

ALASKA BIOTERRORISM RESOURCE GUIDE

Alaska Department of Health & Social Services
Division of Public Health

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BIOTERRORISM RESOURCE GUIDE

Introduction

MONDAY, MARCH 19, 2002

Public Health officials have been notified that patients with flu-like symptoms are presenting at health care facilities from Homer to Anchorage and on up to Fairbanks. They are being seen in much greater numbers than experienced during past influenza outbreaks, and it is late in the season for such a large number of flu patients.

TUESDAY, MARCH 20, 2002

Most of the patients have presented with complaints of fatigue, cough, fever, and generally not feeling well. As expected, most are sent home for bed rest, fluids and fever control suggestions. Those that are admitted to hospitals are diagnosed with pneumonia. By late afternoon, emergency medical services agencies have transported several patients with severe respiratory distress along with a number of febrile seizure patients. Local papers run stories about the high absenteeism among workers and school children due to this flu outbreak.

WEDNESDAY, MARCH 21, 2002

Large numbers of patients who were sent home yesterday from doctor's offices with the diagnosis of influenza are now returning to emergency departments, some by ambulance. They are extremely ill. Statewide fatalities have risen to 71 over the last 24 hours and the Medical Examiner's office is requesting the activation of a Disaster Mortuary Assistance Team. Rapid antigen testing for influenza has been performed on many patients and all the results are negative. Doctors across the state are conferring with State and federal public health authorities in search of a cause of the outbreak. Several health care workers have died from this illness, and many more are too ill to report to work. Several enterprising vendors are selling a new "flu cure" medication that is not licensed by the U.S. Food and Drug Administration. Local, state and federal agencies are immersed in this event.

This hypothetical situation serves to paint a picture of the possible unfolding of a flu pandemic, or bioterrorist attack. Regardless of the cause, this disease outbreak requires coordination and communication between various agencies to identify the pathogen and take the necessary steps to stop the spread and prevent the deadly effects.

As seen from the example above, a threatened or actual bioterrorist attack, particularly one that is covert in nature, presents enormous challenges to medical and law enforcement personnel.

Because of the severity of the potential consequences of a bioterrorist attack, state and federal agencies have substantially increased their involvement with detecting, investigating, and responding to terrorism.

Identifying, understanding and cooperative planning with other agencies involved in bioterrorism is essential to maximize the use of resources, controlling costs and ensuring the public's trust.

Purpose of Document

The Alaska Department of Health and Social Services recognizes the importance of preparedness for bioterrorism on the part of agencies throughout the state. This Bioterrorism Resource Guide will serve as a reference guide for agencies to better understand their interrelationship with each other.

The Guide includes information on federal and state resources, as well as how the resources are likely to interact, given their missions and authority. In addition, information is included on Internet and training resources, and a glossary of terms is found on page 57.

Acronyms and abbreviations, by design, have been kept to a minimum. One acronym that will be seen repeatedly is “WMD,” which refers to “weapons of mass destruction.” Most other acronyms and abbreviations used are ones which are ubiquitous, e.g. FBI, FEMA. A complete list of acronyms is found on page 61.

Most agencies referenced in this document have multiple roles and responsibilities and maintain plans and procedures for a variety of situations. This document is not intended to be an exhaustive reference for all existing plans. It is intended to give basic information about the primary roles and responsibilities for agencies as related to bioterrorism preparedness. This provides a natural avenue for the initiation of dialog with collaborative agencies to enhance overall system coordination and capability.

It is understood that agencies such as the Division of Emergency Services (page 22), the Municipality of Anchorage (page 23), and the military (page 31) have specialized resources and plans and would play a significant role in the response to a threatened or actual bioterrorist event.

Updates

An updated version of this document will be maintained on the CHEMS web site located at <http://www.chems.alaska.gov>. Suggestions for improving the guide and updated contact information can be sent to:

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Overview of Terrorism

Terrorism is the unlawful use of force or violence against persons or property to intimidate or coerce a government or civilian population in furtherance of political or social objectives. People, livestock and crops may be the targets of terrorists. Although numerous foreign governments have supported terrorists, there is also the potential for domestic terrorism by individuals or groups. In addition, terrorists from foreign countries can attack the US without the explicit support of a foreign government, as was the case with the World Trade Center bombing.

Weapons of Mass Destruction

The use of hazardous chemicals by the Japanese religious cult Aum Shinrikyo, dramatized the effects of a weapon of mass destruction used in an urban setting. A terrorist attack using nuclear, biological or chemical weapons is, in some respects, similar to a hazardous materials accident, with a number of unique differences.

These differences will influence the emergency response planning, organization, training, equipment, operational procedures, and coordination requirements.

In general, the differences are:

- The situation may not be recognizable as terrorist event until there are multiple casualties. The cause of the incident or death may not be determined for some period of time without a high index of suspicion.
- Responders are placed at a higher risk of becoming a casualty because some chemical and many biological agents are not easily recognized or detected. Emergency responders are also becoming a target through the placement of secondary releases or explosions.
- Contamination of critical facilities and large geographical areas may result. Exposed people may unknowingly carry contaminants through public transportation systems, business communities, doctors' offices, clinics and emergency departments. Responders may carry agents back to their crew quarters or homes.
- The scope of the event may expand at a phenomenal rate across jurisdictional boundaries and into areas with limited medical resources. Airborne contaminants will flow with the air currents and if disseminated properly, may carry to great distances from their point of origin. Time becomes the enemy of the responders handling casualties, and law enforcement and epidemiologists handling the investigation.
- There will be a strong reaction from the public with mass hysteria being a real problem to contain. The thought of exposure to chemical, biological or radiological material is enough to cause terror in most people. Added to this is the fear of not knowing if they are or are not exposed.

A well-planned and executed urban attack using biological agents (e.g., anthrax spores or botulinum toxin) could result in hundreds of thousands of deaths. Biological agents have been

used in warfare for over 2500 years and are gaining popularity with various terrorist groups. As an example, in 1972, an American Fascist group, the “Order of the Rising Sun” used 30-40 kg of Typhoid to contaminate water supplies in St. Louis and Chicago.

In 1986, over 750 people became ill in Oregon when members of the Rajneesh Bhagwan poisoned salad bars with Salmonella in order to influence an upcoming referendum by making voters ill and keeping them away from the polls. In 1995, a member of the Aryan Nation was arrested for ordering plague from a supply house in Maryland. Two members of the Minnesota Patriots Council were convicted for planning to use Ricin in an assassination attempt. Most recently, members of the Aum Shinrikyo worked to acquire the Ebola virus from Zaire.

Presidential Decision Directives 39 and 62

In June 1995, the White House issued Presidential Decision Directive 39, *United States Policy on Counterterrorism* which directed a number of measures to reduce the nation’s vulnerability to terrorism, to deter and respond to terrorist acts, and to strengthen capabilities to prevent and manage the consequences of terrorist use of nuclear, biological, and chemical weapons including weapons of mass destruction (WMD).

In May 1998, the president issued Presidential Decision Directive 62, related to the *Protection Against Unconventional Threats to the Homeland and Americans Overseas*.

This decision reaffirms the Federal Bureau of Investigation as the lead federal agency for the operational response to a WMD incident. The Federal Emergency Management Agency is responsible for preparing for or responding to the consequences of a WMD incident, with participation by the U.S. Public Health Service (health and medical), the Environmental Protection Agency (hazmat and environmental), and the Department of Energy (radiological), as necessary.

Both of these decisions recognize that WMD incidents are multi-disciplinary, multi-jurisdictional events that require a broad interagency planning and response approach as well as cooperative partnership between federal, state, and local governments.

Roles and Responsibilities of Local and State Agencies

The size of Alaska and its distance from Outside resources has made it imperative that in-state capabilities be developed to allow rapid response and a degree of self-reliance. The state is no stranger to disasters, having experienced significant earthquakes, fires, floods and other significant events within the last fifty years. Most local communities have emergency management plans which guide their actions during the initial stages of a disaster. Larger communities and boroughs often have more expansive plans and some have paid emergency managers to guide emergency planning and response activities.

The Municipality of Anchorage (see page 24) has a Metropolitan Medical Response System, developed under the Domestic Preparedness program, that includes the most highly trained and equipped civilian responders specializing in chemical and biological agents in the state.

Alaska is extremely fortunate to have well-trained and equipped military personnel who are capable of augmenting civilian resources in certain circumstances. In particular, the 103rd Civil Support team is a significant asset, able to deploy to an area of operations and: assess a suspected nuclear, biological, chemical, or radiological event in support of a local incident commander; advise civilian responders regarding appropriate action, and facilitate requests for assistance to expedite arrival of additional state and federal assets (see page 31).

The Division of Emergency Services (see page 22) is the agency within the state government which has statutory responsibility for emergency planning and response. The Division of Emergency Services staffs and supports the State Emergency Coordination Center during disasters and coordinates the activities of other state agencies involved in a disaster response. The Division of Emergency Services plays a large role in bioterrorism planning and response, including administering Department of Justice grants related to bioterrorism.

In a bioterrorist event the Sections of Laboratories and Epidemiology, within the Department of Health and Social Services' Division of Public Health, will be key agencies in the detection and identification of the biological agents used. Agencies in the Division of Public Health communicate frequently with organizations outside the Department of Health and Social Services in an effort to promote and maintain readiness to detect and respond to a bioterrorist event. Other important roles for the Department of Health and Social Services include providing distance delivered education to medical personnel regarding bioterrorism and developing the state's Health Alert Network to provide information to medical personnel rapidly regarding threatened or actual bioterrorist events. For more information on the Department's activities related to bioterrorism, go to http://www.chems.alaska.gov/bioterrorism_home.htm.

Numerous agencies, from the Alaska State Troopers to the Section of Public Health Nursing are likely to be involved in the response to a bioterrorist event. The flow chart on page 41 provides additional information on how federal, state and local agencies are connected.

Roles and Responsibilities of Federal Agencies

The response to a terrorist threat or incident within the U.S. will require highly coordinated, multi-agency local, state, and federal response. In support of this mission, the following primary federal agencies will provide the core federal response:

- Department of Justice/Federal Bureau of Investigation¹
- Federal Emergency Management Agency²
- Department of Defense
- Department of Health and Human Services
- Department of Energy
- Environmental Protection Agency

¹ Lead Agency for Crisis Management

² Lead Agency for Consequence Management

Department of Justice/Federal Bureau of Investigation

The Attorney General is responsible for ensuring the development and implementation of policies directed at preventing terrorist attacks domestically, and will undertake the criminal prosecution of those acts of terrorism that violate U.S. law. The Department of Justice has charged the Federal Bureau of Investigation (FBI) with execution of its lead federal agency responsibilities for the management of a federal response to terrorist incidents that take place within U.S. territory or those occurring in international waters that do not involve a foreign flag vessel. The FBI will execute any federal operational response and act as the federal response with the state and local authorities. The FBI may form and coordinate the deployment of a Domestic Emergency Support Team (see page 7) with other agencies, when appropriate, and seek appropriate federal support based on the nature of the situation. A more detailed description of FBI actions are listed on page 7.

The FBI is the lead federal agency whenever you think you may be faced with a potential terrorist event and serves as the initial single point of federal contact. Developing a working relationship prior to any event with your local FBI office will help to streamline your request for federal support.

Office for State and Local Domestic Preparedness Support

On April 30, 1998, Attorney General Janet Reno delegated authority to the Assistant Attorney General for the Office of Justice Programs to administer grants to assist state and local public safety agencies in acquiring the specialized equipment and training necessary to safely respond to and manage domestic terrorist activities, especially those dealing with chemical and biological agents radiological and explosive devices.

On May 8, 1998, the Assistant Attorney General, Office of Justice Programs, announced the establishment of the Office for State and Local Domestic Preparedness Support, to assist state and local response agencies throughout the United States prepare for incidents of domestic terrorism. There are five ways the office offers assistance to emergency response agencies:

- Financial assistance to enable state and local jurisdictions to buy needed equipment.
- Training to ensure state and local emergency response personnel, public officials, and others who have responsibilities in the event of a terrorist incident have the knowledge, skills and abilities to respond effectively and ensure the public's safety.
- Technical assistance to assist states and localities in making critical domestic preparedness decisions.
- Assessment through nationwide surveys to evaluate the current state of terrorist response readiness and capabilities in order to guide program choices, and determine training and equipment needs at the state and local levels.
- Exercises and exercise support to enable state and local response planning and procedures.

In Alaska, the Office of Justice program is implemented through a grant to the Alaska Division of Emergency Services within the Department of Military and Veterans Affairs (see page 22).

Federal Bureau of Investigation

National Security Division

WMD Operations Unit: The specialized mission of the Weapons of Mass Destruction Operations Unit is to combat the use or threatened use of WMD as a means of terrorism directed against the U.S., its citizens, or its interests. The unit provides program management involving:

- All threats
- Threat assessments
- Contingency planning
- Incidents
- Nonproliferation matters
- International training initiatives
- WMD response program

WMD Countermeasures Unit: The mission of the WMD Countermeasures unit is to ensure that FBI and state and local first responders are prepared to handle incidents involving the use or threat to use WMD in a terrorist act against the United States, its citizens, or its interests. The unit provides program management for the FBI involvement in the Nunn-Lugar-Domenici Domestic Preparedness Program, the WMD Exercise Program, and other WMD first responder programs.

