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## LESSON LEARNED

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### Incident Management: Establishing Procedures for Briefing Response Personnel Regularly on Complex HazMat Issues

#### SUMMARY

Incident command should establish procedures for briefing emergency personnel regularly on complex hazardous materials (HazMat) issues during an incident. This can limit confusion and ensure that emergency personnel are knowledgeable about incident conditions throughout a HazMat response.

#### DESCRIPTION

On December 24, 2009, Massachusetts General Hospital medical personnel diagnosed a 24-year-old female patient with gastrointestinal anthrax. Several weeks prior to the onset of symptoms, the patient had participated in a "drumming circle" in Durham, New Hampshire. A total of 72 people had attended the 2-hour drumming event at the University of New Hampshire (UNH) United Campus Ministry (UCM) community center. During the event, participants had played 59 drums and inadvertently caused anthrax spores on some animal-hide drums to aerosolize. The patient had then become exposed to the anthrax by ingesting the aerosolized spores.

Anthrax is an infectious disease caused by *Bacillus anthracis* bacteria. The 2009 New Hampshire incident represented the first gastrointestinal anthrax case recorded in the United States.

Between December 2009 and April 2010, 7 federal, 19 state, and 23 local agencies and organizations participated in the ensuing epidemiological investigation, prophylaxis activities, and remediation and recovery operations. New Hampshire Department of Health and Human Services (NHDHHS) personnel identified, contacted, and interviewed approximately 210 people who were at or near UNH UCM at the time of the anthrax release. This included 168 UCM visitors, 2 overnight guests, 4 workers, 28 volunteers, and 8 residents. Following this investigation, NHDHHS staff offered anthrax prophylaxis to 84 potentially exposed people. In addition, NHDHHS Division of Public Health Services, NH Department of Environmental Services, and NH National Guard 12th Civil Support Team personnel conducted environmental sampling at UNH UCM and at the patient's residence. Finally, these personnel tested approximately 30 drums to determine the possible source and level of anthrax contamination. Two drums and three UCM electrical outlets were deemed contaminated and had to be disposed of.

The anthrax detected on the drums that participants played on December 4, 2009, was a naturally occurring strain that frequently appears in soil. Animals can ingest contaminated soil and pass the anthrax bacteria to people who handle their hides.

During response operations, NHDHHS staff regularly provided accurate and specific information on complex HazMat issues to response personnel. NHDHHS and other response agencies conducted daily conference calls to discuss incident conditions and ongoing response activities. At the end of each call, NHDHHS experts reviewed and discussed specific topics, including the impact of the anthrax agent on potential victims and treatment options. In addition, NHDHHS experts updated participants on specific incident-related activities, such as laboratory testing. The after action report (AAR) notes that these 5- to 10-minute long "learning moments" limited confusion during response operations. The AAR recommends that "learning moments" be incorporated into standard operating procedures to provide emergency personnel with complex HazMat information during an incident response.

Incident command should establish procedures for briefing emergency personnel regularly on complex HazMat topics during an incident. This can limit confusion and ensure that emergency personnel are knowledgeable about incident conditions throughout a HazMat response.

### CITATIONS

Centers for Disease Control and Prevention. "Gastrointestinal Anthrax after an Animal-Hide Drumming Event - New Hampshire and Massachusetts, 2009." *Morbidity and Mortality Weekly Report*. Vol. 59, no. 28, 23 Jul 2010, pp. 872 – 877.

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