

Guide for All-Hazard Emergency Operations Planning

STATE AND LOCAL GUIDE (101)

CHAPTER 6 ATTACHMENT G -- TERRORISM

**Federal Emergency Management Agency
April 2001**

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CHAPTER 6 HAZARD-UNIQUE PLANNING CONSIDERATIONS

ATTACHMENT G – TERRORISM

A. PURPOSE

The purpose of Attachment G is to aid State and local emergency planners in developing and maintaining a Terrorist Incident Appendix (TIA) to an Emergency Operations Plan (EOP) for incidents involving terrorist-initiated weapons of mass destruction (WMD).¹ The planning guidance in this Attachment was prepared with the assistance of the Departments of Defense, Energy, Agriculture, Health and Human Services, Justice, and Veterans Affairs; the Environmental Protection Agency; the Nuclear Regulatory Commission; the National Emergency Management Association; and the International Association of Emergency Managers.

State and local governments have primary responsibility in planning for and managing the consequences of a terrorist incident using available resources in the critical hours before Federal assistance can arrive. The information presented in this Attachment should help planners develop a TIA that integrates the Federal, State, and local responses. The TIA resulting from this guidance should supplement existing State and local EOPs. A suggested format for a TIA is shown in Tab A.

Federal departments and agencies have developed plans and capabilities for an integrated Federal response to a WMD incident. This Attachment summarizes that response for State and local planners. The Federal Response Plan (FRP), including its Terrorism Incident Annex, provides additional information.

While primarily intended for the use of planners, this Attachment contains information that may be of value to first responders. Planners should consider whether, and how best, to incorporate such information into their plans, procedures, and training materials for first responders.

B. THE HAZARD

The TIA should identify and discuss the nature of the WMD hazard(s), the hazard agents, potential targets, and release areas, as described below.

1. **Nature of the Hazard.** The hazard may be chemical, biological, nuclear/radiological, and/or explosive.
 - a. **Initial Warning.** While specific events may vary, the emergency response and the protocol followed should remain consistent. When an overt WMD incident has occurred, the initial call for help will likely come through the local 911

¹ Definitions of terms and acronyms used in this document are given in Tabs F and G, respectively.

center. This caller probably will not identify the incident as a terrorist incident, but rather state that there was an explosion, a major “accident,” or a mass casualty event. Information relayed through the dispatcher prior to arrival of first responders on scene, as well as the initial assessment, will provide first responders with the basic data to begin responding to the incident. With increased awareness and training about WMD incidents, first responders should recognize that a WMD incident has occurred. The information provided in this Attachment applies where it becomes obvious or strongly suspected that an incident has been intentionally perpetrated to harm people, compromise the public’s safety and well-being, disrupt essential government services, or damage the area’s economy or environment.

- b. **Initial Detection.** The initial detection of a WMD terrorist attack will likely occur at the local level by either first responders or private entities (e.g., hospitals, corporations, etc.). Consequently, first responders and members of the medical community—both public and private—should be trained to identify hazardous agents and take appropriate actions. State and local health departments, as well as local emergency first responders, will be relied upon to identify unusual symptoms, patterns of symptom occurrence, and any additional cases of symptoms as the effects spread throughout the community and beyond. First responders must be protected from the hazard prior to treating victims. Tab D contains an overview of first responder concerns and indicators related to chemical, biological, and nuclear/radiological WMDs.

The detection of a terrorism incident involving covert biological agents (as well as some chemical agents) will most likely occur through the recognition of similar symptoms or syndromes by clinicians in hospital or clinical settings. Detection of biological agents could occur days or weeks after exposed individuals have left the site of the release. Instead, the “scene” will shift to public health facilities receiving unusual numbers of patients, the majority of whom will self-transport.

- c. **Investigation and Containment of Hazards.** Local first responders will provide initial assessment or scene surveillance of a hazard caused by an act of WMD terrorism. The proper local, State, and Federal authorities capable of dealing with and containing the hazard should be alerted to a suspected WMD attack after State/local health departments recognize the occurrence of symptoms that are highly unusual or of an unknown cause. Consequently, State and local emergency responders must be able to assess the situation and request assistance as quickly as possible. For a list of Federal departments and agencies with counterterrorism-specific roles, see Tab B; for telephone and online resources from selected organizations, see Tab C.

2. **Hazard Agents**

- a. **Chemical.** Chemical agents are intended to kill, seriously injure, or incapacitate people through physiological effects. A terrorist incident involving a chemical agent will demand immediate reaction from emergency responders—fire departments, police, hazardous materials (HazMat) teams, emergency medical services (EMS), and emergency room staff—who will need adequate training and equipment. Hazardous chemicals, including industrial chemicals and agents, can be introduced via aerosol devices (e.g., munitions, sprayers, or aerosol generators), breaking containers, or covert dissemination. Such an attack might involve the release of a chemical warfare agent, such as a nerve or blister agent or an industrial chemical, which may have serious consequences. Some indicators of the possible use of chemical agents are listed in Table 1. Early in an investigation, it may not be obvious whether an outbreak was caused by an infectious agent or a hazardous chemical; however, most chemical attacks will

Table 1. General Indicators of Possible Chemical Agent Use

Stated Threat to Release a Chemical Agent
<p>Unusual Occurrence of Dead or Dying Animals</p> <ul style="list-style-type: none"> • For example, lack of insects, dead birds
<p>Unexplained Casualties</p> <ul style="list-style-type: none"> • Multiple victims • Surge of similar 911 calls • Serious illnesses • Nausea, disorientation, difficulty breathing, or convulsions • Definite casualty patterns
<p>Unusual Liquid, Spray, or Vapor</p> <ul style="list-style-type: none"> • Droplets, oily film • Unexplained odor • Low-lying clouds/fog unrelated to weather
<p>Suspicious Devices or Packages</p> <ul style="list-style-type: none"> • Unusual metal debris • Abandoned spray devices • Unexplained munitions

be localized, and their effects will be evident within a few minutes. There are both persistent and nonpersistent chemical agents. Persistent agents remain in the affected area for hours, days, or weeks. Nonpersistent agents have high evaporation rates, are lighter than air, and disperse rapidly, thereby losing their ability to cause casualties after 10 to 15 minutes, although they may be more persistent in small, unventilated areas.

- b. **Biological.** Recognition of a biological hazard can occur through several methods, including identification of a credible threat, discovery of bioterrorism evidence (devices, agent, clandestine lab), diagnosis (identification of a disease caused by an agent identified as a possible bioterrorism agent), and detection (gathering and interpretation of public health surveillance data).

When people are exposed to a pathogen such as anthrax or smallpox, they may not know that they have been exposed, and those who are infected, or subsequently become infected, may not feel sick for some time. This delay between exposure and onset of illness, or incubation period, is characteristic of infectious diseases. The incubation period may range from several hours to a few weeks, depending on the exposure and pathogen. Unlike acute incidents involving explosives or some hazardous chemicals, the initial response to a biological attack on civilians is likely to be made by direct patient care providers and the public health community.

Terrorists could also employ a biological agent that would affect agricultural commodities over a large area (e.g., wheat rust or a virus affecting livestock), potentially devastating the local or even national economy. The response to agricultural bioterrorism should also be considered during the planning process.

Responders should be familiar with the characteristics of the biological agents of greatest concern for use in a bioterrorism event (see Tab C for resources). Unlike victims of exposure to chemical or radiological agents, victims of biological agent attack may serve as carriers of the disease with the capability of infecting others (e.g., smallpox, plague). Some indicators of biological attack are given in Table 2.

Table 2. General Indicators of Possible Biological Agent Use

Stated Threat to Release a Biological Agent
Unusual Occurrence of Dead or Dying Animals
Unusual Casualties <ul style="list-style-type: none"> • Unusual illness for region/area • Definite pattern inconsistent with natural disease
Unusual Liquid, Spray, or Vapor <ul style="list-style-type: none"> • Spraying and suspicious devices or packages

- c. **Nuclear/Radiological.** The difficulty of responding to a nuclear or radiological incident is compounded by the nature of radiation itself. In an explosion, the fact that radioactive material was involved may or may not be obvious, depending upon the nature of the explosive device used. Unless confirmed by radiological detection equipment, the presence of a radiation hazard is difficult to ascertain. Although many detection devices exist, most are designed to detect specific types and levels of radiation and may not be appropriate for measuring or ruling out the presence of radiological hazards. Table 3 lists some indicators of a radiological release.

Table 3. General Indicators of Possible Nuclear Weapon/Radiological Agent Use

<ul style="list-style-type: none"> • A stated threat to deploy a nuclear or radiological device
<ul style="list-style-type: none"> • The presence of nuclear or radiological equipment (e.g., spent fuel canisters or nuclear transport vehicles)
<ul style="list-style-type: none"> • Nuclear placards or warning materials along with otherwise unexplained casualties

The scenarios constituting an intentional nuclear/radiological emergency include the following:

- (1) Use of an **Improvised Nuclear Device (IND)** includes any explosive device designed to cause a nuclear yield. Depending on the type of trigger device used, either uranium or plutonium isotopes can fuel these devices. While “weapons-grade” material increases the efficiency of a given device, materials of less than weapons grade can still be used.
 - (2) Use of a **Radiological Dispersal Device (RDD)** includes any explosive device utilized to spread radioactive material upon detonation. Any improvised explosive device could be used by placing it in close proximity to radioactive material.
 - (3) Use of a **Simple RDD** that spreads radiological material without the use of an explosive. Any nuclear material (including medical isotopes or waste) can be used in this manner.
- d. **Conventional Explosive Devices.** The easiest to obtain and use of all weapons is still a conventional explosive device, or improvised bomb, which may be used to cause massive local destruction or to disperse chemical, biological, or radiological agents. The components are readily available, as are detailed instructions to construct such a device. Improvised explosive devices are categorized as being explosive or incendiary, employing high or low filler explosive materials to explode and/or cause fires. Bombs and firebombs are

cheap and easily constructed, involve low technology, and are the terrorist weapon most likely to be encountered. Large, powerful devices can be outfitted with timed or remotely triggered detonators and can be designed to be activated by light, pressure, movement, or radio transmission. The potential exists for single or multiple bombing incidents in single or multiple municipalities. Historically, less than five percent of actual or attempted bombings were preceded by a threat. Explosive materials can be employed covertly with little signature, and are not readily detectable. Secondary devices may be targeted against responders.

- e. **Combined Hazards.** WMD agents can be combined to achieve a synergistic effect—greater in total effect than the sum of their individual effects. They may be combined to achieve both immediate and delayed consequences. Mixed infections or intoxications may occur, thereby complicating or delaying diagnosis. Casualties of multiple agents may exist; casualties may also suffer from multiple effects, such as trauma and burns from an explosion, which exacerbate the likelihood of agent contamination. Attacks may be planned and executed so as to take advantage of the reduced effectiveness of protective measures produced by employment of an initial WMD agent. Finally, the potential exists for multiple incidents in single or multiple municipalities.
3. **Potential Targets.** In determining the risk areas within a jurisdiction (and in multiple jurisdiction areas participating in an emergency response), the vulnerabilities of potential targets should be identified, and the targets themselves should be prepared to respond to a WMD incident. In-depth vulnerability assessments are needed for determining a response to such an incident. For examples of vulnerability areas to be considered, see Tab E. In addition, reference Risk Management Plans and Emergency Planning and Community Right-to-Know Act (EPCRA) Plans, which include potential target areas and information on industrial chemical facilities, can be obtained from the Local Emergency Planning Committee (LEPC) in your area.
 4. **Release Area.** Standard models are available for estimating the effects of a nuclear, chemical, or biological release, including the area affected and consequences to population, resources, and infrastructure. Some of these models include databases on infrastructure that can be useful in preparing the TIA. A good source of information on available Federal government models is the *Directory of Atmospheric Transport and Diffusion Consequence Assessment Models*, published by the Office of the Federal Coordinator for Meteorology (OFCM). The directory is available both in print and online on OFCM's web page, <http://www.ofcm.gov> (select "Publications," then "Publications Available Online," then the directory). The directory includes information on the capabilities and limitations of each model, technical requirements, and points of contact.

C. SITUATION AND ASSUMPTIONS

1. **Situation.** The situation section of a TIA should discuss what constitutes a potential or actual WMD incident. It should present a concise, clear, and accurate overview of potential events and discuss a general concept of operations for response. Any information already included in the EOP need not be duplicated in the TIA. The situation overview should include as much information as possible that is unique to WMD response actions, including the suggested elements listed in Table 4.

WMD situation planning should include provisions for working with Federal crisis and consequence management agencies. The key to successful emergency response involves smooth coordination with multiple agencies and officials from various jurisdictions regarding all aspects of the response.