Domestic Emergency Support Team

The Domestic Emergency Support Team is a specialized interagency U.S. government team designed to expeditiously provide expert advice, guidance and support to the FBI on-scene commander otherwise known as the Special Agent in Charge. This advice specifically relates to providing the Special Agent in Charge with the capabilities supporting agencies can provide to mitigate the crisis.

The Team also supports the Special Agent in Charge by coordinating follow-on assets he or she has requested. In addition, the Team can be configured to provide the Special Agent in Charge with a limited operational capability. For example, a scientific analysis component can be deployed rapidly from regional offices to assess potentially contaminated sites, collect samples, and conduct nuclear/radiological searches.

The Domestic Emergency Support Team is deployed upon request by the Special Agent in Charge, through FBI headquarters to the Attorney General. The FBI, in consultation with supporting federal agencies, determines the composition of the Team required on a case-by case basis. As appropriate, the Team is configured to include components for a specific type of WMD incident such as nuclear, chemical, or biological threat.

Critical Incident Response Group

Hostage Rescue Team: The Hostage Rescue Team is the FBI's primary tactical response element in a significant WMD incident.

Crisis Management Unit: The unit provides crisis management support to the FBI field divisions in the form of Joint Operation Center expertise and the management of crisis related information. The unit deploys with the laptop computer-based Crisis Management Information System which automates the management of crisis incident information.

Crisis Negotiations Unit: The unit provides crisis negotiations support to the FBI field divisions, and maintains and coordinates the Critical Incident Negotiations Team which is a group of highly trained FBI crisis negotiators located in field divisions throughout the FBI.

National Center for the Analysis of Violent Crimes: The center participates in the FBI's internal WMD credibility threat assessment. Personnel assigned to the center are equipped to provide behavioral and linguistic assessments. During a WMD crisis, center personnel can also assist in hostage negotiations, investigative initiatives, and crisis management strategies.

Laboratory Division

Hazardous Materials Response Unit: Personnel assigned to this unit are available to assist the field in an advisory and liaison capacity with on-scene military and civilian personnel. Personnel are equipped to direct the proper evidence handling procedures in a contaminated environment and to provide expert technical assistance to FBI personnel conducting the investigation.

Evidence Response Unit: The Evidence Response Unit coordinates and manages the FBI's Evidence Response Team Program, which is designed to train and equip field personnel to conduct crime scene searches and collect evidence.

Materials and Devices Unit: Personnel assigned to the Materials and Devices Unit are experts in a wide variety of explosive devices. The Materials and Devices Unit maintains liaison with personnel assigned to the U.S. Army Explosive Ordnance Disposal units and is capable of overseeing the forensic evidence and analysis connected with a WMD detonation.

Information Resources Division

Crisis Response Team: The Crisis Response Team is responsible for supporting major cases in the field by providing full field command post facilities, including independent communications links for secure voice, text, and imagery capabilities through both terrestrial and satellite links. The team is able to collect tactical information from inside the crisis site.

Rapid Start Team: The Rapid Start Team is comprised of information management personnel who are prepared to deploy on short notice to the scene of FBI major cases. The team is designed to streamline and organize the information flow of major cases in such a way that leads are readily tracked, information is prioritized, and all information is easily retrieved for future prosecution.

Federal Emergency Management Agency

The Federal Emergency Management Agency (FEMA) will ensure that the ***Federal Response Plan*** is adequate to respond to the consequences of terrorism directed against populations in the United States, including terrorism involving WMD. As a result, a Terrorism Incident Annex has been added to the ***Federal Response Plan***.

FEMA, as the lead federal agency for consequence management, will support the FBI with the planning and execution of functions undertaken to respond to the consequences of a terrorist use of a WMD. Additionally, FEMA will designate appropriate liaison and advisory personnel for the Strategic Information and Operations Center and deployment with the Domestic Emergency Support Team, the Joint Operations Center, and the Joint Information Center. FEMA will direct and coordinate any federal emergency response in accordance with its statutory authorities to ensure appropriate coordination of federal response activities in support of state and local authorities.

Department of Defense

In accordance with Department of Defense Directives and the Chairman Joint Chiefs of Staff CONPLAN 0300-97, the Department of Defense will provide military assistance to the lead federal agency and/or *Federal Response Plan* Emergency Support Function primary agencies during all aspects of a terrorist incident upon approval by the Secretary of Defense. Department of Defense assistance could include threat assessment, Domestic Emergency Support Team deployment, technical advice, operational support, tactical operations, support for civil disturbances, and custody, transportation and disposal of a WMD device.

Department of Energy

The Department of Energy provides scientific-technical personnel and equipment in support of the lead federal agency during all aspects of a nuclear/radiological WMD terrorist incident. Department of Energy assistance can support both crisis and consequence management activities with capabilities such as threat assessment, Domestic Emergency Support Team deployment, lead federal agency advisory requirements, technical advice, forecasted modeling predictions, and operational support to include direct support of tactical operations.

Deployable scientific technical assistance and support includes capabilities such as search operations; access operations; diagnostic and device assessment; radiological assessment and monitoring; identification of material; development of Federal protective action recommendations; provision of information on the radiological response; render safe operations; hazards assessment; containment, relocation and storage of special nuclear material evidence; post-incident clean-up; and on-site management and radiological assessment to the public, the White House, and members of Congress and foreign governments. All Department of Energy support to a federal response will be coordinated through a Senior Energy Official.

Environmental Protection Agency

The Environmental Protection Agency provides technical personnel and supporting equipment to the lead federal agency during all aspects of a WMD terrorist incident. Assistance may include threat assessment, Domestic Emergency Support Team and regional emergency response team deployment, lead federal agency advisory requirements, technical advice and operational support. Assistance and advice from the Environmental Protection Agency includes threat assessment, consultation, agent identification, hazard detection and reduction, environmental monitoring; sample and forensic evidence collection/analysis; assessment and cleanup; identification of contaminants; and on-site safety, protection, prevention, and decontamination activities. The Environmental Protection Agency and the United States Coast Guard share

responsibilities for response to oil discharges into navigable waters and releases of hazardous substances, pollutants, and contaminants into the environment under the National Contingency Plan. The agency provides the pre-designated federal On-Scene Coordinator for the inland areas and the United States Coast Guard for coastal areas to coordinate containment, removal, and disposal efforts and resources during an oil, hazardous substance, or WMD incident.

Department of Health and Human Services

The United States Department of Health and Human Services is the primary agency under the Federal Response Plan for the provision of health, medical, and health-related social services. The Department of Health and Human Services' assistance could support threat assessment, Domestic Emergency Support Team deployment, epidemiological investigation, pharmaceutical support of operations, lead federal agency advisory requirements, technical advice and operational (public health) medical and mental health services support.

Technical assistance and advice includes identification of contaminants, sample collection and analysis, on-site safety and protection activities, medical management plans, and the provision of health and medical care and mass fatality management.

The Department would activate the National Disaster Medical System, a cooperative asset-sharing partnership between the Department of Health and Human Services, the Department of Defense, the Department of Veterans Affairs, the Federal Emergency Management Agency, state and local governments, private businesses and civilian volunteers.

The National Disaster Medical System, through the U.S. Public Health Service, fosters the development of Disaster Medical Assistance Teams (DMATs). A DMAT is a group of professional and paraprofessional medical personnel (supported by a cadre of logistical and administrative staff) designed to provide emergency medical care during a disaster or other event.

In addition to the standard DMATs, there are highly specialized DMATs that deal with specific medical conditions such as crush injury, burn, and mental health emergencies. Other specialty teams include Disaster Mortuary Operational Response Teams (DMORTs) that provide mortuary services, Veterinary Medical Assistance Teams (VMATs) that provide veterinary services, and National Medical Response Teams that are equipped and trained to provide medical care for victims of weapons of mass destruction.

DMATs deploy to disaster sites with sufficient supplies and equipment to sustain themselves for a period of 72 hours while providing medical care at a fixed or temporary medical care site. In mass casualty incidents, their responsibilities include triaging patients, providing austere medical care, and preparing patients for evacuation. In other types of situations, DMATs may provide primary health care and/or may serve to augment overloaded local health care staffs.

Alaska has an operational DMAT that specializes in cold weather care. More information about the team can be found on page 19.

Under the rare circumstance that disaster victims are evacuated to a different locale to receive definitive medical care, DMATs may be activated to support patient reception and disposition of patients to hospitals. DMATs are designed to be a rapid-response element to supplement local

medical care until other federal or contract resources can be mobilized, or the situation is resolved.

DMAT members are required to maintain appropriate certifications and licensure within their discipline. When members are activated as federal employees in a disaster they are capable of providing medical care in the states to which they are deployed. Additionally, DMAT members are paid while serving as part-time federal employees and have the protection of the federal Tort Claims Act in which the Federal Government becomes the defendant in the event of a malpractice claim.

DMATs are principally a community resource available to support local, regional, and state requirements. However, as a national resource they can be federalized to provide interstate aid.

Emergency Support Function (ESF)-8 Responsibilities

- 1) Primary Agency - Department of Health and Human Services will:
 - a) Provide leadership in directing, coordinating, and integrating the overall federal efforts to provide medical and public health assistance to the affected area.
 - b) Direct the activation of the National Disaster Medical System (NDMS) and the staffing of the NDMS/On Scene Coordinator as necessary to support the emergency response operations, direct operations may include coordinating military airlift support and use of pre-allocated hospital beds in FEMA region 10.
 - c) Direct the activation and deployment of DMATs, specialty teams, and other personnel, supplies, and equipment as needed in response to requests for federal health/medical assistance.
 - d) Provide incident-site management and coordination of federal emergency health and medical services and technical support.
- 2) Support Agencies - Department of Defense (DOD) will:
 - a) Provide military personnel, equipment, transportation, and supplies to assist the U.S. Department of Health and Human Services in providing health and medical services support and technical assistance. DOD participation is provided by numerous federal agencies with technical expertise.
 - b) Provide logistical support to health/medical response operations.
 - c) Provide available emergency medical support to assist in the support of state/local governments within the chemical/biological terrorist incident area.
 - d) Coordinate air evacuation patient regulation.
 - e) Coordinate patient reception and management in areas where DOD medical centers serve as NDMS Federal Coordinating Centers.
 - f) Provide any other support in accordance with its responsibilities as a partner in the NDMS and a supporting agency of Emergency Support Function #8.
- 3) Support Agencies - Department of Justice, through the FBI, will:
 - a) Provide the Department of Health and Human Services Office of Emergency Preparedness with relevant intelligence information of any credible threat or other situation that could threaten public health.
 - b) Assist federal health and medical response operations in victim identification.
 - c) Provide state and local governments legal advice concerning the identification of the dead.
 - d) Designate an incident on-scene manager.
 - e) Provide support for logistics and physical security at the incident scene.
- 4) Support Agencies - Department of Veterans Affairs will:
 - a) Provide available medical support to assist in the support of state/local governments within the chemical or biological terrorist incident area.
 - b) Provide available medical supplies to support the health and medical services response to chemical or biological terrorist acts.
 - c) Coordinate patient reception and management in areas where Veterans Administration medical centers serve as NDMS Federal Coordinating Centers.
 - d) Provide any other support in accordance with its responsibilities as a partner in the NDMS and a supporting agency of Emergency Support Function #8.

Response Actions

Under a consequence management response, the Department of Health and Human Services may be notified directly by FEMA, or FEMA Headquarters may notify the health and medical services action agent (Office of Emergency Preparedness). Office of Emergency Preparedness will notify the Assistant Secretary of Health and request activation of the Health and Human Services response plan for the federal response to acts of chemical or biological terrorism. The Office of Emergency Preparedness will concurrently notify the appropriate Regional Health Administrator in Seattle who is responsible for Alaska.

Upon notification, Department of Health and Human Services health and medical services emergency response members will notify their parent agencies and report to the appropriate location as directed.

Responding to notification of chemical or biological terrorism, the Department of Health and Human Services Emergency Operations Center will become operational on an urgent basis and will be appropriately staffed upon notification. Department of Health and Human Services Office of Emergency Preparedness will initiate action to provide technical assistance or to provide health and medical services response actions in the following functional areas.

1. **Threat Assessment** - Lead Agency: Office of Emergency Preparedness. An assessment team will be assembled and will provide technical assistance to the FBI at the Strategic Information and Operations Center. The assessment team composition will be determined by the Office of Emergency Preparedness in coordination with the FBI.
2. **Chemical/Biological Consultation with Affected Jurisdictions** - Lead Agency: Office of Emergency Preparedness. Emergency consultation will be performed with local and state jurisdictions.
3. **Public Affairs** - Lead Agency: Office of Emergency Preparedness. Office of Emergency Preparedness will coordinate development of pre-scripted advisory releases and public health and disease information that can be transmitted to members of the general public who are located in or near the affected areas.
4. **Chemical/Biological Rapid Deployment Team** - Lead Agency: Office of Emergency Preparedness. Office of Emergency Preparedness will take action to notify, assemble, and deploy the Chem/Bio Rapid Deployment Team and Centers for Disease Control and Prevention (CDC) to render technical assistance in a crisis management situation and, upon activation by FEMA, to assist in coordinating health and medical services support in a consequence management situation.
5. **Agent Identification** - Lead Agency: Centers for Disease Control and Prevention. CDC will coordinate the agent identification process and actions.
6. **Epidemiological Investigation** - Lead Agency: Centers for Disease Control and Prevention. CDC will coordinate the inquiry into the incidence, distribution, and control of a suspected disease or pathogen.
7. **Expedient Hazard Detection** - Lead Agency: Environmental Protection Agency. EPA will coordinate actions and processes to determine the overall health hazard threatening the general population.

