

INCIDENT OBJECTIVES	1. Incident Name Plague05 (Exercise)	2. Date Prepared June 14 <sup>th</sup>	3. Time Prepared 0500
<p>4. Operational Period ( DATE/TIME) Tuesday, June 14<sup>th</sup>, 0500-1530 (real day is Tuesday, November 1<sup>st</sup>)</p>			
<p>5. General Control Investigation &amp; Objectives for the Incident (include alternatives)  <b>Overall Objective:</b> Stop the spread of plague and appropriately treat and isolate patients.  <b>Operational Period Objectives</b></p> <p><b>1. Investigation &amp; Surveillance.</b> Identify specific cause of outbreak.</p> <ul style="list-style-type: none"> <li>▪ Expand epi/law enforcement teams to follow-up on operating assumption of link to Floral Parade</li> <li>▪ Collect and analyze data to assess specific risks</li> <li>▪ Contact trace to identify those exposed to cases.</li> </ul> <p><b>2. Risk Communication.</b> Gain confidence and cooperation through clear, updated information to both the public and medical providers on this epidemic; establish realistic expectations for protecting public health; emphasize protection against secondary spread; describe plans for establish mass clinics; provide information updates to phone bank operators, emergency broadcasts, and web pages to allow public to self assess risks and alter behaviors to maintain civil order, stop disease spread, and select appropriate medical treatment options.</p> <p><b>3. Prepare control measures for public.</b> Plan extensive mass prophylaxes operation that would dispense prophylaxes medication to close contacts of cases and incident responders &amp; their families during next operational period (24 hours, beginning at Tuesday, June 14<sup>th</sup> at 1530) and attendees of parade (approx 350,000). Plan continuation or expansion of operations to proph total population in next two operational periods (48 hours). Ensure security and crowd control.</p> <p><b>4. Insure medical care of the populations</b></p> <p><b>a. Assist local medical resources (hospitals, clinics) in the coordination of distribution of patients, medical supplies, and medical providers. (Regional Hospital)</b></p> <p><b>b. In collaboration with DHS (State of Oregon Public Health) develop and distribute public health of guidance on treatment and prophylaxis of health care workers and patients.</b></p> <p><b>c. Insure adequate numbers of pharmaceuticals and respiratory and ICU support to medical providers.</b></p> <p><b>d. Protect ERs.</b> Plan to conduct 141800 relief of Portland Fire/AMR staff at Medical Care Points just established near Emanuel and OHSU and establish additional MCPs near each MC hospital with capacity to triage and perform minor emergency treatment to a capacity that is double the patient volume of the protected ER. Ensure security and crowd control.</p> <p><b>5. Develop mass isolation/quarantine plan.</b> Consider impact on medication distribution, legal needs, transportation issues (e.g., public transport, road/port closures, etc.)</p> <p><b>6. Insure adequate resources for deceased individuals (DMORT activation request)</b></p> <p><b>7. Provide for mental health support to the responders (state and federal mental health request)</b></p> <p><b>RESPONSE ORGANIZATION:</b> Complete transition to Unified Area Command. Develop clear working relationships (role, responsibility, communication contacts) with supporting response organization(s) (Department and Jurisdictional Operation Centers, Law Enforcement Joint Operation Center, etc.). Integrate or coordinate epidemiological and law enforcement investigations as appropriate.</p>			
<p>6. Current Status and Potential Growth  396 New Cases in past 3 days (since Sunday).  <b>Number of Confirmed Cases:</b> 23 (372 presumptive) <b>Number Hospitalized:</b> 391 <b>Number of Deaths:</b> 21 <b>Number Exposed:</b> Unknown  <b>Number Immune:</b> None  <b>Number Prophy/Vaccination:</b> None  <b>Potential Growth:</b> Common element of investigated cases appears to be Floral Festival Parade attended by hundreds of thousands last Saturday, June 11<sup>th</sup>. Without intervention could see 300-500 new cases per days from primary exposure with those infected from those first exposed then showing symptoms.  Expected case fatality proportion without treatment: 90-100%  Expected case fatality proportion if treat within incubation period: 35-50%</p>			
<p>7. General Safety Message/PPE/Security  Period of high risk of transmission is normally from when cough develops (usually accompanied by high fever at that time; droplet spread) until rapid decline over 1-3 days forces hospitalization and proper isolation protocols.  Any person exposed to a known case or showing symptoms and attending the Floral Parade should immediately put on surgical mask and seek treatment..  ALL persons working in response organization field operations should be fitted for N-95 mask. While waiting for fit testing, they must have an unfitted mask available for wear, but should be protected from exposure to known cases. Mask should be worn whenever there is a risk of coming in contact with an infectious person. Persons working with known cases must also wear eye protection.  <b>All personnel at high risk to secretions should be placed on prophylaxis.</b></p>			
<p>8. Attachments (mark if attached)</p>			

