




BASIC
DISASTER LIFE SUPPORT®
COURSE PRESENTATION
3.2



Session 4 – Lesson Eight A
Biologic Disasters
Applied Learning Exercise


Biologic Disasters
Scenario

- Late fall – as flu season starts
- Flu-like illnesses
 - More patients
 - Sicker
 - Negative flu swabs
 - Bad pneumonias


Debora Cartagena/CDC


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Biologic Disasters
Scenario – Status Report

- Many patients dying unexpectedly
- Emergency departments full of sick and worried well
- Occurring in multiple major cities

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Biologic Disasters
Scenario – CDC Epidemiologic Reports



Christopher Mardorf/FEMA

- Similar unusual flu illness earlier this year in Australia and then Asia
- Cases now spreading in North America and Europe

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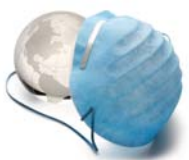
Biologic Disasters
Scenario – SITREP

- Cases multiplying
- Infections showing up on other continents
- Town running out of staff, supplies, and space to put patients



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Planning and Preparation
Resilience
Education and Training
Detection
Incident Management
Safety and Security
Assess Hazards
Support
Triage and Treatment
Evacuation
Recovery



Are my needs > resources?


Putting the PRE-DISASTER Paradigm™ into practice!

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PRE-DISASTER Paradigm™
Planning and Practice

- What issues must you consider when planning for a biologic event?
- How do you drill a biologic disaster or bioterrorism scenario?



Tim Tyson/FEMA

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PRE-DISASTER Paradigm™
Resilience

How would you **emotionally** and **mentally** prepare your population and responders for the effects of a pandemic?

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PRE-DISASTER Paradigm™
Education and Training

List the education and training responders and providers should have in anticipation of a biologic disaster, whether public health emergency or terrorism event.

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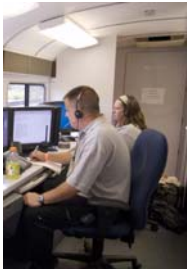
The DISASTER Paradigm™
Detection

- How will you figure out that a biologic event is occurring?
 - What will you do next?
 - Who do you call?
- What surveillance mechanisms need to be in place to detect and confirm an infectious disease outbreak?

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The DISASTER Paradigm™
Incident Management

- Who is the incident commander?
- Who is in charge of getting **key information** out to the public, and feedback to hospitals and responders?




Patsy Lynch/FEMA

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The DISASTER Paradigm™
Safety and Security

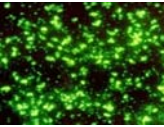
- How do you **stop the spread** of the disease?
- How will providers and responders protect themselves?
- Will health care providers show up?



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The DISASTER Paradigm™
Assess Hazards

- What is the disease?
 - How contagious is it?
 - How many people are affected?
 - Mortality and morbidity?
 - Methods of spread?
- Any populations particularly vulnerable?
- How effective are control methods, prophylaxis, treatment?



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The DISASTER Paradigm™
Support

- How will you handle the influx of patients?
 - Where will they go?
 - How will you care for them?
- Where will you get equipment, supplies, manpower?



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The DISASTER Paradigm™
Triage and Treatment

- What is the goal of triage in this case?
- How do you allocate scarce lifesaving equipment and medications?
 - Who gets ventilators, and for how long?
 - Vaccines, antivirals, antibiotics?
 - What happens when you run low on N95s?

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The DISASTER Paradigm™
Triage and Treatment

- How will you ensure compliance with vaccine and medication regimens?
- How do you accomplish mass vaccination and/or prophylaxis?
- Do you treat the ill, responders, vulnerable populations?




Mark Wolfe/FEMA

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The DISASTER Paradigm™
Evacuation

- Do you need to evacuate?
 - Partial, total?
 - Who? To where? How?
- Should you ban travel?
- How do you prevent self-evacuation?
 - Are they infected?



Mark Wolfe/FEMA

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The DISASTER Paradigm™

Recovery

- When does recovery begin?
- How can you help heal the mental and physical scars of a biologic disaster?
- When do you start scaling back mass care and alternate care sites?

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Biologic Disasters

After-Action Review

- *Situational awareness* - requires high index of suspicion, surveillance mechanisms, and clinical acumen
- *Risk communication* - essential inform public, responders with one voice, accurate and timely
- *Allocation of scarce lifesaving or sustaining resources* - must be anticipated and plans must provide guidance
- *Workforce protection* - paramount to keeping functional health and medical services delivery

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Questions?