8. **Expedient Hazard Reduction** - Lead Agency: Environmental Protection Agency. EPA will coordinate actions to reduce or eliminate the hazard.
9. **Environmental Decontamination** - Lead Agency: Environmental Protection Agency. EPA will coordinate environmental decontamination.
10. **Clinical Medical Support; Health Professionals, Laboratory Support; Patient Evacuation, In-Hospital Care** - Lead Agency: Office of Emergency Preparedness/NDMS. Office of Emergency Preparedness/NDMS will coordinate clinical medical support utilizing Chem/Bio Rapid Deployment Teams, Metropolitan Medical Strike Teams, and Disaster Medical Assistance Teams.
11. **Pharmaceutical Support** - Lead Agency: U. S. Food and Drug Administration (FDA). FDA will coordinate pharmaceutical support for the overall health and medical service response effort. CDC will coordinate the activation of the National Pharmaceutical Stockpile that is further explained under "Resource Requirements" on page 16.
12. **Human Toxic Effects Registry** - Lead Agency: Agency for Toxic Substance and Disease Registry (ATSDR). ATSDR will coordinate the documentation and registration of personnel in the general population and response community who have been exposed to the toxic effects of a chemical/biological terrorist act.
13. **Supplies and Equipment** - Lead Agency: Office of Emergency Preparedness/NDMS). Office of Emergency Preparedness/NDMS will provide health and medical equipment and supplies in support of health and medical services response operations and will coordinate restocking of equipment and supplies in the affected area.
14. **Victim Identification and Mortuary Services** - Lead Agency: Office of Emergency Preparedness/NDMS. Office of Emergency Preparedness/NDMS will assist in providing victim identification and mortuary services, including NDMS Disaster Mortuary Teams and temporary morgue facilities.
15. **Worker Health and Safety** - Lead Agency: Centers for Disease Control and Prevention. CDC will coordinate requirements to ensure health and safety measures for response workers.
16. **Mental Health** - Lead Agency: Substance Abuse and Mental Health Services Administration (SAMHSA). SAMHSA will coordinate mental health requirements.
17. **Communications** - Lead Agency: National Communications Systems (NCS). NCS will establish communications necessary to effectively coordinate health and medical services support assistance.
18. **Transportation** - Lead Agency: Office of Emergency Preparedness. Office of Emergency Preparedness will coordinate transportation requirements, primarily with the U.S. Department of Transportation and the Department of Defense.
19. **Security** - Lead Agency: Office of Emergency Preparedness. Office of Emergency Preparedness will coordinate actions to respond to security requirements associated with the health and medical services support response to a chemical or biological terrorist incident.
20. **Pathological Services** - Lead Agency: Office of Emergency Preparedness/NDMS. Office of Emergency Preparedness/NDMS will assist in providing pathological services to help determine patterns in the manner of death.

Continuing Actions

1. **Situation Assessment** - The National Health and Medical Services support staff will continuously acquire and assess information regarding a chemical or biological terrorist threat and/or disaster situation. The staff will continue to identify the nature and extent of health and medical problems and establish appropriate monitoring and surveillance of the situation to obtain valid ongoing information. In the early stages of a chemical or biological terrorist act response, it may not be possible to fully assess the situation and verify the need for the level of assistance required.

In such circumstances, it will be the responsibility of the National Health and Medical Services authority to decide on what response support is needed and to provide that support on an expedited basis before verifications are obtained.

2. **Activation of Health/Medical Response Teams** - Health personnel and teams from the Department of Health and Human Services will be deployed as needed and appropriate medical and public health (including environmental health) assistance will be provided.

A Chem/Bio Rapid Deployment Team will be assembled and deployed to assist in coordinating technical assistance on scene. Metropolitan Medical Strike Teams will be committed locally, regionally, and/or nationally. Department of Health and Human Services Office of Emergency Preparedness will arrange for alerting, activation, appointment to federal status, and deployment of NDMS Disaster Medical Assistance Teams, Disaster Mortuary Teams, and other special teams. Assistance from the Department of Defense, Environmental Protection Agency, and Veteran's Administration will be provided as required.

3. **Coordination of Medical Transport Requests** - Transportation arrangements for short-notice or no-notice movement of health and medical services support resources will be coordinated by Department of Health and Human Services Office of Emergency Preparedness with the Department of Defense and the Department of Transportation.
4. **Coordination of Medical Facilities Requests** - Arrangements for medical facilities are primarily a local function. Requests for additional assistance should be referred to state authorities. Requests by state officials for federal aid for NDMS hospital support should be routed through the Regional Health and Medical Services Support office to the NDMS On-Scene Commander.

The NDMS On-Scene Commander will verify the request and refer it to the Assistant Secretary for Health for action. Upon approval, the NDMS On-Scene Commander will activate the NDMS patient evacuation system. NDMS Federal Coordinating Centers will be directed to activate area operations/patient reception plans.

5. **Coordination of Patient Evacuation** - If state and local health/medical authorities identify the need for patient evacuation from the chemical or biological terrorist incident area, the requirement for aeromedical evacuation will be communicated through the Regional Health and Medical Services Support authority to the NDMS On-Scene Commander. At NDMS, the Department of Defense representative will coordinate with the U.S. Transportation Command to obtain needed support.
6. **Coordination of Requests for Reimbursement** - Federal agencies directed to participate in the response to chemical or biological terrorist incidents will bear the costs of their participation. State/local consequence management responses that transition to a response under the ***Federal Response Plan*** are eligible for direct reimbursement by FEMA.

Intra-State Actions

The regional health and medical services support authority, supported by the national authority, will collaborate with the identified state health/medical coordinator(s) to resolve and coordinate intra-state health and medical services support issues.

Resource Requirements

Health and medical services resources required in the response to a chemical or biological terrorist incident are urgently needed within the first few hours of the incident. Resource requirements are highly specialized and include medical response personnel with specialized training; chemical or biological-specific medical supplies and equipment; transportation, logistical and administrative systems support; and communication system support. If activated as a support agency to the Health and Human Services (Emergency Support Function #8) in accordance with the ***Federal Response Plan***, General Services Administration (GSA), and representatives of Health and Human Services, Veterans Administration, Department of Defense, and Department of Transportation will coordinate arrangements for the procurement and transportation of medical equipment and supplies.

The CDC has developed a National Pharmaceutical Stockpile to augment the medical supplies, equipment and medications that may be required in large quantities as a result of a terrorist use of a biological or chemical weapon. This stockpile may be accessed through request by the state.

Coordination with the State of Alaska

It is essential that local and state law enforcement agencies relay any WMD threat – credible or non-credible – or any WMD incident to the local FBI field office. The local FBI field office is the conduit to local and state agencies for federal resources and assets in a WMD threat or pre-release situation, although some agencies, such as FEMA and Environmental Protection Agency, can activate in support of state agencies in a post-release situation.

As the lead federal agency for crisis management, the FBI will be faced with a complex command and control situation. The FBI must establish their internal Joint Operations Center and a command/liaison interface with the activated state or local emergency coordination centers.

Response Organizations

Alaska Department of Environmental Conservation (ADEC)

MAILING ADDRESS 410 Willoughby Avenue, Suite 105
CITY Juneau
STATE Alaska
ZIP CODE 99801

TELEPHONE NUMBER (907) 465-5065

FAX NUMBER (907) 465-5070

24 HOUR CONTACT Alan Wien (Disaster Response Coordinator);
Work (907) 376-5038, Fax (907) 376-2382, Home (907) 376-6827, Cell (907) 240-6557

E-Mail ADDRESS Awien@envircon.state.ak.us

WEB SITE ADDRESS <http://www.state.ak.us/local/akpages/ENV.CONSERV/home.htm>

ORGANIZATION MISSION SUMMARY

We promote sound environmental stewardship and the protection of public health by building partnerships dedicated to proactive prevention and problem solving.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

The Department's Disaster Preparedness Representative is a member of the State's Domestic Preparedness for Terrorism Task Group.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

None

ROLE IN DETECTING BIOTERRORISM EVENT

None

ROLE IN RESPONDING TO BIOTERRORISM EVENT

ADEC is a support agency and can provide technical assistance in the identification of public health hazards, contamination of drinking water, food resources, and agricultural products. For a radiological incident, ADEC can provide technical assistance on monitoring, assessment, decontamination, and disposal of wastes to ensure protection of human life, property, wildlife and the environment.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Will report within one hour of receipt of notification by the ADEC Disaster Response Coordinator. Usually, emergency/disaster notification is expected to come from the State Emergency Coordination Center (SECC) at the National Guard Armory.

Alaska 1 Disaster Medical Assistance Team

MAILING ADDRESS C/O Alaska Native Medical Center
4351 Diplomacy Drive
CITY Anchorage
STATE Alaska
ZIP CODE 99508

TELEPHONE NUMBER (907) 729-1895 Message

FAX NUMBER (907) 696-4470

24 HOUR CONTACT Phyllis Goodwin

E-Mail ADDRESS ak1dmat@yahoo.com

WEB SITE ADDRESS not available at this time

ORGANIZATION MISSION SUMMARY

Part of the NDMS, a nationwide medical response system that supplements state and local emergency resources during disasters or major emergencies. NDMS also provides backup medical support to the military and Veterans Affairs medical care systems during an overseas conventional conflict.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

Coordinate activities with local, state, and federal agencies.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

Currently the team depends on individual employers to provide specialized training other than NDMS team organization. As an entire group, training for bioterrorism could be expanded.

ROLE IN DETECTING BIOTERRORISM EVENT

No function in detecting an event.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

The Disaster Medical Assistance Team will deploy per National Disaster Medical System guidelines.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

5 hours if not pre-staged.

Alaska State Public Health Laboratories

MAILING ADDRESS	4500 Boniface Parkway
CITY	Anchorage
STATE	Alaska
ZIP CODE	99507
TELEPHONE NUMBER	(907) 334-2110
FAX NUMBER	(907) 334-2161
24 HOUR CONTACT	(907) 351-2649; Bernard Jilly Ph.D., Chief of Laboratories
E-Mail ADDRESS	Lynne_Lucher@health.state.ak.us
WEB SITE ADDRESS	www.hss.state.ak.us/labs/

ORGANIZATION MISSION SUMMARY

Provide analytical and technical laboratory expertise in support of state and national health disease monitoring and prevention programs.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

Coordinate planning of laboratory responses to bioterrorism with other emergency and public health organizations at the local, state, and federal levels. Educate other emergency and public health organizations to the role and capabilities of the public health laboratory to respond to bioterrorism.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

Provide didactic and hands-on training to hospital/clinical laboratorians in threat agent testing, sample referral, safe handling of threat agents, and disease reporting requirements. Maintain updated testing capacity in-house according to national laboratory response criteria.

ROLE IN DETECTING BIOTERRORISM EVENT

Perform testing designed to confirm the presence/absence of threat agents in clinical specimens, cultures, or environmental samples.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

Report threat agent test results to Epidemiology, Law Enforcement, and other appropriate officials. Provide consultation to hospital/clinic laboratorians concerning testing, referrals, and safe handling of threat agents during an incident.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

1-2 hours

Alaska State Troopers

MAILING ADDRESS 5700 East Tudor Road
CITY Anchorage
STATE Alaska

ZIP CODE 99507

TELEPHONE NUMBER (907) 269-5511

FAX NUMBER (907) 337-2059 (Director's Office)

24 HOUR CONTACT (907) 428-7200 (Dispatch)

E-Mail ADDRESS

WEB SITE ADDRESS www.dps.state.ak.us/ast/

ORGANIZATION MISSION SUMMARY

The mission of the Alaska State Troopers is to preserve the public peace, enforce criminal law, prevent and detect crime, apprehend offenders, protect life and property, serve and support the Court System, diligently enforce passenger and commercial motor vehicle regulations, and provide other specialized public services.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

Coordinate with other governmental and private agencies to plan for weapons of mass destruction incidents.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

Coordinate with governmental and private agencies in providing and receiving training.

ROLE IN DETECTING BIOTERRORISM EVENT

Intelligence gathering, storage, and dissemination. Criminal investigation activities.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

Coordinate with federal, state, and municipal law enforcement and emergency agencies to provide public safety and criminal investigation assistance.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Totally depends upon location of incident and weather conditions.

