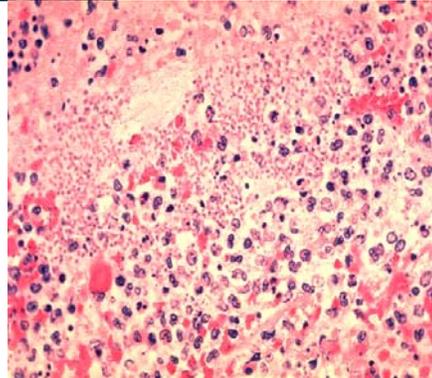


Preparing the Nation: A Policy Summit on Domestic Terrorism



Tabletop Exercise Playbook for Panelists

National Governors Association
July 10th - 11th, 2001

Preparing the Nation: A Policy Summit on Domestic Terrorism

Tabletop Exercise Playbook for Panelists

Introduction

Today's tabletop exercise provides an opportunity for Policy Summit participants to observe critical executive-level decision-making and problem solving in response to a terrorist incident.

Objective

The objective of the exercise is to facilitate understanding of executive-level decision-making and problem solving under the unique operating conditions generated by a terrorist event.

Tabletop Conduct

You will be serving on a panel in the role of the Governor's "**Expert Emergency Epidemic Response Committee**" for the fictional State of "New Aberdeen." (See *attached Committee description.*)

As a "Committee" member, you will respond to the situation based on your expert knowledge of your particular discipline and combating terrorism policies, plans, and practices. To assist in your preparations, you will be provided with "insider" information regarding the scenario that will not be available to Summit participants.

A *Federal Resource Panel* will include representatives from the FBI, CDC, FEMA, PHS, DoD, and the Red Cross. They will serve as a resource regarding Federal crisis and consequence management assets and activities.

The Committee will address three episodes of a terrorism scenario. Each begins with a brief multimedia situation update, followed by a series of topical questions and a facilitator-moderated discussion.

Policy Summit participants will have a chance to contribute to the discussion, and to question Committee members during the moderated discussion.

The *Facilitator* will provide situation updates and moderate the discussions. The facilitator will also provide additional information or resolve questions, as required. The facilitator will act as the Governor during the moderated discussion.

Assumptions/Artificialities

- The scenario is plausible, and events occur as they are presented.
- The exercise is not constrained by the real time portrayal of the subject.
- The scenario and consequences are based on a hypothetical situation and are not intended as a forecast or projection of future terrorist-related events or activities.

BACKGROUND

The State of New Aberdeen & City of Gotham

The State of New Aberdeen (NA) is located on the east coast of the northeastern United States. Gotham, the capitol, is a port city located on the Atlantic Seaboard, and is a popular tourist destination for domestic and international travelers. In addition to being a tourist Mecca, Gotham serves as a distribution, finance, insurance, and medical center.

- New Aberdeen Population - 3,248,200.
- Land area (square miles) - 7,100.
- New Aberdeen is divided into 20 counties.
- The State is bounded by New York to the north, New Jersey to the south, and Pennsylvania to the west.
- New Aberdeen's transportation network includes an international airport (Gotham Metropolitan Airport), a well-developed system of rail lines, and east-west and southeast-northwest-oriented highway routes.
- About 55 percent of New Aberdeen's population lives in urban areas. The state has eight metropolitan areas. Six metropolitan areas are entirely within the state; parts of two extend into Pennsylvania.
- New Aberdeen has a State Emergency Operations Plan (EOP) with a recently published draft terrorism annex. The recently formed Expert Emergency Epidemic Response Committee has been tasked to develop, by December 31, 2001, a new supplement to the state disaster plan that is concerned with the public health response to acts of bioterrorism, pandemic influenza, and epidemics caused by novel and highly fatal infectious agents, and to provide expert public health advice to the governor in the event of an emergency epidemic. The development of the supplement has just begun.
- The state has 22,000 licensed hospital beds; the hospital occupancy rate is currently 67 percent.
- Capital of New Aberdeen: Gotham.
- Population of Gotham: 170,000.
- The City and County of Gotham have a combined population of 298,514.
- Gotham has a Mayor-Council form of government. Mayor Kendall is newly elected, and has been in office four weeks.
- Gotham has 5 hospitals with just over 600 beds. Approximately 200 doctors serve the city. The State has 31 hospitals and 7 healthcare systems.
- The City and County Public Health Department is responsible for promoting health and preventing disease for the citizens of Gotham. Public Health Services include: community health assessment, assurance of health services, promotion of policies that encourage the health of the community, infectious disease control

and prevention, public health education and information, HIV prevention services, and Tuberculosis control.

- The Public Health Authority / Medical Director supervises Animal Control, Environmental Health, and Public Health Sections, and the Women, Infant, Child Nutrition Program.
- The Gotham Police Department has 273 sworn officers, 80 civilians, and 27 reserve officers. Annual calls for police services totaled 112,253 last year.
- The Gotham Fire Department includes 363 career and volunteer personnel. Annual calls for all fire services last year totaled 8,114. The Department of Emergency Medical Services (EMS), which falls under the Fire Department, consists of 5 rescue squads and a special operations unit, with a total equipment complement of 16 ambulances and 2 rapid response vehicles. Career personnel staff the day shift, and volunteers staff the night shift.
- The City and County of Gotham Emergency Management Department maintains a comprehensive emergency management program for disasters and hazards in the City and County.
 - It has five full time staff: Emergency Management Coordinator, Assistant Emergency Management Coordinator, Communications Officer, Hazardous Materials Planner, and a clerk. Sixty volunteers provide assistance to the Department.
 - The Emergency Management Coordinator directs emergency services and receives staff support and advice from City and County departments and agencies in the establishment and administration of the Emergency Management organizational structure. Operations are normally run from the City's Emergency Operations Center (EOC) located in the Police Headquarters building.
- The Ronald Reagan Federal Center houses several Federal department and agency offices, including an FBI Field Office of 50 personnel.
 - A Joint Terrorism Task Force (JTTF) was formed in 1999 to investigate terrorist organizations planning or carrying out criminal acts occurring in the U.S. and to apprehend individuals committing such violations. The Task Force is comprised of representatives from the FBI, U.S. Customs Service, the Gotham Police Department, the U.S. Secret Service, the Bureau of Alcohol, Tobacco and Firearms, the Federal Protective Service, the Federal Emergency Management Agency, the Environmental Protection Agency, the U.S. Immigration and Naturalization Service, the U.S. Postal Service, the New Aberdeen State Police, and the Police Departments of the other seven major metropolitan areas.
- There are no active component military installations in the State, nor is there a National Guard Weapons of Mass Destruction (WMD) Civil Support Team (CST.)
- Gotham has not received Nunn-Lugar-Domenici Domestic Preparedness Program training, exercises or equipment. The State and City and County of

Gotham are not recipients of Centers for Disease Control and Prevention (CDC) grants. New Aberdeen is in the process of developing its Three-Year Statewide Domestic Preparedness Strategy with the assistance of the Department of Justice.

