STATE OF NEVADA
RADIOLOGICAL EMERGENCY RESPONSE PLAN

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Revised 11/2014
STATE OF NEVADA
RADIOLOGICAL EMERGENCY RESPONSE PLAN

I. PURPOSE

The purpose of this plan is to provide a mechanism for effective response to peacetime radiological emergencies in the State of Nevada. A radiological emergency can be any incident that results in the loss of control or potential loss of control of a radiation source so that a hazard or potential hazard to public health and safety or the environment exists.

II. DEFINITIONS

None

III. OBJECTIVES

- To identify agencies and individuals to be notified in the event of a radiological emergency in the State of Nevada.
- To provide guidance for Nevada radiological emergency response participants.
- To establish general protocols for requesting, obtaining or providing radiological response assistance.

IV. DISCUSSION

This plan is intended for use by the response agencies in Nevada and incorporation into the Nevada State Comprehensive Emergency Management Plan and the Hazardous Materials Emergency Response Plan. The plan provides the basis for state radiological emergency response assistance to state, county and local response agencies in Nevada.

The Division of Public and Behavioral Health is designated by Nevada Revised Statute 459 as the state radiation control agency. Consequently, the Division of Public and Behavioral Health, Radiation Control Program is the state agency having primary responsibility to respond, in the state, to any radiological emergency, or non-emergency incident.

The Radiation Control Program radiological emergency response personnel are located in Carson City and Las Vegas. State resources of trained radiological emergency response personnel and equipment are limited and it is anticipated during some emergencies that the resources of neighboring counties, neighboring states and/or federal agencies may be requested.

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Local emergency response authorities which have "first-on-scene" responsibilities include law enforcement agencies, fire departments and other emergency first-responders. These agencies are responsible to perform radiological emergency response actions to the limits of their training as well as the associated functions such as traffic control, crowd control, fire suppression and other incident management activities. The Radiation Control Program should be notified of all radiation related incidents. Requests for on-site technical assistance or incident management should be clearly communicated in the event that the incident is expected to exceed local capabilities.

V. RADIOLOGICAL RESPONSE RESOURCES IN NEVADA

Division of Public and Behavioral Health - Radiation Control Program

1 (877) GET RAD 1 (438-7231) 24-hour Emergency Hotline
(775) 687-7550 Business Number
(775) 687-7552 FAX
(775) 687-0400 NHP Dispatch (Backup)

The Radiation Control Program may be contacted to provide radiological assistance to federal, state, county or local agencies or the general public as necessary. Radiological assistance may be obtained by calling any of the numbers listed above. The Nevada Department of Public Safety (DPS), Highway Patrol Dispatch Center is the backup method for contacting Radiation Control Program Staff and to contact the Division of Emergency Management.

Nevada Department of Public Safety

Division of Emergency Management

(775) 687-0300 During Business Hours
(775) 687-0400 NHP Dispatch After Hours

The Nevada Division of Emergency Management (DEM) will serve as the statewide coordination resource at the state level during a radiological emergency. DEM will assist the Radiation Control Program in the event that resources are necessary from other state agencies such as transport vehicles, helicopters, aircraft and other specialized support resources. DEM also assists coordination of county/local agency resources. DEM must be notified of all radiological incidents even if they are not asked for assistance.

Highway Patrol Division

(775) 687-0400 Northern Command (Reno/Carson City)
(702) 486-5393 Southern Command (Las Vegas)
(775) 753-1171 Central Command (Elko)
The DPS Highway Patrol Division has the ability to do limited assessment of radiological emergencies and is usually the first state agency on scene, particularly for transportation related incidents. They will act as the State On-Scene Coordinator (SOSC) until the appropriate SOSC specialist arrives. DPS dispatch centers are the backup means to contact and communicate with most state response agencies.

U.S. Department of Energy - Nevada Field Office & Remote Sensing Laboratory

The U.S. Department of Energy - Nevada Field Office (DOE-NFO) is a resource that may be available to assist with radiological incidents. They have a variety of radiological assistance programs including RAP, FRMAC, NEST, & AMS. DOE-NFO should only be contacted by the Division of Public and Behavioral Health or through NDEM for Radiological Assistance. DOE-NFO may respond directly if the DOE is responsible for the material and has access to other DOE resources. The state Radiation Control Program should be involved any time Federal agencies respond to a radiological incident in Nevada.