Dept. of Military and Veterans Affairs, Div. of Emerg. Services (DES)

MAILING ADDRESS P.O. Box 5750
CITY Fort Richardson
STATE Alaska
ZIP CODE 99505-5750

TELEPHONE NUMBER (907) 428-7000

FAX NUMBER (907) 428-7009

24 HOUR CONTACT Pager (907) 269-5520 #0866, 1-800-478-2337

E-Mail ADDRESS Wayne_Rush@ak-prepared.com

WEB SITE ADDRESS www.ak-prepared.com

ORGANIZATION MISSION SUMMARY

DES assists local jurisdictions, State agencies, volunteer organizations and the private sector in disaster planning, training and exercises. DES supports State, local and private sector mitigation plans and initiatives. During disasters/emergencies DES, through the SECC (State Emergency Coordination Center), coordinates State, Federal, volunteer and private sector support of local response and recovery operations. In the recovery phase of emergency management, DES is prepared to deliver the full range of individual and public infrastructure assistance to the affected areas.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

DES is tasked by Alaska Statue 26.23.048 to prepare and maintain a State Emergency Plan, keep it current, and play an integral part in the development and revision of local plans. Governor Knowles has identified DES as the single State point of coordination for Department of Justice Weapons of Mass Destruction equipment grants.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

DES is responsible for training individuals who staff the State Emergency Coordination Center (SECC) in the event of a WMD incident. DES maintains a list of WMD courses available to State agencies and local governments. DES funds WMD training activities for State and local first responders and emergency management personnel. In addition, DES provides WMD exercise development assistance to local jurisdictions.

ROLE IN DETECTING BIOTERRORISM EVENT

None

ROLE IN RESPONDING TO BIOTERRORISM EVENT

DES, through the State Emergency Coordination Center, would coordinate requests for assistance from local governments.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Initiate immediate response from DES staff by calling 1-800-478-2337 or (907) 428-7000. If required, the State Emergency Coordination Center can be staffed within 1.5 hours of the decision to do so.

Municipality of Anchorage, Department of Health & Human Services

MAILING ADDRESS	P.O. Box 196650
CITY	Anchorage
STATE	Alaska
ZIP CODE	99519-6650
TELEPHONE NUMBER	(907) 343-4619
FAX NUMBER	(907) 249-7595
24 HOUR CONTACT	pager- (907) 762-2486
E-Mail ADDRESS	merrimanne@ci.anchorage.ak.us
WEB SITE ADDRESS	www.muni.org

ORGANIZATION MISSION SUMMARY

The mission of the Municipality of Anchorage Department of Health and Human Services (DHHS) is to prevent disease and injury and improve Anchorage's physical, mental, environmental and social health.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

The DHHS plays a lead role, along with the Anchorage Office of Emergency Management (OEM), the Anchorage Fire Department (AFD), and the Anchorage Police Department (APD) in planning for bioterrorism preparedness and response. We contribute to the Comprehensive Emergency Management Plan for the City and are developing Department-level preparedness and response plans.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

DHHS will work with OEM, AFD, and APD in developing and providing training for local health care and emergency response-related professions, agencies and groups.

ROLE IN DETECTING BIOTERRORISM EVENT

DHHS will play a key role in the detection of a bioterrorist event, as our Medical Officer or Disease Prevention nurses may be the first in Anchorage notified of a suspicious illness. Another likely scenario is that the State of Alaska Epidemiology section will be notified first – either way, the one entity alerts the other of the event, and a coordinated investigation, heightened detection methods, and intervention strategies are initiated immediately.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

The City of Anchorage will be instrumental in the initial response to a bioterrorist event. DHHS resources would be put to work in epidemiological investigations and planning for an appropriate intervention method. Any response from the DHHS would be coordinated with other City entities and State departments.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

The Management Team of DHHS is accessible 24 hours a day by emergency pager; call-out to auxiliary staff would result in mobilization in approximately 2-6 hours.

Municipality of Anchorage, Anchorage Fire Department

MAILING ADDRESS 1140 Airport Heights Road
CITY Anchorage
STATE Alaska
ZIP CODE 99508-2942

TELEPHONE NUMBER (907) 267-5066

FAX NUMBER (907) 279-2106

24 HOUR CONTACT (907) 267-4950 Anchorage Fire Dispatch

E-Mail ADDRESS tom.wells@ak-prepared.com, Tom Wells, Terrorism Coordinator

WEB SITE ADDRESS www.ci.anchorage.ak.us

ORGANIZATION MISSION SUMMARY

To safeguard our community by providing prevention, medical, fire, and education services to protect life, property and the environment.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

One of the original 26 cities involved in the Domestic Preparedness program. Have completed the three major exercises and training involved in that process. In the final phase of completing the Metropolitan Medical Strike Team for final review by the U.S. Public Health Service.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

191 members were trained through the Domestic Preparedness program. Ongoing training has continued in the fire department. Serves as the Point of Contact for the Department of Justice Terrorism programs, and can conduct National Fire Academy training programs.

ROLE IN DETECTING BIOTERRORISM EVENT

Primarily through EMS services where patient loads, symptomology, and related events might lead to recognition of a problem.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

Operate a 46 member Hazardous Materials Response Team with Level A capability and a variety of detection devices. The team is regional in nature, having agreements in place with the State Department of Environmental Conservation for out-of-jurisdiction response. The fire department has approximately 275 active responders.

Also involved with the FBI and law enforcement agencies on working groups, coordinating with the newly formed WMD Civilian Support role of the National Guard and DHSS Bioterrorism Team. Working with the US Army Soldier Biological Chemical Command on cold-weather decontamination procedures at a national level. Meet with the state WMD team for threat assessment and grant issues.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Units can be dispatched within minutes of notification. Depending upon the nature of the event, it may take up to two hours to bring back off-duty personnel.

Municipality of Anchorage, Office of Emergency Management

MAILING ADDRESS	P.O. Box 196650
CITY	Anchorage
STATE	Alaska
ZIP CODE	99519-6650
TELEPHONE NUMBER	(907) 343-1400 OEM/EOC, (907) 267-5066 AFD Counter Terrorism Coordinator/Tom Wells, APD CIRT Commander (907) 786-8900,
FAX NUMBER	(907) 343-1441 OEM/EOC, AFD (907) 279-2106, APD (907) 786-8991, DHSS (907) 343-6740
24 HOUR CONTACT	(907) 267-4950 Fire Dispatch, (907) 786-8900 Police Dispatch
E-Mail ADDRESS	OEM-wwuem@ci.anchorage.ak.us ,
WEB SITE ADDRESS	www.ci.anchorage.ak.us

ORGANIZATION MISSION SUMMARY

Safeguard life, property and the environment through law enforcement response, prevention, emergency medical response, community health response, emergency management, planning and community education.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

Accomplished as a team effort between police, fire, DHSS, and OEM in conjunction with the FBI, area hospitals, Alaska Epidemiology and Public Health Laboratories.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

Conducted primarily through the AFD Counter Terrorism Coordinator, Tom Wells.

ROLE IN DETECTING BIOTERRORISM EVENT

Detection is through EMS services, hospital reports, the State of Alaska Sections of Epidemiology, Public Health Nursing and State Public Health Laboratory, and community health officer monitoring systems.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

For site specific response, APD and AFD (Hazardous Materials Response Team) would be initial response with close coordination with FBI, Community Health Officer, Epidemiology, Public Health and direct support from the municipal Emergency Operations Center. The AFD Hazardous Materials Response Team is also a regional response asset operating under a Memorandum Of Understanding with the State of Alaska. For a non-site specific event, response would be through Community Health, Epidemiology, and Public Health in coordination with various law enforcement, medical agencies and hospitals.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Within several minutes, APD and AFD resources respond to a site-specific incident. For a non-site specific event during the day, response is within minutes, after-hours it may take up to an hour.

Office of the State Medical Examiner

MAILING ADDRESS 4500 South Boniface Parkway
CITY Anchorage
STATE Alaska
ZIP CODE 99507-1264

TELEPHONE NUMBER (907) 334-2200

FAX NUMBER (907) 344-2216

24 HOUR CONTACT 1-888-332-3273

E-Mail ADDRESS

WEB SITE ADDRESS <http://www.hss.state.ak.us/dph>

ORGANIZATION MISSION SUMMARY

The State Medical Examiner's (SME) office conducts autopsies and cause of death investigations for criminal, medically unexplained, accidental, and unattended deaths.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

Work with other agencies to develop plans for response to mass fatalities as a result of a biological terrorist incident.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

Provides training for death scene investigation to first responders, State Troopers, and local police.

ROLE IN DETECTING BIOTERRORISM EVENT

Collaborative reporting role with public health to detect and identify deaths due to unusual biological event.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

In cooperation with investigative agencies, responsible for body recovery, storage, morgue operations and logistical needs of mass fatality event.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Staff members on call at all times.

Section of Epidemiology, Alaska Division of Public Health

MAILING ADDRESS	3601 C Street, Suite 540
CITY	Anchorage
STATE	Alaska
ZIP CODE	99503
TELEPHONE NUMBER	(907) 269-8000 during normal business hours
FAX NUMBER	(907) 562-7802
24 HOUR CONTACT	(800) 478-0084 Section of Epidemiology answering service
E-Mail ADDRESS	epiweb@epi.hss.state.ak.us
WEB SITE ADDRESS	http://www.epi.hss.state.ak.us/

ORGANIZATION MISSION SUMMARY

The Section of Epidemiology is responsible for surveillance, investigation and control of acute and chronic diseases and injuries through defining causal factors, identifying and directing control measures and providing a basis for policy development, program planning and evaluation.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

The Section of Epidemiology is charged with enhancing the rapid detection of unusual outbreaks of illness that may be the result of terrorism involving biological or chemical agents. The Section is responsible for expanding epidemiologic surveillance and response capacity to investigate and mitigate health threats posed by bioterrorism through collaboration with health care providers throughout Alaska.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

The Section is responsible for developing and providing educational seminars about public health surveillance and what, where, when, and how to report disease. In addition, the Section is partnering with educational activities for the medical community about syndromes and conditions that could be the result of a bioterrorist or chemical attack.

ROLE IN DETECTING BIOTERRORISM EVENT

Under Alaska Under Alaska regulations (7 AAC 27.005 - 7 AAC 27.007), all notifiable conditions must be reported to the Section of Epidemiology. This includes all conditions that could be caused by a biological or chemical terrorist event. Reporting all such conditions in a timely manner is the best assurance that a covert bioterrorist event will be detected and responded to quickly.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

The Section of Epidemiology is responsible for the investigation and control of any suspected or confirmed bioterrorist event for the State of Alaska.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

The Section has a 24 hour emergency telephone number. Members of the epidemiology team are available 24 hours a day, 7 days a week, to respond to an event at any location in Alaska.

Section of Community Health and Emergency Medical Services

MAILING ADDRESS	CHEMS, Box 110616
CITY	Juneau
STATE	Alaska
ZIP CODE	99811-0616
TELEPHONE NUMBER	907-465-3027
FAX NUMBER	907-465-4101
24 HOUR CONTACT	CHEMS does not maintain a 24 hour contact number
E-Mail ADDRESS	matt_anderson@health.state.ak.us
WEB SITE ADDRESS	http://www.chems.alaska.gov

ORGANIZATION MISSION SUMMARY

The Section of Community Health and EMS is responsible for a wide range of state services, including programs to help improve access to primary care among rural and underserved populations; promotion and surveillance of healthy lifestyle behaviors; cardiovascular disease prevention; tobacco use prevention and control; injury prevention and surveillance; emergency medical services and trauma care systems development; and development of a system to educate and alert public health and health care providers through telecommunications.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

The section works with other agencies within the Division of Public Health to plan for and improve the public health response to bioterrorism.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

The Section helps to provide emergency medical services personnel with training related to bioterrorism at symposia and other forums.

ROLE IN DETECTING BIOTERRORISM EVENT

The Section is not likely to be involved in the actual detection of a bioterrorist event but it will assist in alerting responders to a threatened or actual bioterrorist event.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

The Section is the primary agency within the Department of Health and Social Services to provide department staff to the State Emergency Coordinator Center. In that capacity, CHEMS staff assists in fulfilling the emergency health and medical responsibilities outlined in the State Emergency Operations plan, such as coordinating medical resources and emergency medical transportation.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Approximately 12 to 24 hours

Section of Public Health Nursing

MAILING ADDRESS	P.O. Box 110611
CITY	Juneau
STATE	Alaska
ZIP CODE	99801-0611
TELEPHONE NUMBER	(907) 465-3150
FAX NUMBER	(907) 465-3913
24-HOUR CONTACT	Public Health Nursing does not maintain a 24-hour contact number
E-Mail ADDRESS	Nancy_Davis@health.state.ak.us (Section Chief)
WEB SITE ADDRESS	http://www.hss.state.ak.us/dph/NURSING/HOME.HTM

ORGANIZATION MISSION SUMMARY

The mission of the public health nursing program is to work in partnership with individuals, families, and communities to improve the health of the Alaskan population while helping them maintain their dignity, self-reliance, and cultural integrity.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

The section works within the Division of Public Health and with local governmental and private agencies to plan for and improve the public health response to potential health threats, including bioterrorism. The Section builds upon existing plans and procedures within the community and participates in Local Emergency Planning Committees to define clear roles.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

The public health nursing workforce is trained to respond to an infectious disease emergency or other public health crisis. The section coordinates with other governmental and private agencies in developing, providing, and receiving workforce training for enhancing abilities to recognize potential bioterrorist events.

ROLE IN DETECTING BIOTERRORISM EVENT

Public health nurses monitor local health status to identify community health problems, and participate in investigation of health problems and health hazards in the community. The local public health nurse will rapidly report an unusual health event in a community that could be caused by a biological or chemical terrorist event.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

Helps to link organizations and relationships at the local, state, and federal level to provide needed resources to a community before, during, and after a public health emergency. Reduce panic by relaying information and reassuring the public during and after a biological event. Assure coordination for access to necessary healthcare services for all, and adhere to appropriate follow-up activities. Communicate treatment recommendations and initiation of disease prevention measures with community, including plans for mass prophylaxis of community if warranted.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Immediately to 24 hours depending on location and timing of incident and travel conditions.

