GUIDANCE FOR THE ADMINISTRATION OF POTASSIUM IODIDE (KI) FOR EMERGENCY WORKERS, INSTITUTIONALIZED PERSONS AND THE GENERAL PUBLIC

DURING AN ATMOSPHERIC RELEASE OF RADIOACTIVE IODINE FROM A NUCLEAR POWER PLANT (NPP)

- 1. EMERGENCY WORKERS (any person engaged in operations required to minimize the effects of a fixed nuclear facility emergency) The appropriate county or state agencies may authorize the administration of Potassium Iodide (KI) when any thyroid exposure (not a whole body exposure) is reasonably suspected, projected, or confirmed. There is no Protective Action Guide (PAG) dose number to be used as a trigger level.
- 2. INSTITUTIONALIZED PERSONS (within the 10-mile EPZ) The appropriate county or state agencies may authorize the administration of KI any time a thyroid exposure (not a whole body exposure) of 5 Rem or greater is reasonably suspected, projected, or confirmed to an institutionalized person. The PAG dose trigger level will be 5 Rem Committed Dose Equivalent (CDE) to the thyroid.
- 3. **GENERAL PUBLIC** (within the 10-mile EPZ) The appropriate county or state agencies may authorize the administration of KI any time a thyroid exposure (not a whole body exposure) of 5 Rem or greater is reasonably suspected, projected, or confirmed to the General Public. The PAG dose trigger level will be 5 Rem CDE to the thyroid.
- 4. AUTHORIZED AGENCIES OR DESIGNATED PERSONS WHO CAN RECOMMEND THE ADMINISTRATION OF KI TO EMERGENCY WORKERS, INSTITUTIONAL PERSONS AND THE GENERAL PUBLIC
 - a) The State Health Director, the Epidemiology Section Chief, the State Epidemiologist (or their designee) is empowered to advise and authorize the administration of KI to emergency workers, institutionalized persons and/or the general public in the affected areas.
 - b) If the State Health Director, the Epidemiology Section Chief, the State Epidemiologist (or their designee) cannot be contacted after a reasonable attempt, or if the emergency is such that time is of the essence to protect the public's health, the Local Health Director (or designee) of the affected county (ies) is empowered to advise and authorize the administration of KI to emergency workers, institutional persons and/or the general public.
 - c) If the State Health Director, the Epidemiology Section Chief, the State Epidemiologist (or their designee) or the Local Health Director (or their designee) cannot be contacted after a reasonable attempt during an emergency, the Director of the Radiation Protection Section (or designee) is empowered to make the decision.

5. PROTOCOL FOR NOTIFICATION OF THE APPROPRIATE AGENCIES WHEN A DECISION TO ADMINISTER KI IS MADE

a) If the State Health Director, the Epidemiology Section Chief, the State Epidemiologist (or their designee) makes the decision to advise and authorize the administration of KI to emergency workers, institutionalized persons and/or the general public, it is the responsibility of that person to contact the Local Health Director (or designee) of the affected county (ies). The purpose of the contact is to inform the Local Health Director (or designee) of the decision and why the decision was made. The contact should be verbal but any type of notification may be used that ensures the information is transmitted to the appropriate person. A follow-up contact by hard copy or electronic means is also recommended for documentation.

The State Emergency Management Director will designate a person(s) to contact each affected County Emergency Director (or designee) to inform that agency of the decision and why the decision was made. Again, the contact should be verbal but any type of notification may be used that ensures the information is transmitted to the appropriate person. A follow- up contact by hard copy or electronic means is also recommended for documentation

- b) If the Local Health Director (or designee) makes the decision to authorize the administration of KI to emergency workers, institutionalized persons and/or the general public, it is the responsibility of the Local Health Director (or designee) to contact the State Health Director, or the Epidemiology Section Chief, or the State Epidemiologist (or their designee) and the State Emergency Management Director (or designee) to inform them of the decision and why the decision was made. The contact should be verbal but any type of notification may be used that ensures the information is transmitted to the appropriate person. A follow up contact by hard copy or electronic means is recommended for documentation.
- c) If the Director of RPS (or designee) makes the decision to authorize the administration of KI to emergency workers, institutionalized persons and/or the general public, it will be the responsibility of that person to contact the State Emergency Management Director to inform (verbally) that agency of the decision and why the decision was made. The State Emergency Management Director will designate a person(s) to contact (verbally) each affected County Emergency Director (or designee) and inform that agency of the decision and why. A follow-up contact by hard copy or electronic means is also recommended for documentation. Each affected County Emergency Director (or designee) will inform their Local Health Director (or designee) of the decision and why.