2. **Assumptions.** Although situations may vary, planning assumptions remain the same.
 - a. The first responder (e.g., local emergency or law enforcement personnel) or health and medical personnel will in most cases initially detect and evaluate the potential or actual incident, assess casualties (if any), and determine whether assistance is required. If so, State support will be requested and provided. This assessment will be based on warning or notification of a WMD incident that may be received from law enforcement, emergency response agencies, or the public.
 - b. The incident may require Federal support. To ensure that there is one overall Lead Federal Agency (LFA), the Federal Emergency Management Agency (FEMA) is authorized to support the Department of Justice (DOJ) (as delegated to the Federal Bureau of Investigation [FBI]) until the Attorney General transfers the overall LFA role to FEMA. (Source: FRP, Terrorism Incident Annex) In addition, FEMA is designated as the lead agency for consequence management within the United States and its territories. FEMA retains authority and responsibility to act as the lead agency for consequence management throughout the Federal response. In this capacity, FEMA will coordinate Federal assistance requested through State authorities using normal FRP mechanisms.
 - c. Federal response will include experts in the identification, containment, and recovery of WMD (chemical, biological, or nuclear/radiological).
 - d. Federal consequence management response will entail the involvement of FEMA, additional FRP departments and agencies, and the American Red Cross as required.

Table 4. Suggested Emergency Operations Plan Elements

Maps	<ul style="list-style-type: none"> • Use detailed, current maps and charts. • Include demographic information. • Use natural and manmade boundaries and structures to identify risk areas. • Annotate evacuation routes and alternatives. • Annotate in-place sheltering locations.
Environment^a	<ul style="list-style-type: none"> • Determine response routes and times. • Include bodies of water with dams or levees (these could become contaminated). • Specify special weather and climate features that could alter the effects of a WMD (e.g., strong winds, heavy rains, etc.).
Population^b	<ul style="list-style-type: none"> • Identify those most susceptible to WMD effects or otherwise hindered or unable to care for themselves. • Identify areas where large concentrations of the population might be located, such as sports arenas and major transportation centers. • List areas that may include retirement communities. • Note location of correctional facilities. • Note locations of hospitals/medical centers/schools/day care centers where multiple evacuees may need assistance. • Identify non-English-speaking populations.
Metropolitan	<ul style="list-style-type: none"> • Identify multi-jurisdictional perimeters and boundaries. • Identify potentially overlapping areas for response. • Identify rural, urban, suburban, and city (e.g., city-sprawl/surroundings) mutual risk areas. • Identify specific or unique characteristics such as interchanges, choke points, traffic lights, traffic schemes and patterns, access roads, tunnels, bridges, railroad crossings, and overpasses and/or cloverleaves.

^a The Environmental Protection Agency (EPA) will work with local and State officials on environmental planning issues.

^b The Department of Veterans Affairs (VA), in close cooperation with the Department of Health and Human Services (HHS), will work with State and local officials on these issues.

- e. Jurisdictional areas of responsibility and working perimeters defined by local, State, and Federal departments and agencies may overlap. Perimeters may be used to control access to the affected area, target public information messages, assign operational sectors among responding organizations, and assess potential effects on the population and the environment. Control of these perimeters may be enforced by different authorities, which will impede the overall response if adequate coordination is not established.

D. CONCEPT OF OPERATIONS

The TIA should include a concept of operations section to explain the jurisdiction's overall concept for responding to a WMD incident. Topics should include division of local, State, Federal, and any intermediate interjurisdictional responsibilities; activation of the EOP; and the other elements set forth in Chapter 4 (Basic Plan Content) of State and Local Guide (SLG) 101. A suggested format for a TIA is given in Tab A.

1. **Direction and Control.** Local government emergency response organizations will respond to the incident scene(s) and make appropriate and rapid notifications to local and State authorities (Table 5).² Control of the incident scene(s) most likely will be established by local first responders from either fire or police. The Incident Command System (ICS) that was initially established likely will transition into a Unified Command System (UCS) as mutual-aid partners and State and Federal responders arrive to augment the local responders. It is recommended that local, State, and Federal regional law enforcement officials develop consensus "rules of engagement" early in the planning process to smooth the transition from ICS to UCS. This UC structure will facilitate both crisis management and consequence management activities. The UC structure used at the scene will expand as support units and agency representatives arrive to support crisis and consequence management operations. The site of a terrorist incident is a crime scene as well as a disaster scene, although the protection of lives, health, and safety remains the top priority.

Figure 1 summarizes the coordination relationships between the UC and other response entities. It is assumed that normal disaster coordination accomplished at State and local emergency operations centers (EOCs) and other locations away from the scene would be addressed in the basic EOP. Any special concerns relating to State and local coordination with Federal organizations should be addressed in the TIA.

Local, State, and Federal interface with the FBI On-Scene Commander (OSC) is coordinated through the Joint Operations Center (JOC). FEMA (represented in the command group) will recommend joint operational priorities to the FBI based on consultation with the FEMA-led consequence management group in the JOC. The FBI, working with local and State officials in the command group at the JOC, will establish operational priorities.

Response to any terrorist event requires direction and control. The planner must consider the unique characteristics of the event, identify the likely stage at which coordinated resources will be required, and tailor the direction and control process to merge into the ongoing public health response.

² Table 5 provides an overview of events likely to occur in a WMD incident. It is designed to help planners better understand the interface that State and local response will likely have with Federal response organizations. The table includes both crisis management and consequence management activities that would be operating in parallel and is intended to illustrate the complex constellation of responses that would be involved in a WMD incident.

Table 5. Responses to a WMD Incident and the Participants Involved

Events	Participants
1. Incident occurs.	
2. 911 center receives calls, elicits information, dispatches first responders, relays information to first responders prior to their arrival on scene, makes notifications, and consults existing databases of chemical hazards in the community, as required.	911 Center, first responders.
3. First responders arrive on scene and make initial assessment. Establish Incident Command. Determine potential weapon of mass destruction (WMD) incident and possible terrorist involvement; warn additional responders to scene of potential secondary hazards/devices. Perform any obvious rescues as incident permits. Establish security perimeter. Determine needs for additional assistance. Begin triage and treatment of victims. Begin hazard agent identification.	Incident Command: Fire, Law Enforcement, Emergency Medical Services (EMS), and HazMat unit(s).
4. Incident Command manages incident response; notifies medical facility, emergency management (EM), and other local organizations outlined in Emergency Operations Plan; requests notification of Federal Bureau of Investigation (FBI) Field Office.	Incident Command.
5. Special Agent in Charge (SAC) assesses information, supports local law enforcement, and determines WMD terrorist incident has occurred. Notifies Strategic Information and Operations Center (SIOC), activates Joint Operations Center (JOC), coordinates the crisis management aspects of WMD incident, and acts as the Federal on-scene manager for the U.S. government while FBI is Lead Federal Agency (LFA).	FBI Field Office: SAC.
6. Local Emergency Operations Center (EOC) activated. Supports Incident Command, as required by Incident Commander (IC). Coordinates consequence management activities (e.g., mass care). Local authorities declare state of emergency. Coordinates with State EOC and State and Federal agencies, as required. Requests State and Federal assistance, as necessary.	Local EOC: Local agencies, as identified in basic Emergency Operations Plan (EOP).
7. Strategic local coordination of crisis management activities. Brief President, National Security Council (NSC), and Attorney General. Provide Headquarters support to JOC. Domestic Emergency Support Team (DEST) may be deployed. Notification of FEMA by FBI/SIOC triggers FEMA actions. ^a	SIOC: FBI, Department of Justice (DOJ), Department of Energy (DOE), Federal Emergency Management Agency (FEMA), Department of Defense (DoD), Department of Health and Human Services (HHS), and Environmental Protection Agency (EPA).
8. Manage criminal investigation. Establish Joint Information Center (JIC). State and local agencies and FEMA ensure coordination of consequence management activities.	FBI; other Federal, State, and local law enforcement agencies. Local Emergency Management (EM) representatives. FEMA, DoD, DOE, HHS, EPA, and other Federal Response Plan (FRP) agencies, as required.
9. State EMS support local consequence management. Brief Governor. Declare state of emergency. Develop/coordinate requests for Federal assistance through FEMA Regional Operations Center (ROC). Coordinate State request for Federal consequence management assistance.	State EOC: State EMS and State agencies, as outlined in EOP.
10. DEST provides assistance to FBI SAC. Merges into JOC, as appropriate.	DEST: DoD, DOJ, HHS, FEMA, EPA, and DOE.

Table 5 (Cont.)

Events	Participants
11. FEMA representative coordinates Consequence Management Group. Expedites Federal consequence management activities and monitors crisis management response to advise on areas of decision that could impact consequence management response.	FBI, FEMA, EPA, DoD, DOE, HHS, and other FRP agencies.
12. Crisis management response activities to incident may continue.	FBI, Incident Command System (ICS), Special Operations, Hazardous Materials Response Unit (HMRU), Joint Technical Operations Team, Joint Inter-Agency Intelligence Support, and additional authorities, as needed.
13. Federal response efforts coordinated and mission assignments determined. A consequence management support team deploys to incident site. All EOCs coordinate.	ROC and regional-level agencies.
14. An Emergency Response Team - Advance Element (ERT-A) deploys to State EOC and incident site, as needed. Base installation sites identified for mobilization centers. Liaisons from WMD-related agencies requested for Emergency Support Team (EST) and ROC. Disaster Field Office (DFO) liaisons as needed (may be after extended response phase).	ERT-A: Regional-level FEMA and FRP primary support agencies, as needed.
15. A consequence management support team provides operational technical assistance to Unified Command.	FEMA, DOE, DoD, HHS, EPA, and FBI.
16. Recovery operations. Transition of LFA from FBI to FEMA.	

^a FEMA may initiate FRP response prior to any FBI/SIOC notification.

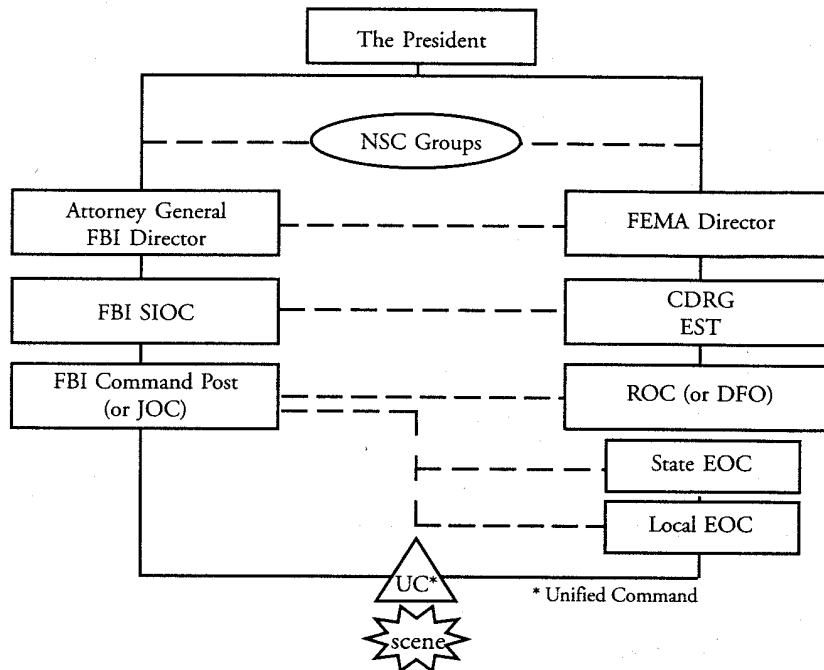


FIGURE 1 Coordination Relationships in Terrorism Incident Response (Source: FRP, Figure TI-4, p. TI-9)

2. **Communications.** In the event of a WMD incident, rapid and secure communication is crucial to ensure a prompt and coordinated response. Strengthening communications among first responders, clinicians, emergency rooms, hospitals, mass care providers, and emergency management personnel must be given top priority in planning.
3. **Warning.** Every incident is different. There may or may not be warning of a potential WMD incident. Factors involved range from intelligence gathered from various law enforcement or intelligence agency sources to an actual notification from the terrorist organization or individual. The EOP should have HazMat facilities and transportation routes already mapped, along with emergency procedures necessary to respond.
 - a. The warning or notification of a potential WMD terrorist incident could come from many sources; therefore, open communication among local, State, and Federal law enforcement agencies and emergency response officials is critical. The local FBI Field Office must be notified of any suspected terrorist threats or incidents.
 - b. **Threat Level.** The FBI operates with a four-tier threat level system:
 - (1) **Level Four (Minimal Threat).** Received threats do not warrant actions beyond normal liaison notifications or placing assets or resources on a heightened alert.
 - (2) **Level Three (Potential Threat).** Intelligence or an articulated threat indicates the potential for a terrorist incident; however, this threat has not yet been assessed as credible.
 - (3) **Level Two (Credible Threat).** A threat assessment indicates that a potential threat is credible and confirms the involvement of WMD in a developing terrorist incident. The threat increases in significance when the presence of an explosive device or WMD capable of causing a significant destructive event, prior or actual injury or loss is confirmed or when intelligence and circumstances indicate a high probability that a device exists.
 - (4) **Level One (WMD Incident).** A WMD terrorism incident has occurred resulting in mass casualties that requires immediate Federal planning and preparation to provide support to State and local authorities. The Federal response is primarily directed toward the safety and welfare of the public and the preservation of human life.
4. **Emergency Public Information.** Accurate and expedited dissemination of information is critical when a WMD incident has occurred. Preservation of life and property may hinge on instructions and directions given by authorized officials. In the event of a terrorist attack, the public and the media must be provided with accurate