United States Alaskan Command

MAILING ADDRESS 9480 Pease Avenue, Suite 105
CITY Elmendorf Air Force Base
STATE Alaska

ZIP CODE 99506-2130

TELEPHONE NUMBER (907) 552-3944/3932

FAX NUMBER (907) 552-4855

24 HOUR CONTACT (907) 552-3000 (Elmendorf AFB Command Post)

E-Mail ADDRESS roger.marcil@elmendorf.af.mil

WEB SITE ADDRESS <http://www.elmendorf.af.mil/orgs/alcom/>

ORGANIZATION MISSION SUMMARY

Integrate military activities within the Alaskan area of interest while building the joint training and experimentation. Be prepared to command and control assigned forces to respond to crisis or deter aggression as a JTF headquarters.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

The Alaskan Command (ALCOM) Director for Plans and Policy (J5) is the Defense Coordinating Office in the State of Alaska for Military Support to Civil Authorities (MSCA). As such, ALCOM coordinates use of military assets to meet federal and state requests for assistance during a declared federal disaster and under the immediate response provisions of the Stafford Act.

ALCOM participates in state emergency planning groups and committees in order to ensure unified response to disasters in Alaska.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

ALCOM/J767 (Medical Operations) provides hospital presentations on managing patients of a suspected bioterrorism event and coordinates training by other DOD organizations involved in bioterrorism medical response.

ROLE IN DETECTING BIOTERRORISM EVENT

DOD hospitals in Alaska participate in the State's public health network in monitoring disease outbreak and notification of reportable public health conditions/disease/events.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

The ALCOM J5 coordinates use of DOD assets during federal and state disasters in accordance with the Federal response Plan (FRP).

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

No greater than 12 hours.

103rd Civil Support Team (WMD)

MAILING ADDRESS	P.O. Box 5800
CITY	Fort Richardson, AK
STATE	Alaska
ZIP CODE	99505-5800
TELEPHONE NUMBER	Commander: 907-428-6620 or Medical Operations Officer 907-428-6628
FAX NUMBER	(907) 428-6625
24 HOUR CONTACT	(907) 428-7000 or 1-800-478-2337 (state EOC)
E-Mail ADDRESS	Medical Operations Officer: richard.Stitzer@ak.ngb.army.mil Medical NCO: Brian.webb@ak.ngb.army.mil
WEB SITE ADDRESS	None

ORGANIZATION MISSION SUMMARY: The mission of the Civil Support Team (weapons of mass destruction) is to deploy to an area of operations and:

- **ASSESS** a suspected nuclear, biological, chemical, or radiological (NBCR) event in support of a local incident commander;
- **ADVISE** civilian responders regarding appropriate action, and;
- **FACILITATE** requests for assistance to expedite arrival of additional state and federal assets to help save lives, prevent human suffering and mitigate great property damage.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES: Unit is required to interface with local, state, and federal authorities via meetings, committee memberships, seminars, and training exercises.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES: Intensive 18-month training program, which provides skills and certifications required for operations with in a hazardous environment.

ROLE IN DETECTING BIOTERRORISM EVENT: To Provide on-site chemical, biological, radiological, nuclear and high-energy explosives (CBRNE) technical advice to federal, state, and local response agencies in the event of a Weapons of Mass Destruction incident. The team is broke down into 6 smaller sections that have been trained and equipped to provide biological detection, analysis and "reach back" to other experts who can assist the incident commander.

ROLE IN RESPONDING TO BIOTERRORISM EVENT: To respond, in support of a incident commander, to assess suspected Weapons of Mass Destruction attacks, advise civilian responders on appropriate actions and facilitate the arrival of additional state and Federal military forces. The team can rapidly deploy to a suspected or actual terrorist attack, conduct reconnaissance activities and detect biological agents to determine the effects of the attack on responders and the civilian population. The medical section can provide advice about field and medical management of biological casualties.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE: Federal certification tentatively scheduled to occur after October 2001. Upon certification, unit will be on a 24/7 alert status with a approximate 4 hour response time.

Environmental Protection Agency, Alaska Operations Office

MAILING ADDRESS	222 West 7 th Avenue, #19	
CITY	Anchorage	
STATE	Alaska	
ZIP CODE	99513	
TELEPHONE NUMBER	Carl Lautenburger	907-271-4306
	Matthew Carr	907-271-3616
FAX NUMBER	(907)271-3424	
24 HOUR CONTACT	1-800-424-8802 National Response Center 1-206-553-1263 Seattle 24-Hour Coordination Center	
E-Mail ADDRESS	laughtenburger.carl@epa.gov carr.matthew@epa.gov	
WEB SITE ADDRESS	www.epa.gov/r10earth	

ORGANIZATION MISSION SUMMARY

Prevention, Preparedness and Response for Oil & Chemical Spills; Provides Federal On Scene Coordinators during responses to oil and hazardous chemical spills (including chemical and biological terrorist incidents).

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

EPA has a long history of working closely with the Alaska Department of Environmental Conservation, the State Emergency Response Commissions and Local Emergency Planning Committees to assist them in developing local emergency response plans for oil and hazardous materials releases. The Agency is expanding this work to encourage these state and local planning organizations to incorporate terrorism response issues into their existing emergency response plans. EPA has worked closely with other federal agencies to develop interagency response plans for terrorist incidents including the U.S. Government Interagency Domestic Terrorism Concept of Operations Plan (i.e., CONPLAN), and the Terrorism Incident Annex to the Federal Response Plan. On a national level we are working with the Association of Metropolitan Water Agencies and the American Water Works Association to assess threats and vulnerabilities of their member water utilities to terrorist acts.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

EPA has provided advanced hazardous materials training to its on-scene coordinators (OSCs) and local first responders to ensure their health and safety when responding to a terrorist incident, particularly one involving WMD. Our basic and intermediate hazardous materials training has also been provided to other federal, state, and local emergency responders. EPA has an role in the Nunn-Lugar-Domenici Domestic Preparedness Program providing terrorism response training to local emergency responders. The Agency has been an active participant in several terrorism training/exercises in Anchorage.

ROLE IN DETECTING BIOTERRORISM EVENT

Under the National Oil and Hazardous Substances Contingency Plan (NCP), the EPA OSC can provide technical expertise in assessing the hazards posed to public health and the environment from potential bioterrorism event. EPA OSCs generally do not participate as first responders during terrorism crisis management activities such as agent identification. FBI, and National Guard Civil Support Teams have this crisis management responsibility. EPA can provide technical advice to FBI and DOD/National Guard during crisis management actions

ROLE IN RESPONDING TO BIOTERRORISM EVENT

EPA participates in consequences management for extent of contamination and cleanup activities once the bioagent has been confirmed and law enforcement agents have confirmed that secondary devices are not present. EPA works with the Alaska Department of Environmental Conservation to determine appropriate response activities. These activities could include providing technical assistance, oversight of private contractor activities or conducting clean-up activities through the use of EPA's response contractors.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

The National Response Center and EPA Region X maintain a 24-hour a day immediately available, duty offers who can provide access to technical assistance. EPA can typically provide an On Scene Coordinator with two technical assistance contractor personnel at an incident in Alaska within 1 to 12 hours after notification. Additional response contractor personnel are available from locations in the Pacific Northwest within 24-72 hours.

Federal Bureau of Investigation

MAILING ADDRESS 101 East Sixth Avenue
CITY Anchorage
STATE Alaska
ZIP CODE 99501-2524

TELEPHONE NUMBER WMD Coordinator, SA Derek Espeland, 907-265-9574

FAX NUMBER

24 HOUR CONTACT (907) 258-5322

E-Mail ADDRESS

WEB SITE ADDRESS <http://www.fbi.gov/>

ORGANIZATION MISSION SUMMARY

The Mission of the FBI is to uphold the law through the investigation of violations of federal criminal law; to protect the United States from foreign intelligence and terrorist activities; to provide leadership and law enforcement assistance to federal, state, local, and international agencies.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

The Department of Justice, through the Federal Bureau of Investigation, will coordinate the domestic preparedness programs and activities of the United States to ensure that a coordinated crisis and consequence management infrastructure is established to address the threat posed by terrorist use of weapons of mass destruction.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

The [National Domestic Preparedness Office](#) (NDPO) is an inter-agency program that coordinates the government's efforts to prepare America's communities for terrorist incidents involving weapons of mass destruction. The NDPO establishes training needs for first responders (i.e., firefighters, police officers, rescue squads) and identifies local needs for emergency equipment. The NDPO also develops standardized equipment lists for communities across the country.

ROLE IN DETECTING BIOTERRORISM EVENT

The FBI is the lead federal law enforcement agency in the fight against terrorism in the U.S. In carrying out this responsibility, the Domestic Terrorism Program investigates threats involving atomic energy, weapons of mass destruction, sabotage, hostage-taking, and civil unrest.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

The Critical Incident Response Group was formed to address hostage-taking, barricade situations, terrorist activities, and other critical incidents that require an emergency response by multiple law enforcement resources. The FBI Hostage Rescue Team and the Field SWAT Programs are part of the CIRG. Nine enhanced SWAT Teams are strategically located around the country.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

There will be an immediate response from the local office that is augmented as appropriate.

Federal Emergency Management Agency (FEMA)

MAILING ADDRESS 130 228th Street, SW
CITY Bothell
STATE Washington
ZIP CODE 98021-9796

TELEPHONE NUMBER 425-487-4634

FAX NUMBER (425) 487-4777

24 HOUR CONTACT 1-800-395-6042

E-Mail ADDRESS june.uson@fema.gov June Uson, Terrorism Program Manager

WEB SITE ADDRESS <http://www.fema.gov/fema/>

ORGANIZATION MISSION SUMMARY

To provide leadership and support to reduce the loss of life and property and protect our nation's institutions from all types of hazards through a comprehensive, risk-based, all-hazards emergency management program of mitigation, preparedness, response and recovery.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

Required by Public Law 104-201, the National Defense Authorization Act for 1997, Title XIV, Defense Against Weapons of Mass Destruction, Section 1417, to establish and maintain the Rapid Response Information System (RRIS) can be used as a reference guide, training aid, and an overall planning and training resource for response to a chemical, biological and/or nuclear terrorist incident. The RRIS is comprised of several databases, consisting of chemical and biological agents' and radiological materials' characteristics, first aid measures, Federal response capabilities, Help Line, Hotlines, and other Federal information sources concerning potential weapons of mass destruction.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

Emergency managers, firefighters, and elected officials can take classes in many areas of emergency management, including emergency planning, exercise design and evaluation disaster management, hazardous materials response and fire service management. Independent study courses on disaster preparedness, disaster assistance, and hazardous materials are available for the general public from the Emergency Management Institute, at no cost. Special seminars, workshops, and broadcasts are offered at no cost via satellite as part of FEMA's Emergency Education Network, called EENET.

ROLE IN DETECTING BIOTERRORISM EVENT

No role at this time.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

Assist NDMS in establishing priorities for application of health and medical support, provide NDMS communications support, provide information/liaison with emergency management officials in NDMS FCC areas, and provide logistics support as appropriate.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Hours to days depending on lead time and need.

National Domestic Preparedness Office

MAILING ADDRESS 935 Pennsylvania Ave., N.W., Room 5214
CITY Washington
STATE District of Columbia
ZIP CODE 20535

TELEPHONE NUMBER (202) 324-9025

FAX NUMBER (202) 324-2224

24 HOUR CONTACT

E-Mail ADDRESS ndpo@leo.gov.

WEB SITE ADDRESS <http://www.ndpo.gov/services.htm>

ORGANIZATION MISSION SUMMARY

To coordinate all federal efforts, including those of the Department of Defense, Federal Bureau of Investigation, Federal Emergency Management Agency, Department of Health and Human Services, Department of Energy, and the Environmental Protection Agency, to assist state and local emergency responders with planning, training, equipment, and exercise needs necessary to respond to a weapon of mass destruction (WMD) incident.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

The Department of Justice, through the FBI, will coordinate the domestic preparedness programs and activities of the United States to ensure that a coordinated crisis and consequence management infrastructure is established to address the threat posed by terrorist use of weapons of mass destruction.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

The NDPO coordinates the compendium of federal WMD training courses. The NDPO is coordinating the establishment of training standards for emergency response to ensure consistency.

ROLE IN DETECTING BIOTERRORISM EVENT

The Health/Medical Services Program provides health and medical related information and communication resources to the emergency response community. Related articles, training aids and research information including dynamic links will be provided to the emergency response community.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

The CCL is a communication and information resource standard, providing a common e-mail system, computer conferencing capability, news groups, etc. The system links users to WMD-related sites. The NDPO will facilitate and coordinate the efforts of the federal government to provide the emergency response community with detection, protection, analysis, and decontamination equipment necessary to prepare for, and respond to, an incident involving WMD, through the Office of Justice Programs, Office of State and Local Domestic Preparedness Support.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Not a response agency.

U.S. Department of Energy

MAILING ADDRESS 2770 Sherwood Lane
CITY Juneau
STATE Alaska
ZIP CODE 99801-8545

TELEPHONE NUMBER DOE Headquarters Operations Center (OC), telephone (202) 586-8100.

