



Emergency Management and Response Information Sharing and Analysis Center

CIP BULLETIN 4-09

April 30, 2009

NOTE: CIP Bulletins will be distributed as necessary to provide members of the Emergency Services Sector with timely, important, unclassified information potentially affecting the protection of their critical infrastructures. They are prepared by the Emergency Management and Response- Information Sharing and Analysis Center (EMR-ISAC) at (301) 447-1325 or by e-mail at emr-isac@dhs.gov.

Media Advisory

April 30, 2009

Contact: USFA Press Office, 301-447-1853

FOR IMMEDIATE RELEASE

Interim Guidance for Emergency Medical Services (EMS) Systems and 9-1-1 Public Safety Answering Points (PSAPs) for Management of Patients with Confirmed or Suspected Swine-Origin Influenza A (H1N1) Infection

Emmitsburg, MD- The NHTSA Office of EMS in collaboration with the DHS Office of Health Affairs, National EMS Managers Association, National Association of State EMS Officials, and other Federal partners, including the United States Fire Administration are pleased that the EMS and 9-1-1 Guidance is now posted at: http://www.cdc.gov/swineflu/guidance_ems.htm.

“The USFA has had the opportunity these past few days to work closely with the DHS Office of Health Affairs staff to ensure our nation’s firefighters and EMS personnel have the most current information regarding the H1N1 virus,” said Glenn A. Gaines, Acting Assistant Administrator of the USFA. “The days ahead may present additional challenges and the continued need for accurate and timely information. USFA will continue to work closely with our federal partners to ensure you have the right information at the right time to continue your response efforts in the cities and counties of this nation.”

Coordination among PSAPs, the EMS system, healthcare facilities (e.g. emergency departments), and the public health system is important for a coordinated response to swine-origin influenza A (H1N1). Each 9-1-1 and EMS system should seek the involvement of an EMS medical director to provide appropriate medical oversight. Given the uncertainty of the disease, its treatment, and its progression, the ongoing role of EMS medical directors is critically important. The guidance provided in this document is based on current knowledge of swine-origin influenza A (H1N1).

The U.S. Department of Transportation's *EMS Pandemic Influenza Guidelines for Statewide Adoption and Preparing for Pandemic Influenza: Recommendations for Protocol Development and 9-1-1 Personnel and Public Safety Answering Points (PSAPs)* are available online at www.ems.gov (Click on Pandemic News). State and local EMS agencies should review these documents for additional information. For instance, Guideline 6.1 addresses protection of the EMS and 9-1-1 workers and their families while Guideline 6.2 addresses vaccines and antiviral medications for EMS personnel. Also, EMS Agencies should work with their occupational health programs and/or local public health/public safety agencies to make sure that long term personal protective equipment (PPE) needs and antiviral medication needs are addressed.