A. Introduction

A public health emergency in Delaware County or neighboring area involving exposure to a chemical nerve agent or an organophosphate-based pesticide would likely produce numerous casualties in urgent need of treatment. In such an event, today’s limited local supply of nerve agent antidotes, in hospitals and/or with EMS units, could quickly be committed and exhausted. The federal government has established the Strategic National Stockpile (SNS) to provide urgently needed medications and supplies to the affected area. However, following a federal decision to deploy, the SNS may take up to 12 hours to arrive in the affected area. Treatment for nerve agent exposure must begin sooner. With this in mind, the federal government has established the SNS CHEMPACK Project to provide a sustainable, supplemental source of urgently needed nerve agent antidotes for large-casualty events by pre-positioning these items at select hospitals throughout New York State (NYS) including Delaware County. In time of emergency the CHEMPACK nerve agent antidotes and related medical supplies would be available for distribution by Delaware County to additional hospitals and EMS units in the area for treatment of nerve agent exposure.

B. Purpose

The purpose of this Attachment is to identify policies and responsibilities for the management, storage, distribution and use of nerve agent antidotes in Delaware County to ensure the effective use of the CHEMPACK assets.

C. Scope

This Attachment applies to any exposure to chemical nerve agents where local medical treatment capabilities are exceeded, necessitating the use of CHEMPACK assets.

D. Situation

A public health emergency necessitating the need for CHEMPACK assets would most likely fall under one of the following two scenarios:

1. A terrorism event involving a chemical nerve agent has produced symptomatic casualties in immediate need of supplies in the CHEMPACK Program.

2. An accidental release of an organophosphate-based pesticide involving numerous symptomatic casualties in immediate need of supplies in the CHEMPACK Program.

E. Assumptions

1. A deliberate or accidental nerve agent release can occur anywhere. Any major release would probably require additional supplies of nerve agent antidotes.
2. The ‘forward’ placement of CHEMPACK assets in hospitals in Delaware County will expedite delivery of antidotes to locations that require them in the event of a nerve agent emergency.

3. The CHEMPACK distribution effort during an emergency will be the responsibility of the Delaware County emergency operations center (EOC).

4. Hospital care providers may be the first to recognize the signs/symptoms of exposure to nerve agents, and may be the first in the County to utilize CHEMPACK assets.

5. The decision to use CHEMPACK assets should be medically driven and can be made by local medical personnel.

6. Hospital and County emergency response officials will closely coordinate their actions to effectively distribute CHEMPACK assets.

7. False alarms of activations of CHEMPACK assets may occur and will require communication and coordination among Federal, State, hospital and County officials.

8. Based upon incident demands, locally staged CHEMPACK assets may be exhausted, requiring additional CHEMPACK assets from other locations outside the County.

9. In the event that the Strategic National Stockpile (SNS) is needed to support the incident, response operations will be conducted as stated in the SNS Appendix to the Delaware County Terrorism Incident Annex.

F. Concept of Operations

Delaware County will open the CHEMPACK containers and use CHEMPACK assets only when it is determined that a nerve agent release has threatened the medical security of the community, has put multiple lives at risk, is beyond local emergency response capabilities and it is medically necessary to save lives.

Distribution of CHEMPACK assets will involve numerous agencies within the County. The CHEMPACK program relies on a “Hub-and-Spoke” system that will allow asset coverage across the County and the State. CHEMPACK assets are stored in containers at one hospital (“Hub”) in Delaware County. These containers are in one of two formats: hospital containers and EMS containers. Each container is preconfigured with color-coded boxes that, when an emergency occurs, will allow the container contents to be organized into portions that will be distributed to specified hospitals and EMS units in the County (“Spokes”) and in neighboring counties. Hub and Spoke locations have been pre-designated including how much CHEMPACK material they will initially receive. These designations are found on pages 6-7 and in Tab 1.

The designation of Spoke hospitals and the CHEMPACK assets assigned to each are for planning purposes only. During an actual event, the assets are distributed according to need. Thus, the Spoke locations and asset assignment could change.
The CHEMPACK program in Delaware County occurs in two distinct phases.

Storage (Pre-Emergency)

CHEMPACK containers are stored at one hub hospital in Delaware County. Each container is on wheels and weighs between 500 to 700 lbs. The container dimensions are 64.5” High, 43”Wide, and 60.7”Long. They have Lexan® Plexiglas walls lined with a hardened wire mesh to conform to FDA and the Drug Enforcement Agency (DEA) storage requirements for schedule IV controlled substances.