U.S. Environmental Protection Agency
Contact through the National Response Center 1 (800) 424-8802

EPA’s Radiation and Indoor Environments National Laboratory in Las Vegas is one of two national EPA radiation labs. Radiological Emergency Response Team personnel based at these labs respond to emergencies throughout the country. EPA also provides assistance with the response and disposal for orphaned sources, and with environmental mitigation and remediation. EPA assistance is requested by contacting the National Response Center and working through the assigned On Scene Coordinator.

Other State and Local Authorities

State and local agencies such as law enforcement, fire department, and other health and safety authorities are vital to evaluate and/or control some radiological emergency details due to their unique local agency authority. These agencies are encouraged to contact the Radiation Control Program as soon a radiological incident is identified, and especially if the scope of the incident is expected to exceed local capabilities.
VI. INFORMATION REQUIRED BY THE DIVISION OF PUBLIC AND BEHAVIORAL HEALTH, RADIATION CONTROL PROGRAM FOR SUSPECTED RADIATION INCIDENTS

The following information should be obtained (to the extent possible without delaying the report) and provided to the Division of Public and Behavioral Health and Nevada Division of Emergency Management.

Nevada Radiation Control Program (24hr): 1(877) 438-7231
Nevada Division of Emergency Management: (775) 687-0300
Nevada Highway Patrol (24 hr.): (775) 687-0400

1. Caller's Information:
   Name:
   Location / Affiliation:
   Telephone Number: (  )

2. Location and description of the radiation incident:

3. Why does the caller think a radiation source or radiation hazard is involved?

4. Has the immediate area of the incident or radiation source been isolated?
   Barricaded? Roped-off? Otherwise restricted to prevent public entry?

5. Name of the person, trucking company, manufacturing plant, doctor's office, etc.
   associated with or cause of the incident? (including phone number)

6. What kind of radiation source is involved? (radioactive material, X-ray, other)
   How do you know this?

7. Any indication of the quantity of radioactive material or size of radiation source
   involved? (amount, size of packages, quantity identified on paperwork, etc.)

8. What type of package(s) is the radioactive material/source contained in? (55-gallon
   drums, boxes, vials, casks, etc.) What is the condition of the packages?

9. Any measurements from radiation detection instruments? Who took the
   measurements (name, agency and telephone number at responder location)?
   What instruments were used?

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VII ACTIONS TO BE CONSIDERED BY STATE AND LOCAL EMERGENCY RESPONSE AGENCIES

The assistance to be given by trained local emergency first-response personnel such as law enforcement and fire department personnel in response to a radiological incident is determined by the scope and magnitude of the incident. It is not feasible to establish rigid procedures for response to all the incident variables but the following general guidelines will apply to most response requirements.

The emergency actions listed below should be taken by first-on-scene response personnel prior to the arrival of trained radiological emergency response personnel.

1. Rescue any injured victims and administer emergency first aid. Arrange for transport of seriously injured to the nearest medical facility. Inform ambulance and hospital personnel that patient may be radioactively contaminated. Wrap patient in blanket or other light-weight covering to minimize spread of possible radioactive contamination.

2. Fire response

3. If radiation sources are suspected, notify appropriate radiological emergency response agencies immediately in accordance with the emergency notification procedure in this document. Be prepared to provide the information requested on Page 4 of this document.

4. Keep the public away from the incident site if possible. Determine if other chemical or biological hazards exist and establish the appropriate exclusion zone and protective action distance as outlined in the North American Emergency Response Guidebook and other guidance documents.

If it is determined that only radiation sources are involved and no other hazard or suspected radiological materials, establish an exclusion zone of 150 ft. or more as determined by trained personnel using appropriate, calibrated, operational radiation instruments to determine a radiation field of 2 milli roentgens per hour (2 mR/hr).

For an incident involving spent nuclear fuel or nuclear weapons, a radius of approximately 1,000 feet or more may be appropriate if a shipment has been opened or until qualified radiation measurements can be made.

Avoid handling debris except to remove injured victims. Restrict public access until the extent of radiation hazard, contamination, etc. is known.
5. Obtain names and addresses of personnel involved in the incident and other response individuals. Detain and isolate any personnel who may have been exposed to the radiation hazard if they are not significantly injured (requiring evacuation to medical facilities). These uninjured persons may provide important information concerning the incident and must be surveyed for contamination radioactive material before release to return to work or home.

6. Extinguish fires from upwind and assume the fires involve toxic chemicals and/or radioactive materials until confirmed by radiological staff to be absent. Avoid fumes, smoke, or dust associated with the incident as you would with any fire involving unknown hazards. Segregate equipment and clothing used at the fire until monitored for radioactive contamination before departure from the incident scene.

