After Action Report

Comanche Peak Nuclear Power Plant
Medical Services Drill

Drill Date – December 8, 2021

Radiological Emergency Preparedness (REP) Program

FEMA

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After Action Report/Improvement Plan

Published

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EXECUTIVE SUMMARY

On December 8, 2021, an out-of-sequence virtual medical services drill was conducted for the Comanche Peak Nuclear Power Plant (CPNPP), located near Glen Rose, Texas. Personnel from the U.S. Department of Homeland Security/FEMA (DHS/FEMA) Region 6 evaluated all activities. The purpose of the drill was to assess the level of preparedness of local responders to react to a simulated radiological emergency at the CPNPP. The previous medical drill conducted at this site was on September 25, 2019.

Personnel from the Texas Department of State Health Services, Texas Health Harris Methodist Hospital Cleburne, Somervell County Fire Department Emergency Medical Services, and CPNPP participated in the drill. Evaluation Areas demonstrated included: Emergency Operations Management, Protective Action Implementation, and Support Operations/Facilities. Cooperation and teamwork of all participants was evident during the drill, and DHS/FEMA Region 6 wishes to acknowledge these efforts.

This report contains the final written evaluation of the out-of-sequence virtual medical services drill. The participants demonstrated knowledge of their emergency response plans and procedures and adequately implemented them. There were no Level 1, Level 2 Findings or Plan Issues identified for this drill.

SECTION 1: EXERCISE OVERVIEW

1.1 Exercise Details

Exercise Name
2021 CPNPP Medical Services Drill

Type of Exercise
Virtual Drill

Exercise Date
December 8, 2021

Program
Department of Homeland Security/FEMA Radiological Emergency Preparedness Program

Scenario Type
Medical Services

1.2 Exercise Planning Team Leadership

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1.3 Participating Organizations

Agencies and organizations of the following jurisdictions participated in drill:

State Jurisdictions

Texas Department of State Health Services – Radiation Control Program

Risk Organizations

Somervell County Fire Department and Emergency Medical Services

Private Organizations

Texas Health Harris Methodist Hospital Cleburne
Comanche Peak Nuclear Power Plant

SECTION 2: EXERCISE DESIGN SUMMARY

2.1 Exercise Purpose and Design

The DHS/FEMA Region 6 Office evaluated the virtual drill on December 8, 2021 to assess the capabilities of local emergency preparedness organizations in implementing their Radiological Emergency Response Plans and procedures to protect the public health and safety during a radiological emergency involving Comanche Peak Nuclear Power Plant (CPNPP). The purpose of this report is to present the results and findings on the performance of the offsite response organizations during a simulated radiological emergency.

2.2 Exercise Objectives, Capabilities and Activities

Exercise objectives and identified Capabilities/REP Criteria selected to be exercised are discussed in the Exercise Plan (EXPLAN) Appendix C.

2.3 Scenario Summary

The medical drill scenario was developed to evaluate the response of drill participants to an incident at Comanche Peak Nuclear Power Plant requiring the transportation, treatment, and decontamination of a radiologically contaminated injured individual. The drill scenario provided for the evaluation of the Somervell County Fire Department Emergency Medical Services and Texas Health Harris Methodist Hospital Cleburne.

SECTION 3: ANALYSIS OF CAPABILITIES

3.1 Exercise Evaluation and Results

Contained in this section are the results and findings of the evaluation for all jurisdictions and functional entities that participated in the December 8, 2021 drill to test the offsite emergency response capabilities of local governments in the 10-mile Emergency Planning Zone (EPZ) surrounding Comanche Peak Nuclear Power Plant.

Each jurisdiction and functional entity was evaluated on its demonstration of criteria contained in the exercise evaluation areas as outlined in the FEMA Radiological Emergency Preparedness Program Manual (January 2016). Detailed information on the drill evaluation area criteria and the Extent of Play Agreement used in this Virtual Drill are found in Appendix C of this report.