- and timely information on emergency operations. Establishing and maintaining an effective rumor control mechanism will help clarify emergency information for the public. Initial interaction with the media is likely to be implemented by an information officer, as directed by the Incident Commander. To facilitate the release of information, the FBI may establish a Joint Information Center (JIC) comprised of representatives from Federal, State, and local authorities for the purpose of managing the dissemination of information to the public, media, and businesses potentially affected by the incident. An act of terrorism is likely to cause widespread panic, and ongoing communication of accurate and up-to-date information will help calm fears and limit collateral effects of the attack.
5. **Protective Actions.** Evacuation may be required from inside the perimeter of the scene to guard against further casualties, either from contamination by an agent released or the possibility that additional WMD or secondary devices targeting emergency responders are present. “In-place sheltering” may be required if the area must be contained because of the need for quarantine or if it is determined to be safer for individuals to remain in place. The TIA should be flexible enough to accommodate either contingency. As with any emergency, State and local officials must be involved in making protective action decisions. Multi-jurisdictional issues regarding mass care, sheltering, and evacuation should be pre-coordinated and included in the TIA.
 6. **Mass Care.** The location of mass care facilities will be based partly on the hazard agent involved. Decontamination, if it is necessary, may need to precede sheltering and other needs of the victims to prevent further damage from the hazard agent, either to the victims themselves or to the care providers. The American Red Cross (the primary agency for mass care), the Department of Health and Human Services, and the Department of Veterans Affairs should be actively involved with the planning process to determine both in-place and mobile mass care systems for the TIA. A “mid-point” or intermediary station may be needed to move victims out of the way of immediate harm. This would allow responders to provide critical attention (e.g., decontamination and medical services) and general lifesaving support, then evacuate victims to a mass care location for further attention. General issues to consider for inclusion in the TIA are:
 - a. Location, setup, and equipment for decontamination stations, if any.
 - b. Mobile triage support and qualified personnel.
 - c. Supplies and personnel to support in-place sheltering.
 - d. Evacuation to an intermediary location to provide decontamination and medical attention.
 - e. Determination of safety perimeters (based on agent).

7. **Health and Medical.** The basic EOP should already contain a Health and Medical Annex. Issues that may be different during a WMD incident and that should be addressed in the TIA include decontamination, safety of victims and responders, in-place sheltering versus evacuation, and multihazard/multiagent triage. Planning should anticipate the need to handle large numbers of people who may or may not be contaminated but who are fearful about their medical well-being.

The response to a bioterrorism incident will require the active collaboration of the clinicians and local public health authorities responsible for disease monitoring and outbreak investigation. Their activities should be factored into the overall response process.

8. **Resources Management.** The following considerations are highly relevant to WMD incidents and should be addressed, if appropriate, in one or more appendixes to a resource management annex:
 - a. Nuclear, biological, and chemical response resources that are available through interjurisdictional agreements (e.g., interstate pacts).
 - b. Unique resources that are available through State authorities (e.g., National Guard units).
 - c. Unique resources that are available to State and local jurisdictions through Federal authorities (e.g., the National Pharmaceutical Stockpile, a national asset providing delivery of antibiotics, antidotes, and medical supplies to the scene of a WMD incident).
 - d. Unique expertise that may be available through academic, research, or private organizations.

E. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

As with any hazard-specific emergency, the organization for management of local response may vary for a WMD incident and should therefore be defined in the TIA. The effects of a terrorist act involving a WMD have the potential to overwhelm local resources, which may require assistance from State or Federal governments. The following response roles and responsibilities should be articulated in the TIA.

1. **Local Emergency Responders.** Local fire departments, law enforcement personnel, HazMat teams, and EMS will be among the first to respond to a WMD incident. As response efforts escalate, the local emergency management agency and health department will help coordinate needed services.

Primary Duties. The duties of local departments, such as fire, law enforcement, and EMS, along with those of the local emergency management agency and health department should be addressed in their respective EOPs. Any special duties

necessary to respond to a suspected terrorist WMD incident should be set forth in the local TIA.

2. **Interjurisdictional Responsibilities.** The formal arrangements and agreements for emergency response to a WMD incident among neighboring jurisdictions, State, Tribal, local, and neighboring States (and those jurisdictions physically located in those States) should be made **prior** to an incident. When coordinating and planning, the Risk Assessment and Risk Area sections of the TIA (areas where potential multiple jurisdictions could overlap and interplay) will be readily identifiable. Federal response is already predisposed for interagency and interdepartmental coordination.
3. **State Emergency Responders.** If requested by local officials, the State emergency management agency has capabilities to support local emergency management authorities and the Incident Commander (IC).

Primary Duties. The duties of all responding State agencies should be addressed in the State EOP. Any special duties necessary to respond to a WMD incident should be set forth in the State's TIA.

4. **Local Emergency Planning Committees (LEPCs), State Emergency Response Commissions (SERCs), and Tribal Emergency Response Commissions (TERCs).** These entities are established under the Superfund Amendments and Reauthorization Act of 1986 (SARA) Title III and the implementing regulations of the Environmental Protection Agency (EPA). LEPCs develop and maintain local hazardous material emergency plans and receive notifications of releases of hazardous substances. SERCs and TERCs supervise the operation of the LEPCs and administer the community right-to-know provisions of SARA Title III, including collection and distribution of information about facility inventories of hazardous substances, chemicals, and toxins. LEPCs will have detailed information about industrial chemicals within the community. It may be advisable for LEPCs, SERCs, and TERCs to establish Memoranda of Agreement (MOAs) with agencies and organizations to provide specialized resources and capabilities for response to WMD incidents.

Primary Duties. Any responsibilities germane to terrorism preparedness or response should be outlined in local, State and Tribal hazardous materials emergency response plans or the hazardous materials annex to the local emergency plan.

5. **Federal Emergency Responders.** Upon determination of a credible WMD threat, or if such an incident actually occurs, the Federal government may respond through the appropriate departments and agencies. These departments and agencies may include FEMA, the Department of Justice (DOJ) and FBI, the Department of Defense (DoD), the Department of Energy (DOE), the Department of Health and Human Services (HHS), the EPA, the Department of Agriculture (USDA), the Nuclear Regulatory Commission (NRC), and possibly the American Red Cross and Department of Veterans Affairs. The roles and responsibilities for Federal departments and agencies participating in both crisis management and consequence management are discussed

in more detail in Tab B. See the United States Government Interagency Domestic Terrorism Concept of Operations Plan and the Terrorism Incident Annex to the Federal Response Plan for information on the roles and responsibilities of Federal departments and agencies responding to terrorism incidents involving WMD.

Primary Duties. Upon determining that a WMD terrorist incident is credible, the FBI Special Agent in Charge (SAC), through the FBI Headquarters, will initiate liaison with other Federal agencies to activate their operations centers. The responsible FEMA region(s) may activate a Regional Operations Center (ROC) and deploy a representative(s) to the affected State(s). When the responsible FEMA region(s) activates a ROC, the region(s) will notify the responsible FBI Field Office(s) to request a liaison. If the FBI activates the Strategic Information and Operations Center (SIOC) at FBI Headquarters, then other Federal agencies, including FEMA, will deploy a representative(s) to the SIOC, as required. Once the FBI has determined the need to activate a Joint Operations Center (JOC) to support the incident site, Federal, State, and local agencies may be requested by FEMA to support the Consequence Management Group located at the JOC.

F. ADMINISTRATION AND LOGISTICS

There are many factors that make response to a WMD terrorist incident unique. Unlike some natural disasters (e.g., hurricanes, floods, winter storms, drought, etc.), the administration and logistics for response to a WMD incident require special considerations. For example, there may be little or no forewarning, immediately obvious indicators, or WMD knowledge (lead time) available to officials and citizens. Because the release of a WMD may not be immediately apparent, caregivers, emergency response personnel, and first responders are in imminent danger themselves of becoming casualties before the actual identification of the crime can be made. Incidents could escalate quickly from one scene to multiple locations and jurisdictions.

TAB A

**SUGGESTED FORMAT FOR A TERRORIST INCIDENT APPENDIX TO
A BASIC ALL-HAZARDS EMERGENCY PLAN****Supplement to a State or Local Basic Emergency Operations Plan**

- A. PROMULGATION DOCUMENT**
- B. SIGNATURE PAGE**
- C. AUTHORITIES AND REFERENCES**
- D. TABLE OF CONTENTS**
- E. PURPOSE**

The purpose of the Terrorist Incident Appendix (TIA) is to develop a consequence management plan for responding to and recovering from a terrorist-initiated weapon of mass destruction (WMD) incident. The TIA supplements the Emergency Operations Plan (EOP) already in effect.

F. THE HAZARD

1. **Nature of the Hazard** {Identify WMD hazards that could potentially affect the jurisdiction.}
2. **Incident** {Statement of the situations that would cause the consequence management plan for a WMD incident to go into operation.}
3. **Hazard Agents** {Separate sections for each of the following hazards may be used, as risk area, treatment, etc., are unique to each incident. The plan for identification of the hazard agent may be included here, as well as an assessment of the risk and definition of the risk area.}
 - a. **Chemical** {Statement on chemical terrorism. A Tab with the names of chemicals, composition, reference materials (activation, lethality, treatment, handling, mixture, etc.) may be created and included in the TIA.}
 - (1) Assessment of risk
 - (2) Risk area
 - b. **Biological** {Statement on biological terrorism. Reference material (identification, handling, treatment, lethality, etc.) may be created and included in the TIA in a Tab.}

- (1) Assessment of risk
 - (2) Risk area
- c. **Nuclear/Radiological** {Statement on nuclear terrorism. Reference material can be listed in a Tab and may include lethality, handling, treatment, etc.}
- (1) Assessment of risk
 - (2) Risk area
- d. **Explosives** {Statement on explosives terrorism. A Tab with the names of explosives, composition, reference materials (activation, lethality, treatment, handling, mixture, etc.) may be created and included in the TIA.}
- (1) Assessment of risk
 - (2) Risk area

G. SITUATION AND ASSUMPTIONS

1. **Situation:** Basic information on the terrorist incident threat or potential threat. A description of the locale for which the plan is being written. Any information listed below that is already included in the EOP need not be duplicated here. A general description of the area may be given, with the following information in a Tab. Consideration should be given to maintaining information in a secure place.
 - a. **Environment**
 - (1) Geographic conditions (terrain).
 - (2) Weather (climate).
 - b. **Population:** General and special needs individuals, retirement communities and nursing homes, schools, day care centers, correctional facilities, non-English-speaking communities, etc.
 - c. **Metropolitan:** Rural/urban/suburban/city (city-sprawl/surroundings).
 - d. **Critical Infrastructure/Transportation:** Major highways, secondary roads, tertiary roadways, dirt/gravel roads. Details may include interchanges, choke points, traffic lights, traffic schemes and patterns, access roads, tunnels, bridges, railroad crossings, overpasses/cloverleafs.
 - e. **Trucking/Transport Activity:** Cargo loading/unloading facilities (type of cargo), waterways (ports, docks, harbors, rivers, streams, lakes, ocean, bays, reservoirs, pipelines, process/treatment facilities, dams, international roll-on/roll-off container shipments, HazMat [oil] flagged registry).