To extend to the maximum the shelf life of these CHEMPACK pharmaceuticals while stored, the federal Shelf Life Extension Program (SLEP) will apply. SLEP requires that the antidotes remain the property of the federal government while in storage and regulates the conditions of storage. This requires that the containers be electronically monitored for security and environmental conditions. While in storage CHEMPACK containers are equipped with a Sensaphone® 2000 monitoring device. The Sensaphone® continuously monitors the containers for intrusion, environmental conditions (temperature), and electrical power. The Sensaphone® will notify (by phone call) federal CHEMPACK personnel if problems are detected. The Sensaphone® validates the environmental storage of CHEMPACK supplies and is not to take the place of appropriate security to be provided at the storage location.

The federal CHEMPACK personnel are responsible for any re-labeling and repackaging of the CHEMPACK material and will ensure the pharmaceuticals are maintained in a ready-to-use state.

Distribution (Emergency)

The Distribution Phase of utilizing CHEMPACK assets will only occur during an event involving nerve agent exposure that exceeds Delaware County’s response capabilities. The decision to use CHEMPACK assets resides with identified medical and emergency officials in Delaware County as specified in Section I. of this Attachment.

An example of an event leading to the distribution of CHEMPACK assets is as follows: The beginnings of an event involving a nerve agent can be discovered in various ways including a device dispersing a nerve agent with victims at a location (e.g., sporting event, transportation terminal) becoming incapacitated, and/or victims seeking treatment at hospital emergency rooms and medical clinics. Local emergency response identifies a likely nerve agent. EMS begins treatment at the scene with existing nerve agent antidotes which will quickly be depleted. A request is made by EMS through dispatch to its assigned Hub hospital for CHEMPACK assets. The hub hospital emergency department physician(s) authorizes that the CHEMPACK EMS container be opened after the appropriate code is given and hospital personnel oversee the breakout of the CHEMPACK container(s) contents. Local law enforcement personnel provide security and transport for the container assets to the EMS spoke location where they are used in the field to treat victims.
Ambulatory victims may appear at hospital emergency rooms. Hospital nerve agent antidotes will be quickly exhausted. This triggers a request for CHEMPACK assets from spoke hospitals to the hub hospital. Hub hospital emergency department physicians would authorize the release of the CHEMPACK Hospital container assets. Local law enforcement personnel provide security and transport for the container assets to the spoke hospital location.

G. Agency Roles/Responsibilities/Authorities

1. DELAWARE COUNTY EMERGENCY MANAGEMENT
   - Authorize the opening of CHEMPACK assets as the situation warrants.
   - Receive immediate notification of the opening of CHEMPACK assets whenever authorized by another official or medical professional.
   - Notify the Delaware County Sheriff’s Dept. of the opening of CHEMPACK assets and the need for security and transport.
   - Notify Delaware County Public Health of the opening of the CHEMPACK assets, unless the Health Dept. had already notified Emergency Management of the opening.
   - Notify and coordinate other County agencies supporting the use of CHEMPACK assets.
   - Notify SEMO that CHEMPACK material is accessed, distributed, or used.
   - Ensure County agency personnel with key roles in the implementation of this Attachment receive initial training and annual retraining. Training containers are available from the State CHEMPACK program.
   - Test this Attachment at least annually through a table-top exercise. Functional drills may be conducted to test specific components of the Attachment.
   - Participate in Joint News Center (JNC) regarding the issuance of public information on the availability of treatment.

2. DELAWARE COUNTY PUBLIC HEALTH DEPARTMENT
   - Authorize the opening of CHEMPACK assets as the situation warrants.
   - Receive notifications from Hub hospitals that CHEMPACK assets have been accessed.
   - Notify Delaware County Emergency Management and New York State DOH that CHEMPACK material is accessed, distributed, or used.
   - Provide information on CHEMPACK distribution and medication protocols to county emergency personnel and medical personnel as requested.
   - Coordinate multi-hospital CHEMPACK training and exercising.

3. DELAWARE COUNTY SHERIFF’S DEPARTMENT
   - Provide security and transport for CHEMPACK assets from Hub to spoke locations.

4. DELAWARE COUNTY EMS COORDIANATOR
• Ensure that EMS community is familiar with CHEMPACK assets.
• At time of emergency, prioritize and assign CHEMPACK EMS assets among EMS Units as necessary.

