Building Partnerships for Chemical Readiness at LHDs

NACCHO's 2026 Chemical Preparedness Webinar

June 25, 2026

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National Association of County & City Health Officials

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Jerry Joseph

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Agenda

- Opening Remarks – CDC/ATSDR
- Biolab Emergency Response
- Poison Control Center and PH Collaboration
- Poison Control Center and MOU
- NACCHO Chemical Preparedness Resources Showcase
- Webinar Close & Evaluation

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Opening Remarks

Jill Shugart, MSPH, REHS, CP-FS, DAAS, CPH, CAPT, U.S.

&

Alison Stargel, Environmental Health Scientist

Office of Community Health Hazard Assessment (OCHHA), Agency for Toxic Substances and Disease Registry (ATSDR), Centers for Disease Control and Prevention (CDC)

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Biolab Emergency Response

Dr. Bob Geller, MD
Georgia Poison Center
Emeritus Medical Director – Georgia Poison Center
Professor – Emeritus Department of Pediatrics, Emory University

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Poison Control Center and PH Collaboration

Dr. Rob Hendrickson, MD

Program Director, Fellowship in Medical Toxicology

Medical Director, Oregon Poison Center

Professor, Department of Emergency Medicine Oregon Health and Science University (OHSU)

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Poison Control Center and MOU

Dr. Salvador Baeza, PharmD - Director,

West Texas Poison Center at University Medical Center of El Paso

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NACCHO Chemical Preparedness Resources

Evelyn Zavala, MPH, PMP – Senior Program Analyst, NACCHO

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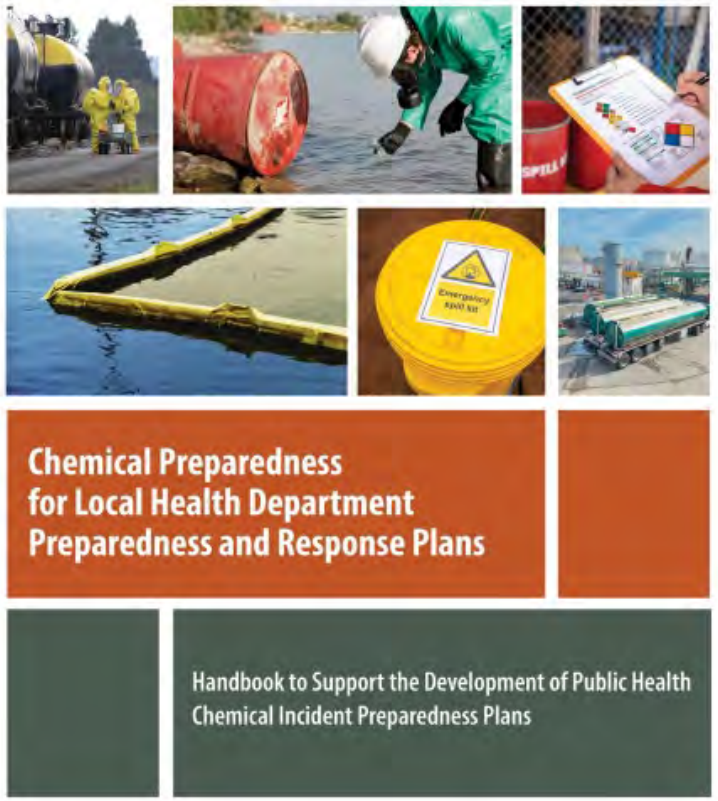
Chemical Preparedness Handbook



Includes:

- Practical checklists, guidance, and strategies
- **Full** emergency management cycle: **prevention, preparedness, response, recovery**
- **Real-world** examples and case studies from **local health departments**
- Designed to be a **roadmap** for developing or updating emergency operations plans

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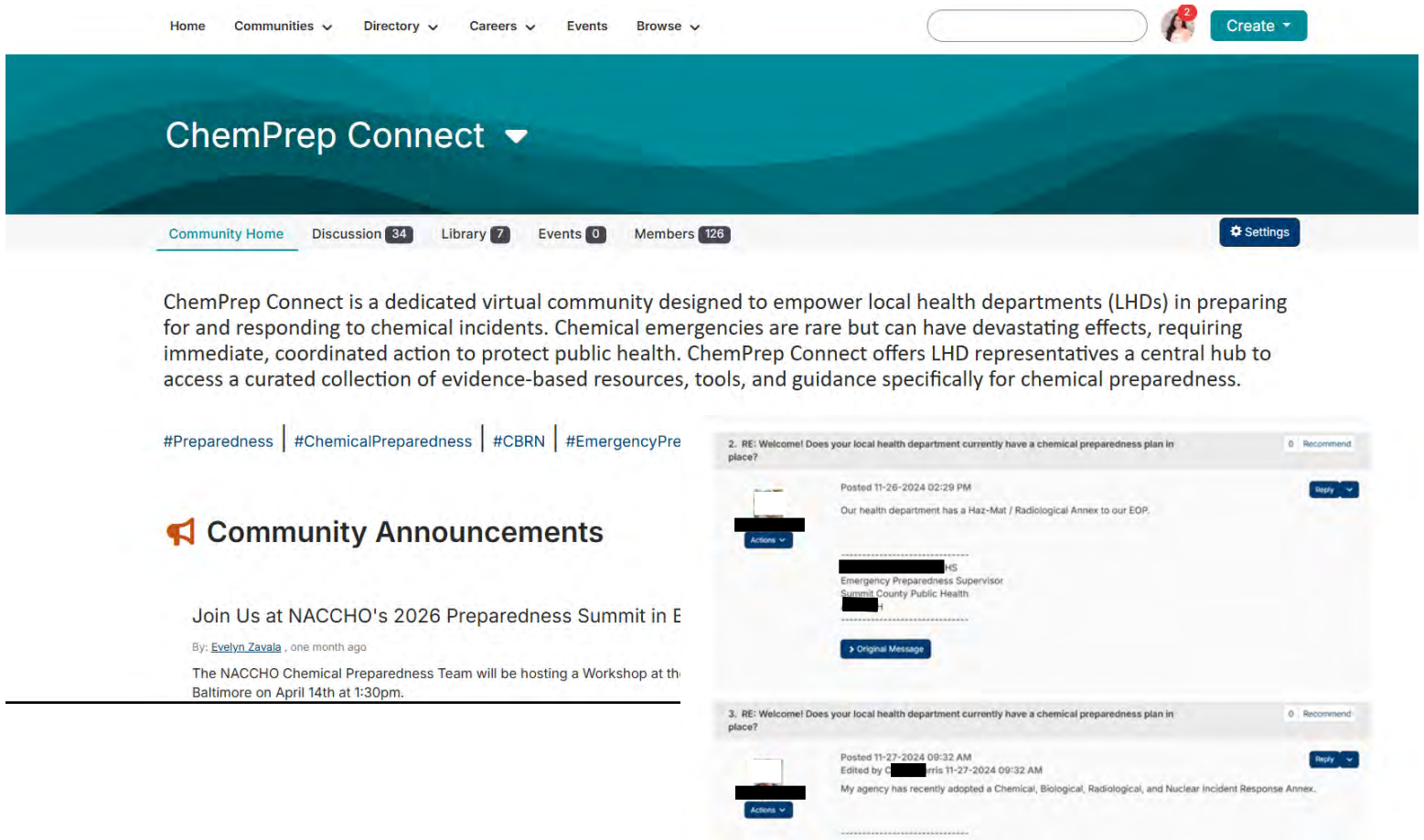
ChemPrep Connect – Virtual Community



Join ChemPrep Connect!

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NACCHO's Chemical Preparedness Webpage

Central hub for all chemical preparedness tools, resources, and updates:

- **Chemical Preparedness Handbook:** Guidance for planning, preparedness, response, and recovery
- Chemical Preparedness **Resource Library:** Includes guidance documents, training modules, communication templates, and case studies
- **ChemPrep Connect Virtual Community:** Secure platform for LHD staff to connect, share best practices, and ask questions
- Easy sign-up for the **Preparedness Brief Digest** to stay updated on new tools and announcements Organized into sections: Guidance, Training & Exercises, Communication, Mental Health & More

www.naccho.org/chemprep

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NACCHO's Chemical Preparedness Webpage

Continued:

- **Tabletop Exercise Toolkit**
  - Facilitator Guide (includes, objectives, roles, scenario injects, and evaluation questions)
  - Situational Manual
  - PowerPoint Templates
  - Adaptable for rural and urban settings
- **Communications Toolkit**
  - Ready-to-Use Public Communication Materials
  - Pre-drafted press releases, social media posts, community update
- **FAQ**
  - Internal document for local health department to address questions new chemical preparedness planners may have for chemical emergencies.

www.naccho.org/chemprep

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Engage

- NACCHO Email:
  - ezavala@naccho.org or preparedness@naccho.org
- Join a Chem Prep Connect:
  - ChemPrep Connect - National Association of County and City Health Officials
- 2027 Preparedness Summit in Atlanta, GA
  - Subscribe to the Preparedness Summit e-newsletter

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Questions?

Share, clarify, connect…

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Thank you!

We value your feedback. It helps us improve and tailor resources to your needs!

Explore NACCHO's Chemical Preparedness Resources anytime at:
https://www.naccho.org/chemprep

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BIOLAB Chemical Fire SEPT 2024

Robert J. Geller MD, Emeritus Medical Director, Georgia Poison Center
Professor Emeritus of Pediatrics, Emory University
Emory University Medical Toxicology and Georgia Poison Center

Disclosure

- I have no conflicts to disclose.

- I acknowledge the contributions of Tyler Lopachin MD, Emily Kiernan DO, and Stephanie Hon PharmD to a previous version of this presentation

Outline

Recap of events

Timeline

Haz mat issues

AEGL

Incident management and community impact overview

Poison Center role

Community support

Medical guidance

Information about the Georgia Poison Center

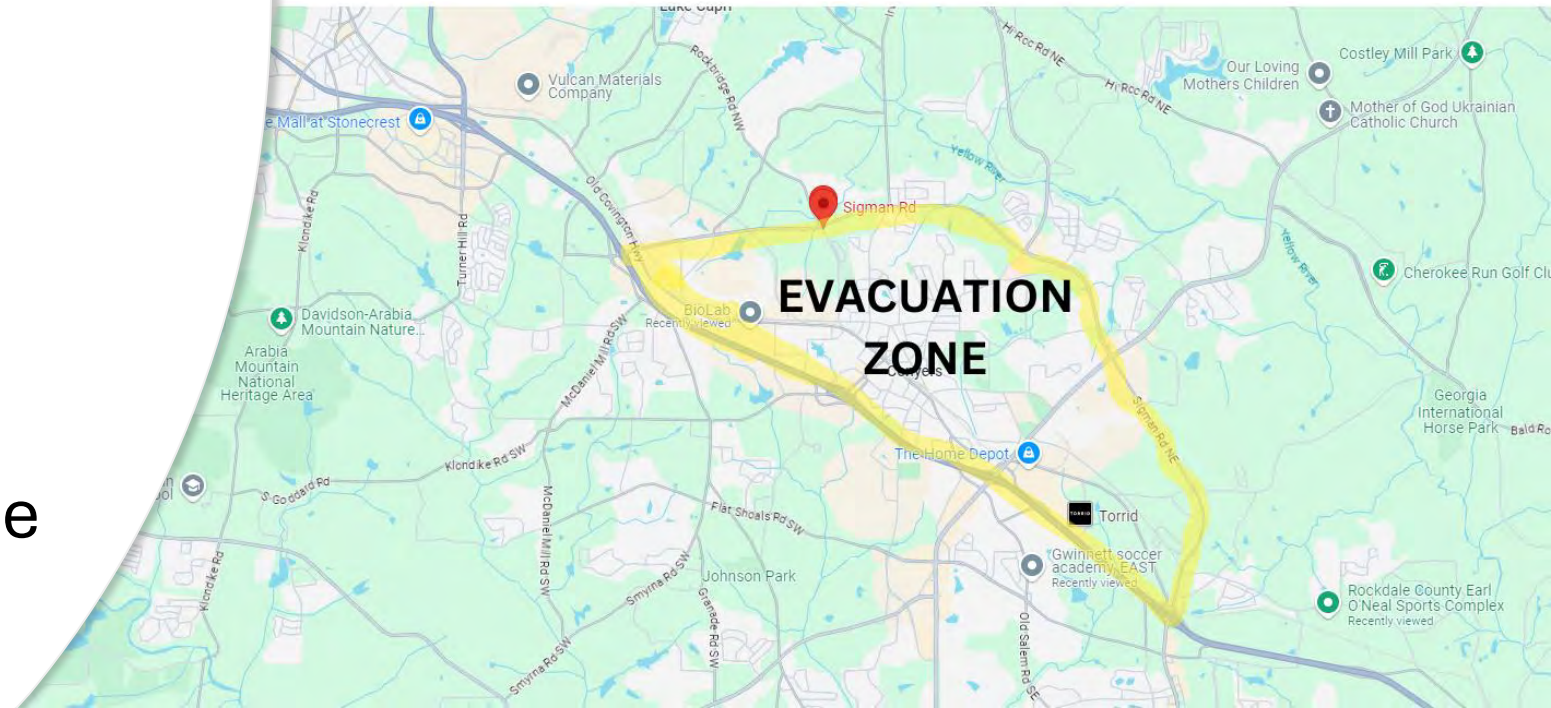
- One of the largest poison centers in the US
- Operated by Grady Health System, one of the largest hospitals in Georgia
- Medical Toxicologists supplied under contract with Emory University
- 7 MD medical toxicologists + 3 PharmD clinical toxicologists on staff
- 25 SPIs (19 FTE) available to answer calls
- Usual staffing 11 staff per day (92 person-hours daily average)