- Gotham is not part of the Metropolitan Medical Response System (MMRS).
- Gotham is the seat of the main campus of the University of New Aberdeen, Lords Theological Seminary, Gotham Community College, and Rampart Technical College.
- Historical sites include Olde Town Gotham, the State House, the State Museum, and the Gotham Museum of Art.
- The weather conditions for the scenario timeframe are:
 - Friday, July 6th, day and night: clear, surface wind speed 4 - 6 m/sec (8.64 to 12.96 mph), wind northerly.
 - Saturday, July 7th, day and night: clear, surface wind speed > 6 m/sec, wind westerly.
 - Sunday, July 8th, day and night: overcast, surface wind speed < 2 m/sec (4.32 mph); wind westerly.
 - Monday, July 9th, day and night: overcast, surface wind speed < 2 m/sec (4.32 mph); wind northerly.
 - Tuesday, July 10th, day and night: overcast, patchy fog, drizzle, surface wind speed 4 - 6 m/sec; wind northerly.



EXECUTIVE SUMMARY

The following scenario depicts activities and events associated with a bioterrorism attack in the fictional city of Gotham, the capital of the State of New Aberdeen. Dale Colson, an unemployed chemist, is involved in the illegal manufacture and sale of methamphetamine. Colson is a neo-nazi, and has an obsessive interest in microbiology and several engineering disciplines. He has used funding derived from drug sales to experiment with the production of various biological agents. He procured a virulent strain of *Yersinia pestis*, or plague, and over the last several months has honed his production and dissemination techniques. He attempted several ineffective test releases, achieving a small number of infections that went undetected by the healthcare system.

On Friday, July 6th, Colson and two unidentified subjects drove a van equipped with a timer-activated dissemination device containing six liters of plague slurry to Gotham. They positioned it in a municipal parking garage in the Olde Town section of Gotham, an area populated with dance clubs, bars and restaurants. The release in the crowded Olde Town area resulted in a significant number of infections from the primary aerosol, and presents the potential for large numbers of secondary pneumonic and bubonic plague cases.

On Sunday, July 8th, a fire and series of explosions consumed the methamphetamine lab, located at a Colson-owned property in a rural county of New Aberdeen. Firefighters and Sheriff's deputies responded to the scene and discovered the methamphetamine and biological laboratories. They arrested one subject, Tony Stoudt, at the scene. Colson eluded capture.

Episode 1, Sunday, July 8th, 2001

On Sunday, July 8th, shortly before 11 a.m., Sheriff's dispatchers in Red Oak County, a rural locale in the northeastern corner of New Aberdeen, received a call reporting an explosion at a farmhouse. A man suffering from what appeared to be minor burns on his face and part of his body met responding firefighters and a sheriff's deputy. The individual, later identified as Dale Colson, 38, told them a backyard gas barbecue grill had exploded. While speaking to Colson, the firefighters and deputy noticed smoke coming from the basement of the home, and detected a strong chemical odor typically associated with methamphetamine manufacturing. Colson ran into the woods next to the residence just as an explosion blew out the basement windows. Several explosions and an ensuing fire culminated with the collapse of the roof. Firefighters took a defensive posture, protecting other exposures and extinguishing several grass fires. The farmhouse was destroyed, and a nearby travel trailer was moderately damaged.

Additional Sheriff's units were dispatched to the scene, including the Special Operations Response Team (SORT), and the State Narcotics Bureau's Special Incident Response Team (SIRT) was notified. Deputies established boundaries around the scene's perimeter, which included a shed, barn, and several other outbuildings, and requested a search warrant relating to illegal narcotics activity.

During this activity, deputies were confronted by Tony Stoudt, 26, who attempted to escape into woods behind the barn. Stoudt fired one round from a semi-automatic handgun at members of SORT. They returned fire, and Stoudt subsequently surrendered. Stoudt was immediately taken to the County Jail for interview and booking. Stoudt waived his right to an attorney. Two Sheriff's Department Narcotics detectives, having been updated by deputies on-scene, conducted the initial interview.

A video of the initial interview will be played at this point

The County Hazardous Materials (HazMat) Team and County Environmental Health Section were alerted. County HazMat in turn notified the State's Regional HazMat team, and Environmental Health notified the State Departments of Environmental Services (DES) and Public Health (DPH).

After securing a search warrant, members of the SIRT, supported by bomb squad technicians, emergency medical personnel, and the County HazMat team, collected and inventoried evidence. Samples were secured for analysis by the state crime lab.

The barn and other outbuildings housed a variety of accoutrements used in methamphetamine manufacturing: glass flasks, heating devices, condensing tubes, rubber or plastic tubing, filters and filter papers, vacuum pumps, funnels, commercial grade gas cylinders containing hydrogen chloride gas, and cans of Freon refrigerant. The search also uncovered breathing apparatus used by the suspects, and significant amounts of iodine crystals, hidriotic acid, red phosphorus, acetone and lye.

Investigators also found small quantities of Marijuana, 4 Vehicles, 32 weapons, approximately \$10,000 in cash, quantities of neo-nazi literature and paraphernalia, and underground publications dealing with methamphetamine and other chemical and biological manufacturing processes. These items were seized as potential evidence of criminal activity.

One SORT member was taken to the County Medical Center for treatment of a hand injury sustained during the incident. Three deputies were also treated at the Emergency Room for upper respiratory distress from toxic fumes. All were released a short time later.

Once the fire subsided, investigators entered the travel trailer and discovered additional laboratory equipment inconsistent with methamphetamine manufacture. County Environmental Health Section representatives at the scene aided in identifying the equipment, including a shaker table, tabletop centrifuge, empty refrigerator and several small bio-safety cabinets joined together and ducted out of the trailer through a jury-rigged HEPA filter.

