



# The Beacon



**By and for emergency responders**

## NEW NDPO ADMINISTRATOR NAMED

Thomas G. Kinnally, formerly the Assistant Special Agent in Charge of the FBI's Kansas City Field Office, has been named the National Domestic Preparedness Office's (NDPO) Administrator.

Mr. Kinnally was born in San Antonio, Texas and earned a Bachelor of Arts degree from the University of Texas at San Antonio. In May 1976, he began his career with the FBI and served as a Financial Analyst in the San Antonio Division. In February 1980, he was appointed as a Special Agent and after a period of training returned to the San Antonio Division. In November 1980 he was reassigned to the Providence, Rhode Island, Resident Agency (RA) and served in that office for nine years. In November 1989 Mr. Kinnally was promoted as the Supervisory Senior Resident Agent of the McAllen, Texas, RA.

In May 1992, Mr. Kinnally was transferred to the Criminal Investigative Division at FBI Headquarters as a supervisor in the Organized Crime/Drug Branch. In November 1994, he was promoted to Assistant Inspector, Inspection Division.

In January 1996, Mr. Kinnally was assigned to DEA headquarters as Chief of a section overseeing the coordination of drug investigations along the southwest border of the United States.

In January 1997, Mr. Kinnally was designated the Assistant Special Agent in Charge of the Kansas City Division. He officially reported to the NDPO on August 29, 2000.

## EPA PUBLISHES ACCIDENTAL RELEASE PREVENTION AND RISK MANAGEMENT REQUIREMENTS

The Environmental Protection Agency (EPA) and the Department of Justice (DOJ) published a rule that provides for access to information concerning the potential off-site consequences of hypothetical accidental chemical releases from industrial facilities.

Under Section 112 (r) of the Clean Air Act, facilities handling large quantities of extremely hazardous chemicals are required to include that information in a risk management plan submitted to the EPA. As required by the Chemical Safety Information, Site Security and Fuels Regulatory Relief Act, this rule provides members of the public and government officials with access to that information in ways designed to minimize the likelihood of accidental releases, the risk to national security associated with posting the information on the Internet, and the likelihood of harm to public health and welfare.

For more information, contact the Emergency Planning and Community Right-to-Know Hotline at (800) 424-9346. You can also visit the Chemical Emergency Preparedness and Prevention Office Internet site at [www.epa.gov/ceppo](http://www.epa.gov/ceppo).

**EXTRA!! EXTRA!! EXTRA!!**

Later this month the NDPO will publish an Information Bulletin on the results of our first State and Local Advisory Group meeting that was held on September 26 and 27.

## **TERRORISM AWARENESS FOR EMERGENCY FIRST RESPONDERS**

### **Free Internet-based course offered by the National Emergency Response and Rescue Training Center (NERRTC), Texas A&M University System**

The NERRTC has developed an Internet-based course as part of the National Domestic Preparedness Consortium's curricula to improve the capabilities of jurisdictions to combat domestic terrorism. *The Terrorism Awareness for Emergency First Responders* course is an awareness level course sponsored by the Department of Justice. The site is located at <http://www.teex.com/campus/>.

#### **Course Overview**

Terrorism Awareness for Emergency First Responders is designed to familiarize participants with terrorism and the essential knowledge that responders need when challenged with a potential terrorism incident involving a weapon of mass destruction (WMD). Upon course completion, participants will possess a basic understanding of terrorism threats, WMD hazards, delivery devices and methods, and the fundamentals of incident command structure for crisis management.

#### **Course Modules**

The course contains three modules. Each module consists of a study text, participant activities, and an end-of-module test. Upon completion of all modules and components, participants must successfully complete a final comprehensive examination in order to earn a Certificate of Training. Modules cover the following subjects:

- ❑ **Terrorism:** A brief history of terrorism, definitions and terms associated with terrorism, and an overview of terrorist motivations, ideologies, tactics, targeting, and weapon selection.
- ❑ **Weapons of Mass Destruction:** The basics of detecting and identifying WMD hazards and self-protection methods used during a WMD incident.

- ❑ **Incident Command and Control:** The Incident Command and Control System, the unique operational challenges presented during a WMD incident, and the primary state and federal agencies and organizations available to assist jurisdictions during such an incident.

#### **Intended Audience**

Responding to a WMD incident requires multiple disciplines. Therefore, course participants are from all levels of the first responder community, including individual firefighters, patrol officers, emergency medical technicians, public health or public works personnel, emergency planners, hazardous materials or rescue team members, administrators, managers, and first-line supervisors who will have responsibility for responding to or managing incidents and operations involving WMD.

It is *not* intended for those who have successfully completed an awareness level training course.

#### **Required Software/Hardware**

- ❑ A computer with Internet access
- ❑ Netscape 4.5 (or higher) or Internet Explorer 4.0 (or higher)
- ❑ Shockwave and Flash

#### **Contact Information**

Questions about this course can be e-mailed to [Steven.Hightower@teexmail.tamu.edu](mailto:Steven.Hightower@teexmail.tamu.edu). You may also call 979-845-2586 for additional information.