- f. **Airports:** Carriers, flight paths, airport layout (air traffic control tower, runways, passenger terminal, parking).
- g. **Trains/Subways:** Physical rails, interchanges, terminals, tunnels, cargo/passengers.
- h. **Government Facilities:** Post office, law enforcement, fire/rescue, town/city hall, local mayor/governor's residences, Federal buildings, judicial personnel (i.e., judges, prosecutors, residences, offices).
- i. **Recreation Facilities:** Sports arenas, theaters, malls, theme parks.
- j. **Other Facilities:** Financial institutions (banking facilities/loan institutions), universities, colleges, hospitals, and research institutes (nuclear, biological, chemical, medical clinics).
- k. **Military Installations**
 1. **HazMat Facilities:** Emergency Planning and Community Right-to-Know Act (EPCRA) sites with Risk Management Plan requirements, Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) sites, nonreporting Resource Conservation and Recovery Act (RCRA) facilities (i.e., combustion sites, generating sites, and treatment, storage, and disposal [TSD] sites), facilities inventoried by the Toxic Release Inventory System (TRIS), utilities and nuclear facilities, chemical stockpile and/or manufacturing sites.
 2. **Assumptions:** This plan will go into effect when a WMD incident has occurred or a credible threat has been identified.

H. CONCEPT OF OPERATIONS

1. **Direction and Control** {Based on the above assessments, provide wiring diagram/flow chart showing the chain of command and control. These diagrams/charts may be specific to WMD or more generally pertinent to any incident.}
2. **Communications** {May elaborate on communications described in the basic EOP.}
 - a. Security of communications among responding organizations.
 - b. Coordination of communications with Federal responders.
3. **Warning**
4. **Emergency Public Information** {The plan should identify specific methods (channels) to notify the public that an incident has occurred, direct their actions, and

keep them informed as the situation progresses. Evacuation and sheltering in place are key actions that may need to be communicated to the public, and continuous updating will be required.}

5. **Protective Actions**

- a. In-place sheltering.
- b. Evacuation routes/means of conveyance should be predetermined based on area and type of agent.
- c. Evacuation support.

6. **Mass Care**

- a. Safe location of mass care facilities
- b. Structural safety
- c. Health and medical services
- d. Provisions for food and water
- e. Policy and procedures for pet care

7. **Health and Medical**

8. **Resources Management**

9. **Recovery Operations**

I. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

In concert with guidance already in existence, supplementing the EOP, the roles and responsibilities are outlined here for all jurisdictions and entities.

1. Local
2. Interjurisdictional Responsibilities
3. State
4. Tribal
5. Federal

J. ADMINISTRATION AND LOGISTICS

The administrative framework for WMD response operations is outlined here.

1. General support requirements
2. Availability of services
3. Mutual aid agreements
4. Emergency Management Assistance Compacts
5. Administrative policies and procedures (e.g., financial record keeping)

K. TABS

1. Acronyms.
2. Key definitions.
3. Points of contact.
4. Each of the WMD hazard agents may have a separate Tab with subcategories and subsets of information specific to each, including the identification of departments and agencies that have authority and expertise relevant to incidents involving specific agents.
 - a. Index of chemical agents.
 - b. Index of biological agents.
 - c. Index of nuclear/radiological materials.

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TAB B**FEDERAL DEPARTMENTS AND AGENCIES:
COUNTERTERRORISM-SPECIFIC ROLES****A. FEDERAL EMERGENCY MANAGEMENT AGENCY**

FEMA is the lead agency for consequence management and acts in support of the FBI in Washington, DC, and on the scene of the crisis until the U.S. Attorney General transfers the Lead Federal Agency (LFA) role to FEMA. Though State and local officials bear primary responsibility for consequence management, FEMA coordinates the Federal aspects of consequence management in the event of a terrorist act. Under Presidential Decision Directive 39, FEMA supports the overall LFA by operating as the lead agency for consequence management until the overall LFA role is transferred to FEMA and in this capacity determines when consequences are “imminent” for purposes of the Stafford Act. (Source: Federal Response Plan Terrorism Incident Annex, April 1999) Consequence management includes protecting the public health and safety and providing emergency relief to State governments, businesses, and individuals. Additional information on Federal response is given in the United States Government Interagency Domestic Terrorism Concept of Operations Plan (<http://www.fema.gov/r-n-r/conplan/>).

Web site: www.fema.gov

1. **Office of the Director/Senior Advisor to the Director for Terrorism Preparedness.** The Senior Advisor (1) keeps the FEMA Director informed of terrorism-related activities, (2) develops and implements strategies for FEMA involvement in terrorism-related activities, and (3) coordinates overall relationships with other Federal departments and agencies involved in the consequence management of terrorism-related activities.
2. **Preparedness, Training, and Exercises Directorate (PT).** This office provides planning guidance for State and local government. It also trains emergency managers, firefighters, and elected officials in consequence management through the Emergency Management Institute (EMI), National Fire Academy (NFA), and the National Emergency Training Center (NETC) in Emmitsburg, Maryland. EMI offers courses for first responders dealing with the consequences of a terrorist incident. PT conducts exercises in WMD terrorism consequence management through the Comprehensive Exercise Program. These exercises provide the opportunity to investigate the effectiveness of the Federal Response Plan (FRP) to deal with consequence management and test the ability of different levels of response to interact. PT also manages FEMA’s Terrorism Consequence Management Preparedness Assistance used by State and local governments for terrorism preparedness planning, training, and exercising.

3. **Mitigation Directorate.** This office has been assigned the responsibility of providing the verified and validated airborne and waterborne hazardous material models. The office also is responsible for developing new, technologically advanced, remote sensing capabilities needed to assess the release and dispersion of hazardous materials, both in air and water, for guiding consequence management response activities.
4. **Response and Recovery Directorate.** This office manages Federal consequence management operations in response to terrorist events. In addition, it manages the Rapid Response Information System, which inventories physical assets and equipment available to State and local officials, and provides a database of chemical and biological agents and safety precautions.
5. **U.S. Fire Administration (USFA).** This administration provides training to firefighters and other first responders through the NFA in conjunction with the Preparedness, Training, and Exercises Directorate. The NFA offers courses pertaining to preparedness and response to terrorist events.

B. DEPARTMENT OF JUSTICE (DOJ)

Web site: www.usdoj.gov

Federal Bureau of Investigation. The FBI is the lead agency for crisis management and investigation of all terrorism-related matters, including incidents involving a WMD. Within FBI's role as LFA, the FBI Federal On-Scene Commander (OSC) coordinates the overall Federal response until the Attorney General transfers the LFA role to FEMA.

Web site: www.fbi.gov

1. **FBI Domestic Terrorism/Counterterrorism Planning Section (DTCTPS).** Within the FBI Counter Terrorism Division is a specialized section containing the Domestic Terrorism Operations Unit, the Weapons of Mass Destruction Operations Unit, the Weapons of Mass Destruction Countermeasures Unit, and the Special Event Management Unit. Each of these units has specific responsibilities in investigations of crimes or allegations of crimes committed by individuals or groups in violation of the Federal terrorism and/or Weapons of Mass Destruction statutes. The DTCTPS serves as the point of contact (POC) to the FBI field offices and command structure as well as other Federal agencies in incidences of terrorism, the use or suspected use of WMD and/or the evaluation of threat credibility. If the FBI's Strategic Information and Operations Center (SIOC) is operational for exercises or actual incidents, the DTCTPS will provide staff personnel to facilitate the operation of SIOC.

During an incident, the FBI DTCTPS will coordinate the determination of the composition of the Domestic Emergency Support Teams (DEST) and/or the Foreign Emergency Support Teams (FEST). All incidents wherein a WMD is used will be coordinated by the DTCTPS WMD Operations Unit.

2. **FBI Laboratory Division.** Within the FBI's Laboratory Division reside numerous assets, which can deploy to provide assistance in a terrorism/WMD incident. The Hazardous Materials Response Unit (HMRU) personnel are highly trained and knowledgeable and are equipped to direct and assist in the collection of hazardous and/or toxic evidence in a contaminated environment. Similarly, the Evidence Response Team Unit (ERTU) is available to augment the local assets and have been trained in the collection of contaminated evidence. The Crisis Response Unit (CRU) is able to deploy to provide communications support to an incident. The Bomb Data Center (BDC) provides the baseline training to public safety bomb disposal technicians in the United States. BDC is the certification and accreditation authority for public safety agencies operating bomb squads and is in possession of equipment and staff that can be deployed to assist in the resolution of a crisis involving suspected or identified explosive devices. The Explosives Unit (EU) has experts who can assist in analyzing the construction of suspected or identified devices and recommend procedures to neutralize those items.
3. **FBI Critical Incident Response Group (CIRG).** CIRG has developed assets that are designed to facilitate the resolution of crisis incidents of any type. Notably, the Crisis Management Unit (CMU), which conducts training and exercises for the FBI and has developed the concept of the Joint Operations Center (JOC), is available to provide on-scene assistance to the incident and integrate the concept of the JOC and the Incident Command System (ICS) to create efficient management of the situation. CIRG coordinates a highly trained group of skilled negotiators who are adroit in techniques to de-escalate volatile situations. The Hostage Rescue Team (HRT) is a tactical asset, trained to function in contaminated or toxic hazard environments, that is available to assist in the management of the incident.
4. **National Domestic Preparedness Office (NDPO).** NDPO is to coordinate and facilitate all Federal WMD efforts to assist State and local emergency responders with planning, training, equipment, exercise, and health and medical issues necessary to respond to a WMD event. The NDPO's program areas encompass the six broad areas of domestic preparedness requiring coordination and assistance: Planning, Training, Exercises, Equipment, Information Sharing, and Public Health and Medical Services.

Office for State and Local Domestic Preparedness Support (OSLDPS). This office, within the Office of Justice Programs (OJP), has a State and Local Domestic Preparedness Technical Assistance Program that provides technical assistance in three areas: (1) general technical assistance; (2) State strategy technical assistance, and (3) equipment technical assistance. The purpose of this program is to provide direct assistance to State and local jurisdictions in enhancing their capacity and preparedness to respond to WMD terrorist incidents. The program goals are to:

- Enhance the ability of State and local jurisdictions to develop, plan, and implement a program for WMD preparedness; and
- Enhance the ability of State and local jurisdictions to sustain and maintain specialized equipment.

Technical assistance available from OSLDPS is provided without charge to requesting State or local jurisdiction. The following organizations are eligible for the State and Local Domestic Preparedness Technical Assistance Program:

- General technical assistance: units and agencies of State and local governments.
- State strategy technical assistance: State administrative agencies, designated by the governor, under the Fiscal Year 1999 State Domestic Preparedness Equipment Program.
- Equipment technical assistance: units and agencies of State and local governments that have received OSLDPS funding to acquire specialized equipment.

Web site: www.ojp.usdoj.gov/osldps/

1. **General Technical Assistance.** OSLDPS provides general overall assistance to State and local jurisdictions for preparedness to respond to WMD terrorist incidents. This technical assistance includes:
 - Assistance in developing and enhancing WMD response plans.
 - Assistance with exercise scenario development and evaluation.
 - Provision of WMD experts to facilitate jurisdictional working groups.
 - Provision of specialized training.
2. **State Strategy Technical Assistance.** OSLDPS provides assistance to States in meeting the needs assessment and comprehensive planning requirements under OSLDPS' Fiscal Year 1999 State Domestic Preparedness Equipment Support Program. Specifically, OSLDPS:
 - Assists States in developing their three-year statewide domestic preparedness strategy.
 - Assists States in utilizing the assessment tools for completion of the required needs and threat assessments.
3. **Equipment Technical Assistance.** OSLDPS provides training by mobile training teams on the use and maintenance of specialized WMD response equipment under OSLDPS' Domestic Preparedness Equipment Support Program. This assistance will be delivered on site in eligible jurisdictions. Specifically, OSLDPS:
 - Provides training on using, sustaining, and maintaining specialized equipment.
 - Provides training to technicians on maintenance and calibration of test equipment.
 - Provides maintenance and/or calibration of equipment.
 - Assists in refurbishing used or damaged equipment.

C. DEPARTMENT OF DEFENSE (DoD)

Web site: www.defenselink.mil

In the event of a terrorist attack or act of nature on American soil resulting in the release of chemical, biological, radiological, nuclear material or high-yield explosive (CBRNE) devices, the local law enforcement, fire, and emergency medical personnel who are first to respond may become quickly overwhelmed by the magnitude of the attack. The Department of Defense (DoD) has many unique warfighting support capabilities, both technical and operational, that could be used in support of State and local authorities, if requested by FEMA, as the Lead Federal Agency, to support and manage the consequences of such a domestic event.

Due to the increasing volatility of the threat and the time sensitivity associated with providing effective support to FEMA in domestic CBRNE incident, the Secretary of Defense appointed an Assistant to the Secretary of Defense for Civil Support (ATSD[CS]). The ATSD(CS) serves as the principal staff assistant and civilian advisor to the Secretary of Defense and Deputy Secretary of Defense for the oversight of policy, requirements, priorities, resources, and programs related to the DoD role in managing the consequences of a domestic incident involving the naturally occurring, accidental, or deliberate release of chemical, biological, radiological, nuclear material or high-yield explosives.