FAX NUMBER

24 HOUR CONTACT [Radiological Hotline](#) 1-202-586-8100 (24 hours)

E-Mail ADDRESS

WEB SITE ADDRESS <http://www.eren.doe.gov/sro/>

ORGANIZATION MISSION SUMMARY

DOE manages and safely dismantles excess nuclear weapons, disposes of surplus fissile nuclear materials, and ensures the security of nuclear assets. We provide policy and technical assistance to curb global proliferation of weapons of mass destruction.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

Offer intensive training to health professionals in medical management for radiological accidents.

ROLE IN DETECTING BIOTERRORISM EVENT

No mission in a biological-only event. May be resource when multiple hazards are potential problem.

ROLE IN RESPONDING TO BIOTERRORISM EVENT

No role in a bioterrorism-only event. Through the Radiation Emergency Assistance Center/Training Site (REAC/TS), they provide 24-hour direct and/or consulting assistance in assessing and treating the health and medical effects of radiological exposure and contamination involving general and high-risk populations, counseling to victims of radiological accidents, and provide technical advice and assistance regarding the handling and disposition of radiologically contaminated remains.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

The emergency phone line is staffed 24 hours a day. Personnel are on one-hour standby for emergency response anywhere in the world.

U.S. Public Health Service, Office of Emergency Preparedness

MAILING ADDRESS 2201 6th Avenue, M/S RX-20
CITY Seattle
STATE Washington
ZIP CODE 98121

TELEPHONE NUMBER (206) 615-2266

FAX NUMBER (206) 615-2481

24 HOUR CONTACT 800-USA-NDMS

E-Mail ADDRESS Astevermer@HRSA.gov, Capt. Andrew Stevermer, Emergency Coordinator

WEB SITE ADDRESS <http://ndms.dhhs.gov/NDMS/ndms.html>

ORGANIZATION MISSION SUMMARY

OEP's program objective has been to develop as robust of a response as possible in metropolitan areas. The MMRS system has been developed to accomplish this objective. OEP is responsible for implementation and coordination of health and medical assistance actions.

ROLE IN PLANNING FOR BIOTERRORISM COUNTERMEASURES

OEP will coordinate with FEMA to pre-identify the initial response resources required for rapid response operations.

ROLE IN TRAINING FOR BIOTERRORISM COUNTERMEASURES

OEP works with state public health and medical offices to secure grants and expert training.

ROLE IN DETECTING BIOTERRORISM EVENT

Available for technical advise.

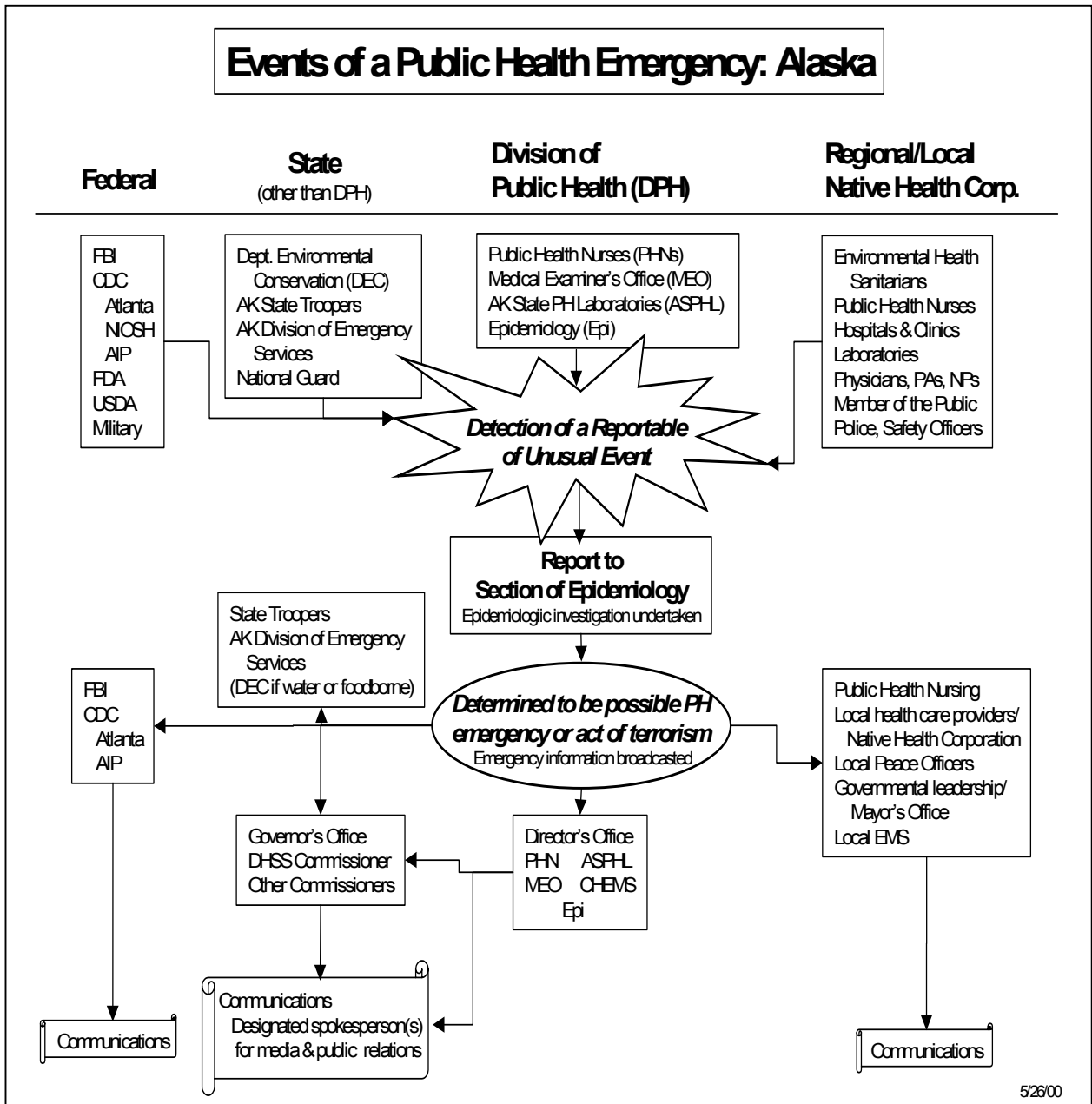
ROLE IN RESPONDING TO BIOTERRORISM EVENT

DHHS/OEP will initiate action to provide technical assistance or to provide health and medical service response actions to the state of Alaska and federal partners.

APPROXIMATE TIME FROM NOTIFICATION TO AGENCY HAVING PERSONNEL OR RESOURCES AVAILABLE

Local response efforts will be supplemented within 12 hours by national medical support providers, supplies, facilities, and one or more CB-enhanced DMATs.

Bioterrorism Flow Chart



Internet Resources

This section of the resource guide is intended to serve as a comprehensive listing of internet sites where agencies may seek additional information on planning, detection and identification, decontamination, mass casualty planning, and overall incident management.

As many sites provide a compilation of services, this guide contains notations to help readers select a site containing specific topic information as listed above.

Planning

Abbreviations, Acronyms, and Terms, Department of Defense
<http://ww2.tricare.osd.mil/references/acroterms.html>

Armed Forces Radiobiology Research Institute Documents
<http://www.afri.usuhs.mil/www/news/news.htm>

Anthrax, Department of Defense information site -
<http://www.anthrax.osd.mil>

Anthrax Vaccine Information
<http://www.nbc-med.org/SiteContent/HomePage/WhatsNew/anthraxinfo/Anthraxinfo3.htm>

Army Medical Dept. Publications
<http://www.armymedicine.army.mil/armymed/>

Bibliography of Terrorism
<http://www.disastercenter.com/terror.htm>

Biological Agent Information, CDC
<http://www.bt.cdc.gov/bioagents.asp>

CDC recommended protocol for BT event notification
<http://www.bt.cdc.gov/protocols.asp>

Department of Defense Dictionary of Military and Associated Terms
<http://www.dtic.mil/doctine/jel/doddict/>

Department of Defense, Search engine for federal laws, regulations and documents relating to emergency management
http://www.dtic.mil/doms/search_eadb/

FBI Terrorism in the US reports
<http://www.fbi.gov/publish/terror/terrorism.htm>

FEMA bibliography listing for emergency management
<http://www.fema.gov/EMI/edu/biblio.htm>

CDC - Botulism
http://www.cdc.gov/ncidod/dbmd/diseaseinfo/botulism_g.htm

CDC – Drug Service

<http://www.cdc.gov/ncidod/srp/drugservice/immuodrugs.htm>

FEMA Library of reference documents

<http://www.fema.gov/library/lib07.htm>

Outbreak Investigation toolbox, DOD

<http://141.236.12.246/outbinv.asp>

Planning Documents, DHHS, OEP, NDMS -

http://ndms.dhhs.gov/CT_Program/Response_Planning/response_planning.html

Rapid Response Information System (RRIS), FEMA

<http://www.rris.fema.gov/>

US Army Soldier and Biological Chemical Command Hotline

http://dp.sbcom.army.mil/fs/dp_hotline.html

CDC – Bioterrorism Preparedness and Response

<http://www.bt.cdc.gov/>

The Association for Professionals in Infection Control and Epidemiology (APIC), prepared a document entitled “Bioterrorism Readiness Plan: A Template for Healthcare Facilities.” The plan, which can be downloaded from APIC’s homepage on the Internet at www.apic.org/html/educ/readinow.html, serves as a reference document and initial template to facilitate preparation of bioterrorism readiness plans for individual healthcare institutions.

Field Operations Guide, Office of Foreign Disaster Assistance, USAID

<http://www.info.usaid.gov/ofda/fog/>

Department of Justice, Office of State and Local Domestic Preparedness Support, Technical Support Help

<http://www.ojp.usdoj.gov/osldps/ta.htm>

First Responder HAZMAT Guide, US Fire Administration, FEMA

<http://www.usfa.fema.gov/hazmat/>

Legal Documents, National Level Laws and Presidential Decision Directives referencing WMD

<http://nsi.org/terrorism.html>

Medical Management of Chemical Casualties Handbook, US Army Medical Research Institute of Chemical Defense

<http://ccc.apgea.army.mil/Documents/Red%20Handbook/001TitlePage.htm>

Mitigation Practitioner’s Handbook, Office of Foreign Disaster Assistance, USAID

http://www.info.usaid.gov/hum_response/ofda/files/hbkoc18.pdf

Mitigation Practitioner’s Handbook, Office of Foreign Disaster Assistance, USAID

http://www.info.usaid.gov/hum_response/ofda/files/hbkoc18.pdf

National Center for Infectious Diseases electronic publications/documents

<http://www.cdc.gov/ncidod/publicat.htm>

Strategic Plan, CDC, National Center for Infectious Diseases
<http://www.cdc.gov/ncidod/emergplan/1toc.htm>

Bioterrorism Readiness Plan: A Template for Healthcare Facilities, CDC
<http://www.cdc.gov/ncidod/hip/Bio/bio.htm>

DHHS, Office of Emergency Preparedness planning documents/guides
http://ndms.dhhs.gov/CT_Program/Response_Planning/response_planning.html

FEMA, Federal Response Plan
<http://www.fema.gov/r-n-r/frp/>

EPA, National Response System
<http://www.epa.gov/superfund/programs/er/nrs/nrsrrt.htm>

FEMA, State and Local Guide (SLG) 101: Guide for All-Hazard Emergency Operations Planning
<http://www.fema.gov/pte/gaheop.htm>

Hospital Procedures for WMD event, JAMA article
<http://jama.ama-assn.org/issues/v283n2/full/jsc90100.html>

Metropolitan Medical Response System Planning/Operational Documents
<http://207.91.118.34/>

The National Response Center, Chemical/HAZMAT spills
<http://www.nrc.uscg.mil/index.html>

Detection and Identification

Outbreak Investigation toolbox, DOD
<http://141.236.12.246/outbinv.asp>

Planning Documents, DHHS, OEP, NDMS -
http://ndms.dhhs.gov/CT_Program/Response_Planning/response_planning.html

Rapid Response Information System (RRIS), FEMA
<http://www.rris.fema.gov/>

US Army Soldier and Biological Chemical Command Hotline
http://dp.sbcom.army.mil/fs/dp_hotline.html

Association for Professionals in Infection Control and Epidemiology
<http://www.apic.org>

CDC – Bioterrorism Preparedness and Response
<http://www.cdc.gov/ncidod/diseases/bioterr.htm>

Biological Agent Information, CDC
<http://www.bt.cdc.gov/bioagents.asp>

Medical Management of Chemical Casualties Handbook, US Army Medical Research Institute of Chemical Defense

<http://ccc.apgea.army.mil/Documents/Red%20Handbook/001TitlePage.htm>

Strategic Plan, CDC, National Center for Infectious Diseases

<http://www.cdc.gov/ncidod/emergplan/1toc.htm>

Bioterrorism Readiness Plan: A Template for Healthcare Facilities, CDC

<http://www.cdc.gov/ncidod/hip/Bio/bio.htm>

CDC recommended protocol for BT event notification

<http://www.bt.cdc.gov/protocols.asp>

Department of Justice, Office of State and Local Domestic Preparedness Support, Technical Support Help