3.2 Summary Results of Exercise Evaluation

The matrix presented in Table 3.2a, on the following page, presents the status of all exercise evaluation area criteria from the REP Program Manual (2016) that were scheduled for demonstration during this drill by all participating jurisdictions and functional entities. Exercise evaluation area criteria are listed by number and the demonstration status are indicated by the use of the following letters:

M - Met (No Level 1 or unresolved Level 2 findings from prior exercises)

L1 – Level 1 Finding

L2 – Level 2 Finding

P - Plan Issue

N - Not Demonstrated

Tables 3.2 - Summary of Exercise Evaluation

Table 3.2a – Exercise Evaluation – Criteria Met

Date: 12/8/2021 Site: Comanche Peak Nuclear Power Plant		
Location Abbreviation	Criteria Title	Criteria
SCFD EMS	Contaminated Injured Transport & Care	6d1
SCFD EMS	EW Exposure Control Implementation	3a1
SCFD EMS	Equipment and Supplies	1e1
TX Health	Contaminated Injured Transport & Care	6d1
TX Health	EW Exposure Control Implementation	3a1
TX Health	Equipment and Supplies	1e1

3.3 Criteria Evaluation Summaries

3.3.1 Private Jurisdictions

3.3.1.1 Somervell County Fire Department Emergency Medical Services

Criterion: 1e1

3.3.1.2 Somervell County Fire Department Emergency Medical Services

Criterion: 3a1

3.3.1.3 Somervell County Fire Department Emergency Medical Services

Criterion: 6d1

In summary, the status of DHS/FEMA criteria for the Risk Jurisdiction is as follows:

a. MET: 1.e.1, 3.a.1, 6.d.1.
b. LEVEL 1 FINDING: None
c. LEVEL 2 FINDING: None
d. PLAN ISSUES: None
e. NOT DEMONSTRATED: None
f. PRIOR ISSUES - RESOLVED: None
g. PRIOR ISSUES - UNRESOLVED: None

3.3.2.1 Texas Health Harris Methodist Hospital Cleburne

Criterion: 1e1

3.3.2.2 Texas Health Harris Methodist Hospital Cleburne

Criterion: 3a1

3.3.2.3 Texas Health Harris Methodist Hospital Cleburne

Criterion: 6d1

In summary, the status of DHS/FEMA criteria for the Texas Health Harris Methodist Hospital Cleburne is as follows:

a. MET: 1.e.1, 3.a.1, 6.d.1.
b. LEVEL 1 FINDING: None
c. LEVEL 2 FINDING: None
d. PLAN ISSUES: None
e. NOT DEMONSTRATED: None
f. PRIOR ISSUES - RESOLVED: None
g. PRIOR ISSUES - UNRESOLVED: None

SECTION 4: CONCLUSION

Based on the results of the drill, the offsite radiological emergency response plans and preparedness for the State of Texas and the affected local jurisdictions are deemed adequate to provide reasonable assurance that appropriate measures can be taken to protect the health and safety of the public in the event of a radiological emergency. Therefore, 44 CFR Part 350 approval of the offsite radiological emergency response plans and preparedness for the State of Texas site-specific to Comanche Peak Nuclear Power Plant will remain in effect.

APPENDIX A: EVALUATION TEAM

DATE: 12/8/2021, SITE: Comanche Peak Nuclear Power Plant

LOCATION	EVALUATOR	AGENCY
Somervell County Fire Department Emergency Medical Service	Brian Ellis	FEMA R6
Texas Health Harris Methodist Hospital Cleburne	Elsa Lopez*	FEMA R6
Texas Health Harris Methodist Hospital Cleburne	Sam Williams	FEMA R6

*Team Leader

APPENDIX B: ACRONYMNS AND ABBREVIATIONS

Acronym	Description
BZ	Buffer Zone
CN	Charge Nurse
CPM	Counts Per Minute
CPNPP	Comanche Peak Nuclear Power Plant
DHS/FEMA	Department of Homeland Security/Federal Emergency Management Agency
DSHS	Texas Department of State Health Services
EMS	Emergency Medical Services
EPD	Electronic Personal Dosimeter
ER	Emergency
EW	Emergency Worker
KI	Potassium Iodide
PPE	Personal Protective Equipment
RAD	Radiological
REA	Radiological Emergency Area
REP	Radiological Emergeny Preparedness
RN	REA Nurse
RPT	Radiation Protection Technician
RT	Radiology Technician
THC	Texas Health Harris Methodist Hospital, Cleburne
TLD	Thermoluminescent Permanent Record Dosimeter
SCFD	Somervell County Fire Department

APPENDIX C: EXERCISE PLAN

TEXAS HEALTH HARRIS METHODIST HOSPTIAL – CLEBURNE MS-1 HOSPITAL
December 8, 2021

1.0 Introduction

This drill will verify that the Texas Health Harris Methodist Hospital Cleburne Radiological Emergency Area (REA) and personnel assigned to care for contaminated injured patients can meet FEMA MS-1 drill requirements. The drill will also verify that the Somervell County EMS Ambulance personnel can interface with the MS-1 hospital.

