**Instructions**

This template is meant as guidance and is not intended to replace any existing plan or annex.

Sections *highlighted in gray and italicized* are instructional. Read the grayed portion indicating what information to insert, and then replace grayed sections with appropriate text.

Text typed normally with no highlighting is suggested verbiage. Your organization has the final say on all verbiage, and these sections can be reworded to suit the needs of your organization.

Contact DSHS Region 8 Preparedness & Response staff with questions or for additional guidance at 210-949-2000.
Closed Point of Dispensing (POD) Planning Template

This plan may become part of your COOP or Business Continuity Plan

PURPOSE

Facility Name will assure that in the event of a public health emergency where all occupants require antibiotic prophylaxis, Facility Name will provide all employees, employees’ immediate family members, patients, volunteers, and volunteer’s immediate family members with prophylaxis within 48 hours of exposure to save lives and prevent illness.

When confronted with a public health emergency, the resources provided by a healthcare facility must be maintained to support the infrastructure of the community. Providing prophylactic coverage will assist meeting the need of the public health response and ensure the continuity of operations at this facility.

PROCEDURE

Population to Receive Prophylaxis

Determine how many people the facility is going to provide with prophylaxis. This will be everyone you have decided to include in the plan under the ‘Policy’ heading above. Be generous in your estimates. It is better to have too much than too little. The table below can assist in your calculations.

<table>
<thead>
<tr>
<th>Population</th>
<th>Number</th>
<th>Employee Household Members (multiply employee # X 3)</th>
<th>Number</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employees</td>
<td>0</td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Volunteers</td>
<td>0</td>
<td>Volunteer Household Members (multiply volunteer # X 3)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Contractors</td>
<td>0</td>
<td>Contractor Household Members (multiply contractor # X 3)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Patients</td>
<td>0</td>
<td>Patient Household Members (optional - multiply patients # X 3)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total # coming to POD</strong> (this number will be basis of copies made)</td>
<td>0</td>
<td><strong>Total # of people served</strong> (Total of all categories + household members)</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>
Supply, Stock and Inventory

Describe the procedure for obtaining the prophylaxis from the Department of State Health Services (DSHS). All Hospitals in DSHS Region 8 are direct delivery, meaning the medication will be delivered to their facility by a DSHS contractor. All other facilities will need to arrange pickup of their medication from a central site.

Identify the person(s) who will be authorized to pick-up and sign for the medications.
The person who is authorized to pick-up the medications must present a government issued or organizational photo ID at the pickup point.

Describe who will oversee the management of the supply, stock, and inventory of the medication upon arrival to the facility. If the facility has a pharmacy, that is ideal.
Once received, the medications should be stored in a secure location (at a minimum a locked room) and kept away from extreme heat or cold within temperature range 68-77°F.

Activation of CPOD Workers & Command Staff

Describe how the POD workers and command staff will be notified of an activation and when/where to report. Explain where the EOC or Command Center for the facility will be located, if applicable.

The following roles may be necessary to operate the POD: See Texas POD Pocket Guide for more specific role descriptions. These positions are scalable depending on the size of your department. Small facilities may only need one or two people to operate the POD.

 POD Manager – oversees the entire Closed POD operation and communicates with the DSHS representative

 Greeting/Triage - triages those attending Closed POD before they enter to assess if they have any special needs and if they are ill. Any ill persons will be sent to Emergency Department or Physician immediately

 Medication Screener(s)- screens form to determine which antibiotic is appropriate
Medication Dispenser(s)- dispenses appropriate antibiotic based on screening form. Provides education and related materials.

<table>
<thead>
<tr>
<th>Position</th>
<th>Primary Name, Title and Number</th>
<th>Secondary Name, Title and Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>POD Manager</td>
<td></td>
<td></td>
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<tr>
<td>Greeter/Triage</td>
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<tr>
<td>Medication Screener(s)</td>
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<tr>
<td>Medication Dispenser(s)</td>
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<tr>
<td>Security Officer</td>
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</tbody>
</table>

Notification

How will the message be relayed to all people who will be served at the facility (mass notification system, P.A. system, email, phone tree, internal website, etc.). Who will be responsible for this communication?