5. DELAWARE COUNTY REGIONAL EMERGENCY MEDICAL ADVISORY COMMITTEE (REMAC)

• Develop policies, procedures, and triage, treatment, and transportation protocols for CHEMPACK EMS assets which are consistent with the standards of the State Emergency Medical Advisory Committee and which address specific local conditions.

6. DELAWARE COUNTY CHEMPACK HOSPITAL STORAGE LOCATION (Hub)

• Maintain CHEMPACK storage pursuant to federal and state guidelines including routine reporting requirements.
• Develop and maintain a Hospital CHEMPACK Emergency Plan.
• Authorize the opening of CHEMPACK assets as the situation warrants.
• Immediately notify Delaware County Public Health that CHEMPACK material is accessed, distributed, or used. If such access is accidental or if there are SENSAPHONE false alarms, this notification should be made during normal business hours.
• Upon notification of authorization of the opening of CHEMPACK assets provide staff to assist in container opening and loading.

H. Readiness

1. Planning and Plan Maintenance

   This Attachment will be routinely updated and supplemented as Federal, State and County CHEMPACK plans and procedures evolve. Plan changes will be made based upon experiences and lessons-learned from drills and exercises. Contact numbers contained in this Attachment will be updated on a quarterly basis. The County Emergency Management Office coordinates plan maintenance activities.

2. Training and Exercises

   County personnel with key roles in the implementation of this Attachment will receive initial training and annual retraining.

   This Attachment will be tested at least annually through a table-top exercise involving key County agencies. Functional drills may be conducted to test specific components of this Attachment.

   Practice EMS and/or Hospital CHEMPACK containers will be provided by NYS for use in training and exercises. Practice containers (PC) will be filled with boxes that replicate both the
size and weight of the actual CHEMPACK containers. In addition, each Hospital PC will contain
240 training auto injectors, and each EMS PC will contain 480 training auto-injectors, for use by
County personnel during training events. These training auto-injectors can be used repeatedly
without any risk to individuals. The other material will consist of weighted marked CHEMPACK
training boxes.

The Emergency Management Office coordinates training and exercising relative to this
Attachment, with the exception of hospitals. Delaware County Public Health will coordinate
multi-hospital training and exercising.

I. Response

Distribution of CHEMPACK assets by Delaware County will be integrated into the
existing incident response organization.

1. Distribution Process

Upon a decision by an Delaware County officials or hospital medical personnel,
CHEMPACK assets may be used to respond to a situation. Within Delaware County, only the
following can make the determination that CHEMPACK containers may be opened and used:

a. Hub Hospital Emergency Room Physicians or Medical Control Physicians
b. Director of Public Health/or designee
c. Emergency Management Director/or designee
d. EMS Coordinator

CHEMPACK containers are stored at the following Hub hospital in Delaware County as
follows:

1. Margaretville Memorial Hospital, 42084 St Highway 28, Margaretville, NY:

   2 CHEMPACK Containers: 1 Hospital Container, 1 EMS Container

The contents of each container are in several boxes and are listed in Tab 1. Although the
overall contents of the two hospital containers are identical, the boxes are configured in different
combinations to provide several options in delivery to spoke locations. The boxes are in
designated color-coded and labeled boxes for distribution to spoke locations as follows:

Margaretville Memorial Hospital, Hospital Container

BOXES H-3 (Yellow) –
BOXES H-3 (Lt. Blue) –
BOXES H-4 (Orange) – Margaretville Memorial Hospital, EMS Container

BOXES E-1 (Green) – for transport to EMS Unit
BOXES E-2 (Red) – for transport to EMS Unit

Upon notification of CHEMPACK activation, the County Sheriff’s Department will coordinate CHEMPACK transportation requirements. Sheriff’s Department vehicles will be the primary means for CHEMPACK transport. Sheriff’s vans are preferred for ease of loading and unloading; however, patrol cars can also be used as the component boxes fit in a sedan.

If there is any confusion or disagreement regarding the assignment and distribution of CHEMPACK assets to EMS Units, the County EMS Coordinator will prioritize and make final assignments.