Information about the Georgia Poison Center

- Extensive utilization of teleworking
- More than 100 DIDs available, many “dark”
- Ability to create and revise menuing “on-the-fly”
- An independent entity not requiring approval from any other agency

Overview of event

- Around 0500 on Sunday 9/29/24, water mixed with water-reactive chemicals in the Biolab plant in Conyers, Georgia .
- This started a chemical reaction leading to a fire within the plant that released chemicals into the air and prompted evacuations




BESTLINE
DOORS

CLICK HERE for Our Dedicated Conyers Community Resources & Information Site

Who we are

BioLab is the swimming pool and spa water care division of KIK Consumer Products, based in Lawrenceville, Georgia.

Our brands include industry leaders BioGuard® and SpaGuard® that pioneered computerized water testing and the 3-step system for pool and spa care. Our portfolio also includes leading brands of specialty chemicals through its Natural Chemistry®, SeaKlear®, AquaPill®, and Coral Seas® brands.

For the Pool Professional channel, BioLab offers service focused product lines called ProGuard® and Pro Series®.

BioGuard®

SpaGuard®

PRO GUARD®

SPA Essentials®

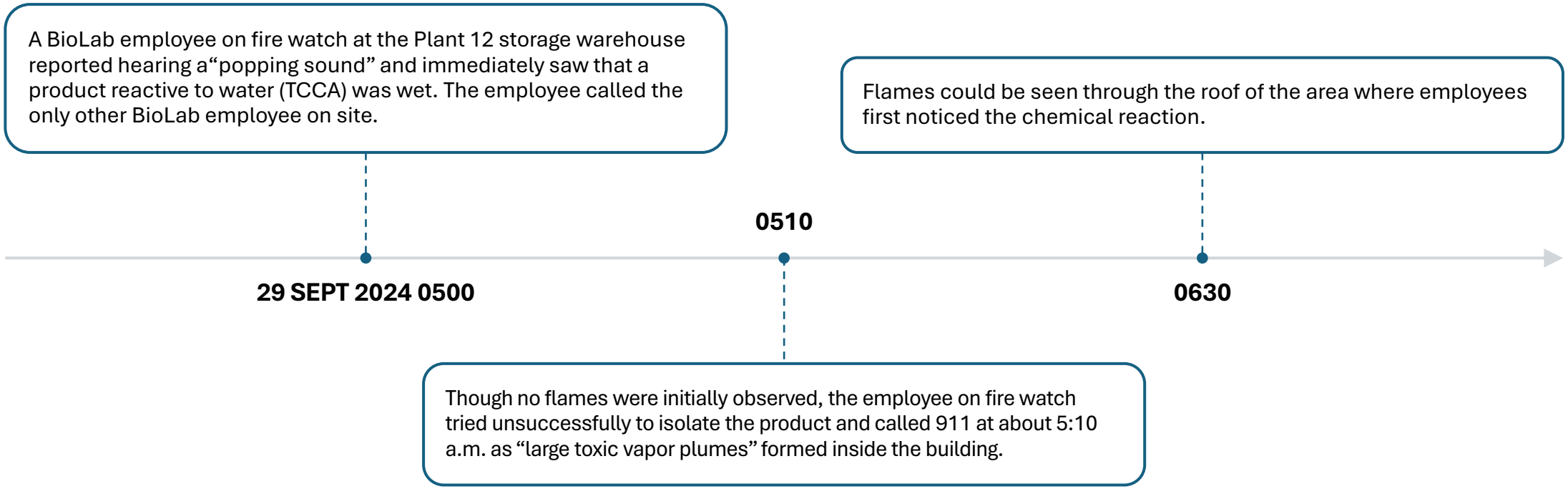
NATURAL CHEMISTRY®

SeaKlear®

aquapill™

PRO SERIES®

Timeline


A BioLab employee on fire watch at the Plant 12 storage warehouse reported hearing a“popping sound” and immediately saw that a product reactive to water (TCCA) was wet. The employee called the only other BioLab employee on site.
Flames could be seen through the roof of the area where employees first noticed the chemical reaction.
0510
29 SEPT 2024 0500
0630
Though no flames were initially observed, the employee on fire watch tried unsuccessfully to isolate the product and called 911 at about 5:10 a.m. as “large toxic vapor plumes” formed inside the building.

Déjà vu?

BioLab Fire in Conyers, Georgia — 25 May 2004

27 June 2012 by Admin Leave a Comment

https://www.jobseekersptc.org/biolab-fire-conyers-georgia-25-may-2004-01/. Accessed June 25, 2026.

Timeline

Shelter in place order in effect for Rockdale county. Fire is controlled 30 minutes later

Evacuations of Rockdale County begin

0740

1200

1230

A second fire starts, producing thick black smoke with multi-color plumes.

Timeline

- The Plant 12 warehouse was a bulk storage area separated from the main warehouse by a firewall and fire shutters. BioLab told federal investigators they had established a permanent fire watch two or three months before the event “after detecting strong odors from oxidizers in two storage buildings,” including Plant 12.

TABLE 3 - INITIAL ISOLATION AND PROTECTIVE ACTION DISTANCES FOR LARGE SPILLS FOR DIFFERENT QUANTITIES OF SIX COMMON TIH (PIH IN THE US) GASES

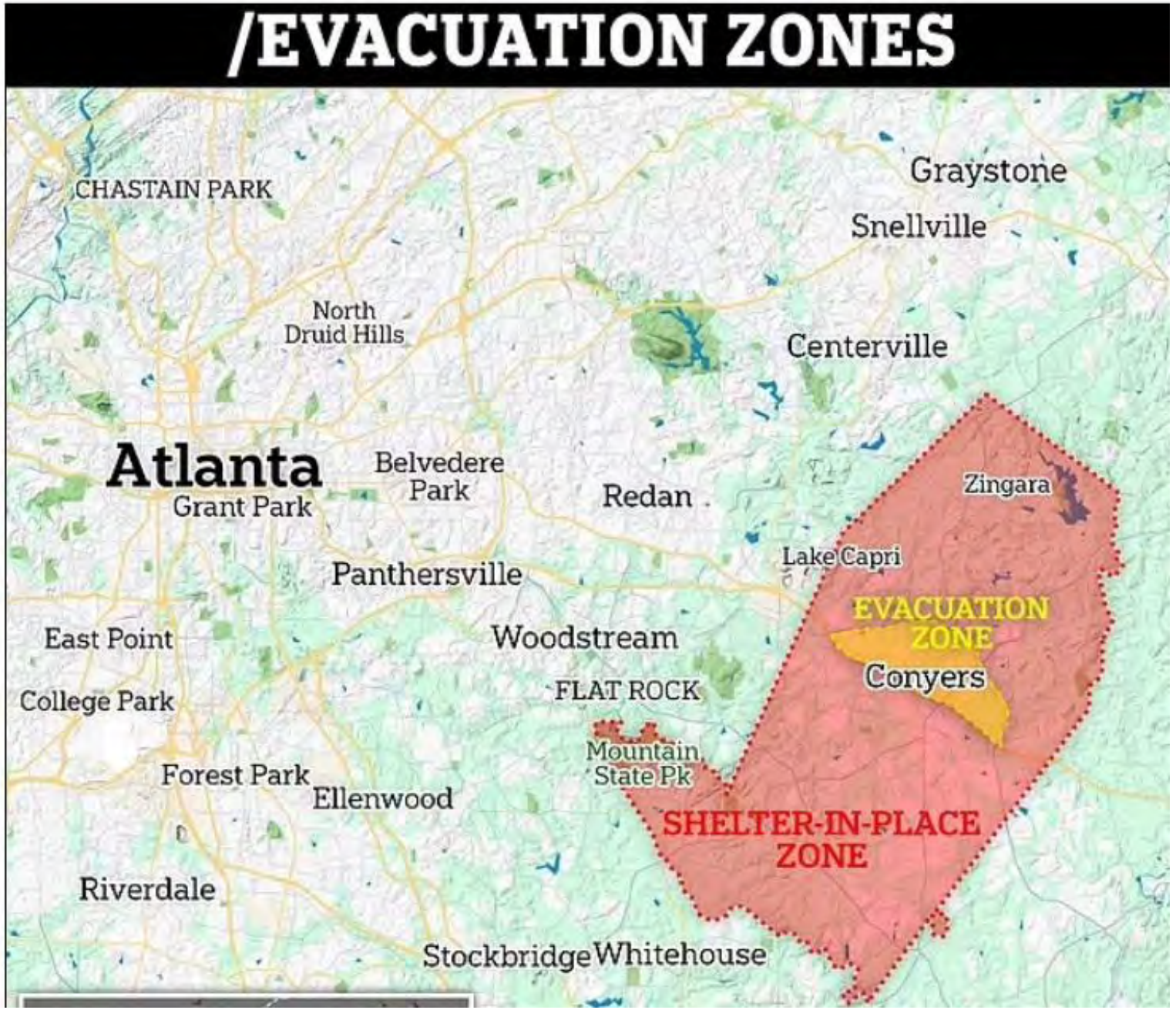
	First **ISOLATE** in all Directions		Then **PROTECT** persons Downwind during									
			DAY						**NIGHT**			
			Low wind (< 6 mph = < 10 km/h)		**Moderate wind** (6-12 mph = 10 - 20 km/h)		**High wind** (> 12 mph = > 20 km/h)		**Low wind** (< 6 mph = < 10 km/h)		**Moderate wind** (6-12 mph = 10 - 20 km/h)		**High wind** (> 12 mph = > 20 km/h)	
	Meters	**(Feet)**	**Kilometers**	**(Miles)**	**Kilometers**	**(Miles)**	**Kilometers**	**(Miles)**	**Kilometers**	**(Miles)**	**Kilometers**	**(Miles)**	**Kilometers**	**(Miles)**
TRANSPORT CONTAINER	**UN1005 Ammonia, anhydrous / Anhydrous ammonia: Large Spills**													
Rail tank car	300	(1000)	1.6	(1.0)	1.2	(0.8)	1.0	(0.6)	4.1	(2.6)	2.1	(1.3)	1.3	(0.8)
Highway tank truck or trailer	150	(500)	0.8	(0.5)	0.5	(0.3)	0.4	(0.3)	1.8	(1.1)	0.7	(0.4)	0.6	(0.4)
Agricultural nurse tank	60	(200)	0.5	(0.3)	0.3	(0.2)	0.3	(0.2)	1.4	(0.9)	0.3	(0.2)	0.3	(0.2)
Multiple small cylinders	30	(100)	0.3	(0.2)	0.2	(0.1)	0.1	(0.1)	0.7	(0.5)	0.3	(0.2)	0.2	(0.1)
TRANSPORT CONTAINER	**UN1017 Chlorine: Large Spills**													
Rail tank car	1000	(3000)	9.6	(6.0)	6.3	(3.9)	5.1	(3.2)	11.0+	(7.0+)	8.9	(5.6)	6.5	(4.1)
Highway tank truck or trailer	600	(2000)	5.6	(3.5)	3.3	(2.1)	2.5	(1.6)	6.4	(4.0)	4.7	(2.9)	3.8	(2.4)