Two narcotics detectives from the Sheriff's Office were at the scene. Following the discovery of the trailer contents, one of the detectives, who serves on the New Aberdeen Joint Terrorism Task Force (JTTF), contacted the Federal Bureau of Investigation (FBI) Weapons of Mass Destruction (WMD) Coordinator for the Gotham Field Office. The Coordinator notified the Field Office's Special Agent in Charge (SAC) and responded to the scene. After being briefed at the scene the Coordinator provided an update to the SAC, who requested a federal search warrant for the travel trailer. A conference call was established with the Weapons of Mass Destruction Operations Unit (WMDOU) at FBI Headquarters. The SAC requested assistance from the Critical Incident Response Group (CIRG), including Hazardous Materials Response Unit (HMRU) support. HMRU was alerted and began deployment to New Aberdeen.

DPH notified the State Office of Emergency Management (OEM) duty officer through the State Police Communications Center of the discovery of the potential biological laboratory. The County Sheriff deployed to the scene, notified the County Executive, and contacted the State Police Superintendent. The Superintendent and OEM Director contacted the Governor, who in turn conferred with the County Executive.

It's now Sunday evening. An hour ago the Governor was advised that a search of the travel trailer uncovered a refrigerator with four pint-sized containers labeled "**plague slurry, 1 gm/ml.**" The FBI Field Office in Gotham has been notified about the containers. The FBI, SIRT, DES, DPH and HazMat teams are working together to develop an action plan to remove the containers and secure samples for testing. An incident command post has been established in the vicinity of the property.

While there is no confirmation regarding the containers' contents, the County Health Officer has recommended precautionary prophylaxis and monitoring of personnel who were on-scene at the Colson property.

DPH alerted the State OEM Director, who in turn contacted and briefed the Governor. The Governor is on his way to the State Emergency Operations Center (EOC) to meet with the Director, other key personnel, and his newly formed "Expert Emergency Epidemic Response Committee."

The Committee was established by the state legislature earlier this year. The Governor has taken an active interest in preparing the State against the threat of terrorism,

emerging infectious diseases, and pandemic influenza. In a recent meeting, the Governor described the role of the Expert Emergency Epidemic Response Committee as a “strategic coordinating group.” The Governor has convened the Committee to review what measures, if any, need to be considered at this juncture based on currently available information. Outside of several organizing meetings, this is the first time it has formally convened.

While the Committee met at the State EOC, the FBI SAC activated a command post at the Field Office, and contacted the US Attorney. The US Attorney filed an urgent report through the Department of Justice Command Center. The FBI and other JTTF agencies began checking Department of Motor Vehicle records, conducting database searches, and reviewing other investigations, warnings and indicators.

An FBI coordinated interagency assessment conference call comprised of affected local, state and federal agency representatives was conducted to evaluate the threat from an operational, technical, and behavioral standpoint. The interagency experts deemed the potential threat to be credible, with a high degree of confidence. Upon notification of the White House by the Department of Justice of the credible threat, the National Security Council (NSC) convened a teleconference of the interagency Counter-terrorism Security Group (CSG). This standing interagency group was briefed on the situation and appropriate Federal agencies were instructed to place their resources on alert to quickly deploy to New Aberdeen.

The FBI WMD Coordinator and Narcotics Detective conducted a second, expanded interview of Stoudt.

A video of the second interview will be played at this point

Episode Summary

- A clandestine methamphetamine laboratory was destroyed in a fire.
- The investigation revealed a second laboratory apparently designed to produce biological materials.
- One individual was arrested at the scene. A second escaped and has not been apprehended.
- Large quantities of chemicals and equipment associated with methamphetamine

PANELIST NOTE: It is now roughly 36 hours after a midnight, Friday, July 6th aerosol attack in Gotham using *Yersinia pestis*. Within 24 hours of the attack, individuals that were outside and close to the dissemination site (a popular dance club) began experiencing a mild “scratchy” throat. These individuals were exposed to the release during the period of aerosol equilibration and were exposed to a combination of both large (> 5 micron) and small (1- 5 micron) mass median diameter aerosol particles. The larger particles lodged in the oropharynx and upper airways and an early bilateral tonsil infection began. Other individuals closest to the dissemination site are experiencing a very slight but non-specific malaise. Burrowing rodents and rats in the vicinity of the dance club received a high dose of the organism, and will begin exhibiting initial clinical signs of infection within the next 24 hours, with death beginning at 50 hours post exposure.

manufacture, neo-nazi literature and paraphernalia, weapons, and reference materials for production of biological and chemical weapons of mass destruction were found at the property.

- Several containers labeled as "*plague slurry, 1 gm/ml*" were discovered in a vehicle on the property. The content of the containers has not been confirmed.
- An interagency assessment has deemed the potential threat to be credible.

Governor's Questions to the Committee

Governor/Facilitator

The Governor relies on his Crisis and Consequence management leaders to keep him informed of developments. He understands that, at the worst, he may be facing a local, state, national and even international health crisis. In order to quickly make public health and safety decisions, as well as plan for the State's response to this potential crisis, he asks for a situation update from the OEM Director and from the Superintendent of the State Police. They provide an update that stresses that containers labeled "plague slurry" had been recovered, and that Federal crisis/consequence management officials working with State and local officials have jointly assessed the bio-terrorism threat as credible. The Governor poses the following questions to individual panel members:

For All:

- *Introductions.*

Questions to Director of Public Health:

- Should we alert our counties and municipalities, and adjoining state and Federal health organizations?
- How will we be able to detect if a release has occurred? Are our surveillance systems sensitive enough to identify any potential victims?
- If plague has been disseminated, what is the incubation period, and do we have the medical resources to handle a significant influx of patients?
- What other health/public safety issues do you have at this time?

Questions to Director of the Office of Emergency Management:

- Should we activate the State EOP? Should we invoke a State of Emergency?
- Should we notify all state emergency management agencies of this developing situation?
- Should we put the National Guard on alert?
- Should we alert all County Executives and Mayors of this situation?
- If plague has been disseminated somewhere in New Aberdeen, what Federal resources might we need to contend with the consequences?

Questions to the Superintendent of the State Police:

- Since this is a credible terrorist threat, is the Joint Terrorism Task Force leading the investigation?
- What additional resources do you need at this time?