Point of Dispensing Design & Operations

The set-up may include the following stations: can be combined depending on the size and needs of your organization

1. Check-In/Triage
2. Form Completion
3. Screening
4. Dispensing

Identify where stations are to be set up. You may also include a layout of the POD with the number of tables and chairs needed for set-up and use arrows to indicate how people will flow through the POD stations. A POD layout example is available in attachments.

Describe how the medication will be provided to the Closed POD from the pharmacy (or wherever it is being managed). Who is responsible for the movement of the medication? List where POD supplies are located if the POD needs to be set up.
Closed POD Documents Checklist

<table>
<thead>
<tr>
<th>Documents</th>
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</thead>
<tbody>
<tr>
<td>Your Dispensing Plan</td>
</tr>
<tr>
<td>Closed POD Incident Command Organizational Chart</td>
</tr>
<tr>
<td>Closed POD Suggested Supplies Checklist (attachment 9)</td>
</tr>
<tr>
<td>Closed POD Site Layout</td>
</tr>
<tr>
<td>Closed POD Event Summary Form &amp; Inventory Tracking Sheet (attachments 7 &amp; 8)</td>
</tr>
<tr>
<td>Medical Screening Form (attachment 1)</td>
</tr>
<tr>
<td>Doxycycline &amp; Ciprofloxacin Dispensing Algorithm (attachment 2)</td>
</tr>
<tr>
<td>Doxycycline &amp; Ciprofloxacin Information Sheet (attachment 3)</td>
</tr>
<tr>
<td>Doxycycline Compounding Instructions (attachment 4)</td>
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<tr>
<td>Ciprofloxacin Compounding Instructions (attachment 5)</td>
</tr>
<tr>
<td>CDC Anthrax Fact Sheet (Attachment 6)</td>
</tr>
</tbody>
</table>

If a person is ill, they should not be allowed to enter the POD and will instead be directed to seek medical evaluation and treatment from Check-In/Triage.

Each person will complete a medical screening form (attachment 1) and move forward to screening. The screener will determine which medication to give each member of the household based on how the form is completed using an algorithm (attachment 2). Medication and education sheets (attachments 3 & 6) will be distributed at the dispensing station, then the person will be directed to the exit. Tell everyone receiving medication to take their first dose as soon as possible and provide access to a beverage.

**In-Patient Population Prophylaxis**

If there is a threat to the in-patient population of the facility, the Charge Nurse assigned to the patient care areas will:

1. Ensure a screening form is complete for each patient on their unit
2. Pick up prophylaxis for each patient on the unit after they pick up prophylaxis for themselves and their immediate family
3. Review the patient’s current medications for any duplicate therapy or contraindications before administration of prophylaxis
4. Contact the patient’s primary physician if the prophylaxis is contraindicated or the patient is already on a similar medication to the prophylaxis
**Deactivation**

When dispensing operations are complete, the Closed POD Coordinator is responsible to return the completed Closed POD Event Summary Form (attachment 7), all completed Medical Screening Forms (attachment 1), and any unused medication to the Public Health entity that originally provided the medication.

**Closed POD Training**

Closed POD Coordinators and backups should complete training. *Include anyone else you will require to complete Closed POD training and how often they must attend refresher training.* Use the link [https://tx.train.org](https://tx.train.org) and follow instructions to set up an account, then complete courses 1059349 and 1013282.

