PublicHealthPractices.org  
ENHANCING EMERGENCY PREPAREDNESS AND RESPONSE

May 2013 UPDATE

IN THIS ISSUE

Dispensing medical countermeasures

MORE ABOUT THESE PRACTICES

University of Minnesota

Seen by the CDC as a core public health preparedness capability (#8), the ability to dispense vaccine, antivirals, antibiotics, antitoxins and more presents no shortage of challenges.

In this edition of PHP UPDATE, we're featuring practices that address how local and state public health practitioners and partnerships tackle dispensing medical countermeasures.

COORDINATION & COMMUNICATION

MT State University

REAL-TIME NEED ASSESSMENT
ILLINOIS developed an online survey tool to assess countermeasure need in real-time during an emergency. View details.

RESPONSE PHASES
OREGON created a “mitigation menu” to help planners communicate countermeasure recommendations at various response phases. View details.

ONLINE SCREENING
A KANSAS county created an online system for quick countermeasure screening and dispensing during an emergency. View details.
POD PRACTICES
Examples from 3 states

OKLAHOMA - A push partner program includes a focus on dispensing countermeasures in institutions. View details.

OREGON - 5 counties created partnerships and tools for dispensing during an emergency. View details.

UTAH - 2 counties exercised countermeasure distribution via bank drive-thru lanes. View details.

TRAINING OPPORTUNITY
The bombing incident in Boston highlighted the importance of a strong mass casualty response.

At its Center for Domestic Preparedness in Alabama, FEMA makes available for qualified participants training in 10 emergency response disciplines.

Training topics range from chemical spills to incidents involving biological materials such as ricin and anthrax.

The costs of training, lodging, and transportation are covered by the US Department of Homeland Security.

PHARMACIES

ANTIVIRAL SHORTAGES
SOUTH CAROLINA formed a public-private partnership with pharmacies to deal with antiviral shortages during H1N1. View details.

USING A NETWORK
To reach the uninsured, a TEXAS network distributed antivirals to community pharmacies and health centers. View details.

PARTNERSHIP STRATEGY TOOLKIT
MARYLAND and FLORIDA counties worked together to create tools for pharmacy-public health dispensing strategies in an emergency. View details.

ANTIVIRALS

PHONE TRIAGE
MINNESOTA created a triage phone line for antiviral prescriptions during H1N1. View details.

TRIBAL CLINICS
NEVADA worked with tribes to develop plans for dispensing antivirals via tribal clinics and in border regions. View details.
REMOTE LOCATIONS
Michigan partnered with the Civil Air Patrol to deliver countermeasures by air to its remote Upper Peninsula region when road and bridge access is limited. View details.

UNINSURED
H1N1 SURGE
OREGON formed partnerships that allowed uninsured patients to receive antivirals over the phone or in person. View details.

CLINIC VISITS
WISCONSIN created programs for the uninsured to receive a free clinic visit and antiviral treatment during H1N1. View details.

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Questions or comments? PHTools@umn.edu

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staff at CIDRAP, and past issues are available on the site.

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