**Reactor Pressure Vessel Closure** Head replacement of Belgian Tihange 3 and Doel 4 units -Follow-up and on-site dosimetry ISOE 2016 - June 2<sup>nd</sup> 2016





Public





Introduction

Preparatory works in the frame of Radiation Protection

On-site follow-up during execution phase

- Radiation protection issues
- On-site dosimetry results

Conclusion





### Introduction Justification and scope description

- RVCH replacement due to a risk of primary water stress corrosion cracking (PWSCC)
- In 2011, designation of Tractebel ENGIE by Engie Electrabel as owner's engineer for the replacement of Tihange 3 and Doel 4 RVCH
- Production and installation granted to AREVA NP, including:
  - New forged flange and hemispherical dome with 66 penetrations of the control rods
  - New Control Rod Drive Mechanisms (CRDM)
  - New thermal insulation
- Installation in 2 phases:
  - A partial assembly taking place in factory
  - A final assembly performed on-site after their transport









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Reactor Vessel Cover Head replacement of Belgian T3 and D4 units - Dosimetry follow-up

### Introduction to the replacement project ALARA objectives

- Objectives:
  - No work incidents
  - No nuclear incidents (no release of radioactive substances into the environment, no on-site cross contamination, no internal human contamination, etc.)
  - Minimal collective and individual doses according to the ALARA principle
- ALARA working group (Engie Electrabel, Tractebel ENGIE, and AREVA NP)
  - Before the execution phase: implementation of the ALARA principle and estimation of the collective doses
  - During the execution phase: dosimetric follow-up and control of the radiological conditions (radiation and contamination levels) in the vicinity of the replacement site



## **Preparatory works in the frame of Radiation Protection**



### **Preparatory works in the frame of radiation protection** General

- Prior to the execution phase, an ALARA study and collective dose estimation were performed separately for each unit
- Collective dose estimation based on:
  - The REX of previous replacement projects performed by the contractor
  - The REX of Tihange 3 RVCH replacement project for Doel 4
  - Dose rate measurements during previous outages
  - Definition of specific tasks, related work stations and dosimetric phases for each replacement project
  - Definition of dose reduction factors (DRF) based on the REX of the Doel and Tihange NPPs

### **Preparatory works in the frame of radiation protection** Dose rate estimate (1)

Measurements performed during previous outages





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### **Preparatory works in the frame of radiation protection** Dose rate estimate (2)



- Decrease of the total collective dose for the Doel 4 project:
  - Reduction of 22% of the estimated man-hours resulting from the REX of the Tihange replacement project
  - The lower dose rates around the old Doel 4 RVCH
  - The serial approach which induces a significantly lower collective dose during the assembly of the new RVCH
- Faster increase of collective dose during the first 11 days of the Doel 4 project:
  - More tasks in the preparatory phase (day 1 to 3)
  - Dismantling of the CRDMs (starting from day 9) performed close to high radiation zones

### **Preparatory works in the frame of radiation protection** Optimization of the collective dose

For both NPPs, different actions were taken to reduce the collective dose in the framework of ALARA:

- The reactor pool was kept filled during the works
- Cartographies were present to illustrate the high and low dose rate areas
- Additional shielding was foreseen in case hot spots were detected
- Clear indications at high dose rate areas











### **On-site follow-up** The challenge

- A large number of tasks and workers together in small work areas
- A variable dose rate around the old RVCH due to the removal of layers
- High dose rates close to the RVCH
- A high risk of contamination spread during some dismantling tasks
- Heavy equipment requiring precision works

### **On-site follow-up** The Tihange 3 RVCH project - Issues

- Higher dose rates than expected at one side of the old RVCH
- Presence of contamination on the EMAs and ventilation envelope
- Manual dismantling of 9 blocked EMAs close to the old RVCH
- Problems during cutting of 2 CRDMs, requiring manual intervention
- Too high dose rates around the container used for the old RVCH transport



### **On-site follow-up**

#### The Tihange 3 RVCH project – Collective dose follow-up

• Consequences of blocked EMAs:

- Delay of the project
- Additional collective dose due to operations close to the old RVCH (estimated collective dose = 9 man.mSv)
- Update of the estimated collective dose to include delay during the project (green curve)
- Estimated collective dose = 103.7 man.mSv
- Collective dose after replacement = 76.3 man.mSv
  decrease of 26% mainly due to:
  - A reduced number of man-hours
  - Lower dose rates than expected around the CRDMs



Installation of extra shielding in the SGR building

### **On-site follow-up** The Doel 4 RVCH project - Issues

- Lower measured dose rate levels (about 30% lower compared to the Tihange project)
- Less problems with blocked EMAs
- No problems during the CRDM cutting
- High contamination of the reactor vessel dome during the cutting of the CRDM adapters:
  - Clothes contaminations were detected for several workers leaving the controlled area
  - A decontamination of the RVCH was performed
  - All cut adapters were covered with plastic bags
- Shielding of the vessel head with lead after dismantling



### **On-site follow-up** The Doel 4 RVCH project – Collective dose follow-up

- Update of the estimated collective dose to include one week delay due to an issue with a bimetallic weld at the new vessel head (green curve)
- Unblocking activities of some EMAs during the first days of the delayed week → weak increase in collective dose
- Larger increase in collective dose during the cutting of the CRDM adapters
- Estimated collective dose = 73.9 man.mSv
- Collective dose after replacement = 52.0 man.mSv
  → decrease of 30%



### **On-site follow-up** Summary

	Tihange 3	Doel 4
Duration of the project [days]	43 (+ 72%)	30 (+7%)
Internal contamination incidents	0	0
Important external contamination	1	1
Dosimetry alarms	3	3
Total collective dose [man-mSv]	76.3 (-26%)	52.0 (-30%)
Max. daily collective dose [man-mSv]	9.7	9.5
Average daily collective dose [man-mSv]	1.8	1.5
Maximum cumulative individual dose [mSv]	-	2.15
Average cumulative individual dose [mSv]	-	0.2

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### **On-site follow-up** International comparison

- The Tihange 3 and Doel 4 RVCH replacement projects resulted in a lesser collective dose compared to the Tihange 1 RVCH replacement in 1999
- The collective doses of the Tihange 3 and Doel 4 projects are in line with international REX







### **Conclusion** Doel 4 and Tihange 3 RVCH replacement projects

- ALARA objectives were reached, collective doses after replacement are:
  - 76.3 man.mSv for Tihange 3
  - 52.0 man.mSv for Doel 4
- The Doel 4 project ended with 32% less collective dose compared to the Tihange 3 project:
  - Difference in approach
  - Lower dose rates
  - REX of the Tihange 3 project has been used
- Doel 4 and Tihange 3 projects are not easy to compare (different approaches, different issues, etc..)
  - Blocked EMAs and problems with CRDMs cutting in Tihange 3
  - Contamination of the vessel dome after cutting of the CRDM adapters in Doel 4

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