



FACT SHEET

The Terrorism Injuries Information, Dissemination and Exchange Project (TIIDE)

Background

The Terrorism Injuries Information, Dissemination and Exchange (TIIDE) Project was established through a cooperative agreement in response to the urgent, ongoing need to develop, disseminate and exchange information about injuries from terrorism. Explosives are the weapon of choice for most terrorists, and terrorist bombings averaged two per day worldwide in 2005. According to the 2006 Institute of Medicine Report, *The Future of Emergency Care in the United States Health System: Emergency Medical Services at the Crossroads*, explosions are the most common cause of injuries associated with terrorism.

Blast injuries(<http://www.bt.cdc.gov/masscasualties/explosions.asp>) present unique triage, diagnostic, and management challenges as a consequence of the blast wave from high explosive detonations upon the body. Only a few civilian health care providers in the United States have experience treating patients with these injuries.

Traditionally, in many states and communities, acute care, emergency medical, and public health systems are poorly integrated, with separate infrastructures functioning independently of one another. Relationships among these organizations must be forged and strengthened to improve public health and safety, clinical management and healthcare system preparedness. TIIDE supports the collaboration of national organizations of professionals in acute medical care, trauma and emergency medical services (EMS) with state and local public health programs and CDC to efficiently and effectively respond to mass casualty events resulting from terrorism. Recent terrorist events worldwide indicate the real and urgent need to move toward an emergency health system that is truly interoperable and integrated.

About the Project

The TIIDE Project is constructed around three, interrelated areas that work to minimize the health consequences of terrorism and other public health emergencies:

1. **Lessons Learned from Terrorist Events** - Certain problematic themes are recurrent in mass casualty responses, such as controlled dispatch, bystander and mutual aid response, and communications. To explore these themes, CDC and TIIDE partners convened meetings in 2005 and 2006 so that individuals and organizations with experience managing responses to international terrorist explosions could share their insight with U.S. acute care and public health organizations. Recent terrorist bombings such as those in Israel, London, and Mumbai may offer new information and provide insight into local, state, regional, and national responses to a terrorist event and the mitigation of recurrent problems. These experiences will be analyzed to improve the response to such an event in the United States.
2. **Partnerships** - Partners enhance CDC's ability to coordinate with the emergency care community and to ensure that critical information is accessible to a broad spectrum of health care providers and organizations. Partnerships also provide an avenue and platform for disseminating the information gained through Lessons Learned from Terrorist Events
3. **Dissemination** - Through Lessons Learned from Terrorist Events, CDC will determine the most appropriate method for disseminating and exchanging information before, during and after a terrorist

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bombing. TIIDE will also promote the use of the appropriate methods of communication - whether by electronic mail, fax machine, telephone or other methods - to convey information to the emergency care community and to public health partners on issues related to injuries from terrorism.

Activities

TIIDE-funded partners participate in many CDC activities that address acute care and the health consequences of terrorism-related events. Two of them are featured below. Other activities include developing a field triage protocol for mass casualty events; developing clinical primers and blast injury trainings for health care professionals; and translating injury care from the military to the civilian sector.

Blast Injury Information Dissemination – CDC developed three fact sheets on blast injury diagnoses and management: Blast Lung Injury: An Overview for Prehospital Care Providers (http://www.bt.cdc.gov/masscasualties/blastlunginjury_prehospital.asp), Blast Lung Injury: What Clinicians Need to Know (<http://www.bt.cdc.gov/masscasualties/blastlunginjury.asp>) and Blast Injuries: Essential Facts (<http://www.bt.cdc.gov/masscasualties/blastessentials.asp>). The response has been positive, particularly in the aftermath of recent international terrorist bombings. The fact sheets were translated and disseminated worldwide via the Web and print publications. To continue and expand the dissemination of information, TIIDE has been working with experts to develop fact sheets on other types of blast injuries, such as traumatic brain injury, tympanic membrane rupture and amputations. These fact sheets will be developed for health care audiences such as EMS providers and a variety of prehospital care professionals, in-hospital clinicians and state and local trauma system coordinators.

- **The Model Communities Initiative** (<http://www.bt.cdc.gov/masscasualties/modelcommunities.asp>) – Seven communities from across the nation were selected as best practice models for emergency EMS and public health interoperation. Each TIIDE partner sponsored travel expenses for a Model Community representative to attend a conference in Atlanta so that they could share their experiences.

Click on a link below to learn more about that community's EMS-public health relationship

- Boston, Massachusetts (<http://www.bostonmms.org/>)
- Eau Claire County, Wisconsin (<http://www.eauclairewi.gov/home.php>)
- Erie County, New York (<http://www.wnysmart.org/>)
- Livingston County, New York (<http://www.co.livingston.state.ny.us/ems.htm>)
- Louisville, Kentucky (<http://www.louisvilleky.gov/EMS/>)
- Monroe County, New York (<http://www.monroecounty.gov/safety-ems.php>)
- Southern Nevada Health District, Nevada (<http://www.cchd.org/>)

Learn how your community can become a Model Community
(<http://www.bt.cdc.gov/masscasualties/pdf/bestpractices.pdf>)

TIIDE Partners

Partners are national, nonprofit or for profit professional organizations with at least 25 members, that address acute care, trauma, or EMS. The partnership establishes a foundation for effective collaboration and for the exchange of information with the larger community of stakeholders. Current TIIDE partners are listed below.

American College of Emergency Physicians (ACEP) (<http://www.acep.org/webportal/>)
American College of Surgeons (ACS) (<http://www.acep.org/webportal/>)

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American Medical Association (AMA) (<http://www.ama-assn.org/>)
American Trauma Society (ATS) (<http://www.ama-assn.org/>)
National Association of Emergency Medical Service Physicians (NAEMSP) (<http://www.naemsp.org/>)
National Association of Emergency Medical Technicians (NAEMT) (<http://www.naemt.com/>)
National Association of State Emergency Medical Service Officials (NASEMSO) (<http://www.nasemso.org/>)
National Native American Emergency Medical Services Association (NNAEMSA)
(<http://www.heds.org/nnaemsa.htm>)
State and Territorial Injury Prevention Directors Association (STIPDA) (<http://www.stipda.org/index.cfm>)

For more information, visit www.bt.cdc.gov/masscasualties,
or call CDC at 800-CDC-INFO (English and Spanish) or 888-232-6348 (TTY).