

**MEMORANDUM**

**TO:** Members of the NMDP Radiation Injury Transplant Network (RITN)  
(formerly known as NMDP Core Contingency Network (CCN))

**FROM:** [REDACTED]

**DATE:** September 15, 2006

**SUBJECT:** Radiation Injury Transplant Network (RITN) 2006 exercise for completion  
of Milestone #4 [REDACTED]

Attached you will find the exercise to complete Milestone #4. Please review the scenario and answer the four questions enclosed to the best of your ability (please provide detailed answers). Answers must be sent to me no later than September 28<sup>th</sup> for verification of completion of Milestone #4 to receive payment [REDACTED].

This exercise presents a scenario that could involve the Radiation Injury Transplant Network (RITN). The intent of this exercise is to stimulate communication about the possible ramifications resulting from the scenarios with your staff and with your critical partners (e.g. emergency room, admitting, laboratory, etc...).

This scenario does not have all the information that you may feel is necessary to provide a fully informed response. As with most emergency situations decisions must be made with less than complete information, therefore please attempt to formulate your response based on the information provided. If you do have questions please feel free to contact me at [REDACTED].

Questions can be submitted electronically by email to [REDACTED] or by fax to [REDACTED]. Questions should be either typed or in legible handwriting.

Thank you for your time and participation in the RITN.

# **National Marrow Donor Program**

## **Radiation Injury Transplant Network (RITN)**

### **2006 Milestone #4 Exercise**

#### **Contents:**

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**Deadline for submission of questions is  
September 28, 2006.**

# Radiation Injury Transplant Network (RITN) Exercise

Formerly known as Core Contingency Network (CCN)

**Intent:** To have RITN center staff and their critical partners (e.g. admitting, administration, laboratory, emergency services, etc...) discuss in person the possible ramifications resulting from an event that impacts the RITN.

## Scenario:

Last week the world was shocked to hear that uncontained radioactive material was found on four public transit trains of the Gotham City Transit Authority. Authorities believe that the radioactive sources are from construction diagnostic tools stolen 18 months ago. There are no confirmed suspects at this time, but a radical group calling themselves the Gotham City Liberation Party has claimed responsibility.

Authorities are uncertain exactly how long the radioactive sources were on the trains. However they do know it is no more than three weeks since all trains were swept with Geiger counters during a Gotham City law enforcement exercise three weeks ago. The exercise identified the need for radiation detection devices, the radioactive sources were discovered during the installation of these fixed radiation detection devices. The radioactive sources were disguised as seat support components, and had some shielding surrounding the devices to reduce the visibility to radiation monitors.

The Gotham City Transit Authority is a metropolitan transportation system that has an average daily (business day) ridership of 1 million passengers. Many of these passengers travel from suburban locations resulting in 30-45 minute train rides.

In light of the thousands of travelers of the transit system that are concerned about their potential exposure, Gotham City immediately launched a massive radiation education campaign. Despite this education campaign, hospitals in the greater Gotham City region are overwhelmed with walk in patients that are concerned that sniffles, bumps and bruises are radiation related.

650 victims have been identified as having some level of Acute Radiation Sickness (ARS). RITN has been asked to accept these patients to provide lifesaving treatments. Based on this each center is asked to accept 50 patients for treatment.

## Assumptions:

1. Altered standards of medical care were authorized by the Department of Health and Human Services.
2. FDA Emergency Use Authorization is approved for the use of Neupogen for ARS treatment.
3. The Strategic National Stockpile (SNS) is authorized to provide Neupogen for use in ARS treatment.
4. Congress approved the funding of emergency relief and medical cost reimbursement.
5. Patients were decontaminated at the evacuation point outside Gotham City.
6. The 50 ARS patients can not be sent to other hospitals for treatment.
7. Patients were triaged at the evacuation point; those with visible injuries (e.g. burns, broken bones or lacerations) were sent to other hospitals for treatment of these injuries prior to consideration for ARS treatment.

## Questions (questions can be submitted either typed or in legible handwriting):

1. How many BMT beds will be available at your center tomorrow?
2. How many beds comparable to BMT beds will be available tomorrow (e.g. rooms with positive pressure and HEPA filtration)?
3. Assuming 50 patients exceeds your bed availability
  - 3.1. What could you do to accept these 50 patients (brainstorm)?
  - 3.2. How would these patients care be managed?
  - 3.3. What critical shortages would need to be addressed (staff, supplies or equipment)?
4. Does your hospital have a procedure to clear patients before admitting to reassure staff that these patients are not contaminated with radioactive material?