NDMS Medical Clearance: Force Protection

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8 September 2012

History of Medical Clearance

- Fairly new due to injuries & illnesses on or the result of deployments
- Major push coming from Occupational Medicine and Force Health Protection
- Combination of work by Safety Officers (Health And Safety Plans) and CMO & TMO (Responder Health Statement and Health Evaluation Risk Assessment)

History (Continued)

- **Haiti:** >330 responders for HHS developed health issues (illness or injury with workmen's comp claims); approx 25% of the responder population

  Gulf Oil Spill: 20-25% responders with illness or injury
- **FTX 2011** Demographics that could cause problems

  Average age 45.5 (27-66)

  25% had initial medical clearances by team

  Average BMI 32 (21-47) with 25% > 35

  Self reported most frequent issues: IDDM; steroid dependency; respiratory issues; C-pap

History (Continued)

- Operational Medicine Rule:

  4-5 staff FTE lost for every serious illness or injury

12 ill responders consumed over 50% of CMO operations in the first week of Haiti = 48-60 FTE =1 DMAT

Increasing Components

- Responder Statement of Health (RSH) - Pre-Deployment Medical Screening
- Yearly Physical Fitness Testing
- Current Immunizations / CDC or PHS 731
- Placing each member in a Tier (1-3) based on RSH, fitness testing, immunizations complete
- Occupational Health Records
- HASP and HERA
- Respiratory Fit Testing
- *More to come*

Pre-Deployment Medical Screening

- The form you have filled out each year; using this one instead of 5 page one
- Age, Height, Weight, BMI
- Vital Signs
- Medical History
- Allergies and reactions
- Medications (prescription and OTC) why taking
- Just before deployment questions re last 72 hrs

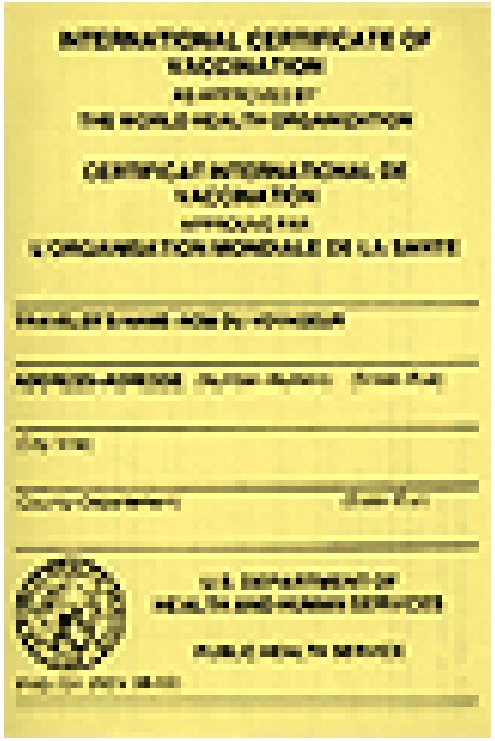
Yearly Physical Fitness Testing

- **Required yearly by all members** to deploy
- Walk/run 1 mile in 16 minutes
- Climb 3 flights of stairs without being SOB
- Carry a 75 # tote 100 feet with another person

We have dates scheduled in Tucson / SoAZ and Phoenix / Maricopa County

Current Immunizations and CDC or PHS 731

- Everybody needs a 731 to deploy; take with you



“Current Immunizations”

NDMS requirements for deployment

(update coming??)

- Tetanus every 10 years
  (Tdap at least once as adult)
- PPD (yearly if medical; 2 yr if not)
- Hepatitis B (series of 3 or + titer)
- Measles, Mumps, Rubella (series or + titer)
- Varicella/Chickenpox (series or + titer)

Current Immunizations / CDC or PHS 731

- NDMS requirements – in addition to above
  - Hepatitis A (series of 2 or + titer)
  - Polio/IVP (series)
  - Influenza (yearly)
- Overseas deployments
  - Depends on which countries and
  - Type of disaster

Placing each member in a Tier by TMO

- NDMS has developed a Tier System for all team members based on Medical Clearance components
- Tier 1 - can deploy anywhere, any time without restrictions (15-20%)
- Tier 2 - can usually deploy anywhere or anytime, but may be need more screening for the mission; temporary conditions, meds
- Tier 3 - non-deployable (<5%)

Occupational Health Records

- Now a part of EMR to capture a better view of staff problems in field
- Real-time
- Planning for future teams & reduction of problems
- All injuries or illness on deployment
- Any injury or illness as a result of a deployment
- Need this to file Workmen's Comp

HASP - Health and Safety Plan

Team, IRCT, SOC Safety Officers

- Non-Typical Healthcare “HAZARDS”:
- Marine and Beach Environment
- Air Transport and Safety
- Extended Acclimatization Schedules: Heat/Cold
- International and Tropical Diseases
- Environmental Pollutants
- Security and Extraction Procedures
- Communication of Hazards PRIOR to Response Efforts

Remedies

- Early Assessment of Risk and Hazard – HASP and HERA
- Good Communication of Hazards to All Responders
- Force Protection –Health Standards for Deployed Personnel
- Continuous Evaluation and Improvement Revision Cycle

Any Obvious Problems?

