

DEPARTMENT OF HEALTH SERVICES
COUNTY OF LOS ANGELES

SUBJECT: **CHEMPACK DEPLOYMENT FOR
NERVE AGENT RELEASE**

REFERENCE NO. 1108

PURPOSE: To provide guidelines for the release of CHEMPACK to designated personnel during times of medical need.

DEFINITION:

CHEMPACK: The CHEMPACK program was created by the Centers for Disease Control (CDC) and designed to place nerve agent antidotes in communities all over the country to support a quick response to a nerve agent attack. The CHEMPACK program is a component of the Strategic National Stockpile (SNS). Each CHEMPACK contains auto-injector antidote kits, atropine, 2-Pralidoxime, sterile water for injection, and Diazepam/Midazolam. There are two types of CHEMPACK containers:

- **EMS CHEMPACK:** Designed for prehospital medical providers, and the antidotes contained in the EMS CHEMPACK are mostly auto-injectors for speed and ease of use.
- **Hospital CHEMPACK:** Designed for hospital medical staff, and the antidotes contained in the hospital CHEMPACK are primarily multi-dose vials.

PRINCIPLES:

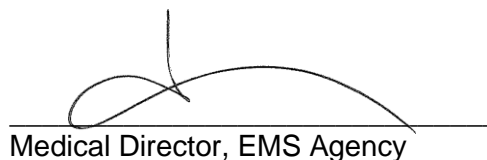
1. Los Angeles County Emergency Medical Services (EMS) Agency has fielded and maintains a current inventory of 65 CHEMPACK caches, that are geographically stored throughout the County.
2. The EMS Agency coordinates quality assurance of all 65 CHEMPACKs per the Administration for Strategic Preparedness and Response (ASPR) protocol and each site manager should provide routine reports to EMS.
3. The overall authority to deploy CHEMPACKs, or portions of its contents, to the field or local hospitals rests with the EMS Agency. The EMS Agency will coordinate the deployment.
4. In any event involving a terrorist attack employing chemical nerve agents, the EMS Agency, hospitals, and provider agencies shall implement their terrorism notification procedures and monitor the situation.
5. CHEMPACK deployment shall be for incidents in which a nerve agent is responsible for the casualties. The incident must be a mass casualty incident which exceeds the provider agencies' Disaster Pharmaceutical Caches (DPC), Ref. No. 1104, Disaster Pharmaceutical Caches Carried by Authorized ALS Providers, for patient use or hospital resources to deal with the patient load.
6. CHEMPACKs may be pre-deployed for special events.

EFFECTIVE: 10-15-06
REVISED: 04-01-25
SUPERSEDES: 01-01-21

PAGE 1 OF 3

APPROVED:


Director, EMS Agency


Medical Director, EMS Agency

POLICY:

I. Types of Deployment

- A. **Field Deployment** - This scenario involves the deployment of CHEMPACK resources to an incident site in a public area. This would occur in the case of an overt nerve agent release in a populated area such as a stadium or inside a building.
- B. **Hospital Deployment** – This scenario may involve an overt or covert terrorist attack in which the first sign of an attack may be the unexplained surge of patients seeking treatment at local hospital(s) for symptoms indicating nerve agent exposure.

II. Role of the Provider Agency

- A. Determine whether first responder DPCs for patient use are sufficient to handle the incident. If provider agency's DPC resources are adequate to deal with the patient load, generally no other pharmaceutical assistance would be requested.
- B. Notify the EMS Agency via the Medical Alert Center (MAC) by either telephone at (562) 378-1789, ReddiNet, or VMED28 Radio:155.34mhz. If unable to contact the MAC, EMS personnel shall contact the Fire Operational Area Coordinator (FOAC) – Los Angeles County Fire District (which is contacted through its dispatch center).
- C. If DPC resources are inadequate, request the deployment of an EMS CHEMPACK via the MAC. Provide the MAC with the following information:
 - 1. Incident location;
 - 2. Chemical agent (if known);
 - 3. Number and severity of victims; and
 - 4. Chief complaints of patients.
- D. Transport the EMS CHEMPACK from the CHEMPACK storage site to the scene.

III. Role of the affected hospital(s)

- A. Determine whether the hospital's resources are adequate to deal with the patient load. If the hospital's resources are adequate to deal with the patient load, generally no other pharmaceutical assistance would be requested.
- B. Notify the EMS Agency via the MAC at (562) 378-1789 or ReddiNet of a possible terrorist attack. The hospital shall provide the MAC with the following information:
 - 1. Name of hospital;
 - 2. Point of Contact (POC);
 - 3. Best contact information;

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4. Chemical agent (if known);
 5. Number and severity of victims; and
 6. Chief complaints of patients.
- C. If hospital resources are inadequate, request deployment of the hospital CHEMPACK from the EMS Agency.
 - D. Transport the hospital CHEMPACK from the CHEMPACK storage site to the hospital.
- IV. Role of the EMS Agency
- A. Once contacted by provider agency or affected hospital, contact the closest CHEMPACK storage site to the incident and instruct the storage site staff to prepare the appropriate CHEMPACK for deployment.
 - B. Contact the CHEMPACK storage site and request POC information and pick-up location at storage site.
 - C. Provide the affected hospital or provider agency with the POC and pick-up location at CHEMPACK storage site.
- V. Role of the CHEMPACK storage sites
- A. Maintain a deployment plan that contains a minimum of the following information:
 1. CHEMPACK deployment training for staff;
 2. 24/7/365 POC list;
 3. CHEMPACK storage location;
 4. Instructions on how to access location and key; and
 5. Location of preferred pick-up point.
 - B. When notified by the EMS Agency to deploy, prepare the CHEMPACK as per deployment plan.

CROSS REFERENCE:

Prehospital Care Manual:

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| Ref. No. 519, | Management of Multiple Casualty Incidents |
| Ref. No. 807, | Medical Control During Hazardous Material Exposure |
| Ref. No. 1104, | Disaster Pharmaceutical Caches Carried by Authorized ALS Providers |
| Ref. No. 1108.1, | CHEMPACK Inventory List |
| Ref. No. 1108.2, | CHEMPACK Photograph |
| Ref. No. 1240, | Treatment Protocol: HAZMAT |