



October 17, 2001

***Federal Occupational Health:
Responding to Inquiries Related to Emergency Planning and Bioterrorism***

In the wake of the recent terrorist attacks on America and the threat of further retaliation against military strikes abroad, FOH has received numerous requests for services to assist agencies in the planning and implementation of emergency responses in the event of biological or chemical attacks. This document has been developed in response to these inquiries and is directed to both FOH program staff and its customer agencies to outline current capabilities and limitations in providing these services and to provide resources for additional information.

Biological Threats

The biological agents most likely to be used in an effort to intentionally cause disease are smallpox, anthrax, botulinum toxin, plague, tularemia and various viral pathogens. Specific vaccines or antitoxins exist only for the first three. They are strictly controlled by the Centers for Disease Control (CDC) and the Department of Defense and are neither recommended nor available to the general public. The securely stored supplies of smallpox vaccine and botulinum toxin would be released by the CDC in the event of an outbreak. Further information on each of these diseases is available at http://www.bt.cdc.gov/DocumentsAPP/facts_about.pdf

In addition, antibiotics are available for effective treatment or prevention of anthrax, plague and tularemia after exposure. However, the CDC and other public health authorities are not recommending the stockpiling of medication in anticipation of an attack. As part of its National Pharmaceutical Stockpile Program (NPSP), the CDC has developed a cache of antibiotics, vaccines and other appropriate medical supplies, to be able to reach victims of an incident anywhere in the United States within 12 hours and have enough antibiotics for example, to prevent anthrax in 2 million people. More information on CDC's National Pharmaceutical Stockpile Program is available at http://www.bt.cdc.gov/DocumentsAPP/national_pharmaceutical_stockpile.pdf. Currently, no vaccines nor effective treatments are available for various viral pathogens such as ebola; only supportive measures are used to treat symptoms after they develop.

FOH medical consultants are available to provide further recommendations to assist agencies in developing appropriate service packages based on public health guidelines for law enforcement and other emergency personnel preparing for deployment to areas at high risk for exposure. For more information on clinical services, contact Lillian Koenig at lkoenig@psc.gov.

Chemical Threats

The list of possible agents used as chemical weapons is too long to enumerate here, but include mustard gases, phosgene and nerve gases. Specific treatments and antidotes such as atropine are available for some exposures, while only supportive measures can be provided for others. Emergency kits with appropriate treatments and antidotes are available and usually stocked by hospitals, ambulances and other emergency personnel. It is not recommended to routinely stock such supplies in agencies or FOH Health Centers as physicians or other medical personnel specifically trained in the diagnosis and treatment of such exposures must administer them. A detailed list of chemical agents is available at <http://www.bt.cdc.gov/Agent/Agentlist.asp>

Responsibilities of FOH Health Center Staff

FOH policies support and expect nursing staff in health centers to participate on workgroups or task forces as clinical consultants in the development of emergency response planning for agencies at their location. Essentially this means working cooperatively with building tenants to outline specific duties and responsibilities in the event of both man-made and natural disasters, including critical communication pathways, activation of the Emergency Medical System (EMS), fire and other rescuers, and the quick and safe evacuation of all building occupants. It is NOT expected however, that FOH or its nurse providers are responsible to be the primary source of triage or treatment. This is the responsibility of the local EMS and fires/rescue team, and our staff and sites are not equipped or trained to handle the complexity and volume of clinical syndromes expected to result from attacks. Obviously if the nurse is capable of assisting other rescue personnel in triage and treatment, they should do so, as would be expected of anyone with critical life-saving skills in a disaster. The decision whether or not to assist in a given situation would be left to an individual's discretion and be dependent on the circumstances, however it is important to understand that it is not seen by FOH or the tenant agency as his/her primary responsibility.

Future Training in Emergency Preparedness for FOH Staff

FOH recognizes that most health care personnel including physicians have had little or no training in disaster planning for biological or chemical attacks. In addition to this memorandum, FOH will update its entire staff, including health center personnel frequently via email, postings on its website and videotape training when available to ensure everyone has a basic understanding of signs, symptoms and first response to biological or chemical exposure.

Emergency/Disaster Planning

Agencies who are developing or updating existing emergency response procedures to include a detailed contingency plan to address a biological or chemical attack, may wish to contact FOH for assistance and direction. FOH has environmental and industrial hygiene specialists who are available to work with you on your specific issues through a convenient interagency agreement. One of the biggest concerns regarding capabilities to effectively deal with disasters or acts of terrorism is the potential lack of communication and coordination of efforts across federal, state and local entities. FOH consultants will work with you to assure that your plan is appropriately plugged in to the local EMS and other authorities to minimize duplication and maximize efficiency. For further information on disaster planning, contact Debra Flagg at dflagg@psc.gov.

Individuals who would like information on putting together emergency evacuation plans for their family and home can find tips and practical tools at <http://www.redcross.org/services/disaster/beprepared/>.

Personal Protective Equipment

Public health authorities are not recommending the purchase of gas masks or other personal protective equipment for the general public or for federal employees not involved in law enforcement/emergency response. However, agencies that are preparing to deploy employees to current or future sites with potential exposures may coordinate their personal protective equipment needs through FOH. Certified industrial hygienists can assess risks, recommend and purchase appropriate equipment, and coordinate the necessary fit testing under a single interagency agreement. For more information on our personal protective equipment program, contact Jay Terra at jterra@psc.gov.

EAP/Crisis Response Management

A critical piece of a comprehensive response to crisis is dealing with the psychological impact of the traumatic event. Our Employee Assistance Program has extensive experience in Critical Incident Stress Management (CISM) for federal agencies and was highly active in the Oklahoma City bombing as well as the New York WTC and Pentagon attacks. Debriefings and trainings are available for managers as well as front line employees. For more information on CISM and other Employee Assistance Program services, contact William Derr at wderr@psc.gov for services to the U.S. Postal Service and Doug Mahy at dmahy@psc.gov for any other Federal organizations.

Now more than ever, FOH is prepared to provide from design to delivery the consultation and services you need to protect the health and safety of your workforce and to refer you to additional resources when necessary. This document will be concurrently sent electronically to all FOH staff, mailed to all customers, and published on our website at www.foh.dhhs.gov. Please check the website often as we plan to update this information as often as necessary to keep you informed of rapidly changing developments.

Other Resources

The Centers for Disease Control and Prevention have assumed a national leadership role in the public health and medical communities for information on detection, diagnosis, treatment and prevention of illnesses that could occur as a result of bioterrorism. Detailed, accurate and up-to-date information can be found at their website at www.bt.cdc.gov and those with further questions regarding bioterrorism, including anthrax and smallpox can call 1-404-639-2807.

Military beneficiaries seeking the latest information on anthrax should be directed to www.anthrax.osd.mil and/or 1-877-GETVACC .

Additional information on preparedness for terrorist attacks and other disasters is available on the Federal Emergency Management Association website at www.fema.gov/pte/gaheop.htm.