

SAN JOAQUIN COUNTY  
EMERGENCY MEDICAL SERVICES AGENCY

**TITLE: EMS CHEMPACK REQUEST - PREHOSPITAL**

EMS Policy No. **7101**

**PURPOSE:** The purpose of this policy is to establish a system for the rapid deployment of nerve agent antidote from the CHEMPACK cache maintained within the San Joaquin County Operational Area.

**AUTHORITY:** Health and Safety Code, Division 2.5, Sections 1797.220 & 1798 et seq.

**REFERENCE:** San Joaquin County EMS Agency CHEMPACK Operation Manual

**DEFINITIONS:**

- A. "CHEMPACK" means a voluntary component of the Federal Strategic National Stockpile Program (SNS) operated by the Centers for Disease Control and Prevention (CDC) for the benefit of the U.S. civilian population. The CHEMPACK program's mission is to provide state and local governments a sustainable nerve agent antidote cache that increases their capability to respond quickly to a nerve agent event such as a terrorist attack.
- B. "Disaster Control Facility (DCF)" means San Joaquin General Hospital (SJGH).
- C. "Strategic National Stockpile (SNS)" means the national repository of antibiotics, chemical antidotes, antitoxins, life-support medications, IV administration, airway maintenance supplies, and medical/surgical materiel for use in a declared biological or chemical terrorism incident.

**POLICY:** San Joaquin County maintains the CHEMPACK stock and storage facilities, which serve the County and their respective operational areas (OA). All prehospital and hospital entities may have immediate access to CHEMPACK assets without seeking permission from any higher authority in the event of a chemical or nerve agent emergency within their respective jurisdiction or OA. This policy establishes who may authorize the release of the CHEMPACK, what a qualifying event is, how it is deployed, how the contents are to be accounted for, and how it is demobilized.

**I. Authorization to Request:**

- A. In the event of a nerve agent release in San Joaquin County the highest ranking paramedic provider on scene is authorized to request the release of nerve agent antidote from the EMS CHEMPACK Cache.
- B. Requests for nerve agent antidotes from the EMS CHEMPACK shall be made to the EMS Agency Duty Officer through LIFECOM EMS Dispatch at (209) 236-8339.

Effective      August 20, 2010  
Supersedes    July 1, 2010

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Approved:    Signature on File  
                  Medical Director

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**II. Authorized to Release:**

- A. The following individuals are authorized to release supplies from the CHEMPACK:
1. San Joaquin County EMS Duty Officer
  2. SJ Medical Health Operational Area Coordinator (MHOAC)
  3. Regional Disaster Medical Health Coordinator

**III. Deployment:**

- A. Deployment Considerations
1. The following should be used as a guideline for requesting the EMS CHEMPACK for nerve agent or organophosphate exposures:
    - a. The EMS Chempack will take approximately one (1) hour to be delivered to the scene. If the scene can be cleared in less than one (1) hour the CHEMPACK should not be requested for scene deployment.
    - b. 20 or more patients that can be categorized as severe.
    - c. 50 or more patients that can be categorized as moderate.
    - d. 100 or more patients that can be categorized as mild.
- B. Authorization to deploy, break the seal on, or move an EMS CHEMPACK container from its specified location will be limited to any of the following qualifying events:
1. Release of a nerve agent or potent organophosphate with human effects or immediate threats too great to effectively manage with available pharmaceutical supplies.
  2. Large or unusual occurrence of patients presenting with signs and/or symptoms consistent with nerve agent or organophosphate exposure or intoxication.
  3. A credible threat of an imminent event of a magnitude likely to require the assets of the EMS CHEMPACK.
  4. Medical mutual aid request from the MHOAC or Regional Disaster Medical Health Coordinator (RDMHC) or neighboring state emergency management or public health department for the deployment or staging of EMS CHEMPACK assets to an actual or threatened nerve agent attack.
  5. Any event which, in the judgment of the MHOAC, EMS Administrator, EMS Medical Director, or EMS Duty Officer justifies the deployment of EMS CHEMPACK supplies.
  6. A physical threat to the CHEMPACK at the fixed location (i.e. fire, theft, flood).
- C. Pre-emptive Movement: Pre-emptive movement is the relocation of a sealed EMS CHEMPACK container and its contents to a site providing for levels of

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environmental and security controls identical to those required for its regular placement site.

1. The following individuals may authorize a pre-emptive move:
  - a) SJC EMS Administrator
  - b) SJC Public Health Officer;
  - c) Region IV RDMHC;
  - d) California Department of Public Health (CDPH) Duty Officer.