Questions to the State Public Information Officer:

- Should we issue a public statement, and if so, what should I say and how should I say it? Who should be with me at the time of the public statement?

To All:

- If plague has been disseminated is the imposition of a quarantine necessary? Is a quarantine warranted? Do we have a plan for quarantine? If there are no plans, what do you recommend?
- What other action is needed at this time?

Episode 2, Monday, July 9th, 2001, Early Morning

Following the Committee meeting at the State EOC, the Governor called the White House Chief of Staff to discuss the unfolding situation.

After HMRU's arrival at the Colson property, the containers were removed from the vehicle, and were transported by the FBI and JTTF members to the State Public Health Laboratory for confirmatory testing and identification. All of the containers appeared to be nearly empty.

A nationwide search was initiated for the 1992 red Pontiac Transport van Colson and the two unidentified subjects took to Gotham. Early this morning, the Gotham City Police Department (GPD) located the van on the top (fourth) level of a downtown municipal parking garage. The rear hatch was open, and the side door and side windows were partially ajar. Police officers observed an air compressor and several modified fire extinguishers mounted in brackets in the rear of the van. The van and garage have been secured pending arrival of specialized investigative elements currently deployed at the Colson property. The Gotham Fire Department has staged its HazMat team in a local Fire Station.

The Gotham Emergency Management Coordinator told the State OEM Director that the Mayor has directed him to open the City and County EOC (located in the Police Building). His staff is in the process of notifying city and county agencies and departments. The Mayor has asked the City and County Medical Director to "begin preparations" for a potential public health crisis. The Emergency Management Coordinator said they were "having some problems" coordinating the activities of police and fire at the parking garage location, and the Assistant Emergency Management Coordinator was deploying to the scene.

The Police activity is attracting local media coverage. No spokesperson has issued a statement to the media; current speculation among reporters centers on a possible bomb threat. The Mayor is emphatic that the arrival of HazMat teams and FBI HMRU and JTTF personnel, street blockages, and increasing media presence are going to create a "major public affairs circus." He plans to make a public safety announcement shortly, but wants to coordinate his remarks with the Governor. Gotham will use the City's citizen assistance hotline to field calls from the public. Local media outlets reported the fire and discovery of the methamphetamine laboratory on their Sunday evening newscasts, but have not made the linkage to activities at the parking garage.

Inspection of the van by HMRU and JTTF investigators revealed three discharged two-liter fire extinguishers surrounded by a passive cooling jacket, discharging through two single fluid nozzles. The air propellant fed through a triggering solenoid linked to a

mechanical timer. A pressure regulator was not included as part of the device, suggesting generation of a discontinuous range of aerosol particle sizes. The timer reflects a Friday, July 6th midnight firing. An incendiary device in the van was also timer-equipped, but failed to function.

As a result of the City Medical Director and Communicable Disease Coordinator's queries of local hospitals, Gotham General identified an unusual cluster of four patients in the Emergency Department. Three of four presenting are young males, ages seventeen to twenty-three, and were admitted over the course of the evening and morning with presumptive pneumonia. Each presented with a high fever, which reportedly developed overnight, along with a scratchy throat. They also displayed various symptoms such as nausea, vomiting and diarrhea, a severe cough with frequent expectoration of yellowish sputum, throat pain, and a painful headache. Suspicion focused on possible meningococemia, mycoplasma, adenovirus, or influenza, but the possibility of unusual side effects from illicit drug exposures was also considered. All denied taking any drugs; initial urine toxicology screens were negative.

During the course of additional calls and visits to area hospitals, five similar cases, all teenagers and young adults, were identified at Adventist Hospital. Two were admitted; the others were treated and released.

Gotham Fire / EMS reported a handful of runs transporting patients, again primarily teenagers and young adults, with symptoms of high fever, complaints of chest pain upon breathing / labored breathing, severe headaches, nausea, vomiting, diarrhea, and coughing up of blood.

Complete blood counts on some of the patients revealed high white counts. A review of preliminary laboratory results suggests gram-negative bacteria growing in the blood and sputum in several of the early admissions. Chest X-rays are reported to be consistent with pneumonia. None of the patients have a history of plague vaccination or exposure. Nasal swabs, sputum, and respiratory secretions are being collected for further testing. The City Medical Director has provided guidance to medical facilities regarding pneumonic plague symptoms, and procedures for isolation of suspected cases.

A video of a doctor discussing the contagious nature of the disease will be shown at this point

Epidemiological and JTTF criminal investigative information, while preliminary, suggests patients were in Olde Town Gotham at or near the "Zine and Dine Dance Club" on the evening of Friday, July 6th. The majority of patients admitted to or treated at Gotham General and Adventist were University of New Aberdeen students. (Both hospitals are close to the campus.) Gotham PD reports hundreds of local college

students and other teenagers and young adults customarily congregate outside the club and surrounding bars and eateries on Friday and Saturday evenings. The club was cited in the past by the Fire Marshal for violation of occupancy loads. It is across the street from (south of) the parking facility where the van was found.

Information regarding the lab results and activities in Gotham has leaked to the media. Several outlets are reporting a possible terrorist incident variously characterized as "biological," "deadly," and "widespread." National networks are expected to air reports momentarily. Two local affiliates are reportedly ready to identify the agent as plague.

The first patient admitted to the hospital on Sunday has died.

State Public Health Laboratory testing shows the container contents recovered at the farmhouse are in fact *Y. pestis* slurry.

Episode 2 Summary

- Results of testing on the container contents confirm the presence of a highly virulent strain of *Y. pestis*.
- Inquiries to local hospitals identified two unusual clusters of teenagers and young adults with severe respiratory conditions. Their symptomology, supported by presumptive laboratory results, is consistent with probable exposure to pneumonic plague.
- The first patient admitted has died. Earlier illnesses and fatalities may also be attributable to plague exposure.
- Fire and EMS reported several runs for patients with suspected plague exposure.
- A van located in a downtown parking garage was equipped with a jury-rigged spray device used to discharge aerosolized *Y. pestis*. The van is located upwind of a popular dance club.
- The local media are reporting a possible terrorist attack, have characterized it as biological, and are prepared to identify the agent as plague. National networks are expected to air reports momentarily.

PANELIST NOTE: The upper airway infection in the early human cases is now causing uncomfortable symptoms and the individuals have a fever. Personnel who have received high respiratory doses are now exhibiting a fever and chronic cough slightly tinged with yellowish sputum.

