-8 activities at the SEOC during a disaster resulting from a radiological incident at a NPP.

   b. Maintains liaison and coordinates with SCDHEC’s affected Region Health Services Emergency Preparedness Coordinators.

   c. Maintains liaison and coordinates with other SCDHEC Health Region Emergency Preparedness Coordinators as needed.

   d. Maintains liaison and coordinates with SCDHEC EMS Director should additional State EMS resources be required in the affected Regions.

   e. Coordinates with the SCEMD when SCDHEC emergency medical transportation resources are exhausted. (e.g., utilization of school buses and National Guard vehicles.)

V. LOGISTICS

A. Communications

   Communications will be through commercial telephones.

B. Supply

   Emergency medical transportation will be fully utilized from sources within the health Region(s) before requesting assistance, unless it is apparent that local capabilities are not adequate to cope with the situation.

C. Control

   Requests for additional emergency transportation support beyond the affected Region Health Services Emergency Preparedness Coordinator’s resources will be coordinated from the SEOC. These requests will be made through the Health Region Emergency Preparedness Coordinators to the SCDHEC Emergency Preparedness Coordinator.
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ANNEX 5, ATTACHMENT A – ORGANIZATIONAL CHART

South Carolina Emergency Management Division

ESF-8 (Health and Medical Services)

SCDHEC Emergency Medical Services (EMS) Director

DHEC Agency Coordination Center (ACC)

SCDHEC Regional Coordination Center

SCDHEC Liaisons in County EOCs

Direction

Coordination
ANNEX 5, ATTACHMENT B – SCDHEC PUBLIC HEALTH REGION MAP
I. PURPOSE

Identify medical facilities in the vicinity of commercial or Department of Energy (DOE) Nuclear Power Plants (NPPs) which have the capability to treat radiologically contaminated/injured individuals.

II. MEDICAL FACILITIES IDENTIFIED FOR THE TREATMENT OF RADIOLOGICALLY CONTAMINATED/INJURED INDIVIDUALS.

A. To determine medical facilities throughout South Carolina considered capable of providing medical support for radiological contaminated/injured individuals, a statewide survey was conducted in coordination with the South Carolina Hospital Association. SCDHEC and ESF-8 (Health and Medical Services) maintains a copy of the survey and the results.

B. Each NPP and affected county identified primary and alternate hospitals for the treatment for plant personnel and members of the general public respectively. Additionally, SCDHEC maintains a list of all medical facilities throughout the State which are considered capable of providing medical support for contaminated, injured individuals.

C. In the event a radiological accident at an NPP exceeds or exhausts South Carolina’s medical treatment capabilities, the States of North Carolina and Georgia have agreed to request and coordinate back-up support from their respective available medical facilities as needed [See Annex 9 (Letters of Agreement and Memoranda of Understanding)].

D. In the event a radiological accident at an NPP exceeds South Carolina’s governmentally owned or leased and commercially available facilities, the Radiation Emergency Assistance Center/Training Site (REAC/TS) at Oak Ridge, Tennessee is authorized to provide back-up services [See Annex 9 (Letters of Agreement and Memoranda of Understanding)].