**IV. Requesting Agency Responsibilities:**

- A. Determine or highly suspect the release of a nerve agent or organophosphate poison (pesticide).
- B. Declare a Multiple Casualty Incident (MCI) involving hazardous materials. Prehospital personnel shall utilize triage tags on all patients to ensure proper treatment and distribution.
- C. Request deployment of EMS CHEMPACK supplies to the incident staging area from the EMS Duty Officer.
- D. Arrange Code 3 transportation of the EMS CHEMPACK supplies to the incident (ambulance, law enforcement, or fire/rescue).
- E. Assign a person to serve as the Medical Supply Coordinator to take custody and security of the EMS CHEMPACK upon its arrival at the scene.
- F. Document amounts of EMS CHEMPACK supplies delivered to scene and dispense using the appropriate material transfer forms (EMS Form 7101 A).

**V. Activation Protocol for Requesting the EMS CHEMPACK**

- A. When an authorized requestor has determined that an incident requires supplies from the CHEMPACK to mitigate an incident, the requestor shall contact the EMS Agency Duty Officer through LIFECOM EMS Dispatch at (209) 236-8339. The requesting provider shall provide the following information to the EMS Duty Officer:
  1. The nature and severity of patient symptoms;
  2. Approximate number of patients needing treatment;
  3. Delivery location for the EMS CHEMPACK and delivery contact information;
  4. Safest route to follow for transport of EMS CHEMPACK, e.g. not through the affected area.
- B. The EMS Duty Officer will contact the DCF MICN and instruct them to prepare the EMS CHEMPACK for immediate deployment.
- C. Once the DCF has received authorization to release the EMS CHEMPACK, the DCF shall notify all acute care hospitals in San Joaquin County through an EMS system event update and by dedicated ring down line to expect to receive

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- patients exposed to chemical nerve agents and the release of EMS CHEMPACK supplies to the scene.
- D. The San Joaquin County EMS Agency Duty Officer shall make the following notifications:
1. SJC MHOAC;
  2. SJC Public Health Officer;
  3. SJC Sheriff-Coroner;
  4. RDMHC/S;
  5. EMSA Duty Officer;
  6. CDPH Duty Officer ;
  7. State Warning Center.
- E. DCF personnel or an emergency department physician that suspects a nerve agent release has occurred and determines additional nerve agent antidotes are needed may contact the EMS Agency Duty Officer through LIFECOM EMS Dispatch at (209) 236-8339 to request the release of hospital CHEMPACK supplies.

**VI. Movement and Delivery of the EMS CHEMPACK:**

- A. EMS CHEMPACK transportation arrangements are the responsibility of the requesting party. If the requesting party has trouble arranging timely transportation, they should contact the SJC EMS Duty Officer through LIFECOM EMS Dispatch (209) 236-8339 for assistance. Considerations should be made with regard to security of the EMS CHEMPACK and timely response to the scene.
- B. Persons transporting (courier) the EMS CHEMPACK supplies should be made aware of the nature of the incident, the materiel being transported, and any hazards that may be encountered en route or at the scene.
- C. The courier should receive adequate location, route, and safety information before departing or early enough during response to deliver the materiel promptly and safely. Two-way communications (radio or wireless phone) should be provided to communicate updates or other critical information as necessary.
- D. To pick up CHEMPACK supplies the courier shall report to the SJGH Security Desk located south of the emergency department.
- E. At the scene, the courier should report and function as directed by the Medical Supply Coordinator, Medical Group Supervisor or Incident Commander (IC) as assigned. If operating in a potentially hazardous area, the courier must obtain an appropriate briefing on the hazards and safety precautions.

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**VII. Receipt of EMS CHEMPACK on Scene**

- A. The Medical Supply Coordinator or Medical Group Supervisor shall take receipt of the CHEMPACK supplies from the courier and verify that medications and supplies match the quantities listed on the CHEMPACK inventory.
- B. The Medical Supply Coordinator should document inventory discrepancies on the EMS CHEMPACK Release and Receipt Form (EMS Form 7101A).

**VIII. Field Policies and Treatment Protocols for EMS Personnel**

- A. Prehospital personnel shall operate in accordance with San Joaquin County EMS Agency Policy No. 5790 **ALS Nerve Agent Exposure** in the administration of the nerve agent antidotes contained in the EMS CHEMPACK

**IX. Post-Event Actions**

- A. The EMS CHEMPACK container, any unused contents, and the EMS CHEMPACK Release and Receipt Form (EMS Form 7101A) shall be returned by the requesting agency to the DCF at SJGH.
- B. The Medical Group Supervisor (MGS) or Medical Branch Director shall upon completion of the event gather all patient distribution information and provide a detailed report to the EMS Agency that contains the following information:
  1. The number of patients on scene by the following triage categories:
    - a) Immediate;
    - b) Delayed;
    - c) Minor;
    - d) Deceased.
  2. The number of patients that were transported;
  3. The Number of Mark I Kits were utilized;
  4. Amount of 2Pam administered - multi-dose vials;
  5. Amount of Atropine administered - pre-loaded syringes;
  6. Amount of Atropine administered - multi-dose vials;
  7. Amount of diazepam administered – Preloaded syringes;
  8. Amount of diazepam administered – multi-dose vials;
  9. Which hospitals received the patients and how many patients they received;
  10. A written after-action report of the medical branch operations.