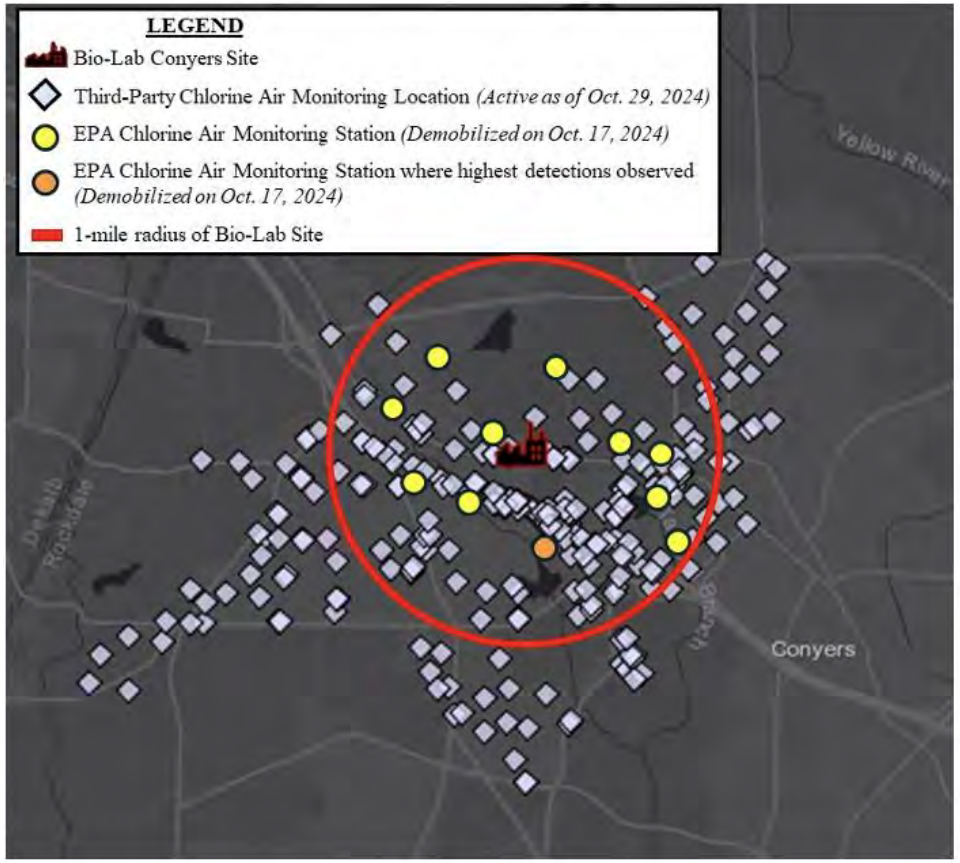
- Interstate 20, which runs parallel to the facility, was shut down shortly after the building collapsed just before 1 p.m. and was closed until about 7 a.m. the next day.

- The primary bulk chemicals at Plant 12 were 99 percent trichloroisocyanuric acid (TCCA) and 99 percent sodium dichloroisocyanurate (DCCA). These chemicals were stored in super sacks (2750 pounds each) prior to their distribution to other parts of the Bio-Lab complex

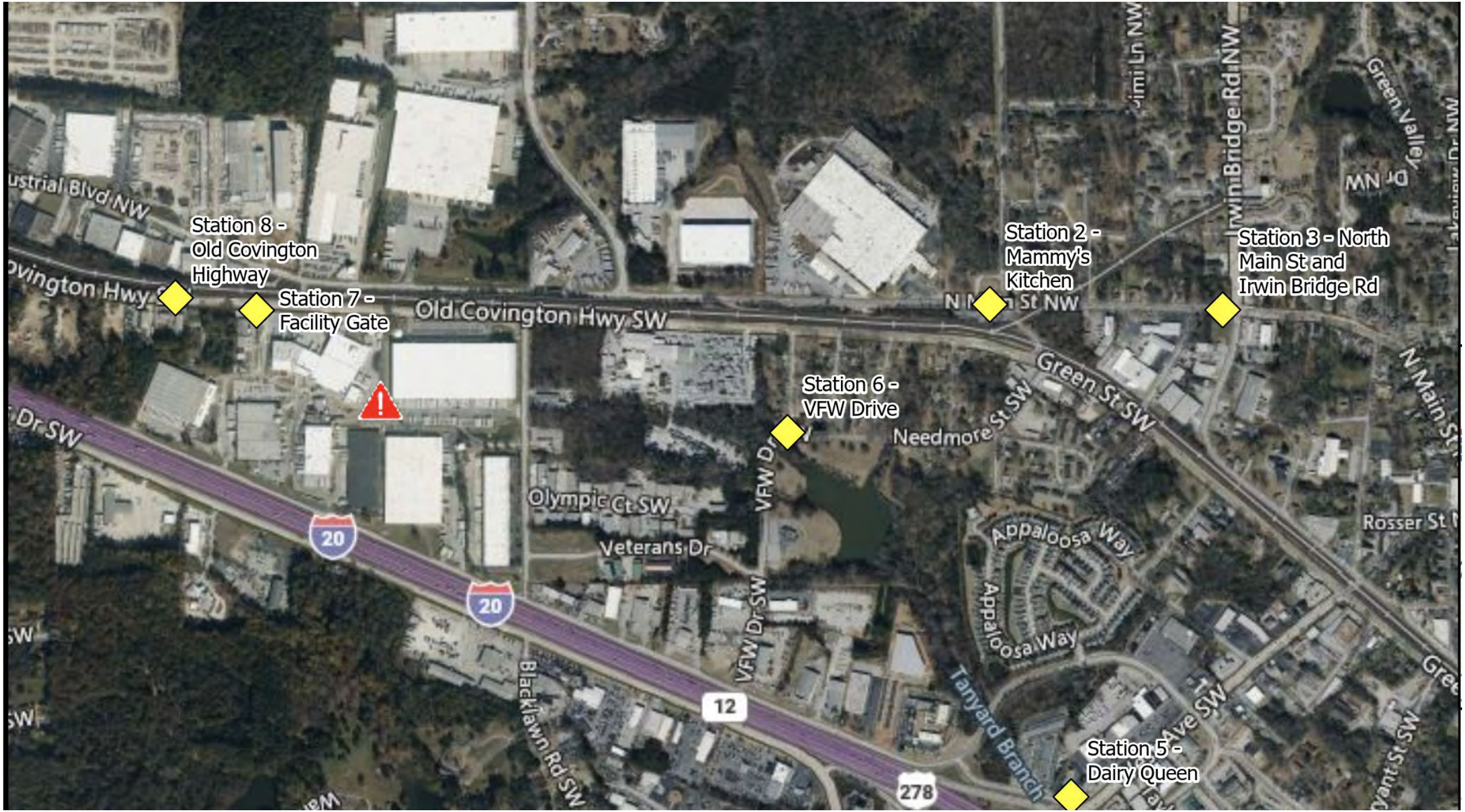
Community Impact

https://www.dailymail.com/news/article-13907263/shelter-place-order-extended-georgia-biolab-fire-conyers.html. Accessed June 25, 2026.





- EPA and Third-Party Chlorine Air Monitoring Sampling Locations Surrounding Bio-Lab.


Station 8 -
Old Covington
Highway
Station 7 -
Facility Gate
Old Covington Hwy SW
Station 2 -
Mammy's
Kitchen
Station 3 - North
Main St and
Irwin Bridge Rd
Station 6 -
VFW Drive
Green St SW
Needmore St SW
Olympic Ct SW
Veterans Dr
VFW Dr SW
Appaloosa Way
Rosser St
Blacklawn Rd SW
Tanyard Branch
Station 5 -
Dairy Queen
20
12
278

AEGL

1

Level 1

- Notable discomfort, irritation, or certain asymptomatic non-sensory effects. However, the effects are not disabling and are transient and reversible upon cessation of exposure.

2

Level 2

- Irreversible or other serious, long-lasting adverse health effects or an impaired ability to escape.

3

Level 3

- Life-threatening health effects or death.

Chlorine Results – AEGL Program

Chlorine 7782-50-5 (Final)

	10 min	30 min	60 min	4 hr	8 hr
ppm					
AEGL 1	0.50	0.50	0.50	0.50	0.50
AEGL 2	2.8	2.8	2.0	1.0	0.71
AEGL 3	50	28	20	10	7.1

Odor threshold vs clinical effects

Odor Threshold 0.2 to 0.4 ppm

AEGL 1- 0.5 ppm

EPA summary First 12 hours

- VOC measurements- 10 parts per billion
- Chlorine measurements- Multiple overnight, peaks of 1.7 ppm but not sustained over 1 hour (**Action level 0.5 ppm for one hour**)
- H2S measurements- 0.5 ppm, 0.75 ppm but not sustained. (**Action Level 0.5 ppm for one hour**)

GPC Involvement

- On afternoon of day 1, county commissioners decide to hold a public information session
  - 90 min notice
  - Demand county health officer attend to answer health questions
- County health commissioner calls GPC medical toxicologists for assistance
- GPC provides info to county health commissioner while she is en route to public meeting
- GPC leadership offers to assist in addressing public health concerns

Residents of the area have health concerns

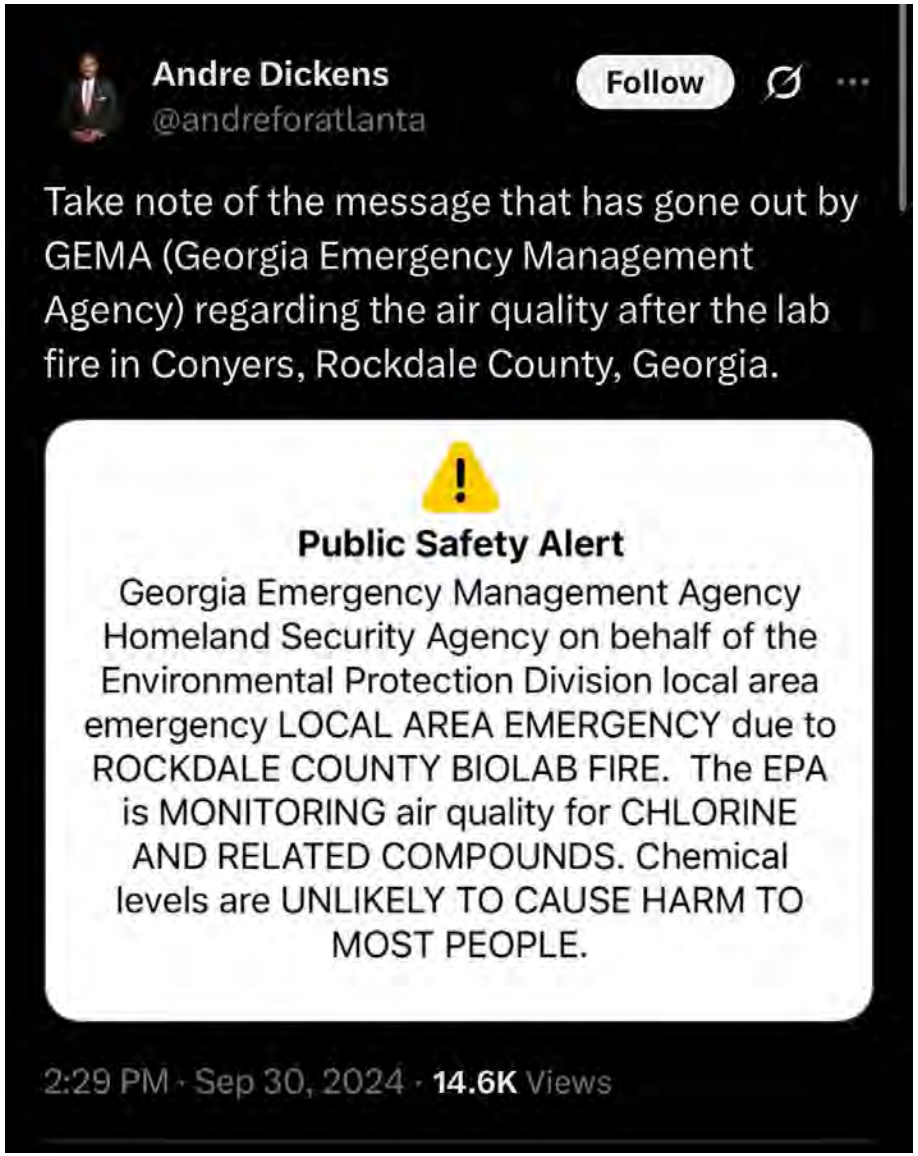
HEALTH CONCERNS WERE REPORTED FROM MANY RESIDENTS OF THE AREA NEAR THE PLANT

COUNTY EMERGENCY RESPONSE COULD NOT ADDRESS THESE CONCERNS ON AN INDIVIDUAL BASIS

EMERGENCY MGMT RECOMMENDED CONTACTING THEIR PHYSICIANS OR GOING TO AN ED

PRIMARY CARE PHYSICIANS HAD INSUFFICIENT DATA TO MAKE DETAILED RESPONSES

30 SEPT 2025- 24 hours into event



Health information and triage continues as an unmet need

The Georgia Poison Center retains many “dark” (live but unused and unlisted) phone numbers for quick activation if needed