Additional resources:

[https://www.cdc.gov/cpr/readiness/healthcare/closedPODtoolkit.htm](https://www.cdc.gov/cpr/readiness/healthcare/closedPODtoolkit.htm)

**Dispensing of Doxycycline, Ciprofloxacin and Amoxicillin for Anthrax Prophylaxis**
List of Attachments

Inclusion Mandatory:
1. Medical Screening form
2. Screening Algorithm
3. Doxycycline & Ciprofloxacin Information Sheet (English & Spanish)
4. Doxycycline Compounding Instructions
5. Ciprofloxacin Compounding Instructions
6. Anthrax Fact Sheet (English & Spanish)
7. Closed POD Event Summary Form

Inclusion Optional:
8. Inventory Tracking Sheet
9. Suggested POD Supply Checklist
10. Example POD Organizational Chart
11. Sample POD Layout
## ATTACHMENT 1

**Texas Health and Human Services**

**Receiving Medication:** (write full names and include yourself)

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</table>

**Your Address:**

**Your Phone Number:**

**FOR OFFICE USE ONLY**

- **Date and Time:**
- **POD:**

**Circle correct medication.**

- DOXY
- CIPRO
- AMOXI

**Total: Total: Total:**

**Total Dispensed:**

**FOR OFFICE USE ONLY**
Doxycycline & Ciproflaxin Information Sheet

This medicine is being given to you today to protect you or your family members from infection-causing bacteria. If you or any of your family members are sick, please seek medical attention quickly.

HOW MUCH TO TAKE
Everyone should take ONE dose with food each morning when you wake-up, and ONE dose with food each night before you go to bed. DO NOT take with Iron, vitamins or dairy products. If you miss a dose, take the missed dose as soon as possible. If it is almost time for your regular dose, wait until then to take your medicine and skip the missed dose. DO NOT take two doses at the same time. Continue taking ONE pill each morning and ONE pill each night until your supply runs out. If you stop taking this medicine too soon, you may become sick.

- Parents use the special dosing instructions given to you for each child. Remember, one child may have been given a different medicine or different dosing instructions than the other. Be sure to give each child the medicine and amount on that child’s instruction sheet.
- **Women who are breast feeding** and were given Ciproflaxin should not give breast milk to your baby until you have finished taking your medicine and your doctor has cleared you to give your baby breast milk again.

Do not take the following within 2 hours of taking your medicine:
- Antacids such as Maalox or Mylanta
- Calcium, Zinc or Iron supplements
- Cholestyramine (Questran) or Colestipol (Colestid)

SERIOUS SIDE EFFECTS
Seek medical attention right away if you are having any or these serious side effects:
- Shortness of breath or trouble breathing
- Swelling of the face, lips or throat
- Seizures

WARNING
Do **NOT** take this medicine if you have had a severe allergic reaction to:
- **Quinolones** such as: Ciprofloxacin (Cipro), Nalidixic acid (NegGram), Gatifloxacin (Tequin), or Levafloxacin (Levaquin)
- **Tetracyclines** such as: Doxycycline and Minocycline
- **Penicillins or Cephalosporins** such as: Amoxicillin (Amoxil), Augmentin, Cephalexin (Keflex), or Cefaclor (Ceclor)

If you are allergic to any of the above, contact your health care provider for further assistance.

If you have any medical questions or problems, contact your health care provider.
Tune to ____________________ on your radio; or ____________________ on your TV for continuing information.
La medicina que se le está dando hoy es para proteger a Ud. o ha su familia de las bacterias que causan infección. Si Ud. o alguno de su familia está enfermo, por favor busque atención médica rápidamente.

CUANTA CANTIDAD DEBE TOMAR
Todos deben de tomar UNA dosis con comida al despertar, y UNA dosis con comida cada noche antes de dormir. NO LA TOME con hierro, vitaminas, o productos lácteos. Si se le olvida tomar una dosis, tome la dosis olvidada lo mas pronto posible. Si es casi la hora de su dosis regular, espere hasta entonces para tomar el medicamento y omita la dosis olvidada. NO TOME dos dosis al mismo tiempo. Continúe tomando UNA píldora cada mañana y una píldora cada noche hasta que su surtido se agote. Si deja de tomar esta medicina demasiado pronto, Ud. se puede enfermar.