2.0 FEMA Evaluation Criteria

1.e.1: Equipment, maps, displays, dosimetry, potassium iodide (KI) and other supplies are sufficient to support emergency operations. (NUREG-0654, H., J.10.a.b.e.f.j.k., 11, K.3.a.)

3.a.1: The offsite response organizations (OROs) issue appropriate dosimetry and procedures and manage radiological exposure to emergency workers in accordance with the plans and procedures. Emergency workers periodically and at the end of each mission read their dosimeters and record the readings on the appropriate exposure record or chart. (NUREG-0654, K.3.)

6.d.1: The facility/ORO has the appropriate space, adequate resources, and trained personnel to provide transport, monitoring, decontamination, and medical services to contaminated injured individuals. (NUREG-0654, F.2, H.10., K.5.a.b., L.1., 4.)

3.0 Guidelines

The following guidelines have been developed to instruct drill participants of the extent of play required to fulfill the drill evaluation criteria.

1. Drill lead controller is responsible for conducting the drill per the drill package.

2. Controllers will be assigned as needed to ensure the completion of drill objectives.

3. This is a FEMA evaluated drill. Therefore, prompting/coaching is not permitted.

4. On-the-spot corrections are allowed in accordance with the REP Program Manual.

5. The controllers should allow free-play. However, free-play will be stopped under the following conditions:

   a. if the action taken would prevent a drill evaluation criterion from being met or is outside the scope of the drill.

   b. if the actions are judged to be unsafe or leading to violations of the law.

   c. if the actions would degrade systems or equipment or degrade response to a real emergency.

6. If an actual emergency occurs, the drill will be terminated.

7. All radio and telephone communications will begin and end with **THIS IS A DRILL.**

8. All signs and postings at the hospital should be marked either **FOR TRAINING USE ONLY** or **DRILL IN PROGRESS.**

4.0 Extent of Play

The individual will suffer a deep laceration on left hand/forearm with multiple bruises as a result of the automobile accident. Because of the proximity of the accident to the plant, the Control Room notifies the EOF Manager who asks a Comanche Peak RP Tech to respond to the event and monitor the patient and accompany to the hospital. Texas Health Cleburne personnel take monitoring control of the patient at the hospital and relieve Comanche Peak RP Tech. Cleburne Fire Department RP will be available for any additional ER monitoring that may be required.

These guidelines define the extent of play required to meet an objective and identify planned simulations.

Criterion 1.e.1: Equipment, maps, displays, dosimetry, potassium iodide (KI) and other supplies are sufficient to support emergency operations. (NUREG-0654, H., J.10.a.b.e.f. j.k., 11, K.3.a.)

See Attachment 1.

Criterion 3.a.1: The OROs issue appropriate dosimetry and procedures and manage radiological exposure to emergency workers in accordance with the plans and procedures. Emergency workers periodically (approximately every 30 minutes) and at the end of each mission read their dosimeters and record the readings on the appropriate exposure record or chart. (NUREG-0654, K.3.)

See Attachment 1.

Criterion 6.d.1: The facility/ORO has the appropriate space, adequate resources, and trained personnel to provide transport, monitoring, decontamination, and medical services to contaminated injured individuals. (NUREG-0654, F.2, H.10., K.5.a.b., L.1., 4.)

All decontamination will be demonstrated to the extent necessary to satisfy evaluator concerns. All medical procedures will be simulated except for decontamination of wounds and or abrasions. The Controller will use the decontamination chart and written guidance to guide the decontamination processes.