The Georgia Poison Center decided to offer its services to the community on the morning of day 2 as an information resource and triage provider, with the assent of the county health officer


V103

GPC Event-specific menu

- **Biolab Main Menu**
- You have reached the Georgia Poison Center Hazards Assistance line for people concerned about the recent BioLab chemical fire in Rockdale County Georgia. Today is October the fourth.
- Here are the latest updates for this ongoing event. Please note that we are only able to assist callers who are experiencing symptoms and seeking treatment strategies for these effects. We are not a reporting agency, so there is no need for you to REPORT your symptoms to us. Additionally, we do not have the expertise to address other important issues that may be arising because of this event. For example, we are not able to answer questions about on-going air testing, sheltering in place concerns, school closings, evacuating, or legal concerns. These questions and many others need to be directed to your local emergency management agency or city government as appropriate.
- Press 1 to hear about the chemicals released in this fire event and symptoms you might experience. Press 2 for advice on ways to reduce the likelihood of symptoms happening. Press 3 to hear about managing signs and symptoms. Press 7 to hear this message again.

Biolab menu choice 1 – the event

- **Biolab Prompt 1**
- Chlorine and chlorine related compounds have been identified as the primary agents released in this fire event. Most people can smell these agents at levels well below those likely to cause health effects. These chemicals have the potential to irritate your skin and mucous membranes which include eyes, nasal passages and the respiratory system. You may experience eye irritation and watery eyes. You may develop a runny nose, or a skin rash. Because these compounds affect your respiratory system, you may experience coughing, wheezing, shortness of breath, with difficulty in breathing. Some people have experienced nausea and vomiting and even dizziness. Please note that vulnerable populations (such as people with asthma or COPD, skin conditions, or other pre-existing conditions affecting these parts of the body, as well as young children, the elderly, or women who are pregnant), may be more likely to develop symptoms from an exposure. PRESS 1 to hear this message again or press 9 to return to the main menu.

Biolab menu choice 2 – minimizing symptoms

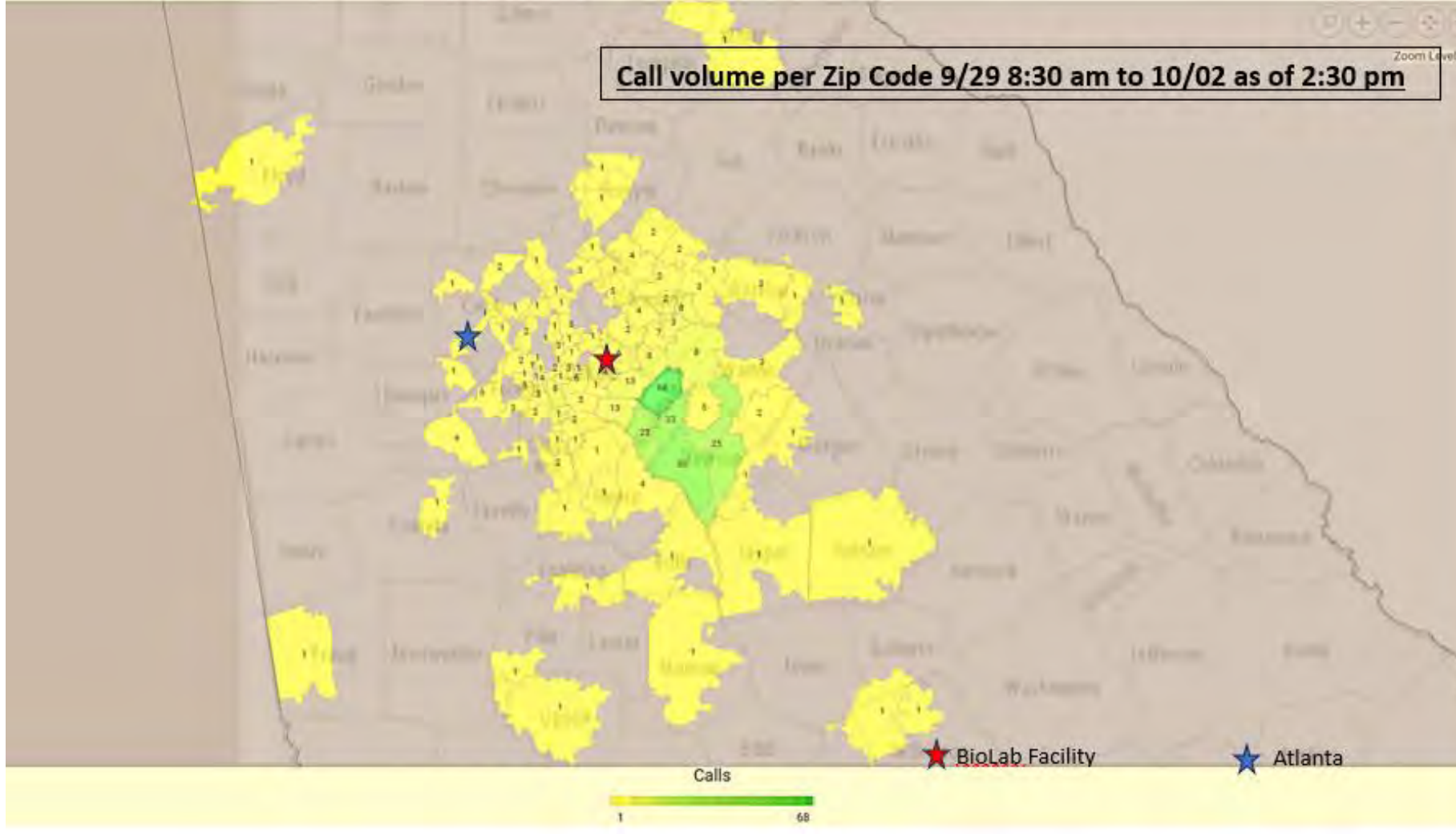
- **Biolab Prompt 2**
- Be advised that chlorine and chlorine related compounds have a low odor threshold. Simply stated, one can smell chlorine at levels below those considered harmful to humans. Also keep in mind that simply detecting and smelling the odor does not necessarily lead to development of symptoms. To lower the likelihood of symptoms, consider avoiding outdoor activities (for example, minimize outdoor exercising, cooking, yard work and outdoor sports). While indoors, keep your windows and doors closed and turn off any system that may bring in outside air. Most HVAC systems in homes do not bring in outside air, but if you are not sure, turn off your HVAC in an abundance of caution. HVAC systems that are known to only recirculate the indoor air can be left on in recirculate mode. N95 masks are unlikely to provide substantial benefit because the chlorine compounds are smaller in size than the size filtered by N95 masks. Because conditions continue to change, stay in touch with updated recommendations from Emergency Management and follow those instructions. PRESS 1 to hear this message again or press 9 to return to the main menu.

Biolab menu choice 3 – managing existing symptoms

- **Biolab Prompt 3**
- Most exposures to chlorine and chlorine related compounds result in only minor symptoms. If you are experiencing severe effects such as chest pain and tightness, severe wheezing, difficulty in breathing, or significant shortness of breath, call 911 and seek Emergency Care immediately. If symptoms are not severe, for skin irritation, rinsing the skin with cool water for several minutes, and taking showers may help. Use of skin lotions after rinsing or showering may also help. For eye irritation, remove contact lenses if they have been in place, then use of artificial tears or eye lubricant drops to provide relief. If you have asthma and have a rescue inhaler such as albuterol or Symbicort, you may be able to reduce airway irritation and bronchospasm by using your rescue inhaler as directed. If, however, you continue to have symptoms, you should contact your physician or seek Emergency Care.
-
- If you have symptoms that you think may be related to this chemical exposure, please press 7 now to discuss your specific symptoms with the next available member of our staff. Thank you.

GPC
Call Distribution

Days 1 -3



Info Calls – 91

Exposed Callers/ Patients – 495

Management Site

125 – Referred or in HCF

369 – Managed at home

Outcome

45 – Minor/ Mod outcome

0 – Severe outcome

448 – Unknown or not followed

2013 Symptoms Reported

106 – Symptoms deemed not related

1913 – Deemed related

GI – 132

CV Effects – 107

Resp Effects – 902

Skin effects – 96

Ocular effects – 294

Other – 382

2050 Therapies Coded (antibiotics, steroids. Dilution, fresh air, oxy
food, bronchodilators)

GPC Provides Medical Toxicology Assistance

- Medical toxicologist participates in every event assessment call after Day 2
- Advises re assessment of observed monitoring data
- Advises re management of I20 area affected
- GPC does not serve as a spokesperson to media
- GPC deflects FOIA request from a law firm on HIPAA grounds

GPC Staffing

Extensive use of overtime on first 3 days

Use of paramedics used in emergency triage of patient calls as additional overtime providers to handle follow-ups and other duties usually handled by SPIs

Medical toxicologists and toxicology fellows flexed up to assist in supporting SPIs and paramedics

Poison center data

1188 total Calls from 29 SEPT to 30 NOV

80 Calls from hospitals: 29 SEPT to 07 OCT (22 from 02 OCT)

Of patients treated in hospitals, most were treated with symptomatic and supportive care (oxygen, bronchodilators, antihistamines)

17,000 evacuated for 5 days

And what about the site after the fire?

SKYFOX 5 flew over the site of the cleanup after a massive chemical fire at a BioLab facility in Rockdale County on Oct. 16, 2024. **(FOX 5)**

https://www.fox5atlanta.com/news/biolab-concludes-emergency-response-chemical-fire-gives-update. Accessed June 25, 2025.

Questions remaining after this session?

- Feel free to contact me.