<http://www.ojp.usdoj.gov/osldps/ta.htm>

CDC – Division of Bacteria and Mycotic Diseases

<http://www.cdc.gov/ncidod/dbmd/>

DHHS, Office of Emergency Preparedness planning documents/guides

http://ndms.dhhs.gov/CT_Program/Response_Planning/response_planning.html

CDC - Botulism

http://www.cdc.gov/ncidod/dbmd/diseaseinfo/botulism_g.htm

EPA, The National Response Team's Integrated Contingency Plan Guidance (One Plan)(published June 5, 1996, corrected, June 19, 1996) (Planning document for Chemical/HAZMAT response)

<http://www.epa.gov/swercepp/pubs/one-plan.wp5>

Decontamination

Decontamination Fact Sheet, US Army Medical Research Institute of Chemical Defense

<http://chemdef.apgea.army.mil/chemcasu/Decontam.htm>

Decontamination, Commercial Resources

<http://www.nbcindustrygroup.com/handbook/decontamination/decontamination.htm#top>

DHHS, Office of Emergency Preparedness planning documents/guides

http://ndms.dhhs.gov/CT_Program/Response_Planning/response_planning.html

Department of Justice, Office of State and Local Domestic Preparedness Support, Technical Support Help

<http://www.ojp.usdoj.gov/osldps/ta.htm>

FEMA, Federal Response Plan

<http://www.fema.gov/r-n-r/frp/>

EPA, The National Response Team's Integrated Contingency Plan Guidance (One Plan)(published June 5, 1996, corrected, June 19, 1996) (Planning document for Chemical/HAZMAT response)

<http://www.epa.gov/swercepp/pubs/one-plan.wp5>

EPA, National Response System

<http://www.epa.gov/superfund/programs/er/nrs/nrsrrt.htm>

FEMA, State and Local Guide (SLG) 101: Guide for All-Hazard Emergency Operations Planning
<http://www.fema.gov/pte/gaheop.htm>

Hospital Procedures for WMD event, JAMA article
<http://jama.ama-assn.org/issues/v283n2/full/jsc90100.html>

Metropolitan Medical Response System Planning/Operational Documents
<http://207.91.118.34/>

The National Response Center, Chemical/HAZMAT spills
<http://www.nrc.uscg.mil/index.html>

Mass Casualties

DHHS, Office of Emergency Preparedness planning documents/guides
http://ndms.dhhs.gov/CT_Program/Response_Planning/response_planning.html

Hospital Procedures for WMD event, JAMA article
<http://jama.ama-assn.org/issues/v283n2/full/jsc90100.html>

Metropolitan Medical Response System Planning/Operational Documents
<http://207.91.118.34/>

CDC – Bioterrorism Preparedness and Response
<http://www.cdc.gov/ncidod/diseases/bioterr.htm>

Field Operations Guide, Office of Foreign Disaster Assistance, USAID
<http://www.info.usaid.gov/ofda/fog/>

First Responder HAZMAT Guide, US Fire Administration, FEMA
<http://www.usfa.fema.gov/hazmat/>

Legal Documents, National Level Laws and Presidential Decision Directives referencing WMD
<http://nsi.org/terrorism.html>

Medical Management of Chemical Casualties Handbook, US Army Medical Research Institute of Chemical Defense
<http://ccc.apgea.army.mil/Documents/Red%20Handbook/001TitlePage.htm>

Mitigation Practitioner's Handbook, Office of Foreign Disaster Assistance, USAID
http://www.info.usaid.gov/hum_response/ofda/files/hbkoc18.pdf

National Center for Infectious Diseases electronic publications/documents
<http://www.cdc.gov/ncidod/publicat.htm>

National Library of Medicine
<http://www.nlm.nih.gov>

Strategic Plan, CDC, National Center for Infectious Diseases
<http://www.cdc.gov/ncidod/emergplan/1toc.htm>

FEMA, Federal Response Plan
<http://www.fema.gov/r-n-r/frp/>

FEMA Library of reference documents
<http://www.fema.gov/library/lib07.htm>

EPA, National Response System
<http://www.epa.gov/superfund/programs/er/nrs/nrsrrt.htm>

FEMA, State and Local Guide (SLG) 101: Guide for All-Hazard Emergency Operations Planning
<http://www.fema.gov/pte/gaheop.htm>

Overall Incident Management

US Army Soldier and Biological Chemical Command Hotline
http://dp.sbcom.army.mil/fs/dp_hotline.html

DHHS, Office of Emergency Preparedness planning documents/guides
http://ndms.dhhs.gov/CT_Program/Response_Planning/response_planning.html

FEMA bibliography listing for emergency management
<http://www.fema.gov/EMI/edu/biblio.htm>

CDC recommended protocol for BT event notification
<http://www.bt.cdc.gov/protocols.asp>

EPA, The National Response Team's Integrated Contingency Plan Guidance (One Plan)(published June 5, 1996, corrected, June 19, 1996) (Planning document for Chemical/HAZMAT response)
<http://www.epa.gov/swercepp/pubs/one-plan.wp5>

FEMA Library of reference documents
<http://www.fema.gov/library/lib07.htm>

Medical Management of Chemical Casualties Handbook, US Army Medical Research Institute of Chemical Defense
<http://ccc.apgea.army.mil/Documents/Red%20Handbook/001TitlePage.htm>

Strategic Plan, CDC, National Center for Infectious Diseases
<http://www.cdc.gov/ncidod/emergplan/1toc.htm>

Department of Justice, Office of State and Local Domestic Preparedness Support, Technical Support Help
<http://www.ojp.usdoj.gov/osldps/ta.htm>

Training

List of federal WMD training courses
<http://dp.sbcom.army.mil/fr/compendium>

Armed Forces Institute of Pathology Training Site
<http://www.afip.org/edu/index.html>

Armed Forces Radiobiology Research Institute
<http://www.afri.usuhs.mil/www/outreach/training.htm>

CDC, Distance Learning Web Sites
<http://www.cdc.gov/phtn/sites.htm#d1>

CDC, Bioterrorism Preparedness and Response Learning Resources
<http://www.bt.cdc.gov/learningresources.asp>

Compendium of WMD courses, SBCCOM
<http://dp.sbcom.army.mil/fr/compendium/index.html>

DHHS, OEP consolidated training list
http://ndms.hdds.gov/CT_Program/Training/training.html

DOJ, OSLDPS training courses
<http://www.ojp.usdoj.gov/osldps/training.htm>

FEMA terrorism consequence courses
<http://www.fema.gov/emi/termng.htm>

National Fire Academy, FEMA, courses, compendium of WMD courses
http://www.usfa.fema.gov/nfa/tr_act.htm

National Laboratory Training Network, CDC
<http://www.phppo.cdc.gov/dls/nltm/>

National Terrorism Preparedness Institute
<http://terrorism.spjc.cc.fl.us/>

Oklahoma City National Memorial Institute for the Prevention of Terrorism
<http://www.okcterrorisinstitute.com/2000poster1.htm>

Public Health Training Network, CDC
<http://www.cdc.gov/phtn/>

USAMRIID Training List
<http://www.usamriid.army.mil/education/index.html>

The National Domestic Preparedness Office
<http://www.ndpo.gov>

CB Quarterly, US Army Soldiers and Biological Chemical Command
<http://www.sbcom.apgea.army.mil/RDA/ecbc/quarterly/index.htm>

The Chemical and Biological Information Analysis center Newsletter
<http://www.cbiac.apgea.army.mil/newsletter/intro.html>

CHPPM News Bulletins, US Army Center for Health Promotion and Preventive Medicine
<http://chppm-www.apgea.army.mil/imo/ddb/dmd/DMD/NEWS.HTML>

Dispatch, The Chemical and Biological Arms Control Institute
<http://www.cbaci.org/dispatch.htm>

Emerging Infectious Diseases, CDC, National Center for Infectious Diseases

<http://www.cdc.gov/ncidod/eid/index.htm>

<http://www.cdc.gov/ncidod/eid/vol5no4/pdf/v5n4.pdf> (July-Aug 1999 Issue – Bioterrorism Articles)

Emergency Information Infrastructure Partnership Newsletter

<http://www.emforum.org/eiip/news.htm>

Emergency Medical Services Magazine

<http://www.emsmagazine.com/tocnav.html>

Epidemiology and Infectious Diseases Publications List -

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FEMA IMPACT newsletter

<http://www.fema.gov/about/hqnltr/>

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Journal of Terrorism and Political Violence

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<http://www.nih.gov/health/consumer/index.html>

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<http://www.train4life.com>

Organizations

Armed Forces Institute of Pathology

<http://www.afip.org>

Armed Forces Radiobiology Research Institute

<http://www.afri.usuhs.mil>

Center for Civilian Biodefense Studies, Johns Hopkins University
<http://hopkins-biodefense.org>

Centers for Disease Control and Prevention
<http://www.cdc.gov>

CDC, Bioterrorism Preparedness & Response
<http://www.bt.cdc.gov>

CDC, National Center for Infectious Diseases
<http://www.cdc.gov/ncidod/diseases/index.htm>

Center for Food Safety and Applied Nutrition, US Food and Drug Administration
<http://vm.cfsan.fda.gov/list.html>

Center for Nonproliferation Studies, Monterey Institute for International Studies
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Chemical and Biological Defense Information Analysis Center
<http://www.cbiac.apgea.army.mil>

The Chemical and Biological Arms Control Institute
<http://www.cbaci.org>

Defense Threat Reduction Agency – Chem-Bio Defense
<http://www.dtra.mil/chem/chem.html>

Department of Health and Human Services, Office of Emergency Preparedness
<http://ndms.dhhs.gov/NDMS/ndms.html>

Department of Defense/Dept. of Army, Director of Military Support
<http://www.dtic.mil/doms/>

Department of Defense, Nuclear, Biological, Chemical Medical reference site
<http://www.nbc-med.org/others>

Department of Defense, Office of Counterproliferation and Chemical/Biological Defense
<http://acq.osd.mil/cp/main.htm>

Department of Justice, Office for State and Local Preparedness Support
<http://www.ojp.usdoj.gov/osldps>

Domestic Preparedness (commercial site)
<http://www.domesticpreparedness.com>

The Emergency Information Infrastructure Partnership
<http://www.emforum.org>

The Emergency Net (commercial site)
<http://www.emergency.com/index.htm>

Environmental Protection Agency, Chemical Emergency Preparedness and Prevention Office
<http://www.epa.gov/swercepp>; <http://www.epa.gov/ceppo>

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<http://www.fema.gov/about/partners.html>

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<http://www.ma1boston.com>

The National Domestic Preparedness Consortium, Academic Consortium
<http://www.emrtc.nmt.edu/ndpc/main.html>

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National Emergency Rescue and Response Training Center, Texas A&M University
<http://teexweb.tamu.edu/nerrtc>

National Institutes of Health
<http://www.nih.gov>

The National Response Team, HAZMAT & Chemical Spills
<http://www.nrt.org/nrt/home.nsf>

New York City Dept. of Health
<http://www.ci.nyc.ny.us/html/doh/home.html>

Office of Counterproliferation and Chemical and Biodefense Studies
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<http://www.okcterrorisminstitute.com/index.html>

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<http://home.eznet.net/~Kenberry/>

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<http://ww.apgea.army.mil/RDA/pdbio/index.html>

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<http://ndms.dhhs.gov>

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<http://www.state.ri.us/riema/riemaaa.html>

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<http://www2.sbcom.army.mil/teu>

US Army Chemical School
<http://www.wood.army.mil/usacmls>

US Army Medical Command
<http://www.armymedicine.army.mil/armymed/default2.htm>

US Army Medical Research Institute of Chemical Defense
<http://chemdef.apgea.army.mil>

US Army Medical Research and Material Command
<http://mrmc-www.army.mil>

US Army Center for Health Promotion & Preventive Medicine
<http://chppm-www.apgea.army.mil>

UASAMRIID – US Army Medical Research Institute of Infectious Diseases
<http://www.usamriid.army.mil>

US Army National Guard Bureau
<http://www.ngb.dtic.mil>

US Army Soldier and Biological Chemical Command
<http://www.sbcom.apgea.army.mil>

US Marine Corps, Chemical Biological Incident Response Force
<http://www.mcwl.quantico.usmc.mil/openingposter3.jpg>; <http://158.237.108.181>

US Navy Chem/Bio Program
http://www.chembiodef.navy.mil/o_nav.htm

Virginia Task Force One Urban Search and Rescue Team
<http://www.vatfl.org>

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Glossary and Definitions

Includes definitions of terms that are specific to weapons of mass destruction or common terms being applied in a new manner in this document or referenced materials and Internet sites.

Acute Exposure- An exposure, often intense, over a relatively short period of time, resulting in a dosage that may cause observable/measurable effects.

Alpha Radiation- The least penetrating type of nuclear radiation; not considered dangerous unless alpha-contaminated particles enter the body.

Antiterrorism- Definitive measures used to reduce the vulnerability of individuals and property to terrorist acts.

Asphyxiants- These are agents that replace or displace oxygen, therefore interfering with normal respiration.

Attack- Sabotage or the use of bombs, chemical or biological agents, nuclear or radiological materials, or armed assault with firearms or other weapons by a terrorist or quasi-terrorist entity that causes or may cause substantial damage or injury to persons or property in any manner.

Beta Radiation- A type of nuclear radiation that is more penetrating than alpha radiation and can damage skin tissue and harm internal organs.