By late afternoon, the upper airway cases, and new cases others have presented for treatment. These cases are prescribed Beta-lactam antibiotics. A throat swab is taken from the reddened throat of one of the upper airway cases, and this is sent for gram stain and culture. A lab technician performed a gram stain in the late afternoon, but the occasional gram-negative bacilli on the smear are not noticed among the mixed-flora of the oral cavity.

Field mice and rats in the area are showing definite clinical signs of pneumonic plague infection. The animals show ruffled fur slight shortness of breath, and agitation.

NOTE: The Beta-lactam antibiotics are ineffective against *Yersinia pestis*. (Beta-lactam antibiotics include penicillins, cephalosporins and related compounds. As a group, these drugs are active against many gram-positive, gram-negative and anaerobic organisms.)

At 50-60 hours post-attack, 90% of the rodents will die off in immediate area of dance club.

At 30-50 hours post-attack, 15% of the human cases will evidence severe symptoms, and death will occur within 72 hours if untreated.

Governor's Questions to the Committee

Location: State Emergency Operations Center (EOC)

Governor / Facilitator

The Governor / facilitator receives a situation update from his crisis and consequence management leaders (OEM Director and Attorney General/Superintendent of the State Police). The Governor understands the seriousness of this quickly developing situation, and is planning for the worst, but hoping for the best. After being briefed he asks the following questions.

Questions to Director of Public Health:

- Do we have a plan for large-scale prophylaxis?
- How long would it take us to implement large-scale prophylaxis if needed?
- Do you have enough medicine on hand to treat large numbers of sick people?
- How many hospital beds do we have available if we have a significant outbreak of disease?
- How can we find out how many citizens reported plague symptoms to hospitals, doctors, clinics or other medical facilities?
- Should we ask for Federal assistance from HHS/CDC now, or wait until we get a sense of whether we have a large health problem on our hands?

Questions to Director of the Office of Emergency Management/National Guard/TAG:

- Have you discussed the need for a quarantine with the Director of Public Health? If we have to impose quarantine, do we have a plan for small-scale and/or large-scale quarantine?
- Do we have the law enforcement and National Guard resources to enforce a quarantine?
- If I make a proclamation of emergency in the next several hours, what will we ask the Federal Government to send? How do we accomplish a 'preliminary damage assessment' for this situation?

Questions to Attorney General/Superintendent of the State Police:

- When will we know the results of the investigation being conducted at the parking garage?
- If plague was disseminated from the van, what investigative actions are being taken in conjunction with medical authorities to find out who besides Colson was responsible, and how many innocent victims might have been infected in a release?

Questions to State Public Information Officer:

- It is clear that a public statement is in order. Should we coordinate such a statement with Gotham City and Federal authorities, including the White House?
- Who should be with me when I give a press briefing? Should we allow questions from the media?
- Should we set up a Joint Information Center?

Director of the Department of Agriculture/State Veterinarian (or to any member of the Committee able to address the questions):

- Have we alerted our agriculture/veterinarian offices statewide of this problem?
- Are you working with the state/Federal public health officials in this matter?
- Are there any reports of sick animals in the state?
- Are such reports being forwarded to appropriate state and Federal crisis and consequence management officials?

Questions to Director of the Department of Transportation (or to any member of the Committee able to address the questions):

- Do we have contingency plans within the state, with our sister states and with the Federal authorities in the event all transportation in and out of the state is shut down?

To all:

- Do we know with certainty how bad the situation will get?
- Could this have happened before and we missed it? How?

Episode 3, Tuesday, July 10th, 2001, Early Morning

The situation has progressively worsened. Since mid-afternoon on Monday the following events have occurred:

The Centers for Disease Control and Prevention (CDC) dispatched an epidemiological investigative team to New Aberdeen at the request of New Aberdeen and Gotham. The team is currently conducting a joint epidemiological investigation with Gotham and State public health staffs, in consultation with the FBI's investigation, and has identified a growing number of potential cases. A DOH pharmaceutical inventory, while not complete, suggests there are insufficient quantities available of necessary medications for treatment (streptomycin [FDA approved for treatment of plague], and gentamicin, [a non-FDA approved alternative]), and to conduct mass chemoprophylaxis (doxycycline or ciprofloxacin). Antibiotic resistance testing by CDC was negative.

A video depicting the press preparing for the Mayor's statement will be played at this point

After determining the effects of the incident were beyond the capability of local resources to mitigate, the Mayor issued a declaration of a local emergency. He subsequently made a public safety announcement with his Emergency Management Coordinator and City Medical Director. He has contacted the Governor to request immediate state and federal assistance. His statement read, in part:

"I have consulted with the Governor and his staff, the City Medical Director and the City and County Board of Health. We are receiving assistance from many of the world's leading experts. All the city's available medical machinery and manpower are committed to this situation, and with the assistance of the state and federal governments we will provide medications, medical screening, and monitoring to those that may have been exposed to this disease. We believe the effects were confined to a relatively small area and number of people. The disease is readily treatable, but if you believe you may have been exposed you should report without delay to the locations we have identified. There is no need for panic or undue alarm, but there is a need to exercise every precaution as soon as possible."

The State determined that the emergency conditions were beyond the control of the services, personnel, equipment, and facilities of the City and County of Gotham, and that these conditions required State and Federal assistance. The Governor issued an Emergency Proclamation, and requested Federal assistance, including assets from the National Pharmaceutical Stockpile Program (NPSP).

With the implementation of the State Emergency Operations Plan (EOP), selected departments and agencies have been activated for specific emergency support functions (ESFs). Representatives of those agencies and departments have deployed to the state

EOC. They include the Department of Health; DOH Division of Human Services; State Police; Departments of Agriculture, Education, Environmental Services, Resource and Economic Development, Employment Security, and Transportation; Fish and Game Services, National Guard; and the American Red Cross.

The FEMA Regional Director was advised of the request; he has activated the Regional Operations Center (ROC), alerted Federal departments and agencies in the region, and his staff is consulting closely with the State OEM. A FEMA liaison has been dispatched to the State EOC.

The Governor made a public announcement, accompanied by the Director of the Department of Health and the FBI SAC. The Governor's emergency proclamation read in part:

"Section 1. I have determined that a state of disaster and a state of emergency, as defined in N.A.S. 166A-4(3) and N.A.S. 14-288.1(10), exists in the City and County of Gotham, in the State of New Aberdeen, as a result of terrorism, on July 10, 2001.