2. Security

CHEMPACK containers include a schedule IV controlled substance, diazepam, which must be secured according to Drug Enforcement Agency (DEA), Food and Drug Administration (FDA), and state pharmaceutical regulations. The County Sheriff’s Department will coordinate security measures for CHEMPACK asset distribution.

a. Receipt and Sign-off

This Attachment contains the methodology to transfer CHEMPACK assets from a storage location located within DELAWARE COUNTY to an emergency scene or spoke hospital. Personnel authorized to transport CHEMPACK material may be any person having official duties for emergency response operations, and authorized by persons in charge of any given scene. A chain of custody for CHEMPACK material must be documented. A Controlled Substance Custody Form was developed by NYSDOH to record the transfer of material from a storage location to either an emergency scene or a hospital. This form is simple, so as not to delay the delivery of the assets to an emergency scene. Hospital supplies must be delivered directly to a doctor and/or a licensed pharmacist, and their signature recorded. An example Controlled Substance Transfer Form is included as TAB 2. Copies of this form will be attached to the outside of the CHEMPACK container for easy access in the event of an emergency.

A simple checklist to document the amount of CHEMPACK material returned to a cache location following an emergency (and the amount of supplies used) is found in TAB 3. This information must be reported to the NYS Department of Health after an emergency.

b. Long-term Dispensing Operations

Delaware County officials will work with NYS officials to determine the need for extended or long term-dispensing efforts or for follow-on resupply of required medications. Resupply operations will be done through the SNS Program plans. Requests for additional SNS
assets will be coordinated through the County Emergency Management Office to the State Emergency Management Office.

**TAB 1**

**MARGARETVILLE MEMORIAL HOSPITAL CHEMPACK CACHE**

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Hospital Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Margaretville Memorial Hospital</td>
<td>H-3 Host Hospital</td>
</tr>
<tr>
<td>O’Connor Hospital</td>
<td>H-3 Spoke Hospital</td>
</tr>
<tr>
<td>Delaware Valley Hospital</td>
<td>H-4 Spoke Hospital</td>
</tr>
</tbody>
</table>

Hospital Chempack

Hospital Hub

Margaretville Memorial Hospital

![Diagram of hospitals connected to Margaretville Memorial Hospital, O'Connor Hospital, and Delaware Valley Hospital]
COMMUNITY MEMORIAL HOSPITAL EMS CACHE

<table>
<thead>
<tr>
<th>EMS</th>
<th>EMS Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMS Unit</td>
<td>E-1</td>
</tr>
<tr>
<td>EMS Unit</td>
<td>E-2</td>
</tr>
</tbody>
</table>
Breakdown of Material by location type.

**Hospital Partitions**

<table>
<thead>
<tr>
<th>(Number of Boxes)</th>
<th>H3</th>
<th>H3</th>
<th>H4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mark 1 autoinjector Kits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Atropine Sulfate 0.4mg/ml 20 ml</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Pralidoxime 1gm inj 20 ml</td>
<td>3</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Atropen 0.5mg</td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Atropen 1.0mg</td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Diazepam 5mg/ml autoinjector</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diazepam 5mg/ml vial 10 ml</td>
<td>6</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>Sterile Water for Injection (SWFI)</td>
<td>6</td>
<td>6</td>
<td>6</td>
</tr>
</tbody>
</table>

**EMS Partitions**

<table>
<thead>
<tr>
<th>(Number of Boxes)</th>
<th>E1</th>
<th>E2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mark 1 autoinjector Kits</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Atropine Sulfate 0.4mg/ml 20 ml</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Pralidoxime 1gm inj 20 ml</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Atropen 0.5mg</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Atropen 1.0mg</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Diazepam 5mg/ml autoinjector</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Diazepam 5mg/ml vial 10 ml</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Sterile Water for Injection (SWFI)</td>
<td>4</td>
<td>6</td>
</tr>
</tbody>
</table>
## CHEMPACK Packaging

<table>
<thead>
<tr>
<th>Product</th>
<th>Amount in a box</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mark 1 autoinjector Kits</td>
<td>240 injectors per box</td>
</tr>
<tr>
<td>Atropine Sulfate 0.4mg/ml 20 ml</td>
<td>100 vials per box</td>
</tr>
<tr>
<td>Pralidoxime 1gm inj 20 ml</td>
<td>276 vials per box</td>
</tr>
<tr>
<td>Atropen 0.5mg</td>
<td>144 injectors per box</td>
</tr>
<tr>
<td>Atropen 1.0mg</td>
<td>144 injectors per box</td>
</tr>
<tr>
<td>Diazepam 5mg/ml autoinjector</td>
<td>150 injectors per box</td>
</tr>
<tr>
<td>Diazepam 5mg/ml vial 10 ml</td>
<td>25 vials per box</td>
</tr>
<tr>
<td>Sterile Water for Injection (SWFI)</td>
<td>400 per box</td>
</tr>
</tbody>
</table>
CHEMPACK
CONTROLLED SUBSTANCE TRANSFER FORM