- Robert J. Geller, MD
- Consulting Medical Toxicologist, GA Poison Center
- Professor Emeritus, Emory University Dept of Pediatrics
- rgeller@georgiapoisoncenter.org

Paralytic Shellfish Poisoning, Oregon, USA 2024

- Robert G. Hendrickson, MD
  - Oregon Poison Center

POISON Help 1-800-222-1222

OREGON POISON CENTER

Background

- Oregon Poison Center

OREGON HEALTH & SCIENCE UNIVERSITY

Poison Center

OREGON POISON CENTER

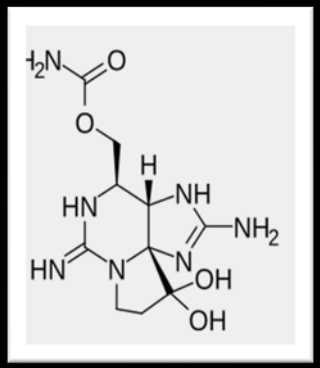
- Oregon Poison Center
  - Provide real-time treatment information for the public and healthcare providers
  - 24 hours per day, all days of the year
  - 42,000 cases per year (~115 new cases per day)
    - Specialists in Poison Information
      - Registered Nurses or Pharmacists
    - Medical Toxicologists
      - Board certified
      - 2-year fellowship training

Poison Center

- Data sharing
  - Poison Center medical record
    - Uploaded to National Poison Data System (NPDS)
      - Data monitored for public health concerns by NPDS/CDC
      - Potential concerns discussed with Poison Center and local public health agency for evaluation and investigation
    - State health department (Oregon Health Authority) has access to Oregon's NPDS cases for syndromic surveillance

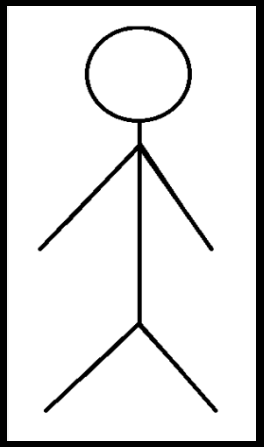
Paralytic Shellfish Poisoning

PSP



PSP toxins

saxitoxin



<u>Paralytic Shellfish Poisoning</u>

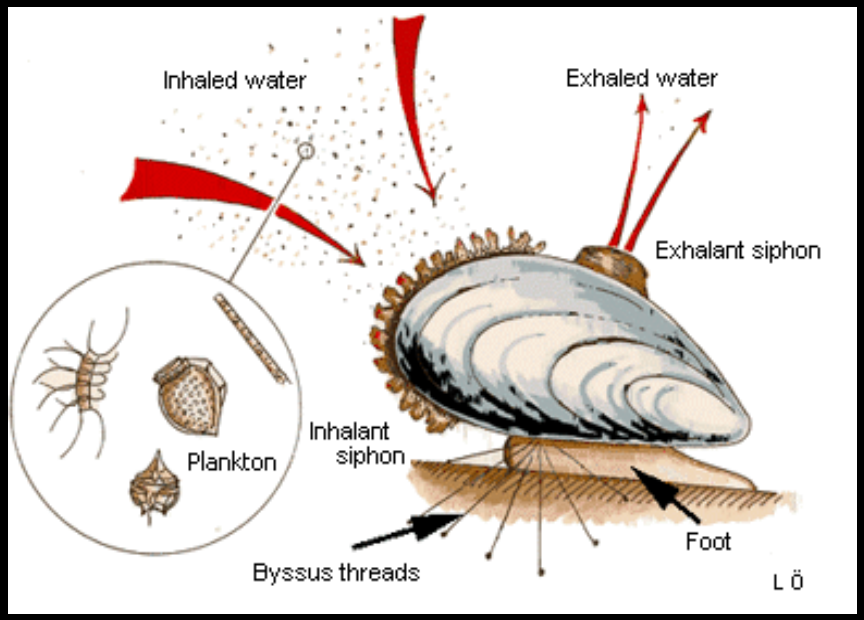
Vomiting & diarrhea

Tingling & numbness

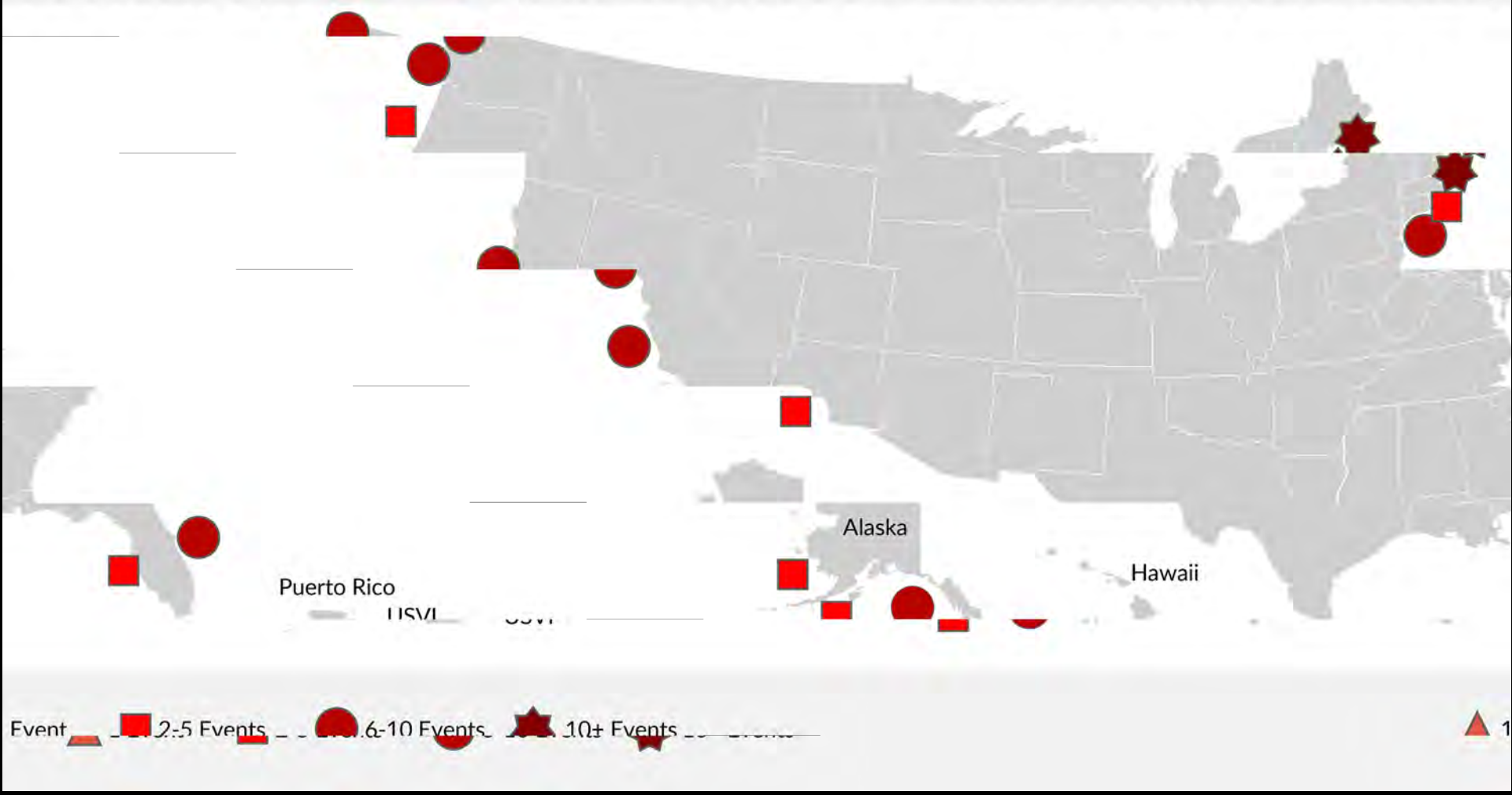
- Face
- Extremities

Severe - paralysis

Dinoflagellates
Cyanobacteria



Presence of PSP Toxins in Seafood in the U.S. (2014-2023)

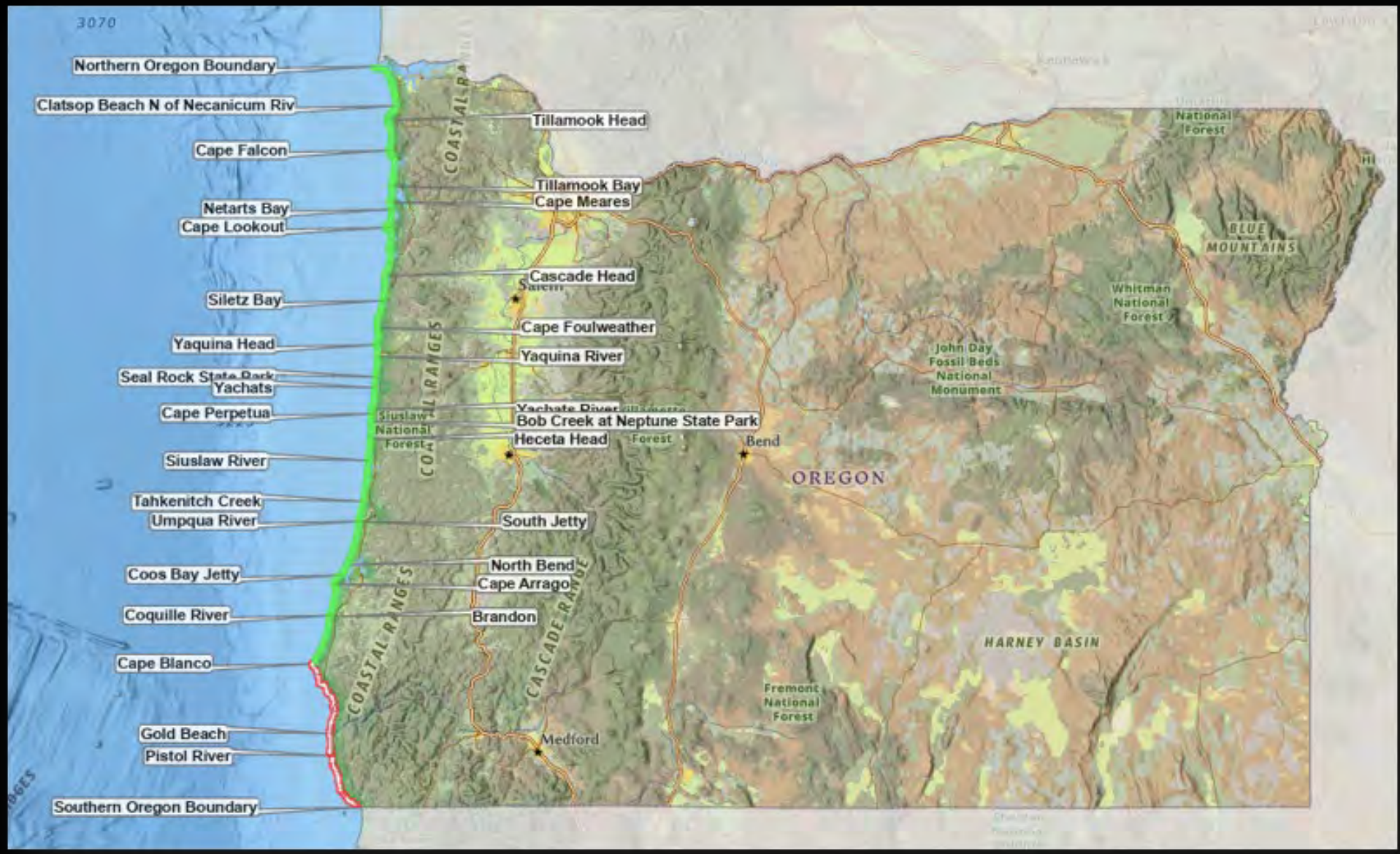


https://hab.whoi.edu/maps/regions-us-distribution/

Case study

POISON Help 1-800-222-1222

OREGON POISON CENTER



Case study

POISON Help 1-800-222-1222

OREGON POISON CENTER

Case study

- Patient 1
  - 36-year old
    - Diarrhea, tingling/numbness lips, tongue, both hands
    - PSP suspected
- Patients 2-4
  - 39-, 67-, and 75-year-old
    - All 3 had nausea and tingling/numbness in hands
    - One had severe ataxia and was unable to walk

Case study

POISON Help 1-800-222-1222

OREGON POISON CENTER

Contact public health agencies

- Individual county health departments where mussel foraging took place
  - Clatsop, Tillamook, Lincoln: Coastal counties without 24/7 PH service

- Leave message with:
  - Oregon Dept of Agriculture, Food Safety
  - Oregon Dept of Agriculture, Shellfish Safety Hotline
  - Oregon Dept of Fish and Wildlife, district office and headquarters

- Large (uninvolved) health department (Multnomah Co)
  - An actual human answers!
  - Get back-door phone to state Public Health Duty Officer