Buckle up!

Sample

"Independence Day 2010"
Force Protection:
Health and Safety Plan

Office of the Chief Medical Officer
National Disaster Medical System

July 3-4, 2010
IRCT Location: 6021 Farrington Ave, Alexandria, VA 22304

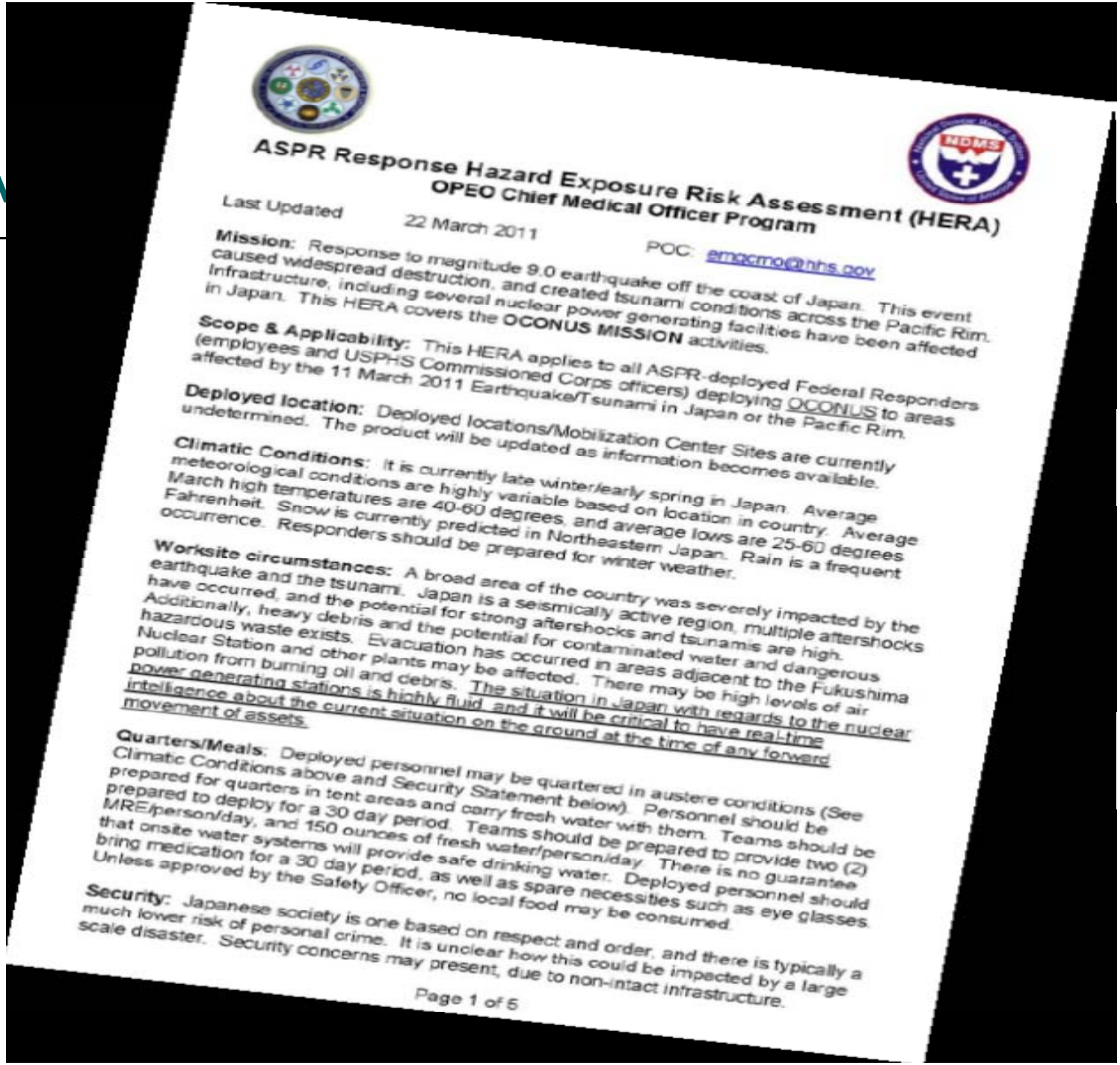
For additional information contact the
IRCT SAFETY OFFICER: DEBORAH WATTS (DebSWatts@aol.com)
or WILLIAM KERSHNER (Kershnerwilliam@gmail.com)
or
IRCT CHIEF MEDICAL OFFICER: DR. ALLEN DOBBS:
(allen.dobbs@hhs.gov)
or CHIEF NURSE: LINDA CASHION (linda.cashion@hhs.gov)

