



2008 Annual RITN Tabletop Exercise

Contents (5 pages total):

Orientation memorandum

Exercise scenario:

Incident Message 1

Conduct Initial Incident Response Steps

Incident Message 2

Assumptions

Exercise Questions

Deadline for submission of answers to exercise questions is July 30, 2008 (unless otherwise coordinated in advance).

MEMORANDUM

TO: Members of the Radiation Injury Treatment Network (RITN)
FROM:
DATE: April 23, 2008
SUBJECT: Radiation Injury Treatment Network (RITN) 2008 tabletop exercise

Attached you will find the tabletop exercise to complete one of your required RITN tasks.

Please review the scenario and answer the applicable questions enclosed to the best of your ability. Answers will only be accepted when submitted through the Internet link provided no later than July 30, 2008 (unless otherwise coordinated). Only one person should submit answers for each RITN center. Some questions may be repetitive from previous exercises, please determine the current answer. Web link for answer submission:

██████████

This exercise presents a scenario that could involve RITN. This exercise should be completed with a group of appropriate staff members. This is a low stress exercise that should get everyone thinking and talking about incident response at your center.

The intent of this exercise is to stimulate communication about the possible ramifications resulting from the scenario with your staff and with your critical partners. This group of staff should meet, for approximately two hours, to review the scenario and determine the best answers possible to the questions. All participants should review a copy of your centers RITN related SOP(s) prior to the exercise. Your RITN SOP(s) should be scrutinized for applicable updates and improvements.

Examples of possible participants include (not an all inclusive list):

Transplant Center:

- Medical director
- Another physician
- Primary coordinator
- RITN POC
- Nurse
- Admission process representative
- Administrator/hospital executive
- Emergency management staff
- Pharmacy staff member
- Other staff as needed

Donor Center:

- Medical director
- Primary coordinator
- RITN POC
- Representative from physical exam provider
- Representative from collection center/apheresis center
- Vendor/contractors (laboratory for IDMs, etc...)
- Other staff as needed

Cord Blood Bank:

- Medical director
- Primary coordinator
- RITN POC
- Administrator
- Other staff as needed

The above examples would be the “dream team” of exercise participants (only meant as a suggestion), do what is reasonable for your center.

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 ██████████

Thank you for your time and participation in this critical national response initiative.

Radiation Injury Treatment Network (RITN) 2008 Exercise

=====**EXERCISE**=====**EXERCISE**=====**EXERCISE**=====
=====**RITN NOTIFICATION**=====
=====**This message serves as NOTIFICATION OF ACTIVATION of RITN**=====
=====**MESSAGE 1 - May 1, 2008 at 0800 CDT**=====
=====

SITUATION:

This morning VNN reported that a terrorist nuclear bomb (a.k.a. Improvised Nuclear Device (IND)) was detonated in the bustling metropolitan city of South Park. Initial reports suggest that the detonated device was of a similar magnitude as the bomb dropped on Hiroshima on August 6, 1945. The nuclear yield of that bomb (known as “Little Boy”) was between 10 – 12 kt. This incident could not have come at a worse time as the city and all surrounding communities were celebrating the annual Cactus Root Festival, drawing an average of 500,000 attendees. South Park’s 2006 population was reported as 1,234,567 living in a land area of 24.68 square miles, resulting in a densely populated city of 50,000 residents per square mile.

Law enforcement has established a perimeter on the Northern side of the city, due to the radioactive plume and resulting fallout residents located south of town are asked to shelter in place for at least three days, at which time a coordinated evacuation plan will be ready. First responders have begun to setup casualty collections points outside the ‘hot zone’, on the North, East and Western sides of town. These collection points serve as an initial triage and decontamination location, before victims are evacuated to hospitals, field medical sites or to temporary housing facilities further outside the cities perimeter.

In the first hour after the detonation chaos ensued when many residents were prevented from attempting to self evacuate, surrounding communities established roadblocks to prevent the spread of contamination. Resulting in major roads being turned into gigantic campgrounds, as frustrated evacuees refused to return to the disaster area. Mayor Timmy, a spokesperson for the surrounding communities, stated that “until each vehicle and its occupants are decontaminated no one will be allowed to spread the potentially deadly radioactive contamination.” Furthermore, “the use of deadly force has been authorized for police, deputized militias and anyone carrying a gun.”

Panic has set in as citizens nationwide present themselves to local medical facilities concerned about radioactive contamination. Additionally, Internet and telecommunications systems are bogged down to the point of ineffectiveness. One exception, as during previous recent national disasters, is the unfettered use of text messaging. Unfortunately, use is primarily by people under 30 years of age.

At this time minimal information is available about the number of casualties as well as the intensity of their injuries.

No group has claimed responsibility for the attack; it is suspected that the hard-line terrorist group South Park Jihad may have eliminated all of its members as a result of the detonation.