Section 2. Pursuant to N.A.S. 166A-6 and 14-285.15., I, therefore, proclaim the existence of a state of disaster and a state of emergency in the above-referenced city and county.

Section 3. I hereby order all state and local government entities and agencies to cooperate in the implementation of the provisions of the New Aberdeen Emergency Operations Plan."

The CDC Director consulted with the Secretary of Health and Human Services (HHS), the Surgeon General, and the HHS Office of Emergency Preparedness (OEP) on stockpile deployment. HHS advised the FBI and the Federal Emergency Management Agency (FEMA) of the decision to immediately deploy a pharmaceutical "push package" with CDC's Technical Assistance Response Unit (TARU), and to activate Vendor Managed Inventory (VMI) resources in anticipation of additional requirements. DOH, CDC, and the City and County conferred on a plan for dealing with those potentially exposed to plague, and have recommended, in order, prophylaxis and monitoring for those individuals at or in the immediate area of the Zine and Dine Dance Club during the evening of July 6th (residents, workers, patrons and visitors); their high frequency contacts (e.g., family members), EMS and other medical workers or personnel in close contact with patients, and then lower frequency contacts in these categories. Public service announcements have begun. As soon as sufficient quantities of pharmaceuticals are on hand to begin mass distribution, persons will be directed to City Health Clinics and the UNA Field House for screening and prophylaxis, or additional treatment. Hospitals have activated their disaster plans, and staffs have been held over and augmented in anticipation of a major health emergency.

The FBI SAC requested the assistance of the FBI led federal interagency Domestic Emergency Support Team (DEST) on Monday evening; the Attorney General approved the deployment and the DEST is at the Field Office. The SAC is establishing a Joint Operations Center (JOC) and has been named as the On-Scene Commander (OSC) by the Director. The Strategic Information and Operations Center (SIOC) at FBI

headquarters and the Emergency Support Team (EST) at FEMA headquarters are coordinating federal crisis and consequence management response. The Advance Element of the Emergency Response Team (ERT-A) has deployed to the State EOC.

The University of New Aberdeen Health Clinic, which was closed over the weekend, reported a flood of worried students on Monday, continuing through Tuesday, seeking medical screening. Several students with clinically compatible case descriptions were transported to Gotham General. Parents of students continue to arrive, and many insist on removing their students from the campus. The University has suspended classes and is asking for medical personnel to assist in screening students. Lords Theological Seminary, Gotham Community College, and Rampart Technical College have also cancelled classes and are referring students with suspected exposure to City and County health clinics and hospital emergency departments.

The contiguous counties to Gotham and Red Oak County have activated their EOCs, and hospitals in those locales have implemented their disaster plans. All public health authorities in New Aberdeen have been alerted. They have been provided with guidance for medical facilities regarding pneumonic plague symptoms, procedures for isolation of suspected cases, and case reporting instructions. The states of Pennsylvania, New York and New Jersey have opened their Emergency Operations Centers, alerted appropriate departments and agencies and public health officials, and have offered assistance to New Aberdeen.

To date, the vast majority of cases seem to be confined to Gotham. University of New Aberdeen students predominate.

Following a CSG meeting, the Principals Committee of the National Security Council, (USG Cabinet officials) met to discuss the incident and the Federal response. On Monday evening, based on the local emergency declaration, state proclamation, and urgent requests for federal assistance, the President issued an Emergency Declaration to supplement the efforts and resources of the state and affected local governments, and made a public statement pledging full assistance to New Aberdeen and Gotham. A Federal Coordinating Officer (FCO) has been appointed. Appropriate members of Congress and other Federal departments and agencies have been notified. The FCO will work closely with the on-scene commander (OSC, the FBI SAC) as well as state and local authorities until the crisis is resolved.

The CDC reported the occurrence of plague to the World Health Organization (WHO) in accordance with the International Health Regulations for internationally quarantinable diseases. The high risk of international spread, potentially high case-fatality rate, unusual occurrence, high degree of media interest, and potential for imposition of trade / travel restrictions mandated prompt notification.

With the arrival of the NPS push package, mass prophylaxis began in earnest at clinics and the UNA Field House. By 11 a.m., 3,000 persons were lined up in vehicles outside the Field House and around the UNA campus. By 1 p.m., the number had risen to 5,000, and UNA temporarily closed its gates. University officials stated the lines were becoming unmanageable, the university had insufficient security, and administrators had concerns regarding liability. While Gotham health clinics also experienced large number of persons seeking assistance, Gotham, New Aberdeen and federal public health personnel continued issuing medications and screening and registering persons.

The City's Hotline has been fielding numerous calls from homebound persons seeking assistance with medical screening and prophylaxis. The Gotham Employment and Public Assistance Office advised the EOC that non-domiciled (homeless) persons frequent the area around the municipal parking garage, and outreach to local shelters and churches should be made immediately.

The Gotham Coroner has established a temporary morgue using refrigerated trailers to manage plague fatalities.

City and County public safety and essential services are beginning to experience staffing difficulties due to increasing employee absence. Prioritization of prophylaxis for public safety and medical personnel has been effective in ensuring availability of key personnel, but other essential services have been hard hit by absenteeism.

The national news media are now providing continuous coverage of the incident through their local affiliates, and all major networks have dispatched crews to New Aberdeen. Local affiliates have provided significant assistance to the City and County and State in disseminating emergency public information.

Thirty-eight cases have been reported, with six fatalities to date. A high incidence of pharyngitis and cervical lymphadenitis are the apparent result of exposure to larger infectious droplets (pharyngeal plague).

Episode 3 Summary

- The City and County of Gotham declared a local emergency and requested state and federal assistance. The Governor made an emergency proclamation and requested federal assistance. The President made an emergency declaration. Local, State and Federal agencies and departments are engaged in dealing with the worsening crisis.
- Surrounding counties and States are monitoring the situation and taking precautionary steps in anticipation of the potential spread of the disease. The World Health Organization (WHO) and a host of countries are closely monitoring developments; several countries are on the verge of imposing travel restrictions.
- Problems are occurring in mass distribution of medications.
- The number of victims now appears to be relatively small, and confined predominately to UNA students.