## **DEPARTMENT OF DEFENSE FORCE PROTECTION EQUIPMENT DEMONSTRATION III 8-10 MAY 2001**

The Joint Staff, in conjunction with the Office of the Under Secretary of Defense for Acquisition and Technology (OUSD A&T), the Joint Non-Lethal Weapons Directorate, the National Institute of Justice, and the Department of Energy, is hosting Force Protection Equipment Demonstration III (FPED III), 8-10 May, 2001, at the Quantico Marine Corps Base, Virginia. The U.S. Army

Product Manager, Physical Security Equipment (PM-PSE), Fort Belvoir, Virginia, is coordinating the demonstration of state-of-the-art commercial off-the-shelf (COTS) components and systems to DoD, federal department and agency, state and local law enforcement and other first responders, and corrections agency decision makers responsible for force protection. FPED II, 3-6 May 99, attracted 366 U.S. and foreign vendors with over 1000 items of antiterrorism/force protection COTS equipment for demonstration for over 4000 attendees.

FPED III will showcase blast protective barrier systems and windows, personal protective equipment, explosive ordnance disposal equipment, unattended ground sensors, ballistics mitigation equipment, night vision devices, first-responder equipment, unmanned aerial vehicles, and waterside security equipment among others. Blast/ballistics, non-lethal, night vision and biometrics demonstrations will be highlighted.

Persons with responsibility for force protection are encouraged to attend and see firsthand the latest technological innovations from industry. FPED III is not open to the general public and requires pre-registration. Persons desiring to attend may register on-line at <http://www.monmouth.army.mil/smc/pmpse/fped>.

## **FDA APPROVES USE OF CIPRO AFTER EXPOSURE TO INHALATIONAL ANTHRAX**

The Food and Drug Administration today approved the antimicrobial Cipro (ciprofloxacin) for use in individuals who have been exposed to inhaled anthrax. Cipro is approved to reduce the incidence or progression of inhalational anthrax following exposure to aerosolized *Bacillus anthracis*, the bacterium that causes anthrax.

Inhalational anthrax is an extremely rare disease, resulting from exposure to contaminated animal hides and hairs, usually in an industrial setting. The causative organism, *B. anthracis*, is a spore-forming gram positive rod that can be used as a biological weapon. Inhalational anthrax is thought to be the most likely form of this infection to result

from the intentional use of an aerosolized preparation of spores of *B. anthracis*.

FDA approved this new use, for inhalational anthrax (post-exposure), under its accelerated approval regulations. Approval was based on the use of a surrogate endpoint, ciprofloxacin serum concentrations achieved in humans, together with the available information about the concentration needed to inhibit or kill *B. anthracis*.

The use of the surrogate endpoint was further supported by ciprofloxacin serum concentrations in the Rhesus monkey model of post-exposure inhalational anthrax that demonstrated a significantly improved survival rate for animals that received ciprofloxacin compared to animals that did not receive an antimicrobial following exposure to aerosolized *B. anthracis*. The serum levels measured in monkeys that survived exposure to anthrax bacteria can be achieved or exceeded in humans who receive the recommended doses.

The applicability of this model is based upon data attesting to the similarities between experimental animals and humans regarding the pathogenesis, clinical course, and tissue pathology of inhalational anthrax. Because of the high mortality rate, this disease cannot ethically be studied in humans under circumstances of intentional exposure. Therefore, human ciprofloxacin serum concentrations served as the surrogate endpoint considered reasonably likely to predict clinical benefit and provide the basis for this approval.

The approval of Cipro for this indication represents both the manufacturer and FDA's response to a public health need. This is the first antimicrobial drug application submitted to the FDA for an indication, which would result from the intentional use of a biological agent.

Cipro was first approved in the US in 1987. It has been used in more than 100 million patients in the US, and approximately 250 million patients worldwide. It is now approved for a total of 14 indications. These include a number of serious infections such as lower respiratory tract, intra-abdominal, typhoid fever, bone, and joint infections, in addition to the newly-approved indication, inhalational anthrax (post-exposure).

Because of concerns about long-term safety, including effects on cartilage, until now, Cipro was not approved for any indication in the pediatric

population. However, because inhalational anthrax is lethal, the risk-benefit assessment indicates that use of Cipro for this indication in pediatric patients is appropriate. Studies are currently under way to evaluate long-term safety, including effects on cartilage, in pediatric patients.

On July 28, 2000, the FDA's Anti-Infective Drug Products Advisory Committee unanimously recommended the approval of Cipro for inhalational anthrax (post-exposure) based on the available scientific data and consideration of the special circumstances surrounding the potential use of the drug.

The recommended adult dose of Cipro for post-exposure inhalational anthrax is 500 milligrams given orally twice a day. The recommended pediatric dose of Cipro for post-exposure inhalational anthrax is 15 mg/kg given orally twice a day. The adult intravenous dose is 400 mg twice a day; the pediatric intravenous dose is 10 mg/kg twice a day. Treatment with ciprofloxacin should begin as soon as possible after exposure. The drug should be administered for a total of 60 days.