When requested, the DoD will provide its unique and extensive resources in accordance with the following principles. First, DoD will ensure an unequivocal chain of responsibility, authority, and accountability for its actions to ensure the American people that the military will follow the basic constructs of lawful action when an emergency occurs. Second, in the event of a catastrophic CBRNE event, DoD will always play a supporting role to the LFA in accordance with all applicable law and plans. Third, DoD support will emphasize its natural role, skills, and structures to mass mobilize and provide logistical support. Fourth, DoD will purchase equipment and provide support in areas that are largely related to its warfighting mission. Fifth, reserve component forces are DoD's forward-deployed forces for domestic consequence management.

All official requests for DoD support to CBRNE consequence management (CM) incidents are made by the LFA to the Executive Secretary of the Department of Defense. While the LFA may submit the requests for DoD assistance through other DoD channels, immediately upon receipt, any request that comes to any DoD element shall be forwarded to the Executive Secretary. In each instance the Executive Secretary will take the necessary action so that the Deputy Secretary can determine whether the incident warrants special operational management. In such instances, upon issuance of Secretary of Defense guidance to the Chairman of the Joint Chiefs of Staff (CJCS), the Joint Staff will translate the Secretary's decisions into military orders for these CBRNE-CM events, under the policy oversight of the ATSD(CS). If the Deputy Secretary of Defense determines that DoD support for a particular CBRNE-CM incident does not require special consequence management procedures, the Secretary of the Army will exercise authority as the DoD Executive Agent through normal Director of Military Support, Military Support to Civil Authorities (MSCA) procedures, with policy oversight by the ATSD(CS).

As noted above, DoD assets are tailored primarily for the larger warfighting mission overseas. But in recognition of the unique challenges of responding to a domestic CBRNE incident, the Department established a standing Joint Task Force for Civil Support (JTF-CS) headquarters at the United States Joint Forces Command, to plan for and integrate DoD's consequence management support to the LFA for events in the continental United States. The United States Pacific Command and United States Southern Command have parallel responsibilities for providing military assistance to civil authorities for States, territories, and possessions outside the continental United States. Specific units with skills applicable to a domestic consequence management role can be found in the Rapid Response Information System (RRIS) database maintained by FEMA. Capabilities include detection, decontamination, medical, and logistics.

Additionally, DoD has established 10 Weapons of Mass Destruction Civil Support Teams (WMD-CST), each composed of 22 well-trained and equipped full-time National Guard personnel. Upon Secretary of Defense certification, one WMD-CST will be stationed in each of the 10 FEMA regions around the country, ready to provide support when directed by their respective governors. Their mission is to deploy rapidly, assist local responders in determining the precise nature of an attack, provide expert technical advice, and help pave the way for the identification and arrival of follow-on military assets. By Congressional direction, DoD is in the process of establishing and training an additional 17 WMD-CSTs to support the U.S. population. Interstate agreements provide a process for the WMD-CST and other National Guard assets to be used by neighboring states. If national security requirements dictate, these units may be transferred to Federal service.

D. DEPARTMENT OF ENERGY (DOE)

Through its Office of Emergency Response, the DOE manages radiological emergency response assets that support both crisis and consequence management response in the event of an incident involving a WMD. The DOE is prepared to respond immediately to any type of radiological accident or incident with its radiological emergency response assets.* Through its Office of Nonproliferation and National Security, the DOE coordinates activities in nonproliferation, international nuclear safety, and communicated threat assessment. DOE maintains the following capabilities that support domestic terrorism preparedness and response.

Web site: www.dp.doe.gov/emergencyresponse/

1. **Aerial Measuring System (AMS).** Radiological assistance operations may require the use of aerial monitoring to quickly determine the extent and degree of the dispersal of airborne or deposited radioactivity or the location of lost or diverted radioactive materials. The AMS is an aircraft-operated radiation detection system that uses fixed-wing aircraft and helicopters equipped with state-of-the-art technology

* For facilities or materials regulated by the Nuclear Regulatory Commission (NRC), or by an NRC Agreement State, the technical response is led by NRC as the LFA (in accordance with the Federal Radiological Emergency Response Plan) and supported by DOE as needed.

- instrumentation to track, monitor, and sample airborne radioactive plumes and/or detect and measure radioactive material deposited on the ground. The AMS capabilities reside at both Nellis Air Force Base near Las Vegas, Nevada, and Andrews Air Force Base near Washington, D.C. The fixed-wing aircraft provide a rapid assessment of the contaminated area, whereas the helicopters provide a slower, more detailed and accurate analysis of the contamination.
2. **Atmospheric Release Advisory Capability (ARAC).** Radiological assistance operations may require the use of computer models to assist in estimating early phase radiological consequences of radioactive material accidentally released into the atmosphere. The ARAC is a computer-based atmospheric dispersion and deposition modeling capability operated by Lawrence Livermore National Laboratory (LLNL). The ARAC's role in an emergency begins when a nuclear, chemical, or other hazardous material is, or has the potential of being, released into the atmosphere. The ARAC's capability consists of meteorologists and other technical staff using three-dimensional computer models and real-time weather data to project the dispersion and deposition of radioactive material in the environment. The ARAC's computer output consists of graphical contour plots showing predicted estimates for instantaneous air and ground contamination levels, air immersion and ground-level exposure rates, and integrated effective dose equivalents for individuals or critical populations. The plots can be overlaid on local maps to assist emergency response officials in deciding what protective actions are needed to effectively protect people and the environment. Protective actions could impact distribution of food and water sources and include sheltering and evacuating critical population groups. The ARAC's response time is typically 30 minutes to 2 hours after notification of an incident.
 3. **Accident Response Group (ARG).** ARG is DOE's primary emergency response capability for responding to emergencies involving United States nuclear weapons. The ARG, which is managed by the DOE Albuquerque Operations Office, is composed of a cadre of approximately 300 technical and scientific experts, including senior scientific advisors, weapons engineers and technicians, experts in nuclear safety and high-explosive safety, health physicists, radiation control technicians, industrial hygienists, physical scientists, packaging and transportation specialists, and other specialists from the DOE weapons complex. ARG members will deploy with highly specialized, state-of-the-art equipment for weapons recovery and monitoring operations. The ARG deploys on military or commercial aircraft using a time-phased approach. The ARG advance elements are ready to deploy within four hours of notification. ARG advance elements focus on initial assessment and provide preliminary advice to decision makers. When the follow-on elements arrive at the emergency scene, detailed health and safety evaluations and operations are performed and weapon recovery operations are initiated.
 4. **Federal Radiological Monitoring and Assessment Center (FRMAC).** For major radiological emergencies impacting the United States, the DOE establishes a FRMAC. The center is the control point for all Federal assets involved in the

- monitoring and assessment of offsite radiological conditions. The FRMAC provides support to the affected states, coordinates Federal offsite radiological environmental monitoring and assessment activities, maintains a technical liaison with Tribal nations and State and local governments, responds to the assessment needs of the LFA, and meets the statutory responsibilities of the participating Federal agency.
5. **Nuclear Emergency Search Team (NEST).** NEST is DOE's program for dealing with the technical aspects of nuclear or radiological terrorism. A NEST consists of engineers, scientists, and other technical specialists from the DOE national laboratories and other contractors. NEST resources are configured to be quickly transported by military or commercial aircraft to worldwide locations and prepared to respond 24 hours a day using a phased and flexible approach to deploying personnel and equipment. The NEST is deployable within four hours of notification with specially trained teams and equipment to assist the FBI in handling nuclear or radiological threats. Response teams vary in size from a five person technical advisory team to a tailored deployment of dozens of searchers and scientists who can locate and then conduct or support technical operations on a suspected nuclear device. The NEST capabilities include intelligence, communications, search, assessment, access, diagnostics, render-safe operations, operations containment/damage mitigation, logistics, and health physics.
 6. **Radiological Assistance Program (RAP).** Under the RAP, the DOE provides, upon request, radiological assistance to DOE program elements, other Federal agencies, State, Tribal, and local governments, private groups, and individuals. RAP provides resources (trained personnel and equipment) to evaluate, assess, advise, and assist in the mitigation of actual or perceived radiation hazards and risks to workers, the public, and the environment. RAP is implemented on a regional basis, with regional coordination between the emergency response elements of the States, Tribes, other Federal agencies, and DOE. Each RAP Region maintains a minimum of three RAP teams, which are comprised of DOE and DOE contractor personnel, to provide radiological assistance within their region of responsibility. RAP teams consist of volunteer members who perform radiological assistance duties as part of their formal employment or as part of the terms of the contract between their employer and DOE. A fully configured team consists of seven members, to include one Team Leader, one Team Captain, four health physics survey/support personnel, and one Public Information Officer. A RAP team may deploy with two or more members depending on the potential hazards, risks, or the emergency or incident scenario. Multiple RAP teams may also be deployed to an accident if warranted by the situation.
 7. **Radiation Emergency Assistance Center/Training Site (REAC/TS).** The REAC/TS is managed by DOE's Oak Ridge Institute for Science and Education in Oak Ridge, Tennessee.. The REAC/TS maintains a 24-hour response center staffed with personnel and equipment to support medical aspects of radiological emergencies. The staff consists of physicians, nurses, paramedics, and health physicists who provide medical consultation and advice and/or direct medical support at the accident scene. The REAC/TS capabilities include assessment and treatment of

internal and external contamination, whole-body counting, radiation dose estimation, and medical and radiological triage.

8. **Communicated Threat Credibility Assessment.** DOE is the program manager for the Nuclear Assessment Program (NAP) at LLNL. The NAP is a DOE-funded asset specifically designed to provide technical, operational, and behavioral assessments of the credibility of communicated threats directed against the U.S. Government and its interests. The assessment process includes one-hour initial and four-hour final products which, when integrated by the FBI as part of its threat assessment process, can lead to a “go/no go” decision for response to a nuclear threat.

E. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

The Department of Health and Human Services (HHS), as the lead Federal agency for Emergency Support Function (ESF) #8 (health and medical services), provides coordinated Federal assistance to supplement State and local resources in response to public health and medical care needs following a major disaster or emergency. Additionally, HHS provides support during developing or potential medical situations and has the responsibility for Federal support of food, drug, and sanitation issues. Resources are furnished when State and local resources are overwhelmed and public health and/or medical assistance is requested from the Federal government.

HHS, in its primary agency role for ESF #8, coordinates the provision of Federal health and medical assistance to fulfill the requirements identified by the affected State/local authorities having jurisdiction. Included in ESF #8 is overall public health response; triage, treatment, and transportation of victims of the disaster; and evacuation of patients out of the disaster area, as needed, into a network of Military Services, Veterans Affairs, and pre-enrolled non-Federal hospitals located in the major metropolitan areas of the United States. ESF #8 utilizes resources primarily available from (1) within HHS, (2) ESF #8 support agencies, (3) the National Disaster Medical System, and (4) specific non-Federal sources (major pharmaceutical suppliers, hospital supply vendors, international disaster response organizations, and international health organizations).

Web site: www.hhs.gov

1. **Office of Emergency Preparedness (OEP).** OEP manages and coordinates Federal health, medical, and health-related social service response and recovery to Federally declared disasters under the Federal Response Plan. The major functions of OEP include:
 - a. Coordination and delivery of Department-wide emergency preparedness activities, including continuity of government, continuity of operations, and emergency assistance during disasters and other emergencies;
 - b. Coordination of the health and medical response of the Federal government, in support of State and local governments, in the aftermath of terrorist acts involving WMD; and

- c. Direction and maintenance of the medical response component of the National Disaster Medical System, including development and operational readiness capability of Disaster Medical Assistance Teams and other special teams that can be deployed as the primary medical response teams in case of disasters.
2. **Centers for Disease Control and Prevention (CDC).** CDC is the Federal agency responsible for protecting the public health of the country through prevention and control of diseases and for response to public health emergencies. CDC works with national and international agencies to eradicate or control communicable diseases and other preventable conditions. The CDC Bioterrorism Preparedness and Response Program oversees the agency's effort to prepare State and local governments to respond to acts of bioterrorism. In addition, CDC has designated emergency response personnel throughout the agency who are responsible for responding to biological, chemical, and radiological terrorism. CDC has epidemiologists trained to investigate and control outbreaks or illnesses, as well as laboratories capable of quantifying an individual's exposure to biological or chemical agents. CDC maintains the National Pharmaceutical Stockpile to respond to terrorist incidents within the United States.