7. If the incident involves a transportation route or vehicles are involved, detour traffic around the incident site. Minimize movement of vehicles involved in the incident when clearing the right-of-way. Prevent passage of personnel or vehicles through the incident area until it has been surveyed and released by radiological personnel for radioactive contamination.

8. Do not eat, drink, or smoke in the area of the incident. Outside of the incident area, take care to not consume food or water that may have been in contact with material from the incident area.

9. Conduct radiation contamination surveys only if qualified to make radiological evaluation of the incident site. Advise the incident commander of suspected radiation contamination or otherwise be prepared to advise trained radiological emergency response agencies upon their arrival at the scene.

10. If radioactive contamination is confirmed, advise participating on-scene authorities of the need to implementing decontamination procedures of personnel, equipment and other resources at the site in order to limit the source and extent of contamination.

If radioactive contamination of injured victims is suspected, advise ambulance drivers or anyone transporting injured victims and receiving hospital personnel that the accident victims should be treated as if contaminated until actual assessment or radiological or non-radiological (chemical) contamination can be made.

If radiological contamination is not known, treat the victim as if non-radiological agents are involved until complete assessment can be made.

In general, radiological contamination found during most incidents does not present an immediate life-threatening condition. Remember: Your personal effects, clothing, etc. can be recovered or replaced if they are subjected to radioactive contamination; your lack of life-saving actions can never save someone from death.

*Any vehicle involved in the incident or that transports contaminated patients must be surveyed and released by the Radiation Control Program.
NEVADA HOSPITALS WITH LIMITED RADIOLOGICAL ASSISTANCE SUPPORT

The Nevada hospitals listed below have medical programs which may use radioactive materials including personnel and equipment that may be helpful to determine if the injured accident victims are contaminated with radioactive materials.

These facilities can be contacted for radiological assistance during an incident if injured victims will be transported for treatment or if the Radiation Control Program or other radiological assistance cannot be obtained to assist at the scene of the incident. Bear in mind these resources may only be practical if contaminated accident victims are transported to that facility. You should ask to speak to someone in the nuclear medicine or radiology department or emergency room if you decide to contact the facility for assistance at the hospital. It is suggested that contacting these facilities in the response planning phase prior to actual need during an incident would provide the best information to your agency.

LAS VEGAS
University Medical Center, 1800 W. Charleston Blvd (702) 383-2000
Sunrise Hospital Medical Center, 3186 S. Maryland Pkwy (702) 731-8000
Valley Hospital Medical Center, 620 Shadow Lane (702) 388-4000
Desert Springs Hospital, 2075 E. Flamingo Road (702) 733-8800
Summerlin Hospital Medical Center, 655 Town Center Drive (702) 233-7000
Mountain View Hospital Medical Center, 3100 N. Tenaya Way (702) 255-5000
Southern Hills Hospital Medical Center, 9300 W. Sunset Road (702) 880-2100
St. Rose Dominican Hospital San Martin, 8280 W. Warm Springs (702) 492-8000
Centennial Hills Medical Center, 6900 N. Durango Dr (702) 835-9700
Spring Valley Hospital Medical Center, 5400 S. Rainbow Blvd (702) 853-3000

NORTH LAS VEGAS
North Vista Medical Center, 1409 E. Lake Mead Blvd (702) 649-7711
VA Medical Center Mike O’Callahan Facility, 4700 N. Las Vegas Blvd (702) 653-2260

HENDERSON
St. Rose Dominican Hospital De Lima Campus, 102 E. Lake Mead Dr (702) 564-2622
St. Rose Dominican Hospital Siena Campus, 3001 St. Rose Pkwy (702) 616-5000

BOULDER CITY
Boulder City Hospital, Inc., 901 Adams Blvd, (702) 293-4111

RENO
Renown Medical Center, 77 Pringle Way (775) 328-5638
CHW St. Mary’s Regional Medical Center, 235 W. Sixth St (775) 789-3177
VA Medical Center, 1000 Locust (775) 786-7200
South Meadows Medical Center, 10101 Double R Blvd. (775) 982-7000

SPARKS
Northern NV Medical Center, 2375 E. Prater Way, (775) 331-7000

CARSON CITY
Carson-Tahoe Regional Medical Center, 1600 Medical Parkway, (775) 445-8000

ELKO
Northeastern Nevada Regional Hospital, 2001 Errecart Boulevard, (775) 331-7000

FALLON
Churchill Community Hospital, 801 E Williams Ave., (775) 423-3151
IX. OTHER EMERGENCY PLANS

The following emergency plans and other documents are useful referenced for response to radiological incidents:

3. National Response Plan
5. CRCPD Handbook for Responding to a Radiological Dispersion Device