PANELIST NOTE:

70 hours post- attack, 40% of all cases will have severe symptoms. This is the cut off time for 90% survival with antibiotic therapy. If antibiotics have not been administered by this time, these cases are expected to show a poor prognosis even with antibiotic therapy.

During the late evening of the previous day (Monday), the initial 8 index cases worsen. With respect to these upper airway cases, *Y. pestis* rapidly causes a tender cervical lymphadenopathy, but the organism undergoes lymphohematogenous spread before actual bubo formation occurs. Individuals exposed to a high-dose small particle aerosol now begin to show definitive signs of an early lobar pneumonia. Early in the morning, the 4 cases with oropharangeal / lymphohematogenous spread are admitted to the hospital showing very early signs of septic shock. All the cases due to exposure to high-dose small particles seen the previous day have now returned to medical facilities and are admitted with progressive clinical signs of broncho- and lobar pneumonia. The patients exhibit high temperature with a significantly productive cough and Grade I dyspnea. Gram staining of the sputum from these patients reveals numerous gram-negative bacilli and a provisional diagnosis of pneumonic plague is made.

100 hours post-attack, 95% of all cases have severe symptoms. The full medical effects of the attack are now apparent. The initial 4 oropharangeal index cases have now progressed into septic shock and are near death with coagulation abnormalities, leukemoid cell counts, vascular necrosis and left-sided heart failure due to a plague-secreted cardiotoxin. A large number of patients with primary aerosol exposure have now been admitted, and require admission to already full ICUs. The hospitalized patients are exhibiting an aggressive lobar and multilobar pneumonia with fibropurulent pleuritis and pulmonary edema secondary to Left-sided heart failure. Some patients are showing early signs of septic shock. Secondary plague cases are now beginning. This is in addition to the primary aerosol cases and the vector-mediated bubonic cases. Cases of the bubonic form of the disease are mainly attributable to domestic cats infecting their owners; large die-offs of cats are being reported in the city. A percentage of the bubonic cases are characterized by septicemia and a necrotizing broncho-pneumonia with consolidating air spaces.

Summation Questions to the Committee

Location: State Emergency Operations Center (EOC)

Governor/Facilitator

The Governor has been receiving continuous briefings over the past few hours, and has had a quick situation update from his crisis and consequence management leaders/experts. Since the last meeting, the tempo of the crisis has increased dramatically, the Governor has declared a State of Emergency and a Federal emergency declaration has been invoked. Federal assets, including resources from the National Pharmaceutical Stockpile have arrived, and medications are being administered to people who have a high probability of being infected by the plague. Facilities used by medical authorities to administer medications are quickly being overwhelmed by those seeking treatment. The situation in Gotham and the State remains relatively calm since needed information is being disseminated to the public through the media; however, anxiety is rising. Other States, and two foreign countries have now reported several clinically compatible cases.

For all:

Each committee member will be provided with an opportunity to comment on local, state and federal activities depicted in Episode 3.

The facilitator will then restate the exercise purpose and objective:

Purpose: Today's tabletop exercise provides an opportunity for Policy Summit participants to observe critical executive-level decision-making and problem solving in response to a terrorist incident.

Objective: Facilitate understanding of decision-making and problem solving under the unique operating conditions generated by a terrorist event.

Each committee member will then be provided with the opportunity to provide a summation, and to comment on key observations and issues both from their 'role playing' and professional perspectives.

If time allows, the facilitator will provide audience members with an opportunity to comment on the exercise and key issues, and then close the exercise.

Preparing the Nation: A Policy Summit on Domestic Terrorism

BACKGROUND - - Governor's Expert Emergency Epidemic Response Committee

The Governor and Disasters - Revised New Aberdeen Statute to include an Expert Emergency Epidemic Response Committee

(Based on the State of Colorado's recent legislation establishing an Expert Emergency Epidemic Response Committee. The Committee is discussed at Section [8] [a]).

(1) The governor is responsible for meeting the dangers to the state and people presented by disasters.

(2) The governor may issue executive orders, proclamations, and regulations and amend or rescind them. Executive orders, proclamations, and regulations have the force and effect of law.

(3) (a) There is hereby created a governor's disaster emergency council, referred to as the "council", consisting of not less than six nor more than nine members. The attorney general, the adjutant general, and the executive directors of the following departments shall be members: Administration, transportation, public safety, and natural resources. The additional members, if any, shall be appointed by the governor from among the executive directors of the other departments. The governor shall serve as chairman of the council, and a majority shall constitute a quorum. The council shall meet at the call of the governor and shall advise the governor and the director of the office of emergency management on all matters pertaining to the declaration of disasters and the disaster response and recovery activities of the state government; except that nothing in the duties of the council shall be construed to limit the authority of the governor to act without the advice of the council when the situation calls for prompt and timely action when disaster threatens or exists.

(4) A disaster emergency shall be declared by executive order or proclamation of the governor if the governor finds a disaster has occurred or that this occurrence or the threat thereof is imminent. The state of disaster emergency shall continue until the governor finds that the threat of danger has passed or that the disaster has been dealt with to the extent that emergency conditions no longer exist and the governor terminates the state of disaster emergency by executive order or proclamation, but no state of disaster emergency may continue for longer than thirty days unless renewed by the governor. The general assembly, by joint resolution, may terminate a state of disaster emergency at any time. Thereupon, the governor shall issue an executive order or proclamation ending the state of disaster emergency. All executive orders or

proclamations issued under this subsection (4) shall indicate the nature of the disaster, the area threatened, and the conditions which have brought it about or which make possible termination of the state of disaster emergency. An executive order or proclamation shall be disseminated promptly by means calculated to bring its contents to the attention of the general public and, unless the circumstances attendant upon the disaster prevent or impede, shall be promptly filed with the office of emergency management, the secretary of state, and the county clerk and recorder and disaster agencies in the area to which it applies.

(5) An executive order or proclamation of a state of disaster emergency shall activate the disaster response and recovery aspects of the state, local, and interjurisdictional disaster emergency plans applicable to the political subdivision or area in question and shall be authority for the deployment and use of any forces to which the plans apply and for use or distribution of any supplies, equipment, and materials and facilities assembled, stockpiled, or arranged to be made available pursuant to this part or any other provision of law relating to disaster emergencies.