Information

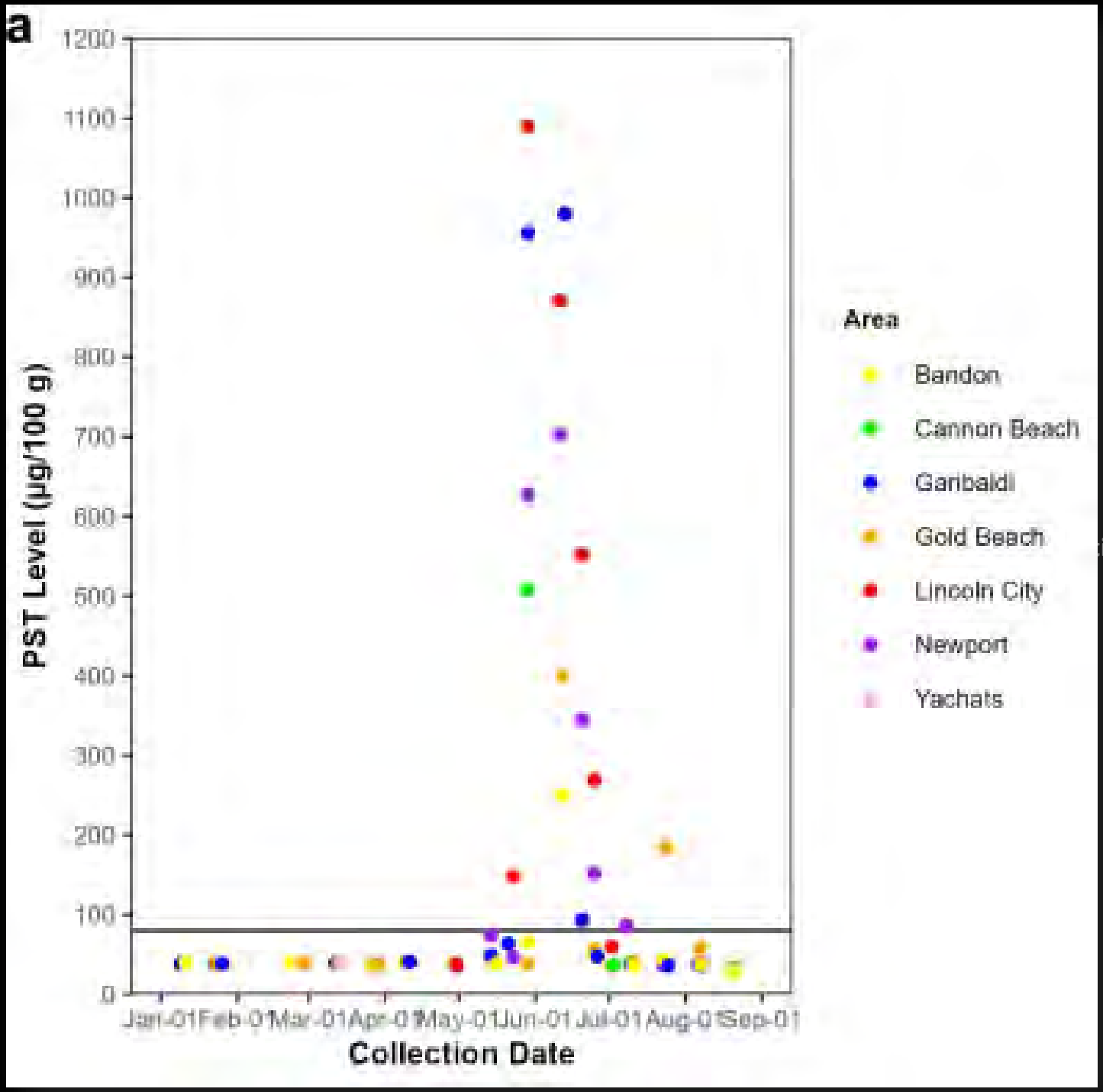
- PH duty officer & PC medical director
  - Coordinate message to healthcare providers & the public
    - Agree on wording of message
    - PC will act as -
      - Clinical resource for healthcare providers & the public
      - Data collection until PH takes over
    - PC – messaging via social media and local media
    - PC – fax to all hospital EDs
      - Alert that there are PSP cases
      - Information about diagnosis, testing, clinical course, and treatment
      - Request to call the PC for any cases

Oregon recreational shellfish harvesting

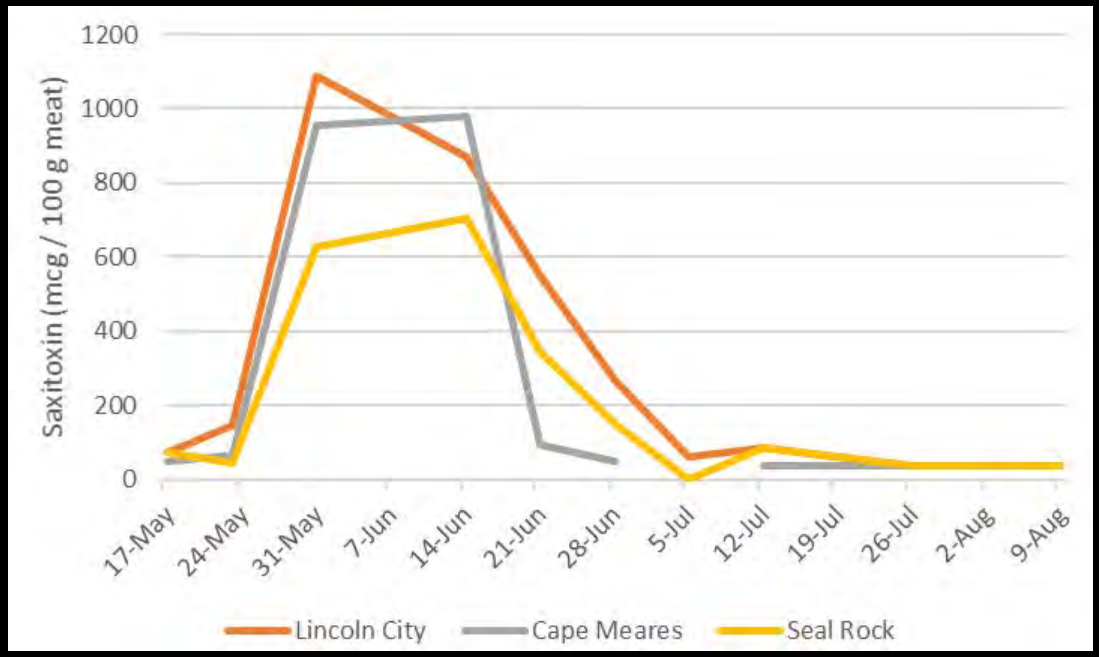
- Joint decision/implementation between ODA and ODFW

- Rapid closure of all beaches while discussing where/when to do immediate statewide coastal biotoxin sampling

- Testing: Usually every other week, in ~3-8 places on coast
- During outbreak: (Almost) every week in >12 locations
  - Paralytic Shellfish Toxin: < 80 mcg / 100 g meat
  - Domoic Acid Toxin: < 20 mcg / 100 g meat


a
PST Level (µg/100 g)
1200
1100
1000
900
800
700
600
500
400
300
200
100
0
Jan-01
Feb-01
Mar-01
Apr-01
May-01
Jun-01
Jul-01
Aug-01
Sep-01
Collection Date
Area
Bandon
Cannon Beach
Garibaldi
Gold Beach
Lincoln City
Newport
Yachats

Biotoxin monitoring



Epidemiology

- Epi investigation by local PH agency
  - Interviews
  - OHA website survey
  - Cases:
    - 42 total cases
      - 24 (57%) reported to PC
      - 17 (40%) associates with cases
      - 10 (24%) detected by website survey
    - Outcome:
      - 24 (57%) seen in ED
        - 7 (29%) hospitalized
        - 1 (4%) mechanically ventilated

Case details

OREGON POISON CENTER

Journal of Food Protection 88 (2025) 100590

Contents lists available at ScienceDirect

Journal of Food Protection

journal homepage: www.elsevier.com/locate/jfp

Research Paper

Paralytic Shellfish Poisoning Outbreak—Oregon, United States, 2024

Rosalie T. Trevejo [1,*], Matthew Hunter [2], Terran Gilbreath [1,3], Madison Walton [1], June E. Bancroft [1], Emilio E. DeBess [1], Dat Tran [1], Paul R. Cieslak [1]

[1] Oregon Health Authority, Portland, OR, United States
[2] Oregon Department of Fish and Wildlife, Salem, OR, United States
[3] Council of State and Territorial Epidemiologists, Atlanta, GA, United States

Journal of Medical Toxicology (2026) 22:39–43
https://doi.org/10.1007/s13181-025-01112-6

ORIGINAL ARTICLE

Clinical Features of Paralytic Shellfish Poisoning: a Case Series from the 2024 Oregon Outbreak

Keahi M. Horowitz[1,2] · Colleen P. Cowdery[1,2] · Robert G. Hendrickson[1,2]

How did we do?

- Successes
  - Response was rapid
  - Detected a pattern from cases in multiple hospitals
    - Biomonitoring was inadequate
  - Information to the public and healthcare providers very quickly

How did we do?

- Challenges & opportunities
  - A more reliable system of reporting emergent or urgent public health cases may be desirable
  - Pre-event coordination on communication wording for predictable events

Closing

- Takeaways:
  - Poison Centers and Public Health agencies have synergistic skills & roles and can complement each other in urgent/emergent public health responses

Rob Hendrickson; hendriro@ohsu.edu

Poison Centers & Regional Response Team Collaboration

Salvador Baeza, PharmD, Director
West Texas Poison Center
University Medical Center of El Paso

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Outline

1. Introduction of Poison Centers & our services
2. National Response System Overview
3. Examples of Region 6 Regional Response Team & Poison Centers Collaborations

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What is a Poison?

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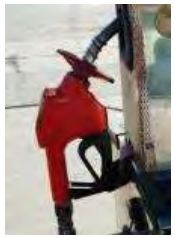



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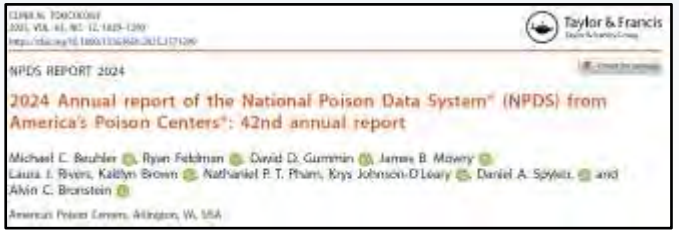
America's Poison Centers

- 53 centers that serve all 50 states and all US territories
  - Answer Poison Help hotline 24/7
  - Community Outreach
  - Teach Clinical Toxicology
- National Poison Data System
  - All calls to US Poison Centers are documented and uploaded every 10 minutes
  - Real-time monitoring for anomalies based on:
    - Substance
    - Clinical Effects
    - Therapies
    - Case Volumes



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Texas Poison Control Network

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National Response System

- Established in response to Torrey Canyon oil spill off the coast of England in 1967
  - 37 million gallons resulting in oil slick 35 miles long and 20 miles wide
- It unifies local, state, tribal, and federal agencies, alongside private industry, to minimize threats to human health and the environment.
  - National Contingency Plan…National Response System
  - National Response Center: 1-800-424-8802
    - Over 30,000 reports received each year
  - National Response Team
    - Regional Response Teams
    - Federal On-Scene Coordinators (FOSC)