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|-----------------------------------------------------------------|-------------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Organization List - ICS 203 | <input type="checkbox"/> Medical Plan - ICS 206 | <input type="checkbox"/> (Other) |
| <input type="checkbox"/> Div. Assignment Lists - ICS 204        | <input type="checkbox"/> Incident Map           | <input type="checkbox"/>         |
| <input type="checkbox"/> Communications Plan - ICS 205          | <input type="checkbox"/> Traffic Plan           | <input type="checkbox"/>         |

9. Prepared by (Planning Section Chief) Hai Ta	10. Approved by (Incident Commander) Dr. Gary oxman
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ORGANIZATION ASSIGNMENT LIST		1. Incident Name <b>Plague05 (Exercise)</b>	
2. Date Prepared June 14 <sup>th</sup> [real date is Nov 1]	3. Time Prepared 0500	4. Operational Period (DATE/TIME) June 14 <sup>th</sup> , 0700 thru June 14 <sup>th</sup> , 1530 [real date is Nov 1]	
Position	Name	Position	Name
5. Incident Commander and Staff		9. Operations Section	
Incident Commander	<del>Gary Oxman</del> Jon Jui	Chief	Deborah Cockrell
Deputy	Dave Houghton	Deputy	Margaret Lentell
Safety Officer	Rob Gabris	a. Branch I - Investigation and Surveillance	
Information Officer	Althea Milechman	Branch Director	Jeannie Chesney
Liaison Officer	Christine Bernsten	Deputy	Julie Goodrich
6. Agency Representative		Division/Group	
Agency	Name	Division/Group	
OHS/ACDP		LE Group	FBI - tbd
CDC		Division/Group	
		b. Branch II - Control Measures	
		Branch Director	Sharon Todd
		Deputy	Ginni Schmitz
7. Planning Section		Division/First Responder Group	Fire/EMS (tbd)
Chief	Valerie Whittlesey	Division/Group	
Deputy for Units	Hai Ta	Division/Group	
Deputy for Ops Planning	Patsy Kullberg	Division/Group	
Resources Unit	Terry Grayum	Division/Group	
Situation Unit	Miriam Elman	Security Group	Sheriff or Police
Documentation Unit	Jill Holden	c. Branch III - Medical Care Points	
Demobilization Unit		Branch Director	Bill Collins (or Fire/EMS?)
Technical Specialists	Except for current Investigation/ Surveillance operations, those listed as OPS Leadership and staff will serve in those roles in next Op Period, but are now serving as Tech Spec planning their operations for next Oper. Patsy Kullberg is leading this Operations Development.	Deputy	Gail Burrow
		Division/Group	Cheryl Langer
Sit. Unit Field Observer	Cathy Gates, Cathy Olsen-Dennis	Division/Group	
8. Logistics Section		Division/Group	
Chief	Stan Johnson	Division/Group	
Deputy	Joy Belcourt	Security Group	Sheriff or Police
Supply Unit	Stacy Pugh	10. Finance Section	
Facilities Unit	Rich Swift	Chief	Wendy Lear
Ground Support Unit	Kersten Kohring	Deputy	Debra Newton
Communications Unit	Troy Albin	Time Unit	Larry Mingo
Medical Unit	Stephen Kue	Procurement Unit	
Security Unit	LE Officer	Compensation/Claims Unit	
Food Unit	Jon Marquardt	Cost Unit	Jesse DeJesus
203 ICS	Prepared by (Resources Unit) Terry Grayum		