All injury and contamination levels will be via controller verbal inject from the "Injury Map for Medical Controllers" (Attachment 4a – Anatomical Charts). **Free play of this activity <u>is not</u> permitted.**

5.0 Participants

This drill will require the participation of the following agencies:

Texas Health Cleburne Emergency Room Staff and;
Support Staff as needed
Somervell County EMS Ambulance Personnel
Texas Department of State Health Services – Radiation Control Program (DSHS-RCP), Medical Facility Liaison

6.0 Controller and Role Players

A minimum of three (3) controllers will be required for this drill.

One (1) role player victim (dummy/manikin) will be required for this drill

7.0 Initial Conditions

A radiological release had occurred at the Comanche Peak Nuclear Power Plant and has since been terminated. The State of Texas Emergency Operation Center, Johnson and Somervell County Emergency Operation Centers and the DSHS Field Team are simulated operational in response to the event.

8.0 Narrative Summary

The Comanche Peak Control Room received notification of a single vehicle automobile accident (car vs. barricade; windows shattered) on the access road. The individual told responders that he lives in an evacuated sector.

Somervell County EMS will be notified by Comanche Peak that an automobile accident has occurred on the access road near the plant. The patient is believed to be contaminated. The patient will be transported to Texas Health Hospital in Cleburne.

9.0 Timeline

0730 Drill begins [Message Number 1].

0740 Patient data is transmitted to Texas Health Cleburne from the Ambulance en-route [Message Number 2].

0800 Ambulance arrives at Texas Health Cleburne.

1100 Drill terminates

1115 Critique

1145 Activities Concluded

10.0 Facility Addresses/Locations:

Texas Health Harris Methodist Hospital Cleburne
201 Walls Dr.
Cleburne, TX 76033

MEDICAL INFORMATION FOR CONTROLLERS

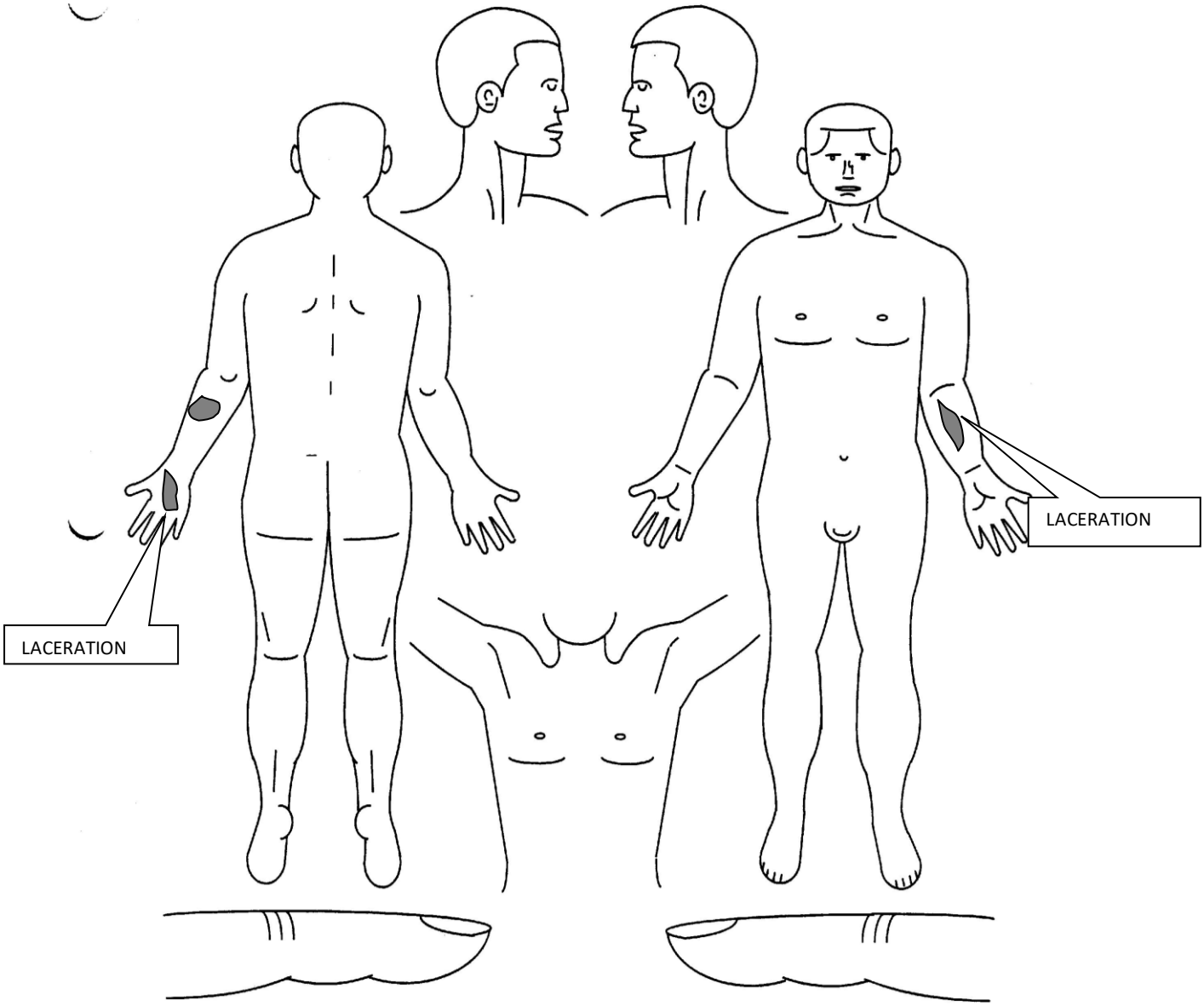
	INITIAL	ENROUTE	HOSPITAL
Contamination (clothing)	8000 cpm	8000 cpm	8000 cpm
Contamination (laceration on forearm)	4000 cpm	4000 cpm	4000 cpm
Blood Pressure	120/60	100/60	115/70
Respiration	30	20 – bilateral clear sounds	15 and shallow
Pulse	130	110	80
Breathing	Normal	Normal	Normal
Skin Condition	Warm and dry	Warm and dry	Warm and dry
Blood Glucose Level	110	110	110
Consciousness	Disoriented, but responsive	Disoriented, but responsive	Oriented and responsive
Pupils	3 mm, equal and responsive	3 mm, equal and responsive	3 mm, equal and responsive
Significant injury	Laceration on left forearm/left hand with bleeding.	Laceration on left forearm/left hand with bleeding.	Laceration on left forearm/left hand with bleeding.

