

Bioterrorism: guidelines for hospitals

Bacillus anthracis



awareness, surveillance, communication & planning
for management of suspected biological attacks

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Introduction

Most experts would agree that hospital emergency departments and outpatient centers will play a crucial role in the response to an act of bioterrorism. The need to provide lifesaving medical care for the large number of critically ill patients produced by such events will challenge even the best-prepared and best-equipped institutions. Many hospitals nationwide have begun to review their emergency management plans to include preparation and response to bioterrorism. Above and beyond their response function, hospitals have an opportunity to lead the prevention or limitation of a bioterrorist-caused event. Because an attack employing a biological agent will most likely be covert, the timely and informed analysis and management of the (often subtle) early indications of a biological attack, can result in containment of the spread of infection and the savings of hundreds, perhaps thousands of lives. **A planned approach to preparedness, recognition and response to bioterrorism includes: awareness, surveillance, communication and planning.**

Awareness

Hospital emergency department staff need to be aware of the modes of transmission, clinical presentation, laboratory requirements, treatment, and sequelae for biological agents. People infected with biological agents will likely present early on with flu-like symptoms and progress rapidly to life threatening diseases.

Indicators of a potential bioterrorist event or disease outbreak:

- Unusual disease presentation or unusual illness in a population
- Disease with an unusual geographic or seasonal distribution
- Large numbers of cases of unexplained diseases or deaths
- Large numbers of ill persons with a similar disease or symptoms

Bioterrorism

is the purposeful
release or use of a
biological agent to
cause serious
illness and/or death
in a large number
of people.

plague
brucellosis
tularemia

Diseases likely to be associated with biological terrorism:

Anthrax	Botulism
Smallpox	Plague (Bubonic & Pneumonic)
Tularemia	
Hemorrhagic fevers (Ebola, Marburg, Dengue and Yellow fever)	

Surveillance

Perhaps the greatest contribution that any hospital can make to prevent or limit the success of a biological attack is in the area of surveillance. While electronic surveillance and analysis systems will offer efficient methods to detect potential bioterrorist events, they are at least a few years away. In the meantime; however, hospitals can manage very effective surveillance systems that will allow them to identify unusual events and other community-wide disease outbreaks. Such surveillance is intended to distinguish any significant deviations from what would be expected. This surveillance can be as simple as a log review at the end of each shift, or as sophisticated as the application of a statistical aberration detection algorithm. If a distinct variation from the normal pattern is detected, consult with your county health department or with the Bureau of Epidemiology at (850) 245-4401 (24-hour number).

Some guidelines for hospital bioterrorism/outbreak surveillance are:

- Hospitals should first consider using simple systems with existing data
- Someone must be assigned the responsibility
- Standard reports are helpful for periodic analysis
- Review of data collection frequency and quality is essential
- Hospitals are encouraged to consult with county health departments about suspect events

Hospitals desiring consultation on how to set up an internal surveillance program or wanting to participate in one of the Department of Health's bioterrorism surveillance projects should contact the Bureau of Epidemiology, Surveillance Section at (850) 245-4401.

This brochure deals with **bioterrorism**,
which is different than chemical or
radiological terrorism.



botulism smallpox anthrax q-fever brucellosis tularemia anthrax

Communication

Dramatic changes in an event can occur rapidly during a disaster. The ability to communicate effectively with each other, the various support departments, hospital management, local and state emergency medical services and the public is essential for disaster recognition and response. Information should flow in a manner that is quick, secure and continuous.

IF you suspect something suspicious is taking place in your facility, you should notify your infection control department. If the hospital has no infection control department, contact your local health department or the Bureau of Epidemiology for consultation.

IF you think your hospital is involved in an actual bioterrorism event, call the FBI office in your region, in addition to contacting the hospital disaster coordinator, county and state warning points:

- (904) 721-1211 Jacksonville**
- (813) 273-4566 Tampa**
- (305) 944-9101 Miami**

Planning

Regional planning and coordination must come first if individual hospitals are to plan effectively and to make the best use of their unique resources. Institution specific response plans should be prepared in partnership with local health departments (invite these partners to your planning session). Individual facilities should determine the extent of their bioterrorism readiness and identify needs, which may range from local emergency networks, to activation of large, comprehensive communication and management networks. Existing local emergency plans should be reviewed and a multidisciplinary approach outlined that includes local emergency medical services (EMS), police, fire departments, public health and media relations in addition to healthcare providers and infection control practitioners. Annual disaster preparedness drills can improve response capacity by incorporating a bioterrorism scenario to test and refine Bioterrorism Readiness Plans at each individual facility.

Include a plan for communication in your disaster plan.

Frequently Asked Questions:

Which biological agents are the highest risk?

Anthrax, Botulism, Smallpox, Plague, Tularemia, VHF

Why are current concerns about bioterrorism valid?

The allure of biological terrorism has grown and biological agents are readily available and accessible.

How and why should the medical community develop a bioterrorism readiness plan?

Bioterrorism readiness plans should be prepared in partnership with local health departments. It will allow rapid institution of control measures to prevent further spread of the diseases caused by biological agents.

What are the issues facing emergency room and infection control practitioners if a bioterrorism event occurs?

Staffing, patient triage, supplies, decontamination, quarantine, prophylaxis, and medical management of patients.

How can the medical and public health communities increase surveillance and detection practices?

By developing and implementing surveillance programs in hospitals and at the local and state level.

Internal Contacts:

- Administration: _____
- Infection Control: _____
- Hospital Disaster Coordinator: _____
- Security: _____
- Public Relations: _____

External Contacts:

- Local County Health Department: _____
- Bureau of Epidemiology: (850) 245-4401**
- Local Law Enforcement: _____
- Federal Bureau of Investigation: _____
- State Warning Point: (800) 320-0519**

**Florida Department of Health
Division of Disease Control
Bureau of Epidemiology**

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