BBC Radio 5 Live - 5 live Daily - 'I was there': Torrey Canyon spill, 1967

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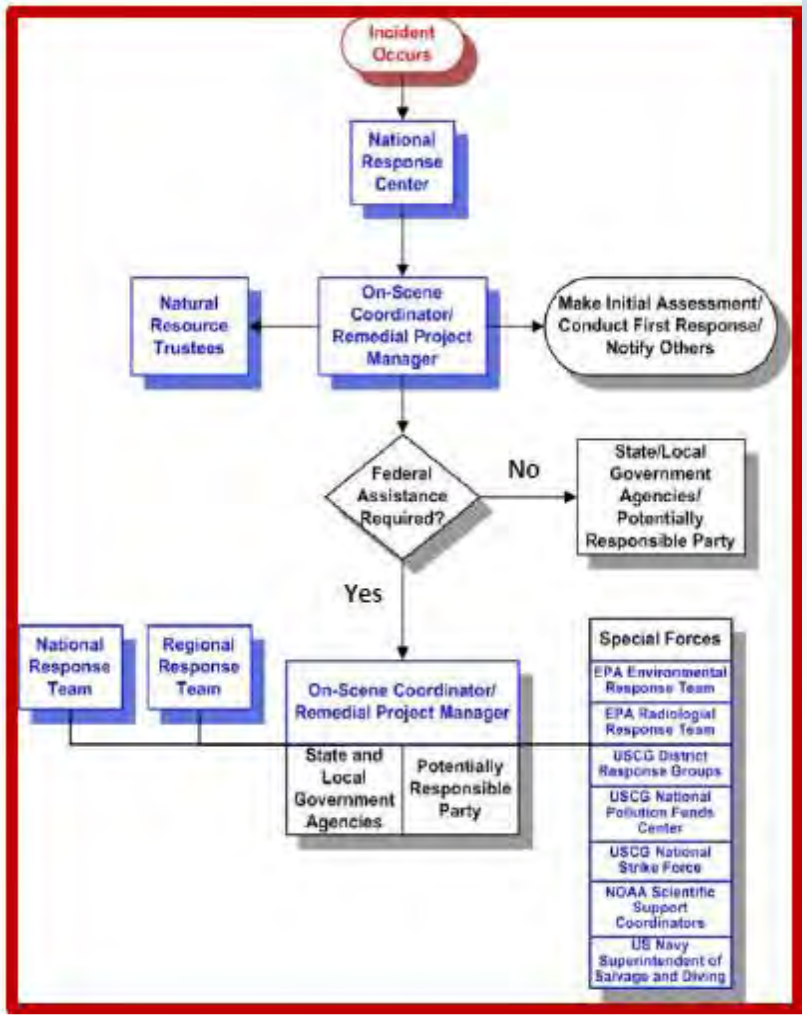
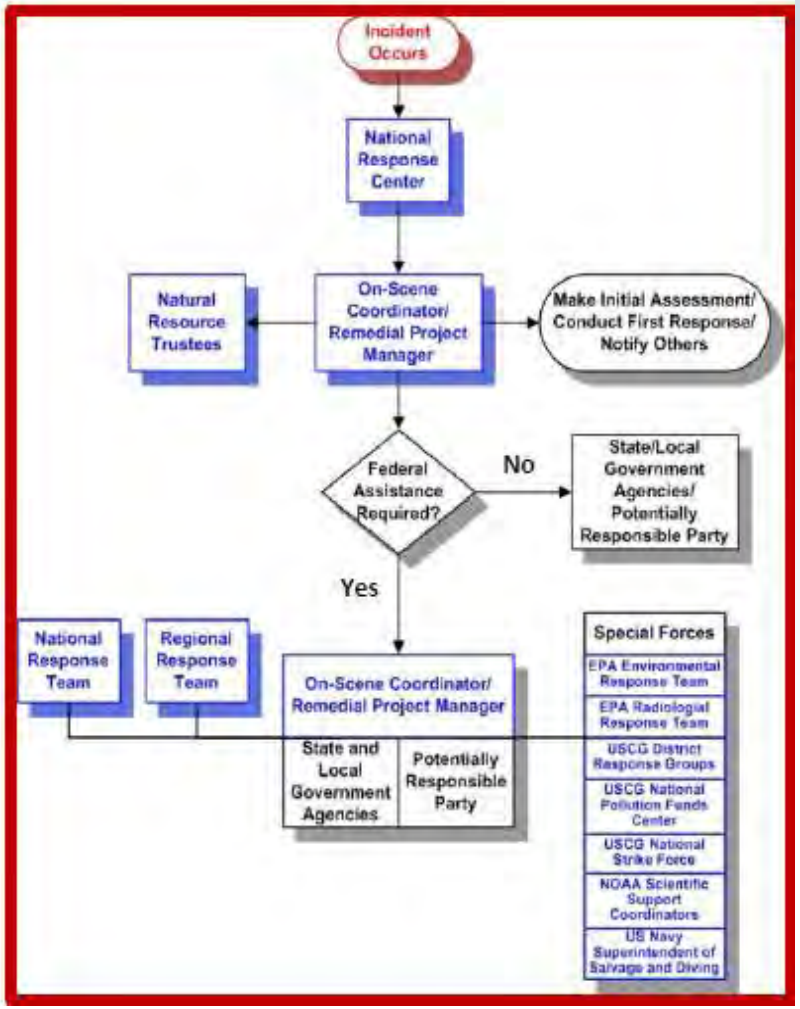
National Response System

- Federal law requires responsible parties to report discharges of oil and releases of hazardous substances to the NRC
  - 1st line of defense is the entity responsible for the release > local > state
- "Nationally Significant Incidents"
  - Don't require a presidential declaration of disaster
  - Phone call to NRC allows for immediate activation



On-Scene Coordinators

- Pre-designated federal official
  - EPA for inland areas
  - USCG for coastal areas
  - >250 OSCs in the US
- Responsible for ensuring immediate and effective response to a discharge or release
  - Direct & coordinate response efforts with state, local, and private orgs
- Determine if RRT/NRT activation is necessary



Region 6 Regional Response Team

- Co-chaired by EPA and USCG
  - 16 Federal Departments/Agencies
  - Arkansas, Louisiana, New Mexico, Oklahoma, Texas
  - 1/3 reports to National Response Center
- Committees
  - Executive
  - Preparedness
  - Response
  - Science & Technology
- Meet twice a year
  - Include LEPC, state, tribal,…& Poison Centers!

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Why Include Poison Centers in Response Teams & Plans?

1. Existing 24/7 hotline
2. Free to ANY and ALL callers
   - Public, First Responders, Healthcare Professionals, Law Enforcement, Media, Govt Agencies,…
3. Staffed with specially trained nurses, pharmacists, physicians, & toxicologists
   - Advanced Hazmat Life Support
   - Access to multiple references/databases/experts with info on chemical toxicities
4. Provide recommendations for patient care via telephone
   - >90% of calls from outside a healthcare facility are safely managed on-site

AHLS Advanced HAZMAT Life Support

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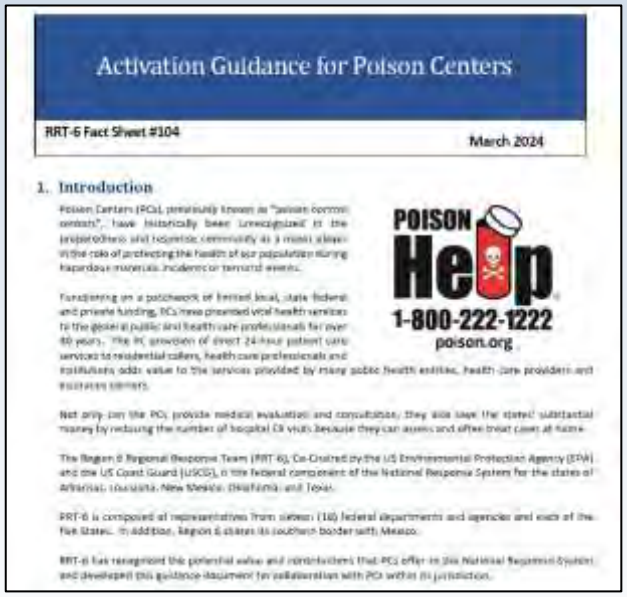
RRT-6 Fact Sheet #104 – Activation Guidance for Poison Centers

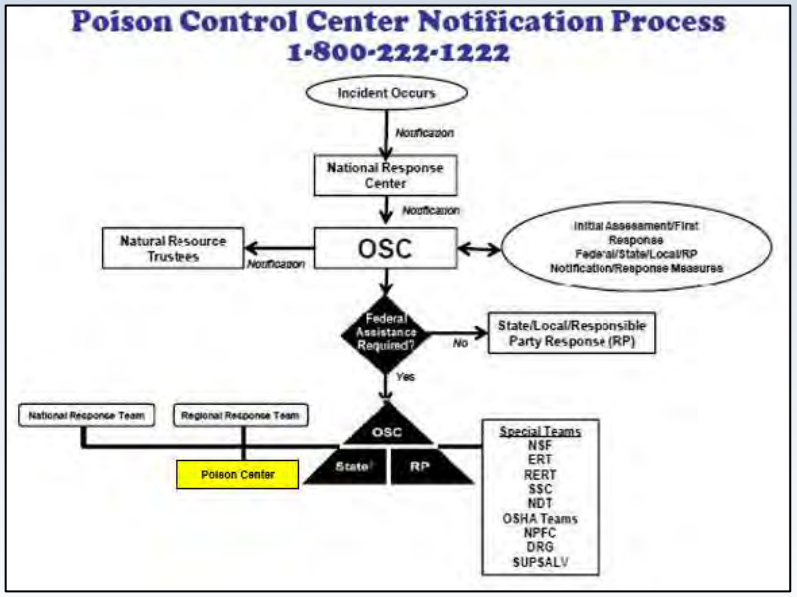


Activation Guidance for Poison Centers

RRT-6 Fact Sheet #104 March 2024

1. Introduction

POISON Help 1-800-222-1222 poison.org



Capt. (Ret.) Patrick Young,
US Public Health Service
- Model for other RRTs to follow

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How can Poison Centers fit within the Incident Command System?

- Decision to activate Poison Center
- Information regarding incident is shared with the Poison Center
  - Substance involved, amount, location, etc
  - Environmental or Health concerns
  - Key messaging
- PC is able to provide advice on patient safety and management to Ops Team/Safety Officer
- PIO announces availability of Poison Center as a resource to help answer questions
- PC is able to share data on calls from the public, patient contacts and exposures

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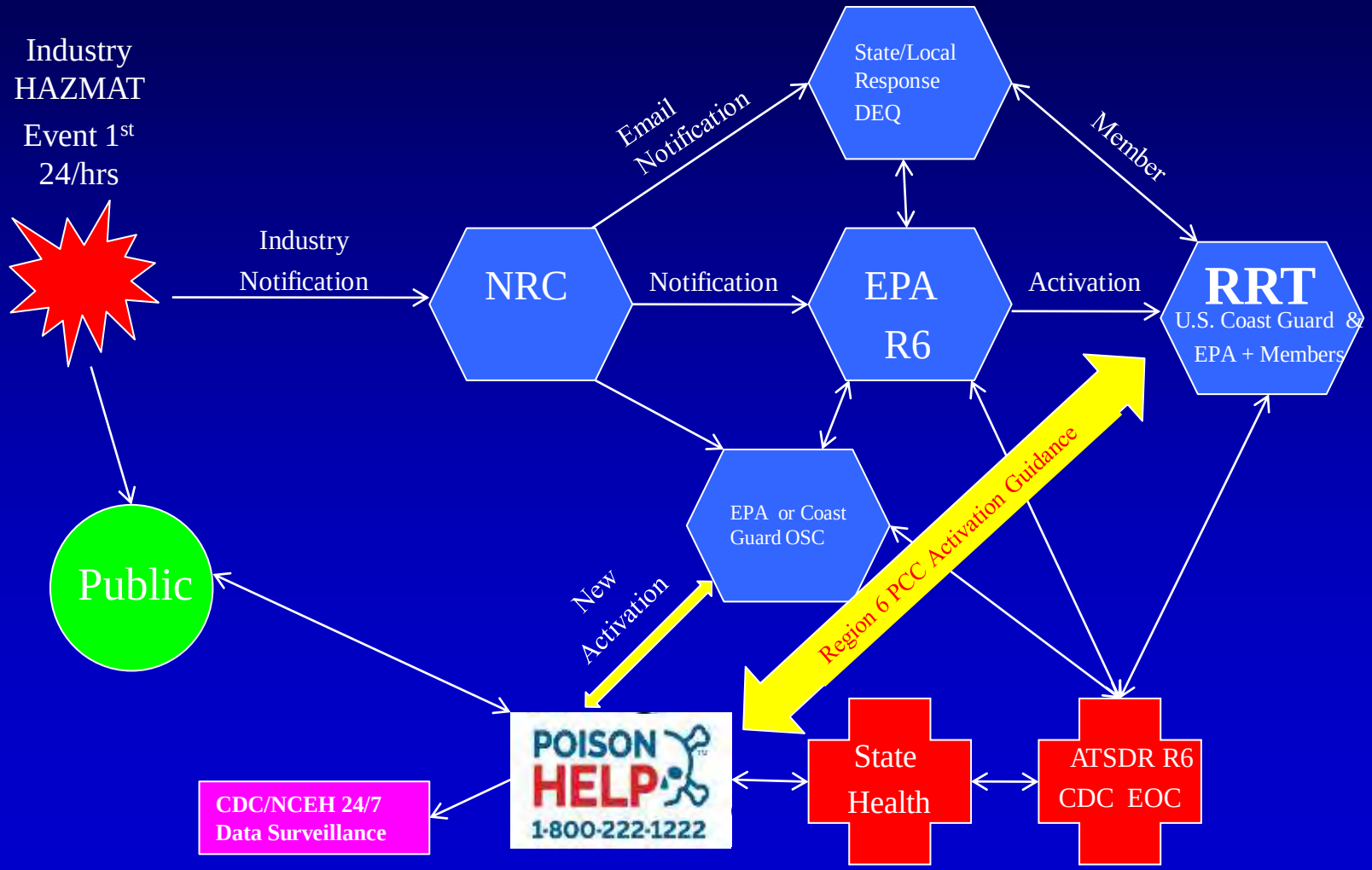
PCC -Activation Protocol Region 6 Example