Biological Agents- Biological agents are microorganisms or toxins produced from living organisms that have infectious or non-infectious properties that produce lethal or serious effects in plants and animals (including human beings).

Blister Agents- Chemical agents, also called vesicants, which cause severe blistering and burns to eyes, skin, and tissue of the respiratory tract. Exposure is through liquid or vapor contact. Also referred to as mustard agents; examples include mustard and lewisite. Onset of symptoms may be delayed with some agents.

Blood Agents- Chemical agents that interfere with the cell's ability to utilize oxygen. These substances injure a person by interfering with cell respiration (the exchange of oxygen and carbon dioxide between blood and tissues). Common examples are hydrogen cyanide and cyanogen chloride.

Chemical Agents- Chemical agents are solids, liquids, or gases that have chemical properties that produce lethal or serious effects in plants and animals (including human beings).

Choking Agents- Chemical agents that cause physical injury to the lungs. In extreme cases, membranes swell and lungs become filled with fluid, which can result in asphyxiation resembling drowning. Death results from lack of oxygen; hence, the casualty is "choked." Common examples are chlorine and phosgene.

Chronic Exposure- An exposure, often mild, over a long period of time, which may have a varying impact on the individual's health status.

Consequence Management- Measures to alleviate the damage, loss, hardship or suffering caused by emergencies. These include measures to restore essential government services, protect public health and safety, and provide emergency relief to affected entities. Consequence management response is under the primary jurisdiction of the affected state and local governments. When consequence management exceeds the capability of the local or state jurisdictions, a federal

response is initiated. Federal agencies support local efforts under coordination of the Federal Emergency Management Agency (FEMA).

Contamination- The deposit or absorption of chemical or biological warfare agents (or conventional hazardous materials) on structures, areas, personnel, or objects.

Corrosive Materials- A type of chemical agent that can cause visible destruction or irreversible damage in human tissue where the material contacts the casualty.

Crisis Management- As described in Presidential Decision Directive-39, crisis management is the law enforcement response, and focuses on the criminal aspects of the event. The Federal Bureau of Investigation (FBI) has the lead in crisis management.

Distance- One of three components of the time, distance, and shielding response referring to the recommendation that emergency responders maintain a safe distance from hazardous incidents. The North American Emergency Response Guide (NAERG) serves as a quick guide to use.

Emergency Operations Plan (EOP)- An EOP is a document that (1) assigns responsibilities to organizations and individuals for carrying out specific actions at designated times or in response to specific events; (2) identifies lines of authority and organizational relationships, and outlines how actions are to be coordinated; (3) describes how people and property will be protected in emergencies and disasters; (4) identifies personnel, equipment, facilities, supplies, and specialized resources available for use during response and recovery operations; and (5) identifies steps to address mitigation concerns during response and recovery activities. EOPs may exist at the agency level in policies, procedures and protocols, and then at each level of local, county, state and federal government. Each EOP should reference the EOP above and below it in the command structure.

Emergency Support Functions (ESF)- The Federal Response Plan details 12 ESFs in place to coordinate operations during federal involvement in an incident: transportation, communications, public works and engineering, fire fighting, information and planning, mass care, resource support, health and medical services, urban search and rescue, hazardous materials, food, and energy.

Explosive- As defined by the U.S. Department of Transportation, “a substance fitting into one of these two categories: (1) any substance or article, including a device, designed to function by explosion; or (2) any substance or article, including a device, which, by chemical reaction within itself, can function in a similar manner even if not designed to function by explosion.”

Federal Response Plan (FRP)- Developed to help expedite federal support to disasters. Typically, the FRP is activated when the state’s resources are not sufficient to cope with a disaster, and the governor has requested federal assistance.

Gamma Radiation- Gamma rays are high-energy, ionizing radiation that travel at the speed of light and have great penetrating power. They cause skin burns, severely injure internal organs, and have long-term, physiological effects.

Incendiary Device- Any mechanical, electrical, or chemical device used intentionally to initiate combustion and start a fire.

Irritating Agents- Chemical agents, more commonly known as riot control agents or tear gas, which cause respiratory distress and tearing designed to incapacitate. Examples include chloropicrin, MACE, tear gas, and pepper spray.

NBC Emergencies- An NBC emergency is one in which the release of nuclear (radiological), biological, or chemical agents into the community is either threatened or intentionally made. These agents may be warfare agents (i.e., weapons of mass destruction – WMD) or commonly used industrial agents whose release results in a complex HAZMAT incident requiring specialized response capabilities.

Nerve Agents- Substances that interfere with the way nerves communicate with other nerves, muscles, and glands. Exposure is primarily through inhalation of the vapor but may also occur via eye contact, and/or contact with the liquid. Examples of nerve agents include Sarin, Soman, Tabun, and VX agent.

Personal Protective Equipment (PPE)- Includes clothing or equipment designed to protect the skin, eyes, or respiratory system from exposure to harmful levels of contaminants.

Presidential Decision Directive 39 (PDD-39)- Issued June 1995, PDD-39, United States Policy on Counterterrorism, directed a number of measures to reduce the nation's vulnerability to terrorism, to deter and respond to terrorist acts, and to strengthen capabilities to prevent and manage the consequences of terrorist use of nuclear, biological, and chemical weapons.

Radiation- For use in a terrorism plan, this term refers to nuclear radiation, not radiation as a type of heat transfer. There are three types of radiation: (1) alpha, (2) beta, and (3) gamma. Radiation is a potential source of illness or injury that may be associated with a terrorist incident.

Robert T. Stafford Disaster Relief and Emergency Assistance Act, Public Law 93-288- Authorizes the federal government to respond to disasters and emergencies in order to help state and local governments save lives, and to protect public health, safety, and property. Also referred to as the Stafford Act.

Shielding- One of three components of the time, distance, and shielding response referring to the recommendation that emergency responders maintain a significant barrier between the responder and the hazard. Examples may include vehicles, buildings, and PPE.

Size-up- Refers to the rapid mental evaluation of critical factors at any incident that may influence the course of an incident. This is the first step in determining a specific course of action.

Strategic Goals- These are general, broad statements of intent. Often referred to as “commanders intent”. By clearly defining the strategic intent of handling an incident, operational branches have the latitude to manage their resources in the most effective and efficient manner to fulfill the strategic goal.

Terrorism- As defined by the FBI, “the unlawful use of force against persons or property to intimidate or coerce a government, the civilian population, or any segment thereof, in the furtherance of political or social objectives.” This definition includes three elements: (1) terrorist activities are illegal and involve the use of force; (2) the actions are intended to intimidate or coerce; and (3) the actions are committed in support of political or social objectives.

Time- One of three components of the time, distance, and shielding response referring to the recommendation that emergency responders spend the shortest amount of time possible in the hazard area.

Toxins- Toxic substances that are naturally produced by certain species of animals, plants, and microbes. These agents may also be synthesized or refined in a laboratory setting. Toxins may include botulinum toxin, ricin, and mycotoxins.

Virus- The simplest type of microorganisms, lacking a system for their own metabolism. They depend on living host cells to multiply and cannot live long outside of a host. Types of viruses are smallpox, Ebola, Marburg, and Lassa fever.

Acronyms and Abbreviations

AEC	Agency Emergency Coordinator
AECC	Aeromedical Evacuation Control Center
AELT	Aeromedical Evacuation Liaison Team
ALC	Agency Logistics Center
AMC	Air Mobility Command
ARAC	Atmospheric Release Advisory Capability
ARC	American Red Cross
ASH	Assistant Secretary for Health
C/B	Chemical/Biological
CAP	Civil Air Patrol
CCP	Casualty Collection Point
CDC	Centers for Disease Control and Prevention
CDRG	Catastrophic Disaster Response Group
CEPPO	Chemical Emergency Preparedness and Prevention Office
CERCLA	Comprehensive Environmental Response, Compensation, and Liability Act
CFR	Code of Federal Regulations
CHEMS	Section of Community Health and EMS
CMC	Crisis Management Center
CONUS	Continental United States
DALO	Disaster Area Liaison Officer
DASHO	Designated Agency Safety and Health Official
DCE	Defense Coordinating Element
DCO	Defense Coordinating Officer
DEST	Domestic Emergency Support Team
DFC	Disaster Finance Center
DFO	Disaster Field Office
DISC	Disaster Information Systems Clearinghouse
DLA	Defense Logistics Agency
DMAT	Disaster Medical Assistance Team
DMORT	Disaster Mortuary Team
DOD	Department of Defense
DOE	Department of Energy

DOJ	Department of Justice
DOMS	Director of Military Support
DOS	Department of State
DOT	Department of Transportation
DRM.....	Disaster Recovery Manager
DRSF.....	Disaster Response Support Facilities
DSO	Disaster Safety Officer
EC.....	Emergency Coordinator
EICC	Emergency Information and Coordination Center
EM.....	Emergency Management
EMRT	Emergency Medical Response Team
EMS	Emergency Medical Service
EMT	Emergency Management Team
EMT.....	Emergency Medical Technician
EOC.....	Emergency Operations Center
EPA	Environmental Protection Agency
ERL	Environmental Research Laboratories
ERT.....	Emergency Response Team
ERT.....	Environmental Response Team
ERT-A.....	Emergency Response Team — Advance Element
ERT-N.....	National Emergency Response Team
ESF.....	Emergency Support Function
ESFLG.....	Emergency Support Function Leaders Group
EST.....	Emergency Support Team
FBI	Federal Bureau of Investigation
FCC	Federal Coordinating Center
FCO	Federal Coordinating Officer
FEMA	Federal Emergency Management Agency
FESC	Federal Emergency Support Coordinator
FORSCOM	Forces Command
FRERP	Federal Radiological Emergency Response Plan
FRMAC	Federal Radiological Monitoring and Assessment Center
FRP	Federal Response Plan
GIS	Geographic Information System

GPMRC	Global Patient Movement Requirements Center
HHS	Department of Health and Human Services
HQ.....	Headquarters
HQAMC.....	Headquarters Air Mobility Command
ICS	Incident Command System
IRR	Initial Response Resources
IRT	Initial Response Team
IST	Incident Support Team
IST-A	Incident Support Team — Advance Element
J-4/JCS	Medical Readiness Division, Office of the Joint Chiefs of Staff
JIC	Joint Information Center
JOC.....	Joint Operations Center
JPMT	Joint Patient Movement Team
JRMPO	Joint Regional Medical Planning Office
JTF	Joint Task Force
LFA.....	Lead Federal Agency
LIMS	Logistics Information Management System
MA	Mission Assignment
MAC	Mission Assignment Coordinator
MASF.....	Mobile Aeromedical Staging Facility
MCC.....	Movement Coordination Center
MERRT.....	Medical Emergency Radiological Response Team
MERS.....	Mobile Emergency Response Support
MOA.....	Memorandum of Agreement
MOC	MERS Operations Center
MOU	Memorandum of Understanding
MSCA	Military Support to Civil Authority
NCC	National Coordinating Center
NCP	National Contingency Plan
NDMS	National Disaster Medical System
NECC	National Emergency Coordination Center
NGB	National Guard Bureau
NICC	National Interagency Coordination Center
NRC.....	National Response Center

NRC.....	Nuclear Regulatory Commission
NRS	National Oil and Hazardous Substances Response System
NRT.....	National Response Team
NS/EP	National Security/Emergency Preparedness
NSC	National Security Council
NSF.....	National Strike Force
OC.....	Operations Center
OCHAMPUS..	Office of Civilian Health and Medical Program of the Uniformed Services
OEP	Office of Emergency Preparedness
OPHS	Office of Public Health and Science
OSC	On-Scene Commander
OSC	On-Scene Coordinator
OSC	Operations Support Center
OSHA	Occupational Safety and Health Administration
OSTP	Office of Science and Technology Policy
PAO	Public Affairs Officer
PD	Presidential Declaration
PDD.....	Presidential Decision Directive
POA	Point of Arrival
POC	Point of Contact
POD.....	Point of Departure
PPE	Personal Protective Equipment
PRA	Patient Reporting Activity
RAP.....	Radiological Assistance Program
RCP.....	Region Oil and Hazardous Pollution Contingency Plan
REAC/TS	Radiation Emergency Assistance Center/Training Site
REC.....	Regional Emergency Coordinator
REP	Regional Evacuation Point
REPLO.....	Regional Emergency Preparedness Liaison Officer
RERT	Radiological Emergency Response Team
RETCO.....	Regional Emergency Transportation Coordinator
RFA	Request for Federal Assistance
RHA	Regional Health Administrator
RISC.....	Regional Interagency Steering Committee

ROC.....	Regional Operations Center
RR	Response and Recovery
RRIS	Rapid Response Information System
RRT.....	Regional Response Team
RTF	Response Task Force
SARA.....	Superfund Amendments and Reauthorization Act
SCO	State Coordinating Officer
SIOC	Strategic Information and Operations Center
SITREP	Situation Report
SOP.....	Standard Operating Procedure
SSC	Scientific Support Coordinator
STOLS	System to Locate Survivors
TAES.....	Tactical Aeromedical Evacuation System
TLC	Territory Logistics Center
UC.....	Unified Command
US&R	Urban Search and Rescue
USCG	U.S. Coast Guard
USDA.....	U.S. Department of Agriculture
USPACOM	U.S. Pacific Command
VA	Department of Veterans Affairs
WMD.....	Weapon of Mass Destruction

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