INJURY MAP FOR MEDICAL CONTROLLERS

ATTACHMENT 4a - ANATOMICAL CHART

PATIENT'S NAME: _____ SURVEY DATE/TIME: _____

Directions: Record indicated levels of contamination in counts per minute (CPM) on the patient map.



TYPE OF INSTRUMENT USED: _____
(MODEL AND NUMBER)

DISTANCE SKIN TO PROBE: _____ INCHES

Revision
06/07/2000

CONTAMINATION MAP FOR RADIOLOGICAL CONTROLLER

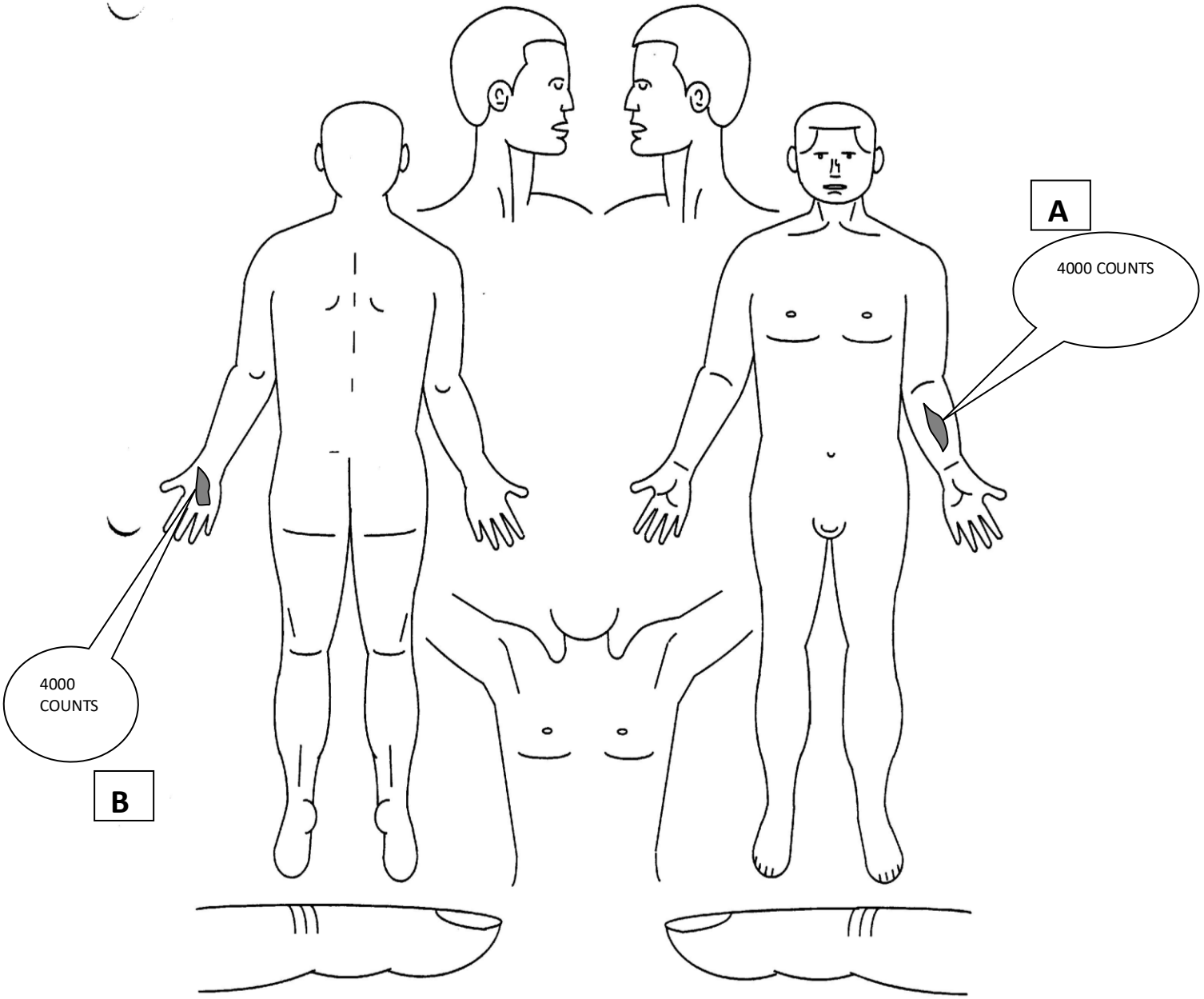
(ALL READINGS ARE ABOVE BACKGROUND)

INJURED AREA

ATTACHMENT 4a - ANATOMICAL CHART

PATIENT'S NAME: _____ SURVEY DATE/TIME: _____

Directions: Record indicated levels of contamination in counts per minute (CPM) on the patient map.



TYPE OF INSTRUMENT USED: _____
(MODEL AND NUMBER)

DISTANCE SKIN TO PROBE: _____ INCHES

Revision
06/07/2000

CONTAMINATION MAP ADDITIONAL INFORMATION FOR RADIOLOGICAL CONTROLLER
(Page Two – MS-1 Drill)

INSTRUCTIONS FOR PROVIDING DECONTAMINATION LEVELS
(Letters below correspond to Anatomical Chart on preceding page)

PATIENT RADIOLOGICAL CONDITION DURING TREATMENT	
Location of contamination:	**Contamination levels:**
All outside clothing	8000 cpm
Location A	4000 cpm
Location B	4000 cpm
Location of contamination:	**Contamination levels: After 1st Decon:**
All outside clothing if wiped down	8000 cpm
Under garments/skin if outer clothing removed	No Detectable Activity
Location A	1200 cpm
Location B	1000 cpm
Location of contamination:	**Contamination levels: After 2nd Decon:**
All outside clothing if wiped down	800 cpm
Under garments/skin if outer clothing removed	No Detectable Activity
Location A	370 cpm
Location B	300 cpm
Location of contamination:	**Contamination levels: After 3RD Decon:**
All areas (Note: outer clothing must be removed to achieve No Detectable Activity)	200 cpm

MS-1 Hospital Drill

MESSAGE 1

TIME: 0730

FROM: Medic 1

TO: Texas Health Cleburne ER (phone # TBD)

TEXT:

THIS IS A DRILL!