Web site: www.cdc.gov

3. **National Disaster Medical System (NDMS).** NDMS is a cooperative asset-sharing partnership between HHS, DoD, the Department of Veterans Affairs (VA), FEMA, State and local governments, and the private sector. The System has three components: direct medical care, patient evacuation, and the non-Federal hospital bed system. NDMS was created as a nationwide medical response system to supplement State and local medical resources during disasters and emergencies, provide backup medical support to the military and VA health care systems during an overseas conventional conflict, and to promote development of community-based disaster medical service systems. This partnership includes DoD and VA Federal Coordinating Centers, which provide patient beds, as well as 1,990 civilian hospitals. NDMS is also comprised of over 7,000 private-sector medical and support personnel organized into many teams across the nation. These teams and other special medical teams are deployed to provide immediate medical attention to the sick and injured during disasters, when local emergency response systems become overloaded.
 - a. **Disaster Medical Assistance Team (DMAT).** A DMAT is a group of professional and paraprofessional medical personnel (supported by a cadre of logistical and administrative staff) designed to provide emergency medical care during a disaster or other event. During a WMD incident, the DMAT provides clean area medical care in the form of medical triage and patient stabilization for transport to tertiary care.
 - b. **National Medical Response Team—Weapons of Mass Destruction (NMRT-WMD).** The NMRT-WMD is a specialized response force designed to provide medical care following a nuclear, biological, and/or chemical incident. This unit

is capable of providing mass casualty decontamination, medical triage, and primary and secondary medical care to stabilize victims for transportation to tertiary care facilities in a hazardous material environment. There are four such teams geographically dispersed throughout the United States.

- c. **Disaster Mortuary Operational Response Team (DMORT).** The DMORT is a mobile team of mortuary care specialists who have the capability to respond to incidents involving fatalities from transportation accidents, natural disasters, and/or terrorist events. The team provides technical assistance and supports mortuary operations as needed for mass fatality incidents.

F. ENVIRONMENTAL PROTECTION AGENCY (EPA)

EPA is chartered to respond to WMD releases under the National Oil and Hazardous Substances Pollution Contingency Plan (NCP) regardless of the cause of the release. EPA is authorized by the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA); the Oil Pollution Act; and the Emergency Planning and Community-Right-to Know Act to support Federal, State, and local responders in counterterrorism. EPA will provide support to the FBI during crisis management in response to a terrorist incident. In its crisis management role, the EPA On-Scene Commander (OSC) may provide the FBI Special Agent in Charge (SAC) with technical advice and recommendations, scientific and technical assessments, and assistance (as needed) to State and local responders. The EPA OSC will support FEMA during consequence management for the incident. EPA carries out its response according to the FRP, ESF #10, Hazardous Materials. The OSC may request an Environmental Response Team that is funded by EPA if the terrorist incident exceeds available local and regional resources. EPA is the chair for the National Response Team (NRT).

The following EPA reference material and planning guidance is recommended for State, Tribal, and local planners:

- Thinking About Deliberate Releases: Steps Your Community Can Take, 1995 (EPA 550-F-95-001).
- Environmental Protection Agency's Role in Counterterrorism Activities, 1998 (EPA 550-F-98-014).

Web site: www.epa.gov

G. DEPARTMENT OF AGRICULTURE

It is the policy of the U.S. Department of Agriculture (USDA) to be prepared to respond swiftly in the event of national security, natural disaster, technological, and other emergencies at the national, regional, State, and county levels to provide support and comfort to the people of the United States. USDA has a major role in ensuring the safety of food for all Americans. One concern is bio-terrorism and its effect on agriculture in rural

America, namely crops in the field, animals on the hoof, and food safety issues related to food in the food chain between the slaughter house and/or processing facilities and the consumer.

Web site: www.usda.gov

1. **The Office of Crisis Planning and Management (OCPM).** This USDA office coordinates the emergency planning, preparedness, and crisis management functions and the suitability for employment investigations of the Department. It also maintains the USDA Continuity of Operations Plan (COOP).
2. **USDA State Emergency Boards (SEBs).** The SEBs have responsibility for coordinating USDA emergency activities at the State level.
3. **The Farm Service Agency.** This USDA agency develops and administers emergency plans and controls covering food processing, storage, and wholesale distribution; distribution and use of seed; and manufacture, distribution, and use of livestock and poultry feed.
4. **The Food and Nutrition Service (FNS).** This USDA agency provides food assistance in officially designated disaster areas upon request by the designated State agency. Generally, the food assistance response from FNS includes authorization of Emergency Food Stamp Program benefits and use of USDA-donated foods for emergency mass feeding and household distribution, as necessary. FNS also maintains a current inventory of USDA-donated food held in Federal, State, and commercial warehouses and provides leadership to the FRP under ESF #11, Food.
5. **Food Safety and Inspection Service.** This USDA agency inspects meat/meat products, poultry/poultry products, and egg products in slaughtering and processing plants; assists the Food and Drug Administration in the inspection of other food products; develops plans and procedures for radiological emergency response in accordance with the Federal Radiological Emergency Response Plan (FRERP); and provides support, as required, to the FRP at the national and regional levels.
6. **Natural Resources Conservation Service.** This USDA agency provides technical assistance to individuals, communities, and governments relating to proper use of land for agricultural production; provides assistance in determining the extent of damage to agricultural land and water; and provides support to the FRP under ESF #3, Public Works and Engineering.
7. **Agricultural Research Service (ARS).** This USDA agency develops and carries out all necessary research programs related to crop or livestock diseases; provides technical support for emergency programs and activities in the areas of planning, prevention, detection, treatment, and management of consequences; provides technical support for the development of guidance information on the effects of radiation, biological, and chemical agents on agriculture; develops and maintains a

- current inventory of ARS controlled laboratories that can be mobilized on short notice for emergency testing of food, feed, and water safety; and provides biological, chemical, and radiological safety support for USDA.
8. **Economic Research Service.** This USDA agency, in cooperation with other departmental agencies, analyzes the impacts of the emergency on the U.S. agricultural system, as well as on rural communities, as part of the process of developing strategies to respond to the effects of an emergency.
 9. **Rural Business-Cooperative Service.** This USDA agency, in cooperation with other government agencies at all levels, promotes economic development in affected rural areas by developing strategies that respond to the conditions created by an emergency.
 10. **Animal and Plant Health Inspection Service.** This USDA agency protects livestock, poultry, crops, biological resources, and products thereof, from diseases, pests, and hazardous agents (biological, chemical, and radiological); assesses the damage to agriculture of any such introduction; and coordinates the utilization and disposal of livestock and poultry exposed to hazardous agents.
 11. **Cooperative State Research, Education and Extension Service (CSREES).** This USDA agency coordinates use of land-grant and other cooperating State college, and university services and other relevant research institutions in carrying out all responsibilities for emergency programs. CSREES administers information and education services covering (a) farmers, other rural residents, and the food and agricultural industries on emergency needs and conditions; (b) vulnerability of crops and livestock to the effects of hazardous agents (biological, chemical, and radiological); and (c) technology for emergency agricultural production. This agency maintains a close working relationship with the news media. CSREES will provide guidance on the most efficient procedures to assure continuity and restoration of an agricultural technical information system under emergency conditions.
 12. **Rural Housing Service.** This USDA agency will assist the Department of Housing and Urban Development by providing living quarters in unoccupied rural housing in an emergency situation.
 13. **Rural Utilities Service.** This USDA agency will provide support to the FRP under ESF #12, Energy, at the national level.
 14. **Office of Inspector General (OIG).** This USDA office is the Department's principal law enforcement component and liaison with the FBI. OIG, in concert with appropriate Federal, State, and local agencies, is prepared to investigate any terrorist attacks relating to the nation's agriculture sector, to identify subjects, interview witnesses, and secure evidence in preparation for Federal prosecution. As necessary, OIG will examine USDA programs regarding counterterrorism-related matters.

15. **Forest Service (FS).** This USDA agency will prevent and control fires in rural areas in cooperation with State, local, and Tribal governments, and appropriate Federal departments and agencies. They will determine and report requirements for equipment, personnel, fuels, chemicals, and other materials needed for carrying out assigned duties. The FS will furnish personnel and equipment for search and rescue work and other emergency measures in national forests and on other lands where a temporary lead role will reduce suffering or loss of life. The FS will provide leadership to the FRP under ESF #4, Firefighting, and support to the Emergency Support Functions, as required, at the national and regional levels. FS will allocate and assign radio frequencies for use by agencies and staff offices of USDA. FS will also operate emergency radio communications systems in support of local, regional, and national firefighting teams. Lastly, the FS law enforcement officers can serve as support to OIG in major investigations of acts of terrorism against agricultural lands and products.

H. NUCLEAR REGULATORY COMMISSION

The Nuclear Regulatory Commission (NRC) is the Lead Federal Agency (in accordance with the Federal Radiological Emergency Response Plan) for facilities or materials regulated by the NRC or by an NRC Agreement State. The NRC's counterterrorism-specific role, at these facilities or material sites, is to exercise the Federal lead for radiological safety while supporting other Federal, State and local agencies in Crisis and Consequence Management.

Web site: www.nrc.gov

1. **Radiological Safety Assessment.** The NRC will provide the facility (or for materials, the user) technical advice to ensure onsite measures are taken to mitigate offsite consequences. The NRC will serve as the primary Federal source of information regarding on-site radiological conditions and off-site radiological effects. The NRC will support the technical needs of other agencies by providing descriptions of devices or facilities containing radiological materials and assessing the safety impact of terrorist actions and of proposed tactical operations of any responders. Safety assessments will be coordinated through NRC liaison at the Domestic Emergency Support Team (DEST), Strategic Information and Operations Center (SIOC), Command Post (CP), and Joint Operations Center (JOC).
2. **Protective Action Recommendations.** The licensee and State have the primary responsibility for recommending and implementing, respectively, actions to protect the public. They will, if necessary, act, without prior consultation with Federal officials, to initiate protective actions for the public and responders. The NRC will contact State and local authorities and offer advice and assistance on the technical assessment of the radiological hazard and, if requested, provide advice on protective actions for the public. The NRC will coordinate any recommendations for protective actions through NRC liaison at the CP or JOC.

3. **Responder Radiation Protection.** The NRC will assess the potential radiological hazards to any responders and coordinate with the facility radiation protection staff to ensure that personnel responding to the scene are observing the appropriate precautions.

4. **Information Coordination.** The NRC will supply other responders and government officials with timely information concerning the radiological aspects of the event. The NRC will liaison with the Joint Information Center to coordinate information concerning the Federal response.

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TAB C**HOTLINES AND ONLINE RESOURCES**

Note: The Internet sites listed here are current as of April 2001. Users of this Tab should be aware that the Internet is a changing environment. New sites are added frequently. Sites also may be relocated or discontinued. Updated information on online resources will be provided through the FEMA web site, <http://www.fema.gov>.

A. TELEPHONE HOTLINES

Domestic Preparedness Chemical/Biological HelpLine (phone: 800-368-6498, fax: 410-612-0715, Web: <http://www.nbc-prepare.org> or <http://dp.sbccom.army.mil>, e-mail: cbhelp@sbccom.apgea.army.mil) This service provides technical assistance during business hours to eligible State and local emergency responders and their organizations.

National Response Center Hotline (800-424-8802) A service that receives reports of oil, chemical, biological, and radiological releases and actual or potential domestic terrorism; provides technical assistance to emergency responders; and connects callers with appropriate Federal resources. The hotline operates 24 hours a day, 365 days a year.

Nuclear Regulatory Commission Operations Center (301-816-5100, collect calls accepted) Accepts reports of accidents involving radiological materials.

B. INTERNET REFERENCE ADDRESSES

Army Training Support Center (<http://www.atsc.army.mil>) Provides a digital library with approved training and doctrine information. Files include Field Manuals, Mission Training Plans, Soldier Training Pubs, and more.

Centers for Disease Control and Prevention (CDC) (<http://www.bt.cdc.gov>) Information regarding infectious diseases.

Soldier and Biological Chemical Command (SBCCOM) (<http://www.apgea.army.mil>) Information on chemical/biological defense equipment and chemical agents.

CBIAC: Chemical and Biological Defense Information and Analysis Center (<http://www.cbiac.apgea.army.mil>) Collects, reviews, analyzes, and summarizes chemical warfare/contraband detection (CW/CBD) information.

Chemical and Biological Warfare – Health and Safety (<http://www.ntis.gov/health/health.html>) Department of Commerce National Technical Information Service (NTIS) site has infor-

mation on chemical and biological agents, Government research, detoxification and decontamination studies, developing immunizations, and drug theories.

Chemical Emergency Preparedness and Prevention Office (CEPPO) (<http://www.epa.gov/ceppo/>) Information on the CEPPO office, upcoming events, publications, legislation and regulations, and links to outside resources. Also contains information on accident prevention and risk management planning.

Chemical Transportation Emergency Center (CHEMTREC) (<http://www.cmahq.com>). Source of technical assistance from chemical product safety specialists, emergency response coordinators, toxicologists and other hazardous materials (HazMat) specialists.