(6) During the continuance of any state of disaster emergency, the governor is commander-in-chief of the organized and unorganized militia and of all other forces available for emergency duty. To the greatest extent practicable, the governor shall delegate or assign command authority by prior arrangement embodied in appropriate executive orders or regulations, but nothing in this section restricts the governor's authority to do so by orders issued at the time of the disaster emergency.

(7) In addition to any other powers conferred upon the governor by law, the governor may:

(a) Suspend the provisions of any regulatory statute prescribing the procedures for conduct of state business or the orders, rules, or regulations of any state agency, if strict compliance with the provisions of any statute, order, rule, or regulation would in any way prevent, hinder, or delay necessary action in coping with the emergency;

(b) Utilize all available resources of the state government and of each political subdivision of the state as reasonably necessary to cope with the disaster emergency;

(c) Transfer the direction, personnel, or functions of state departments and agencies or units thereof for the purpose of performing or facilitating emergency services;

(d) Subject to any applicable requirements for compensation, commandeer or utilize any private property if the governor finds this necessary to cope with the disaster emergency;

(e) Direct and compel the evacuation of all or part of the population from any stricken or threatened area within the state if the governor deems this action necessary for the preservation of life or other disaster mitigation, response, or recovery;

(f) Prescribe routes, modes of transportation, and destinations in connection with evacuation;

(g) Control ingress to and egress from a disaster area, the movement of persons within the area, and the occupancy of premises therein;

(h) Suspend or limit the sale, dispensing, or transportation of alcoholic beverages, firearms, explosives, or combustibles; and

(i) Make provision for the availability and use of temporary emergency housing.

(8) (a) **There is hereby created a governor's expert emergency epidemic response committee.** The duties of the committee shall be to develop by December 31, 2001, a new supplement to the state disaster plan that is concerned with the public health response to acts of bioterrorism, pandemic influenza, and epidemics caused by novel and highly fatal infectious agents and to provide expert public health advice to the governor in the event of an emergency epidemic. The committee shall meet at least annually to review and amend the supplement as necessary. The committee shall provide information to and fully cooperate with the council.

(b) (I) State members of the committee shall include the following:

- (A) The executive director of the department of public health;
- (B) The chief medical officer of the department of public health;
- (C) The chief public information officer of the department of public health;
- (D) The emergency response coordinator for the department of public health;
- (E) The state epidemiologist for the department of public health;
- (F) The attorney general or the designee of the attorney general;
- (G) The president of the board of health or the president's designee;
- (H) The president of the state medical society or the president's designee;
- (I) The president of the New Aberdeen health and hospital association or the president's designee;

- (J) The state veterinarian of the department of agriculture;
- (K) The Director of the Department of Environmental Protection, and
- (L) The director of the office of emergency management.

(II) In addition to the state members of the committee, the governor shall appoint to the committee an individual from each of the following categories:

- (A) A licensed physician who specializes in infectious diseases;
- (B) A licensed physician who specializes in emergency medicine;
- (C) A medical examiner;
- (D) A specialist in posttraumatic stress management;
- (E) A director of a local public health department;
- (F) A hospital infection control practitioner;
- (G) A wildlife disease specialist with the division of wildlife; and
- (H) A pharmacist member of the state board of pharmacy.

(III) The executive director of the department of public health shall serve as the chair of the committee. A majority of the membership of the committee, not including vacant positions, shall constitute a quorum.

(IV) The executive director of the department of public safety or the executive director's designee shall serve as an ex officio member of the committee and shall not be able to vote on decisions of the committee. The executive director shall serve as a liaison between the committee, the council, and the New Aberdeen emergency planning commission in the event of an emergency epidemic.

(c) The committee shall include in the supplement to the state disaster plan a proposal for the prioritization, allocation, storage, protection, and distribution of antibiotic

medicines, antiviral medicines, antidotes, and vaccines that may be needed and in short supply in the event of an emergency epidemic.

(d) The committee shall convene at the call of the governor or the executive director of the department of public health to consider evidence presented by the department's chief medical officer or state epidemiologist that there is an occurrence or imminent threat of an emergency epidemic. If the committee finds that there is an occurrence or imminent threat of an emergency epidemic, the executive director of the department of public health shall advise the governor to declare a disaster emergency.

(e) In the event of an emergency epidemic that has been declared a disaster emergency, the committee shall convene as rapidly and as often as necessary to advise the governor, who shall act by executive order, regarding reasonable and appropriate measures to reduce or prevent spread of the disease, agent, or toxin and to protect the public health. Such measures may include, but are not limited to:

- (I) Procuring or taking supplies of medicines and vaccines;
- (II) Ordering physicians and hospitals to transfer or cease admission of patients or perform medical examinations of persons;
- (III) Isolating or quarantining persons or property;
- (IV) Determining whether to seize, destroy, or decontaminate property or objects that may threaten the public health;
- (V) Determining how to safely dispose of corpses and infectious waste;
- (VI) Assessing the adequacy and potential contamination of food and water supplies;
- (VII) Providing mental health support to affected persons; and
- (VIII) Informing the citizens of the state how to protect themselves, what actions are being taken to control the epidemic, and when the epidemic is over.

As used in this part, unless the context otherwise requires:

(1) "Bioterrorism" means the intentional use of microorganisms or toxins of biological origin to cause death or disease among humans or animals.

(1.3) "Committee" means the governor's expert emergency epidemic response committee created above.

(1.5) "Disaster" means the occurrence or imminent threat of widespread or severe damage, injury, or loss of life or property resulting from any natural cause or cause of human origin, including but not limited to fire, flood, earthquake, wind, storm, wave action, hazardous substance incident, oil spill or other water contamination requiring emergency action to avert danger or damage, volcanic activity, epidemic, air pollution, blight, drought, infestation, explosion, civil disturbance, or hostile military or paramilitary action.

(1.7) "Emergency epidemic" means cases of an illness or condition, communicable or noncommunicable, caused by bioterrorism, pandemic influenza, or novel and highly fatal infectious agents or biological toxins.

(1.9) "Pandemic influenza" means a widespread epidemic of influenza caused by a highly virulent strain of the influenza virus.

(2) "Political subdivision" means any county, city and county, city, or town and may include any other agency designated by law as a political subdivision of the state.

(3) "Search and rescue" means the employment, coordination, and utilization of available resources and personnel in locating, relieving distress and preserving life of, and removing survivors from the site of a disaster, emergency, or hazard to a place of safety in case of lost, stranded, entrapped, or injured persons.