A CONTAMINATED INJURED PATIENT IS BEING TRANSPORTED TO YOUR FACILITY BY SOMERVELL COUNTY EMS AMBULANCE.

THE PATIENT IS ASSUMED TO BE RADIOLOGICALLY CONTAMINATED. PLEASE ACTIVATE YOUR RADIATION EMERGENCY AREA FOR RECEIPT OF THE PATIENT.

MY CALL BACK NUMBER IS _____.

THE AMBULANCE WILL CONTACT YOUR FACILITY WHEN EN-ROUTE.
PLEASE GIVE ME YOUR NAME FOR THE LOG.

THANK YOU.

THIS IS A DRILL.

MS-1 Hospital Drill
December 8, 2021

MESSAGE 2

TIME: 0740

FROM: Medic 1

TO: Texas Health Cleburne ER (Phone TBD)

TEXT:

THIS IS A DRILL!

THIS IS SOMERVELL COUNTY EMS EN-ROUTE TO YOUR FACILITY WITH A MALE PATIENT APPROXIMATELY 30 YEARS OF AGE WHO WAS INVOLVED IN A TRAFFIC ACCIDENT, WHILE EVACUATING FROM SOMERVELL COUNTY.

PATIENT VITAL SIGNS ARE AS FOLLOWS:

Vital Sign	**ENROUTE DATA**
Blood Pressure	**100/60**
Respiration	**20 – bilateral clear sounds**
Pulse	**110**
Consciousness	**Disoriented, but responsive**

OUR ETA IS 20 MINUTES.

THIS IS A DRILL!

Attachment 1

EVALUATION AREA 1 - EMERGENCY OPERATIONS MANAGEMENT

Criterion 1.e.1: Equipment, maps, displays, dosimetry, potassium iodide (KI) and other supplies are sufficient to support emergency operations.

Organization	Evaluation Criteria	Method/ Comments
Somervell County EMS	Quantities of dosimetry, KI availability and storage location was confirmed through documentation of current inventory submitted following the drill.	Describe/Discuss
	Medical equipment available to treat the patient can be provided during interview with the paramedic.	Describe/Discuss
	Dosimetry/TLD, survey meter calibration dates, and KI information were provided through documentation submitted following the drill.	Inventories and pictures will be provided in submission after drill.
	Call-out, Dosimetry, Exposure tracking/reporting, and EMS Inventory List documents, etc. provided as back-up documentation.	Inventories and pictures will be provided in submission after drill.
	Inventory, range or reading stickers, operational checks, and inspection of instruments.	Inventories and pictures will be provided in submission after drill.
Texas Health - Cleburne	Available equipment as per plans/procedures dosimetry, survey meters, PPE, signage, and medical treatment equipment available.	Demonstrate
	Instruments will be inspected, inventoried, and operationally checked before use.	Demonstrate
	Do the instruments used to measure activity have a range of readings stickers affixed?	Describe/Discuss

	Do the instruments used have calibration stickers?	Pictures will be provided in submission after drill.
	Medical equipment used/available may be obtained via interview and pictures or lists for back-up if available.	Describe/Discuss

Somervell County EMS and Texas Health – Cleburne staff will not be issued KI.

EVALUATION AREA 3 - PROTECTIVE ACTION IMPLEMENTATION

Criterion 3.a.1: The OROs issue appropriate dosimetry and procedures and manage radiological exposure to emergency workers in accordance with the plan and procedures. Emergency workers periodically and at the end of each mission read their dosimeters and record the readings on the appropriate exposure record or chart.

