

## EMS BIOTERRORISM RESPONSE GUIDELINES FOR AMBULANCE SERVICES

	<b>Physical Security</b>	<b>Operations Management</b>
<b>SEVERE</b>  <b>Severe Risk of Terrorist Attacks</b>	<p>All actions from LOW (green), GUARDED (blue), ELEVATED (yellow) and HIGH (orange) plus:</p> <ul style="list-style-type: none"> <li>•Reduce access points to absolute minimum necessary to sustain health care operations.</li> <li>•Consider relocation of personnel from targeted and nearby facilities.</li> <li>•Conduct daily briefing to include identification of potential threats and vulnerabilities.</li> <li>•Review emergency action plan - drill as necessary to assure an effective response.</li> </ul>	<ul style="list-style-type: none"> <li>•Maintain 24-hour operations.</li> <li>•Validate call roster and update staff on red status.</li> <li>•Revise staff schedules and augment as indicated.</li> <li>•Consider adding a third staff person to manage scene safety issues.</li> <li>•Activate service disaster plans.</li> <li>•Take protective measures against civil disturbances.</li> <li>•Mobilize pre-designated EMS personnel and vehicles.</li> <li>•Report patients with symptoms of potential CBRNE agent exposure to medical command.</li> <li>•Notify county EMA when EMS systems are overwhelmed &amp; assistance needed.</li> <li>•Review protocol for responding to potentially dangerous environments, i.e., dangerous gas, radiologic contamination, unusual powder present.</li> <li>•If inadvertently transporting a contaminated patient, call medical command to obtain direction for decon prior to arrival. Do not contaminate the hospital.</li> <li>•Consider CISM for staff.</li> <li>•If called to respond to suspicious event or explosion, consider secondary devices and proceed with great caution.</li> <li>•Consider the site of an explosion to be possibly a contaminated with radiological or chemical agents.</li> </ul>
<b>HIGH</b>  <b>High Risk of Terrorist Attacks</b>	<p>All actions from LOW (green), GUARDED (blue) and ELEVATED (yellow) plus:</p> <ul style="list-style-type: none"> <li>•Anticipate need for law enforcement to assist at scene and enroute to scene.</li> <li>•Verify that 911 center has alerted law enforcement to assist EMS as necessary.</li> </ul>	<ul style="list-style-type: none"> <li>•ALS services request exception to state drug list as appropriate to carry antidotes/pharmaceuticals targeted to threat and risk.</li> <li>•Review agency plan for special populations (children, elderly, homeless, etc).</li> <li>•Refresh all staff on symptoms and interventions for CBRNE.</li> <li>•Reinforce the need for personal protection equipment for personnel.</li> <li>•Stock additional supplies of personnel protective supplies.</li> <li>•Distribute materials explaining hazards and actions EMS personnel can take to protect themselves, and to clean vehicles and equipment.</li> <li>•Be suspicious of any calls for EMS to hotels, apartment buildings, restaurant shopping malls, etc., for more than one patient experiencing same symptoms.</li> <li>•Brief all staff on specific threat and protocols that apply.</li> <li>•Determine supply needs, including appropriate medications/antidotes, number of ambulances needed and being utilized. Assure supply line &amp; vehicle fuel availability.</li> <li>•Review response to radiological contaminated scenes and patients and the decontamination required before patients are transported in an ambulance.</li> <li>•Implement plan for emergency care &amp; response to staff injuries/illnesses.</li> </ul>

	Physical Security	Operations Management
<b>ELEVATED</b>  <b>Significant Risk of Terrorist Attacks</b>	All actions from LOW (green) and GUARDED (blue) plus: <ul style="list-style-type: none"> <li>•Brief key personnel on threats, changes to security patterns, potential action plans.</li> <li>•Communicate with all staff the need to enhance security awareness.</li> <li>•Determine the need to restrict building access points - escort personnel entering controlled areas.</li> </ul>	<ul style="list-style-type: none"> <li>•Review service disaster plan.</li> <li>•Report any unusual activity that might indicate an interest in using ambulances for access to scenes and locations.</li> <li>•Pre-designate personnel to respond to biological calls.</li> <li>•Pre-designate personnel to assist at inoculation centers.</li> <li>•Identify vehicles to transport patients with communicable diseases.</li> <li>•Review mass casualty incident kit: triage tags, vests for ICS, etc.</li> <li>•Consider alternate routes in case the infrastructure (highway, bridge, tunnel, etc.) is disrupted.</li> <li>•Conduct briefing by infection control personnel.</li> </ul>
<b>GUARDED</b>  <b>General Risk of Terrorist Attacks</b>	All actions from LOW (green) plus: <ul style="list-style-type: none"> <li>•Report suspicious persons, items, &amp; vehicles; unidentified vehicles parked in unusual manner.</li> <li>•Assure that emergency vehicles are secured at all times.</li> <li>•Increase liaison with local agencies, regional EMS councils to monitor threat.</li> <li>•Advise staff of their individual and service security responsibilities.</li> </ul>	<ul style="list-style-type: none"> <li>•Brief leadership and staff of elevated threat posture.</li> <li>•Emphasize personal and family preparedness. Include safe location and activation plan.</li> <li>•Report any trends and patient symptoms to medical command.</li> </ul>
<b>LOW</b>  <b>Low Risk of Terrorist Attacks</b>	<ul style="list-style-type: none"> <li>•Normal operations consistent with organizational Security Management Plan.</li> <li>•On-going emergency planning and drills.</li> <li>•On-going staff orientation.</li> <li>•On-going information sharing</li> <li>•All staff issued security credentials (badges) to be worn while on duty.</li> </ul>	<ul style="list-style-type: none"> <li>•Assure that family care plan and support measures are in place.</li> <li>•Provide photo identity card to staff.</li> <li>•Review and update personnel recall and mobilizations rosters.</li> <li>•Arrange for fuel, repairs and recovery services</li> <li>•Assure CISM intervention is planned and available.</li> <li>•Train regularly in agents/diseases; incident and unified command; triage, etc.</li> </ul>

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