City Background:

South Park is one of the most populous non-coastal cities in the United States, and has been since shortly after its establishment in 1997, South Park is renown for many of its landmarks, and tourist attractions; however it is touted as the home of the youngest candidate for president (Eric Cartman).

For more than a decade, it has been one of the world's major centers of commerce and finance. South Park is generally not considered to be a city with global influence over media, politics, education, entertainment, arts and fashion. But, South Parks politics regularly are global in reach.

The name South Park derives from the words South and Park, or loosely translated as “el parque del sur”. It has been also translated as “esa demostración maldita” among other variations depending on the culture and syntax applied. The name was first coined by its discoverers T. Parker and M. Stone when they realized they were at a playground on the southern edge of town.

=====**END TRANSMISSION**=====
=====**EXERCISE**=====**EXERCISE**=====**EXERCISE**=====
=====

ACTIONS:

1. Activate center emergency response plans per your organizations SOP.
2. Gather your incident response team to determine your centers response capabilities.
3. Discuss your centers initial steps.

Radiation Injury Treatment Network (RITN) 2008 Exercise

=====EXERCISE===== EXERCISE ===== EXERCISE =====
===== RITN NOTIFICATION =====
===== MESSAGE 2 - May 1, 2008 at 1000 CDT =====
=====

SITUATION:

After 48 hours the first responders have triaged 300,000 victims.

Victims were triaged into categories I through V:

- I most likely to self recover
- II requires minor support
- III requires intensive supportive care
- IV most likely will require a transplant
- V comfort care only

150,000 Level I victims were released with instructions to return in 7 days for a checkup. Currently 125,000 victims are housed in makeshift field treatment facilities (gymnasiums, tents, and some open field areas) that are identified as a Level II victim. Level III and Level IV victims total approximately 5,000. Level V victims are being tended to as best as possible by volunteers and available responders.


The Department of Health and Human Services, Assistant Secretary of Preparedness and Response requests that RITN provide assistance in receiving for treatment 5,000 patients. These victims are believed to have been exposed to significant amounts of ionizing radiation.

===== END TRANSMISSION =====
=====EXERCISE===== EXERCISE ===== EXERCISE =====

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/GCSF for ARS treatment.
3. The Strategic National Stockpile (SNS) is authorized to provide Neupogen/GCSF for use in reconstituting marrow function (to be requested through the NMDP).
4. Congress approved the funding of emergency relief and medical cost reimbursement.
5. As part of the triage process and initial treatment patients with trauma injuries (e.g. burns, broken bones or lacerations) were sent to other hospitals for treatment of these injuries first.
6. RITN composition: 36 transplant centers, 9 donor centers and 7 cord blood banks

ACTIONS:

1. Activate center emergency response plans per your organizations SOP.
2. Gather your incident response team to determine your centers response capabilities.
3. Discuss your centers initial steps.
4. Answer exercise questions submit online via:


Radiation Injury Treatment Network (RITN) 2008 Exercise

Exercise Questions (submit online via:

Transplant Centers:

1. How many patients can be admitted for adequate treatment today?
2. How many patients can be admitted for adequate treatment tomorrow?
3. How many BMT/oncology medical staff are available now (MD, NP, PA, RN, etc...)?
4. How many medical staff of other specialties can be cross trained or managed by BMT/Hem/Onc staff to expand your capabilities (MD, NP, PA, RN, etc...)?
5. Are there liability concerns?

All Centers (transplant, donor, and cord blood bank):

6. How many people participated in your exercise (keep a list of all who participated by name)?
7. Identify all members of your incident response team?
 - a. Physician
 - b. Physicians assistant
 - c. Nurse (RN, LPN, etc..)
 - d. Emergency management staff
 - e. Executive management (administration)
 - f. Emergency medicine staff (ER)
 - g. Pharmacy staff
 - h. Health physicist
 - i. Logistics staff
 - j. Medical director
 - k. Another physician
 - l. Primary coordinator
 - m. RITN POC
 - n. Admission process representative
 - o. Social worker
 - p. Representative from physical exam provider
 - q. Representative from collection center or apheresis center
 - r. Vendor/contractors (laboratory for IDMs, etc...)
 - s. Other
8. Once RITN is activated does your emergency communications plan incorporate a test of all equipment to verify functionality?
9. How many staff members are aware of the location of your emergency communications equipment (satellite phone and GETS card)?
10. How many staff have completed a test call with the satellite telephone?
 - a. What is the approximate % of staff?
11. How many staff have completed a test call with the GETS Card?
 - a. What is the approximate % of staff?
12. Is at least one of the satellite telephone batteries charged each month?
13. Have you planned for communicating by satellite phone?
14. How does your center plan to use the satellite phone?
 - a. We will make calls as needed
 - b. RITN staff member will sit outside with the phone
 - c. Another staff member will sit outside with the phone (from another department)
 - d. Phone will be maintained by other department (emergency management, etc...)
 - e. Other
15. Does your emergency communications plan account for receiving phone calls to the satellite telephone?
16. Do you feel that your emergency communications plan will be effective?