Organization	Evaluation Criteria	Method/ Comments
Somervell County EMS	EWs basic knowledge of radiation exposure limits and who would authorize exceeding the limits as specified in the OROs plans or procedures.	Describe/Discuss
	EWs describe where/who would issue dosimetry, instructional documents, and record keeping forms.	Demonstrate: EMS will fill out paperwork in their kits and we will send to FEMA for documentation after drill.
	EWs had basic knowledge of dosimetry, procedures, reading/reporting requirements, and where to turn in equipment at the end of event (drill).	Describe/Discuss
	EWs basic knowledge of KI use, where it would be issued, and who would authorize ingestion.	Describe/Discuss
	Donning and use of dosimetry	Demonstrate: EMS personnel will don dosimeter.
	Use of dosimetry and survey meters to include operational checks.	Demonstrate: EMS/RP Tech will demonstrate use of survey meter and dosimetry. Discuss how to clear the ambulance to put back in service.
Texas Health - Cleburne	Staff has basic knowledge (interview) of radiation exposure limits, turn back values, and who would authorize exceeding the limits as specified in the plans or procedures	Describe/Discuss
	Staff has basic knowledge and demonstrate the use of dosimetry, procedures, reading/reporting requirements, and where to turn in equipment at the end of event (drill).	Describe/Discuss
	Who issues (demonstrate) dosimetry, instructional	Demonstrate: Buffer zone nurse will fill out paperwork and will be sent to

	documents, and record keeping forms and track readings during the drill.	FEMA for documentation after drill.
	Donning and doffing of PPE, use of dosimetry, and survey meters.	Demonstrate: One member of THC ER Staff will don PPE and a member of the hospital staff will demonstrate use of survey meter.

Additional Information:

The use of dosimetry and KI will be **explain/describe** by the ambulance crew. For the purpose of this drill, **Somervell County EMS will explain/describe** dosimetry and KI. Ingestion of KI and issuing dosimetry will not occur.

Movement of samples, equipment, and materials moving into and out of the treatment room will be **explained/described** to ensure cross contamination of clean areas does not occur. **Explain/Describe** how all items leaving the radiologically controlled area must be clearly identified according to procedures.

EVALUATION AREA 6.d – TRANSPORTATION AND TREATMENT OF CONTAMINATED INJURED INDIVIDUALS

Criterion 6.d.1: The facility/ORO has the appropriate space, adequate resources, and trained personnel to provide transport, monitoring, decontamination, and medical services to contaminated injured individuals.

Organization	Evaluation Criteria	Method/ Comments
Somervell County EMS	Communications used between the ambulance and medical facility were described.	Describe/Discuss
	Contamination control procedures were described.	Describe/Discuss
	The ambulance crew were aware of procedures and locations for equipment, personnel monitoring and decontamination.	Describe/Discuss
	The ambulance crew indicated that medical care took priority over monitoring or decontamination control efforts.	Describe/Discuss
	Communication with medical facility, patient care and transfer to hospital for treatment.	Describe/Discuss
	Demonstration of cross contamination control procedures.	Demonstrate: EMS staff will change gloves and control contamination. They will also discuss procedures that are not feasible to demonstrate, such as wrapping patient in sheets.
Texas Health - Cleburne	Describe/interview action levels used to ID need for decontamination.	Describe/Discuss
	What is procedure for notifying the hospital?	Describe/Discuss
	Describe (interview) set-up of REA & ambulance bay.	Describe/Discuss
	Describe contamination control practices (floor covering, anti-cs, ventilation controls, etc.)	Describe/Discuss
	Demonstrate use if survey meters (i.e., response source	Demonstrate: THC will demonstrate proper

	check, survey technique, proper scale).	survey techniques on simulated patient and use of equipment.
	Describe (interview) what takes precedence (medical treatment, monitoring, decontamination, etc.).	Describe/Discuss
	Describe/demonstrate decontamination procedures for patient and if possible one glove change.	Demonstrate: THC will simulate decontamination of patient wounds and discuss process as they are performing.
	Describe/demonstrate progressive decontamination methods. If unable to remove decontamination, what is the procedure? Also, describe methods used to collect & analyze samples (for bioassay).	Demonstrate: THC will simulate decontamination of patient wounds and discuss process as they are performing.
	Demonstrate survey technique with patient.	Demonstrate: THC will demonstrate proper survey techniques on simulated patient.
	Demonstrate use of recording treatment/decontamination of patient for back-up documentation.	Demonstrate: Buffer zone nurse will fill out paperwork and will be sent to FEMA for documentation after drill.
	Demonstrate exit procedures for REA staff (one individual).	Demonstrate: The one ER Nurse who will don PPE will demonstrate doffing PPE and exiting a simulated REA.

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