Instructions:
The delivery agent should verify the type of diazepam -EMT- (single use) or Hospital (multi-use) and
the amount, to be transferred, sign for custody, part A below, and transfer the diazepam to the
designated location(s). Hospital (multi-use) packages must be physically received by a staff
physician and/or a pharmacist, part B, C, or D below. EMS materials should be delivered, and
physically received by the Person in Charge (PIC) on the emergency scene, part B, C or D.

PART D- Delivery of Diazepam to Location #3

The following controlled Substances have been removed from_________________________________
for delivery to ____________________________________________

Hospital- Diazepam 5mg/ml 10 ml vials (25 per box) Number of Boxes_______________
EMS- Diazepam 5mg/ml auto-injector (150 per box) Number of Boxes_______________

Name of Recipient______________________________ Signature __________________________
Date _________________ Time_________________

PART C- Delivery of Diazepam to Location #2

The following controlled Substances have been removed from_________________________________
for delivery to ____________________________________________

Hospital- Diazepam 5mg/ml 10 ml vials (25 per box) Number of Boxes_______________
EMS- Diazepam 5mg/ml auto-injector (150 per box) Number of Boxes_______________

Name of Recipient______________________________ Signature __________________________
Date _________________ Time_________________

PART B- Delivery of Diazepam to Location #1

The following controlled Substances have been removed from_________________________________
for delivery to ____________________________________________

Hospital- Diazepam 5mg/ml 10 ml vials (25 per box) Number of Boxes_______________
EMS- Diazepam 5mg/ml auto-injector (150 per box) Number of Boxes_______________

Name of Recipient______________________________ Signature __________________________
Date _________________ Time_________________

PART A- RECEIPT of DIAZEPAM

The following controlled Substances have been removed from_________________________________
for delivery to ____________________________________________

Hospital- Diazepam 5mg/ml 10 ml vials (25 per box) Number of Boxes_______________
EMS- Diazepam 5mg/ml auto-injector (150 per box) Number of Boxes_______________

Name & Shield Number of courier ____________________ Signature __________________________
Date _________________ Time_________________
TAB 3
EXPENDITURE ACCOUNTING FORM

Dispensing Organization_____________________________________

Dispensing Organization Type (i.e. H1, H2, E1 etc)________________

Date of Incident: ____________________________________________

<table>
<thead>
<tr>
<th>Individual Items</th>
<th>Amount Received</th>
<th>Amount Distributed</th>
<th>Amount Returned</th>
</tr>
</thead>
<tbody>
<tr>
<td>See back of form</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mark 1 autoinjector Kits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Atropine Sulfate 0.4mg/ml 20 ml</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pralidoxime 1gm inj 20 ml</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Atropen 0.5ml</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Atropen 1.0ml</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diazepam 5mg/ml autoinjector</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diazepam 5mg/ml vial 10 ml</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sterile Water for Injection (SWFI)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SEE REVERSE SIDE FOR INDIVIDUAL ITEM AMOUNTS PER BOX
<table>
<thead>
<tr>
<th>Item</th>
<th>Amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mark 1 autoinjector Kits</td>
<td>240 480 720 960 1200 1440 1680 1920</td>
</tr>
<tr>
<td>Atropine Sulfate 0.4mg/ml 20 ml</td>
<td>100 200 300 400 500 600</td>
</tr>
<tr>
<td>Pralidoxime 1gm inj 20 ml</td>
<td>276 552 828 1104 1380 1656</td>
</tr>
<tr>
<td>Atropen 0.5ml</td>
<td>144 288</td>
</tr>
<tr>
<td>Atropen 1.0ml</td>
<td>144 288</td>
</tr>
<tr>
<td>Diazepam 5mg/ml autoinjector</td>
<td>150 300 450 600</td>
</tr>
<tr>
<td>Diazepam 5mg/ml vial 10 ml</td>
<td>25 50 75 100 125 150 175 200</td>
</tr>
<tr>
<td>Sterile Water for Injection (SWFI)</td>
<td>100 200 300 400 500 600 700 800</td>
</tr>
</tbody>
</table>