The most common adverse drug reactions observed with the use of ciprofloxacin include nausea, vomiting, diarrhea, abdominal pain, rash, headache, restlessness. In patients who have received ciprofloxacin for 60 days or longer, no new or unexpected adverse reactions were identified compared to patients receiving shorter approved regimens.

*Source: FDA Talk Paper dated 8/31/00*

## **BIOLOGICAL WEAPONS IMPROVED RESPONSE PROGRAM'S PLANNING GUIDE NOW AVAILABLE ONLINE**

The Biological Weapons Improved Response Program, led by the US Army Soldier and Biological Chemical Command (SBCCOM), recently released their Planning Guide entitled "Improving Local and State Agency Response to Terrorist Incidents Involving Biological Weapons."

The guide is the first step in helping communities examine their current Emergency

Operations Plans and Standard Operating Procedures. Using the principles from the guide, planners can begin to incorporate additional planning actions so that they can respond effectively and quickly to a terrorist incident involving biological weapons.

The guide can be found on the SBCCOM website at [http://dp.sbccom.army.mil/fr/dp\\_bwirp\\_interim\\_planning\\_guide\\_download.htm](http://dp.sbccom.army.mil/fr/dp_bwirp_interim_planning_guide_download.htm).

## **DECON 2000 SYMPOSIUM TO TAKE PLACE THIS MONTH**

DECON 2000, a two-day symposium on chemical biological, and radiological field decontamination, will take place on October 21 – 22 at the University of Maryland Shady Grove Center, 9640 Gudelsky Drive, Rockville, Maryland.

Attendees will hear nationally recognized experts talk about specific aspects of decontamination and also see displays/demonstration systems. Presentation topics include: Review of key information about chemical and biological agents and radiological materials; personal safety; decontaminants; "best practices" for mass decontamination; cold weather decon; patient triage, treatment, and transportation; hospital issues; EPA and legal issues; and public information strategies.

The target audience are members of the emergency medical services, fire departments, law enforcement agencies, emergency management, public health services, Hazmat response teams, hospitals' emergency departments, and other emergency responders. **Please register by 10/6/00.**

The program hours are 8:30 a.m. to 4:30 p.m. on Saturday and 9:00 a.m. to 4:00 p.m. on Sunday. DECON 2000 is hosted by the Maryland Emergency Management Agency and the Montgomery County Fire and Rescue Service.

For more information and to register for free, please contact the Montgomery County Fire and Rescue at 240-777-2441, or by fax at 240-777-2414.

## CORRECTIONS:

In September's *Beacon*, Dr. Mohamed Athher Mughal's "The Biological Weapons Improved Response Program" article referred to an accompanying generic bioresponse template. The template was not included in the September issue; therefore, we are publishing the template this month. We apologize for any confusion caused by our oversight.

### BW IRP RESPONSE TEMPLATE OUTLINE AND WORK BREAKDOWN STRUCTURE

- 2.1 Public Health Surveillance
- 2.2 Medical Diagnosis
- 2.3 Epidemiological Investigation
- 2.4 Mass Prophylaxis
- 2.5 Criminal Investigation
- 2.6 Residual Hazard Assessment & Mitigation
- 2.7 Control Affected Area/Population
- 2.8 Care of Presented Casualties & Worried Well
- 2.9 Fatality Management
- 2.10 Command and Control
- 2.11 Resource and Logistical Support
- 2.12 Continuity of Infrastructure
- 2.13 Family Support Services

## NDPO NEWSGROUPS FOR EMERGENCY RESPONDERS

Don't forget to use the NDPO's seven newsgroups on the Law Enforcement Online (LEO) system. The newsgroups are categorized as: WMD Training, WMD Equipment, WMD Planning, WMD Exercises, WMD Health and Medical, WMD Information Sharing, and a WMD Equipment Trading Post.

To access the newsgroups, you must be a member of the NDPO's Common Communication Link (CCL), which is hosted by LEO. If you are not a member of the CCL and wish to receive an application, please send an e-mail to our helpline at [ndpo@leo.gov](mailto:ndpo@leo.gov).

If you are a member of the CCL and would like to subscribe to the newsgroups, please ensure that you have newsgroups set up on your web browser e-mail system. Messages are posted in the same way an e-mail message is sent, but instead of being addressed to an individual, the message is addressed to the newsgroup. To set up your newsgroup subscription list, you may click on the "Newsgroups" link on the LEO Homepage. This link will provide detailed instructions to set up newsgroups on both Microsoft Internet Explorer and Netscape Communicator. The NDPO is soliciting your ideas for additional newsgroups on the CCL.

**Editor's Note:** Items published in *The Beacon* are for informational purposes for the emergency response community. The material submitted does not necessarily imply concurrence from the interagency community represented at the NDPO.

*The Beacon* is published monthly for members of the emergency response community. Please send articles, comments, feedback, and letters to the Information Sharing Team at the address listed below.

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## NDPO ONLINE RESOURCES FOR EMERGENCY RESPONDERS:

- Helpline – [ndpo@leo.gov](mailto:ndpo@leo.gov)
- Law Enforcement Online Newsgroups
- Common Communication Link
- Internet site at [www.ndpo.gov](http://www.ndpo.gov)
- List Serve for users to receive electronic versions of our publications