Disaster Management Central Resource (DMCR) (<http://206.39.77.2/DMCR/dmrhome.html>) Lackland Air Force Base (AFB) site with information on civilian support resources, triage of mass casualty situations, medicine and terrorism, terrorism injuries, and WMD medical library.

FEMA – Bio, Toxic Agents, and Epidemic Hazards Reference (www.fema.gov/emi/edu/biblo11.html) Emergency management-related bibliography on biological, toxic agents, and epidemic hazards.

FEMA – Emergency Management – Related Bibliography (<http://www.fema.gov/emi/edu/biblo12.htm>) Currently 35 links to various emergency management-related bibliographies. At least 10 of these relate to WMD.

Federal Radiological Emergency Response Plan (<http://www.nrc.gov/NRC/AEOD/FRERP/downld.html>)

U.S. Army Center for Health Promotion and Preventive Medicine (CHPPM) (<http://chppm-www.apgea.army.mil>) Home Page providing links especially requests for CHPPM services. Links connect to Directorates of Environmental Health Engineering, Health Promotion and Wellness, Laboratory Sciences, Occupational Health, and Toxicology.

U.S. Army Medical Research and Development (R&D) Command (<http://MRMC-www.army.mil>) Links include military infectious disease, chemical and biological links, scientific and technical reports, and Web site links.

U.S. Army Medical Research Institute of Chemical Defense (<http://chemdef.apgea.army.mil>) Provides data links to open literature for medical management of chemical casualties and assay techniques for chemical agents.

U.S. Army Medical Research Institute of Infectious Diseases (<http://www.usamriid.army.mil>) Provides links to Medical Command (MEDCOM), Ebola site, outbreak reporting site, CDC, Defense Technical Information Center (DTIC), U.S. Army, and more.

C. CROSS-REFERENCE WEB SITES

1. Federal Departments/Agencies

a. Environmental Protection Agency (EPA)

- (1) EPA's Chemical Emergency and Prevention Office (CEPPO). CEPPO provides leadership, advocacy, and assistance to prevent and prepare for chemical emergencies, respond to environmental crises, and inform the public about chemical hazards in their community. <http://www.epa.gov/ceppo/>
- (2) EPA's Environmental Response Team (ERT). The ERT is a group of skilled experts in environmental emergencies who provide on-scene assistance on a "round-the-clock" basis to deal with environmental disasters. <http://www.ert.org/>
- (3) EPA's Role in Counterterrorism. This Web site describes EPA's counterterrorism efforts and shares relevant counterterrorism information and resources. <http://www.epa.gov/ceppo/cntr-ter.html>

b. Department of Defense (DoD)

- (1) DoD's Chemical and Biological Defense Information Analysis Center. This Web site is DoD's focal point for chemical and biological warfare information. <http://www.cbiac.apgea.army.mil>
- (2) DoD's Counterproliferation: Chem Bio Defense. This is a DoD "webnetwork" on nuclear, biological, and chemical (NBC) defense. <http://www.acq.osd.mil/cp/>
- (3) DoD's Hazardous Technical Information Services (HTIS). HTIS is a service of the Defense Logistics Agency, located in Richmond, Virginia. <http://www.dscr.dla.mil/htis/htis.htm>
- (4) DoD's Medical (Army Surgeon General). This Web site contains extensive medical documents, training materials, audiovisual clips, a search engine, and links to other sites. <http://www.nbc-med.org>

c. **Department of Justice (DOJ)**

- (1) Federal Bureau of Investigation (FBI)
 - (a) Awareness of National Security Issues and Response Program (ANSIR). The ANSIR is the “public voice” of the FBI for espionage, cyber and physical infrastructure protection.
<http://www.fbi.gov/hq/nsd/ansir/ansir.htm>
 - (b) National Domestic Preparedness Office (NDPO). The NDPO Web site provides a location for information regarding the available Federal training and programs intended to enhance the capabilities of the public safety community in dealing with weapons of mass destruction (WMD). The NDPO mission, members, services, newsletter, and recommended links are contained on this site.
<http://www.ndpo.gov>
- (2) Office for State and Local Domestic Preparedness Support (OSLDPS). OSLDPS provides technical assistance to States and local jurisdictions to enhance their ability to develop, plan, and implement a program for WMD preparedness. *<http://www.ojp.usdoj.gov/osldps/>*

d. **Federal Emergency Management Agency (FEMA)**

- (1) Backgrounder: Terrorism. This FEMA Web site provides basic background information on terrorism-related issues.
<http://www.fema.gov/library/terror.htm>
- (2) Terrorism Annex to the Federal Response Plan. The site includes the full text of the Annex in PDF format that can be downloaded and reproduced.
<http://www.fema.gov/r-n-r/frp/frpterr.pdf>
- (3) United States Government Interagency Domestic Terrorism Concept of Operations Plan. The link provides the full text of the plan, which is designed to provide information to Federal, State, and local agencies on how the Federal government will respond to potential or actual terrorism threats. The document is in PDF format and can be downloaded and reproduced. *<http://www.fema.gov/r-n-r/conplan/>*
- (4) FEMA’s Rapid Response Information System (RRIS). This Web site provides descriptions and links to eight major chemical and biological agent resources. *<http://www.fema.gov/rris/reflib2.htm#chembio>*
- (5) National Fire Academy. The National Fire Academy homepage provides links to the course catalog and to specific courses and job aids relating to terrorism preparedness. *<http://www.usfa.fema.gov/nfa/>*

- (6) FEMA's Emergency Response to Terrorism Self-Study Course. This Web site provides a link to a self-study course designed to provide basic awareness training to prepare first responders to respond safely and effectively to incidents of terrorism. http://www.usfa.fema.gov/nfa/tr_ertss1.htm

e. **Department of Health and Human Services**

- (1) Office of Emergency Preparedness / National Disaster Medical System – The website provides information on current and previous disaster responses, counter terrorism programs and links to other Federal sites. <http://www.oep-ndms.dhhs.gov>
- (2) Centers for Disease Control and Prevention, Bioterrorism Preparedness and Response Program – The website provides information on bioterrorism preparedness issues, response planning and recent publications related to bioterrorism. <http://www.bt.cdc.gov>

The Centers for Disease Control and Prevention (CDC) also provide helpful (though not comprehensive) lists of chemical and biological agents that might be used by terrorists. These lists are included in "Biological and Chemical Terrorism: Strategic Plan for Preparedness and Response," in CDC's *Morbidity and Mortality Weekly Report*, April 21, 2000 (Vol. 49, No. RR-4), available at http://www.cdc.gov/mmwr/mmwr_rr.html.

- (3) Metropolitan Medical Response System (MMRS) – Although the MMRS program is locally controlled, this website provides information which will assist any local, State or Federal planner or responder working with domestic preparedness issues. <http://www.mmrs.hhs.gov>

2. **Other Resources**

- a. Critical Infrastructure Assurance Office. This Web site provides information on the Administration's current initiatives in critical infrastructure protection. <http://www.ciao.gov>
- b. DOE's Radiation-Related Web sites. This Web site is maintained by DOE's Office of Civilian Radiation Waste Management. <http://www.rw.doe.gov/>
- c. National Response Team (NRT). The NRT Web site contains information about standing NRT committees, the Regional Response Teams (RRTs), upcoming events, and NRT publications. <http://www.nrt.org/>

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TAB D**INCIDENT INDICATIONS AND FIRST RESPONDER CONCERNS**

NOTE: Extensive additional information on weapons of mass destruction (WMD) hazards and response, including information addressing first responder concerns, is available from various commercial publishers.

A. BIOLOGICAL

1. **Indications.** Indicators that a WMD incident involving biological agents has taken place may take days or weeks to manifest themselves, depending on the biological toxin or pathogen involved. The Centers for Disease Control and Prevention (CDC) recently developed the following list of epidemiologic clues that may signal a bioterrorist event:
 - a. Large number of ill persons with a similar disease or syndrome.
 - b. Large numbers of unexplained disease, syndrome, or deaths.
 - c. Unusual illness in a population.
 - d. Higher morbidity and mortality than expected with a common disease or syndrome.
 - e. Failure of a common disease to respond to usual therapy.
 - f. Single case of disease caused by an uncommon agent.
 - g. Multiple unusual or unexplained disease entities coexisting in the same patient without other explanation.
 - h. Disease with an unusual geographic or seasonal distribution.
 - i. Multiple atypical presentations of disease agents.
 - j. Similar genetic type among agents isolated from temporally or spatially distinct sources.
 - k. Unusual, atypical, genetically engineered, or antiquated strain of agent.
 - l. Endemic disease with unexplained increase in incidence.
 - m. Simultaneous clusters of similar illness in noncontiguous areas, domestic or foreign.

- n. Atypical aerosol, food, or water transmission.
 - o. Ill people presenting near the same time.
 - p. Deaths or illness among animals that precedes or accompanies illness or death in humans.
 - q. No illness in people not exposed to common ventilation systems, but illness among those people in proximity to the systems.
2. **First Responder Concerns**
- a. The most practical method of initiating widespread infection using biological agents is through aerosolization, where fine particles are sprayed over or upwind of a target where the particles may be inhaled. An aerosol may be effective for some time after delivery, since it will be deposited on clothing, equipment, and soil. When the clothing is used later, or dust is stirred up, responding personnel may be subject to “secondary” contamination.
 - b. Biological agents may be able to use portals of entry into the body other than the respiratory tract. Individuals may be infected by ingestion of contaminated food and water, or even by direct contact with the skin or mucous membranes through abraded or broken skin. Use protective clothing or commercially available Level C clothing. Protect the respiratory tract through the use of a mask with biological high-efficiency particulate air (HEPA) filters.
 - c. Exposure to biological agents, as noted above, may not be immediately apparent. Casualties may occur minutes, hours, days, or weeks after an exposure has occurred. The time required before signs and symptoms are observed is dependent on the agent used. While symptoms will be evident, often the first confirmation will come from blood tests or by other diagnostic means used by medical personnel.

B. CHEMICAL

1. **Indications.** The following may indicate a potential chemical WMD has been released. There may be one or more of these indicators present.
 - a. An unusually large or noticeable number of sick or dead wildlife. These may range from pigeons in parks to rodents near trash containers.
 - b. Lack of insect life. Shorelines, puddles, and any standing water should be checked for the presence of dead insects.
 - c. Considerable number of persons experiencing water-like blisters, weals (like bee-stings), and/or rashes.

- d. Numbers of individuals exhibiting serious health problems, ranging from nausea, excessive secretions (saliva, diarrhea, vomiting), disorientation, and difficulty breathing to convulsions and death.
 - e. Discernable pattern to the casualties. This may be “aligned” with the wind direction or related to where the weapon was released (indoors/outdoors).
 - f. Presence of unusual liquid droplets, e.g., surfaces exhibit oily droplets or film or water surfaces have an oily film (with no recent rain).
 - g. Unscheduled spraying or unusual application of spray.
 - h. Abandoned spray devices, such as chemical sprayers used by landscaping crews.
 - i. Presence of unexplained or unusual odors (where that particular scent or smell is not normally noted).
 - j. Presence of low-lying clouds or fog-like condition not compatible with the weather.
 - k. Presence of unusual metal debris—unexplained bomb/munitions material, particularly if it contains a liquid.
 - l. Explosions that disperse or dispense liquids, mists, vapors, or gas.
 - m. Explosions that seem to destroy only a package or bomb device.
 - n. Civilian panic in potential high-profile target areas (e.g., government buildings, mass transit systems, sports arenas, etc.).
 - o. Mass casualties without obvious trauma.
2. **First Responder Concerns.** The first concern must be to recognize a chemical event and protect the first responders. Unless first responders recognize the danger, they will very possibly become casualties in a chemical environment. It may not be possible to determine from the symptoms experienced by affected personnel which chemical agent has been used. Chemical agents may be combined and therefore recognition of agents involved becomes more difficult.

C. NUCLEAR/RADIOLOGICAL

1. **Indications.** Radiation is an invisible hazard. There are no initial characteristics or properties of radiation itself that are noticeable. Unless the nuclear/radiological material is marked to identify it as such, it may be some time before the hazard has been identified as radiological.
2. **First Responder Concerns.** While there is no single piece of equipment that is capable of detecting all forms of radiation, there are several different detectors for each type of radiation. Availability of this equipment, in addition to protective clothing and respiratory equipment, is of great concern to first responders.

TAB E

POTENTIAL AREAS OF VULNERABILITY

Areas at risk may be determined by several points: population, accessibility, criticality (to everyday life), economic impact, and symbolic value. The identification of such vulnerable areas should be coordinated with the Federal Bureau of Investigation (FBI).

