ASPR TRACIE Technical Assistance Request

Request Receipt Date (by ASPR TRACIE): 6 August 2019  
Response Date: 9 August 2019  
Type of TA Request: Complex

Request:

The requestor noted that they are collaborating with their first responder agency and healthcare partners to develop a plan on how to allocate multiple potentially infectious patients with special isolation needs (e.g., airborne infection isolation rooms, and biocontainment unit) to hospitals for evaluation. The intent of these planning efforts would be to avoid one hospital from receiving several patients that would exceed their isolation capacity. The requestor asked for assistance in identifying information and resources that could assist with planning for this scenario.

The requestor also mentioned that the catalyst for this planning effort was the example of the Emirates flight that landed at the John F. Kennedy International Airport in September 2018 with multiple ill patients needing evaluation for Middle East Respiratory Syndrome (MERS).

Response:

The ASPR TRACIE Team reviewed existing ASPR TRACIE resources; namely the Bioterrorism and High Consequence Biological Threats, Patient Movement and Tracking, Pre-Hospital, SARS/MERS, and VHF/Ebola Topic Collections. We also searched online for additional relevant materials.

We also reached out to ASPR TRACIE Subject Matter Expert (SME) Cadre members to request resources (e.g., policies and procedures), feedback, and/or lessons learned they could share.

Section I includes feedback provided by ASPR TRACIE SMEs via email. Section II provides links to highly infectious diseases/special pathogens and port of entry planning resources. Finally, Section III includes additional surge plans, tools, and guidance documents as they relate to infectious diseases/special pathogens.

I. ASPR TRACIE SME Cadre Member Comments

Please note: These are direct quotes or paraphrased comments from emails and other correspondence provided by ASPR TRACIE SME Cadre members in response to this specific request. They do not necessarily express the views of ASPR or ASPR TRACIE.

SME Cadre Member 1:

- We have exercised this scenario to test multiple patient movement across the U.S., but it was on a much smaller scale and not a plane full of potentially infected patients.
- Establishing local strategies would be essential, specifically with regards to conducting triage of patients.
• Another consideration to factor in would be movement of patients using the national strategy to the various Biocontainment Units as appropriate using both state-based and regional treatment centers. Each regional treatment center is required, via their contract with ASPR, to maintain 10 beds for an airborne pathogen. Most state-based Ebola Treatment Units would take far fewer patients.

II. Highly Infectious Diseases/Special Pathogens Port of Entry Planning Resources


This presentation provides an overview of CDC’s airport quarantine stations and point of entry communicable response plans. Presenters provide case scenarios that can be modified for planning and training purposes. The presentation also includes gaps and lessons learned during training and exercise events.


This article provides an overview of lessons learned during an infectious disease-centric simulation exercise conducted at an airport in Ireland. The exercise covered a MERS-CoV public health threat aboard an aircraft along with a corresponding undercarriage fire. Lessons learned highlight the importance of conducting appropriate public health risk assessments, passenger information gathering, and communication and notification to relevant parties, passengers and response agencies.


This plan serves as the standard operating procedures for responding to infectious disease situations at Eisenhower National Airport. It focuses on the following response areas: responsibilities, notifications, protocols, isolation and quarantine, public information and media response, routine cleaning and disinfection during a pandemic, personal protective measures, and continuity of operations response during pandemics.

III. Highly Infectious Diseases/Special Pathogens – Surge Plans, Tools, and Guidance Resources


This playbook synthesizes multiple sources of information in a single planning document addressing the full spectrum of infectious agents to create a concise reference resource for EMS agencies developing their service policies. The information can be incorporated into agency standard operating procedures and reviewed by the EMS medical director.

This instructional series, comprised of nine modules, includes an introduction to infectious diseases, basic infection control concepts, considerations for personal protective equipment (including donning and doffing), personnel decontamination, patient transport, and transfer of patient care for patients with Ebola and other highly infectious diseases.


This Emergency Operations Guide addresses protocols, procedures, and organizational structure necessary for the healthcare entities in the Eastern Region to prepare for, respond to and recover from emergencies as a collective whole, in partnership with other emergency response agencies.

Kansas City Metropolitan Area. (2016). ESF 8: Public Health and Medical Services: Kansas City Metropolitan Area Regional Coordination Guide. (Contact the ASPR TRACIE Assistance Center for access to this document).

This comprehensive (318 page) annex to the Regional Coordination Guide describes how public health and medical services capabilities from metropolitan areas surrounding Kansas City would be coordinated in the event of a natural or human-caused disaster. It details planning for every aspect of disaster medical response and may be a useful reference for metro area planners.


This webpage contains links to free toolkits, plans, and guidance documents that were developed to provide healthcare providers immediate access to high consequence infectious disease surge resources. NOTE: A High Consequence Infectious Disease (HCID) Toolbox for Emergency Medical Services (EMS) is still under development and will be a valuable reference once released.


This document explores the Regional Transport Plan's ability to safely transfer a patient with confirmed Ebola virus disease from a frontline or state-designated Ebola Treatment Center to one of the 10 Regional Ebola and Special Pathogen Treatment Centers located in each of the U.S. Department of Health and Human Services regions nationwide. The questions in this document are intended to initiate discussion and description of how the Regional Transport Plan would be activated to respond to such an event.

This plan contains the following sections: command, plans section (by unit), operations section, logistics, and finance. Four annexes that focus on different threats are included, as are sample forms and other appendices.


This webpage contains links to four free toolkits that were developed to provide healthcare providers immediate access to key infectious disease outbreak information and resources. The toolkits contain guidance on incident management, emerging pathogens, horizontal strategies, communication, negotiation, and implementation. Each toolkit contains checklists, guidance documents, case studies, and fillable tables to meet the planning and response needs prior to or during an infectious disease outbreak.


Johns Hopkins Bloomberg School of Public Health Center for Health Security.

This document provides action steps for responding to isolated cases or limited outbreaks of high-consequence infectious diseases, including those that are: novel or rare in the community, moderate to highly contagious, moderate to highly lethal, not easily controlled by medical countermeasures and other interventions, and have the potential to cause exceptional public concern. The document includes a general checklist and population-specific checklists for public health, healthcare, EMS, and elected officials.