(Version 1.1; June 30, 2010)

HERA

- Hazard Exposure Risk Assessment
- Done by CMO and Safety Officers
- Listing the possible problems and dangers posed to team members in the field
- How to decrease the risks
- Dynamic and fluid document

HERA



ASPR Response Hazard Exposure Risk Assessment (HERA)
OPEO Chief Medical Officer Program

Last Updated 22 March 2011 POC: amocmo@hhs.gov

Mission: Response to magnitude 9.0 earthquake off the coast of Japan. This event caused widespread destruction, and created tsunami conditions across the Pacific Rim. Infrastructure, including several nuclear power generating facilities have been affected in Japan. This HERA covers the **OCONUS MISSION** activities.

Scope & Applicability: This HERA applies to all ASPR-deployed Federal Responders (employees and USPHS Commissioned Corps officers) deploying OCONUS to areas affected by the 11 March 2011 Earthquake/Tsunami in Japan or the Pacific Rim.

Deployed location: Deployed locations/Mobilization Center Sites are currently undetermined. The product will be updated as information becomes available.

Climatic Conditions: It is currently late winter/early spring in Japan. Average meteorological conditions are highly variable based on location in country. Average March high temperatures are 40-60 degrees, and average lows are 25-60 degrees Fahrenheit. Snow is currently predicted in Northeastern Japan. Rain is a frequent occurrence. Responders should be prepared for winter weather.

Worksite circumstances: A broad area of the country was severely impacted by the earthquake and the tsunami. Japan is a seismically active region, multiple aftershocks have occurred, and the potential for strong aftershocks and tsunamis are high. Additionally, heavy debris and the potential for contaminated water and dangerous hazardous waste exists. Evacuation has occurred in areas adjacent to the Fukushima Nuclear Station and other plants may be affected. There may be high levels of air pollution from burning oil and debris. The situation in Japan with regards to the nuclear power generating stations is highly fluid, and it will be critical to have real-time intelligence about the current situation on the ground at the time of any forward movement of assets.

Quarters/Meals: Deployed personnel may be quartered in austere conditions (See Climatic Conditions above and Security Statement below). Personnel should be prepared for quarters in tent areas and carry fresh water with them. Teams should be prepared to deploy for a 30 day period. Teams should be prepared to provide two (2) MRE/person/day, and 150 ounces of fresh water/person/day. There is no guarantee that onsite water systems will provide safe drinking water. Deployed personnel should bring medication for a 30 day period, as well as spare necessities such as eye glasses. Unless approved by the Safety Officer, no local food may be consumed.

Security: Japanese society is one based on respect and order, and there is typically a much lower risk of personal crime. It is unclear how this could be impacted by a large scale disaster. Security concerns may present, due to non-intact infrastructure.

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Other Programs in the Pipeline

- Personal Protective Equipment Program:
  - Hearing Conservation
  - Respiratory Protection
  - PPE
- Ionizing Radiation: Exposure Control Plan.
- Infection Control Program
- Warehousing and Logistics Safety
- Mobilization Center: Safety Program
- Specialized Teams: Safety Program

Respiratory Fit Testing
N 95 Testing

- Questionnaire – Respiratory Survey
- Occupational Health review
- Fitting for individual mask(s)
- Currently mostly done during mobilization site
- OSHA requires regular testing
- See **Barb Bray** for more information

For Example:

- A volcano erupts in Yellowstone Park. There is volcanic dust in the air for weeks. Additionally, there is sulfuric gasses being given off. The average elevation is 8,000 ft with some points over 11,000 ft. It is summer time with temperatures ranging from freezing to 80 F. You will need to walk at least 1/2 mile through debris while carrying your gear to get to your work site (impassable to vehicles).
- What type risk factors would keep some team members from deploying?
- If it was winter would that change things?

All in All, Medical Screening ….

- Becoming “in compliance” with current Occupational Health guidance
- Looking at work in non-traditional venues for extended hours
- Watching out for responder health and safety; ***for your benefit*** (and team)
- Becoming more complex & evolving
- Making my job more difficult without your help in getting it all done