ATSDR – Agency for Toxic Substances and Disease Registry
NCEH – National Center for Environmental Health
CDC – Centers for Disease Control and Prevention
NRC – National Response Center – EPA/U.S. Coast Guard Headqrts
FOSC – Federal On-Scene Coordinator
RRT- Regional Response Team
DEQ – Department of Environmental Quality
R6 – Region 6
New Response Relationships



When have Poison Centers been activated by the RRT?

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Macdona Union Pacific Train Derailment

- June 28, 2004 5:03AM - outside San Antonio, TX.
- 2 trains collided & released >60 tons of chlorine
  - 3 fatalities and at least 43 hospitalizations
- TPCN
  - 1st call received by STPC at 5:35AM
  - 43 cases – area residents, first-responders, EDs
- Lessons Learned

Site Profile - Macdona Union Pacific Train Derailment - EPA OSC Response

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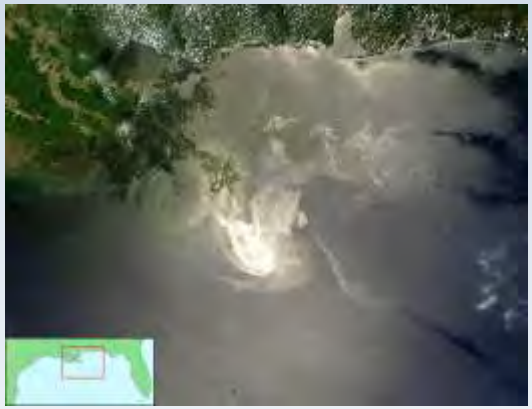
Deepwater Horizon

- April 20, 2010 – largest marine oil spill in history
  - BP contracted with RMPDIC
  - Regional centers also engaged
- 1,675 calls over the next 3 months
  - 1,028 potential exposures
  - HA, Nausea, Coughing, Dermal s/s
- Event code added to ID cases in NPDS
  - Oil Spill, Gulf of Mexico (20 April 2010) / APC Temporary Code #40 / Micromedex emergent Product Code #40
- Louisiana PC - Daily SitReps reached the White House



Wolkin A, Schnall AH, Law R, Schier J. Using poison center data for postdisaster surveillance. Prehosp Disaster Med. 2014 Oct;29(5):521-4. doi: 10.1017/S1049023X14000983. Epub 2014 Sep 10. PMID: 25205009; PMCID: PMC4576449.

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MagnaBlend Fire

- October 3, 2011 in Waxahachie, Texas
  - Fire destroyed a chemical factory and smoldered for 3 days
  - > 1,000 people evacuated
  - Only 7 calls received by TPCN
- 15 days later – Community activist called
  - Concerned with the lack of public education provided during the incident
  - EPA said it was safe, but local college remained closed citing poor air quality
  - Shared TPCN info on their Facebook page
    - 12 additional calls were received that day
- Lessons learned

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West Nile Virus 2012 Outbreak

- Nationwide, the WNV cases were the highest reported since 1999.
- Texas was the epicenter
  - 52% of the cases reported to CDC
  - 49% of the deaths reported to CDC
- 22% of Texas' cases were from Dallas County
  - August 9th - Dallas county's top official declared a public health emergency
    - Aerial spraying authorized for first time in 45 years

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TPCN Response to West Nile

- Messaging
  - NTPC worked with Dallas County Health Officials, UTSW Toxicology, Texas DSHS, & ATSDR
  - Developed talking points for SPIs
- Proactive outreach to media:
  - Press Release
  - Also posted info on Facebook and Twitter
- Updated the TPCN IVR with specific messaging for WNV & aerial spraying

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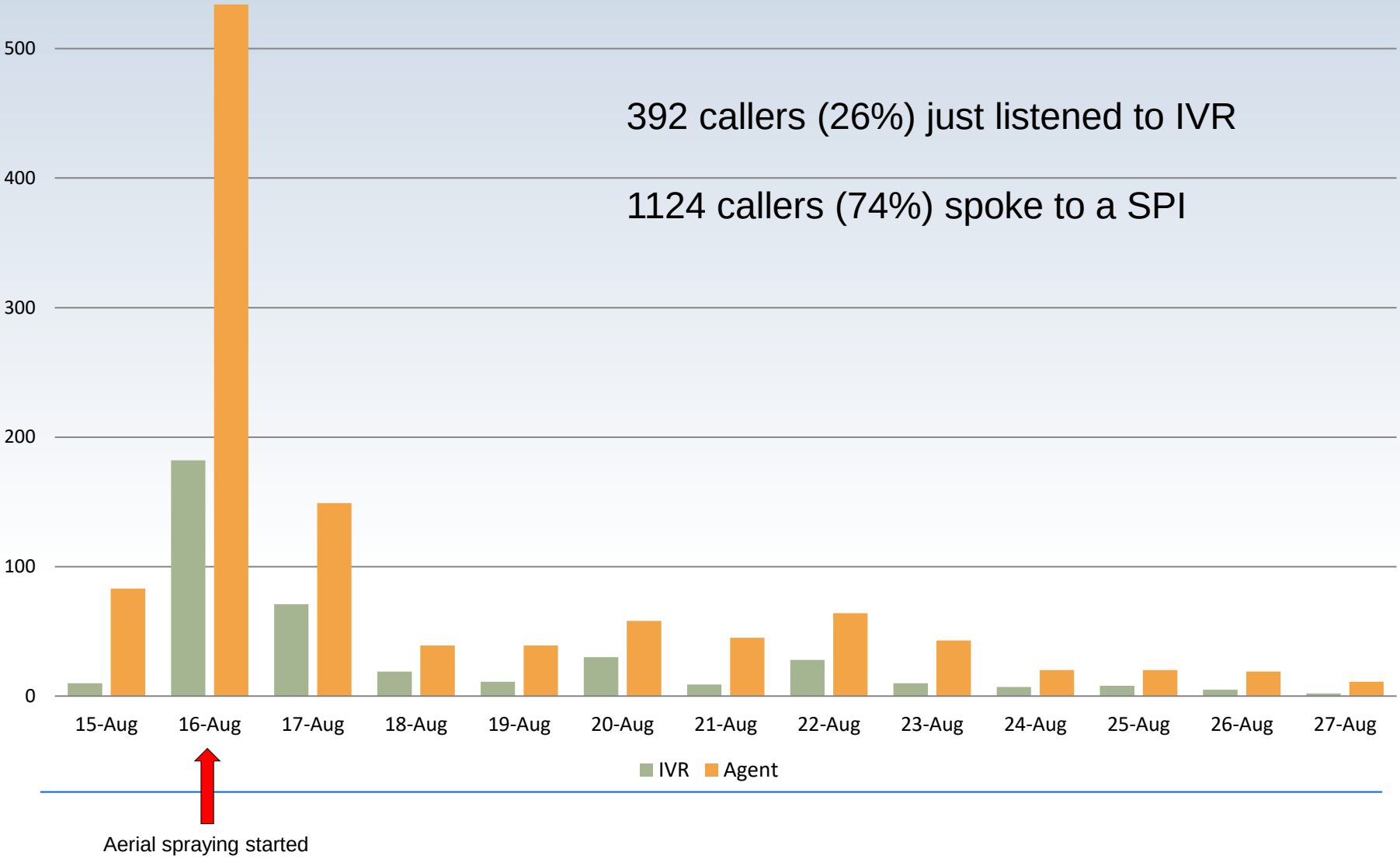
Breakdown of IVR vs Specialist



Other Examples

- October 2012: Urban Park Elementary School – Mercury spill
  - 3 kids hospitalized, school closed for cleaning, family had to vacate their home
- December 2016: Corpus Christi water contamination → ban on drinking and bathing in tap water for several days
  - STPC Directors were out. WTPC Directors coordinated TPCN response.
- August 2017: Hurricane Harvey → catastrophic flooding in Houston
  - >2,500 calls to TPCN
  - 455 pesticides, 293 bites & stings, 114 snakebites, 54 gasoline, 29 CO, 4 water contamination calls…
- March 2020: COVID-19 reaches El Paso
  - WTPC answered COVID hotline for the City of El Paso while they set up their own call center
  - 373 calls answered in first 10 days after 1st + in town

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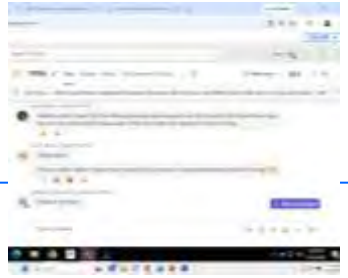
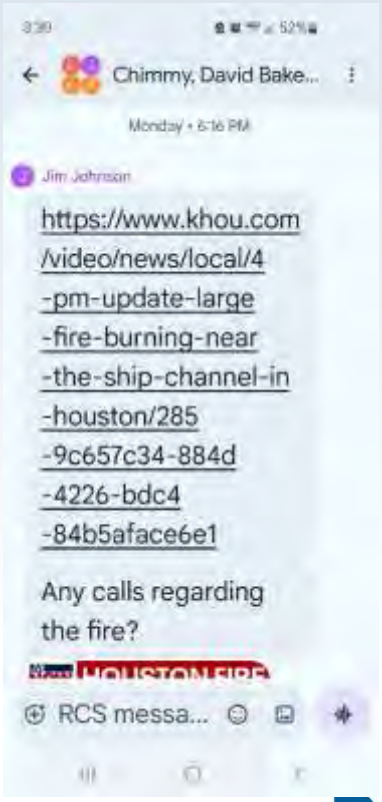
This week:

TPCN SPI Chat Sunday 6/21/2026

- 9:08AM: *Chemical plant fire in Texas City. Residents are being told to shelter in place. No details at this time.*
- 9:54AM: *Marathon fire in Texas City: The affected area has been reduced from 35th street to 14th street From Texas Ave. (on the south side) to Moses Lake on the north side). No details on what is burning.*
- 11:16AM: *Shelter in place has been lifted for Texas City*



Directors' group text message:



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TPCN Response to Public Health Emergencies

- 24/7 free hotline
- Direct access to specially trained healthcare professionals
- New & Improved…
  - Chat function
  - Remote call taking capabilities
  - Established special codes to use in any case that may ***potentially*** be a public health concern
    - PHEmerg
    - Recall
    - Drill/Exercise

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RRT-6 2023 Annual Report

Challenges and Issues (and Operational Requirements Which May Require NRT Attention):

"*…RRT-6 recommends the NRT develop guidance for unified command on how to activate and use Poison Centers…*"

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QUESTIONS?

Email: sbaeza@umcelpaso.org