Traffic	<p>Determine which roads/tunnels/bridges carry large volumes of traffic.</p> <p>Identify points of congestion that could impede response or place citizens in a vulnerable area.</p> <p>Note time of day and day of week this activity occurs.</p>
Trucking and Transport Activity	<p>Note location of hazardous materials (HazMat) cargo loading/unloading facilities.</p> <p>Note vulnerable areas such as weigh stations and rest areas this cargo may transit.</p>
Waterways	<p>Map pipelines and process/treatment facilities (in addition to dams already mentioned).</p> <p>Note berths and ports for cruise ships, roll-on/roll-off cargo vessels, and container ships.</p> <p>Note any international (foreign) flagged vessels (and cargo they carry) that conduct business in the area.</p> <p>NOTE: The Harbor and Port Authorities, normally involved in emergency planning, should be able to facilitate obtaining information on the type of vessels and the containers they carry.</p>
Airports	<p>Note information on carriers, flight paths, and airport layout.</p> <p>Annotate location of air traffic control (ATC) tower, runways, passenger terminal, and parking areas.</p>

Trains/Subways	<p>Note location of rails and lines, interchanges, terminals, tunnels, and cargo/passenger terminals.</p> <p>Note any HazMat material that may be transported via rail.</p>
Government Facilities	<p>Note location of Federal/State/local government offices.</p> <p>Include locations of post office, law enforcement stations, fire/rescue, town/city hall, and local mayor/governor's residences.</p> <p>Note judicial offices and courts as well.</p>
Recreation Facilities	<p>Map sports arenas, theaters, malls, and special interest group facilities.</p>
Other Facilities	<p>Map location of financial institutions and the business district.</p> <p>Make any notes on the schedule business/financial district may follow.</p> <p>Determine if shopping centers are congested at certain periods.</p>
Military Installations	<p>Note location and type of military installations.</p>
HazMat Facilities, Utilities, and Nuclear Facilities	<p>Map location of these facilities.</p>
<p>NOTE: Security and emergency personnel representing all of the above facilities should work closely with local and State personnel for planning and response.</p>	

TAB F**DEFINITIONS**

Aerosol – Fine liquid or solid particles suspended in a gas, for example, fog or smoke.

Biological Agents – Living organisms or the materials derived from them that cause disease in or harm to humans, animals, or plants or cause deterioration of material. Biological agents may be used as liquid droplets, aerosols, or dry powders.

Chemical Agent – A chemical substance that is intended to kill, seriously injure, or incapacitate people through physiological effects. Generally separated by severity of effect: lethal, blister, and incapacitating.

Consequence Management – Measures to protect public health and safety, restore essential government services, and provide emergency relief to governments, businesses, and individuals affected by the consequences of terrorism. State and local governments exercise primary authority to respond to the consequences of terrorism. (Source: FRP Terrorism Incident Annex, page TI-2, April 1999). The Federal Emergency Management Agency (FEMA) has been designated the Lead Federal Agency (LFA) for consequence management to ensure that the Federal Response Plan is adequate to respond to terrorism. Additionally, FEMA supports the Federal Bureau of Investigation (FBI) in crisis management.

Crisis Management – This is the law enforcement aspect of an incident that involves measures to identify, acquire, and plan the resources needed to anticipate, prevent, and/or resolve a threat of terrorism. The FBI is the LFA for crisis management for such an incident. (Source: FBI) During crisis management, the FBI coordinates closely with local law enforcement authorities to provide successful law enforcement resolution to the incident. The FBI also coordinates with other Federal authorities, including FEMA. (Source: FRP Terrorism Incident Annex, April 1999)

Decontamination – The process of making people, objects, or areas safe by absorbing, destroying, neutralizing, making harmless, or removing the HazMat.

Federal Response Plan (FRP) – The FRP establishes a process and structure for the systematic, coordinated, and effective delivery of Federal assistance to address the consequences of any major disaster or emergency declared under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended (42 U.S. Code [USC], et seq.). The FRP Terrorism Incident Annex defines the organizational structures used to coordinate crisis management with consequence management. (Source: FRP Terrorism Incident Annex, April 1999)

Lead Agency – The Federal department or agency assigned lead responsibility under U.S. law to manage and coordinate the Federal response in a specific functional area.

The FBI is the lead agency for crisis management and FEMA is the lead agency for consequence management. Lead agencies support the overall Lead Federal Agency (LFA) during all phases of the response.

Lead Federal Agency (LFA) – The agency designated by the President to lead and coordinate the overall Federal response is referred to as the LFA and is determined by the type of emergency. In general, an LFA establishes operational structures and procedures to assemble and work with agencies providing direct support to the LFA in order to provide an initial assessment of the situation, develop an action plan, monitor and update operational priorities, and ensure each agency exercises its concurrent and distinct authorities under U.S. law and supports the LFA in carrying out the President’s relevant policy. Specific responsibilities of an LFA vary according to the agency’s unique statutory authorities.

Mitigation – Those actions (including threat and vulnerability assessments) taken to reduce the exposure to and detrimental effects of a WMD incident.

Nonpersistent Agent – An agent that, upon release, loses its ability to cause casualties after 10 to 15 minutes. It has a high evaporation rate, is lighter than air, and will disperse rapidly. It is considered to be a short-term hazard; however, in small, unventilated areas, the agent will be more persistent.

Persistent Agent – An agent that, upon release, retains its casualty-producing effects for an extended period of time, usually anywhere from 30 minutes to several days. A persistent agent usually has a low evaporation rate and its vapor is heavier than air; therefore, its vapor cloud tends to hug the ground. It is considered to be a long-term hazard. Although inhalation hazards are still a concern, extreme caution should be taken to avoid skin contact as well.

Plume – Airborne material spreading from a particular source; the dispersal of particles, gases, vapors, and aerosols into the atmosphere.

Preparedness – Establishing the plans, training, exercises, and resources necessary to achieve readiness for all hazards, including WMD incidents.

Radiation – High-energy particles or gamma rays that are emitted by an atom as the substance undergoes radioactive decay. Particles can be either charged alpha or beta particles or neutral neutron or gamma rays.

Recovery – Recovery, in this document, includes all types of emergency actions dedicated to the continued protection of the public or promoting the resumption of normal activities in the affected area.

Response – Executing the plan and resources identified to perform those duties and services to preserve and protect life and property as well as provide services to the surviving population.

Terrorism – The unlawful use of force or violence against persons or property to intimidate or coerce a government, the civilian population, or any segment thereof, in furtherance of political or social objectives. Domestic terrorism involves groups or individuals who are based and operate entirely within the United States and U.S. territories without foreign direction and whose acts are directed at elements of the U.S. government or population.

Toxicity – A measure of the harmful effects produced by a given amount of a toxin on a living organism.

Weapons-Grade Material – Nuclear material considered most suitable for a nuclear weapon. It usually connotes uranium enriched to above 90 percent uranium-235 or plutonium with greater than about 90 percent plutonium-239.

Weapons of Mass Destruction – Any explosive, incendiary, or poison gas, bomb, grenade, rocket having a propellant charge of more than 4 ounces, or a missile having an explosive incendiary charge of more than 0.25 ounce, or mine or device similar to the above; poison gas; weapon involving a disease organism; or weapon that is designed to release radiation or radioactivity at a level dangerous to human life. (Source: 18 USC 2332a as referenced in 18 USC 921)

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TAB G

ACRONYMS

AFB	Air Force Base
AMS	Aerial Measuring System
ANSIR	Awareness of National Security Issues and Response Program
ARAC	Atmospheric Release Advisory Capability
ARG	Accident Response Group
ARS	Agriculture/Research Service
ATC	Air Traffic Control
ATSD(CS)	Assistant to the Secretary of Defense for Civil Support
BDC	Bomb Data Center
CBIAC	Chemical and Biological Defense Information and Analysis Center
CBRNE	Chemical, Biological, Radiological, Nuclear Material, or High-Yield Explosive
CDC	Centers for Disease Control and Prevention
CDRG	Catastrophic Disaster Response Group
CEPPO	Chemical Emergency Preparedness and Prevention Office
CERCLA	Comprehensive Environmental Response, Compensation, and Liability Act
CHEMTREC	Chemical Transportation Emergency Center
CHPPM	Center for Health Promotion and Preventive Medicine
CIRG	Crisis Incident Response Group
CJCS	Chairman of the Joint Chiefs of Staff
CM	Consequence Management
CMU	Crisis Management Unit (CIRG)
CRU	Crisis Response Unit
CSREES	Cooperative State Research, Education and Extension Service
CST	Civil Support Teams
CW/CBD	Chemical Warfare/Contraband Detection
DEST	Domestic Emergency Support Team
DFO	Disaster Field Office
DMAT	Disaster Medical Assistance Team
DMCR	Disaster Management Central Resource
DMORT	Disaster Mortuary Operational Response Team
DoD	Department of Defense
DOE	Department of Energy
DOJ	Department of Justice
DPP	Domestic Preparedness Program
DTCTPS	Domestic Terrorism/Counter Terrorism Planning Section (FBI HQ)
DTIC	Defense Technical Information Center

EM	Emergency Management
EMI	Emergency Management Institute
EMS	Emergency Medical Services
EOC	Emergency Operations Center
EOP	Emergency Operations Plan
EPA	Environmental Protection Agency
EPCRA	Emergency Planning and Community Right-to Know Act
ERT	Emergency Response Team (FBI)
ERT-A	Emergency Response Team – Advance Element
ERTU	Evidence Response Team Unit
ESF	Emergency Support Function
EST	Emergency Support Team
EU	Explosives Unit
FBI	Federal Bureau of Investigation
FEMA	Federal Emergency Management Agency
FEST	Foreign Emergency Support Team
FNS	Food and Nutrition Service
FRERP	Federal Radiological Emergency Response Plan
FRMAC	Federal Radiological Monitoring and Assessment Center
FRP	Federal Response Plan
FS	Forest Service
HazMat	Hazardous Materials
HHS	Department of Health and Human Services
HMRU	Hazardous Materials Response Unit
HQ	Headquarters
HRT	Hostage Rescue Team (CIRG)
HTIS	Hazardous Technical Information Services (DoD)
IC	Incident Commander
ICS	Incident Command System
IND	Improvised Nuclear Device
JIC	Joint Information Center
JOC	Joint Operations Center
JTF-CS	Joint Task Force for Civil Support
LEPC	Local Emergency Planning Committee
LFA	Lead Federal Agency
LLNL	Lawrence Livermore National Laboratory
MEDCOM	Medical Command
MMRS	Metropolitan Medical Response System

MOA	Memorandum of Agreement
MSCA	Military Support to Civil Authorities
NAP	Nuclear Assessment Program
NBC	Nuclear, Biological, and Chemical
NCP	National Oil and Hazardous Substances Pollution Contingency Plan
NDMS	National Disaster Medical System
NDPO	National Domestic Preparedness Office
NEST	Nuclear Emergency Search Team
NETC	National Emergency Training Center
NFA	National Fire Academy
NMRT	National Medical Response Team
NRC	Nuclear Regulatory Commission
NRT	National Response Team
NSC	National Security Council
NTIS	National Technical Information Service
OEP	Office of Emergency Preparedness
OFCM	Office of the Federal Coordinator for Meteorology
OIG	Office of the Inspector General (USDA)
OSC	On-Scene Commander
OSLDPS	Office for State and Local Domestic Preparedness Support
PDD	Presidential Decision Directive
PHS	Public Health Service
POC	Point of Contact
PT	Preparedness, Training, and Exercises Directorate (FEMA)
R&D	Research and Development
RAP	Radiological Assistance Program
RCRA	Research Conservation and Recovery Act
RDD	Radiological Dispersal Device
REAC/TS	Radiation Emergency Assistance Center/Training Site
ROC	Regional Operations Center
RRIS	Rapid Response Information System (FEMA)
RRT	Regional Response Team
SAC	Special Agent in Charge (FBI)
SARA	Superfund Amendments and Reauthorization Act
SBCCOM	Soldier and Biological Chemical Command (U.S. Army)
SCBA	Self-Contained Breathing Apparatus
SEB	State Emergency Board
SERC	State Emergency Response Commission
SIOC	Strategic Information and Operations Center (FBI HQ)
SLG	State and Local Guide

TERC	Tribal Emergency Response Commission
TIA	Terrorist Incident Appendix
TRIS	Toxic Release Inventory System
UC	Unified Command
UCS	Unified Command System
USC	U.S. Code
USDA	U.S. Department of Agriculture
USFA	U.S. Fire Administration
VA	Department of Veterans Affairs
WMD	Weapons of Mass Destruction
WMD-CST	WMD Civil Support Team