• Padres- Sigan las instrucciones especiales de dosis que se les dio para cada niño/a. Recuerde, un niño/a puede haber recibido un medicamento diferente o diferente instrucciones de dosificación que el otro. Asegúrese de darle a cada niño/a el medicamento y la cantidad que figura en la hoja de instrucciones de cada niño/a.

• Las mujeres que están amamantando y se les dio Ciproflaxin no deben de amamantar a su bebe hasta que haya terminado de tomar su medicamento y su médico le ha autorizado dar pecho de nuevo.

No tome lo siguiente dentro de 2 horas de tomar su medicamento:
• Antiácidos como Maalox o Mylanta
• Calcio, Zinc o suplementos de Hierro
• Cholestyramine (Questran) o Colestipol (Colestid)

EFECTOS SECUNDARIOS SERIOS
Busque atención médica inmediatamente si tiene cualquiera de estos efectos secundarios serios:
• Brevedad de la respiración o dificultad para respirar
• Hinchazón de la cara, labios, o garganta
• Convulsiones

AVISO!
NO TOME este medicamento si ha tenido una reacción alérgica severa ha:
• Quinolonas como: Ciprofloxacin (Cipro), Nalidixic acid (NegGram), Gatifloxacin (Tequin), o Levofloxacin (Levaquin)
• Tetraciclinas como: Doxycycline y Minocycline
• Penecilinas o Cefalosporinas como: Amoxicillin (Amoxil), Augmentin, Cephalexin (Keflex), or Cefaclor (Ceclor)

Si es alérgico a cualquiera de los medicamentos mencionados anteriormente, póngase en contacto con su proveedor de salud para obtener más ayuda.

Si acaso tiene alguna pregunta médica o problemas médicos, póngase en contacto con su proveedor de salud.

Sintonice su radio a ____________________ o su televisión a ________________ para información continua.
This card explains how to prepare emergency dosages of Doxycycline for infants and children exposed to anthrax.

Once you have been notified by your federal, state, or local authorities that you have been exposed to anthrax, it may be necessary to prepare emergency doses of doxycycline for infants and children using doxycycline tablets.

You will need:

- One (1) 100 milligram (mg) doxycycline tablet
- Metal teaspoon
- Measuring spoons [1 teaspoon (tsp); and ½ teaspoon (tsp)]
  (NOTE measuring spoons are preferred, however if not available, use the metal spoon to grind, measure and give the medicine)
- 1 small bowl
- One of these foods or drinks
  - chocolate syrup
  - maple syrup
  - strawberry jam
  - apple juice

Directions:

3. Put one (1) 100-mg doxycycline tablet into a small bowl. Crush the tablet with the back of the metal spoon until no large pieces are seen.

4. Add four (4) level teaspoons (tsp) of a food or drink to the crushed doxycycline. Stir them together until the drug looks evenly mixed with the food or drink.

How Much of the Doxycycline Mixture to Give a Child

The number of teaspoons of the doxycycline mixture to give a child depends on the child’s weight. If child’s weight is unknown, weigh child before giving the first dose. The chart tells you how much to give a child for one dose. You should give a child two doses each day (one in the morning and one in the afternoon).

<table>
<thead>
<tr>
<th>If the child weighs</th>
<th>Give the child</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 – 11.5 pounds (lbs.)</td>
<td>One half (1/2) teaspoon (tsp) of the doxycycline mixture</td>
</tr>
<tr>
<td>11.5 – 22.5 (lbs.)</td>
<td>One (1) teaspoon of the doxycycline mixture</td>
</tr>
<tr>
<td>22.5 – 33.5 (lbs.)</td>
<td>One and one half (1 ½) teaspoons of the doxycycline mixture</td>
</tr>
<tr>
<td>33.5 – 45 (lbs.)</td>
<td>Two (2) teaspoons of the doxycycline mixture</td>
</tr>
<tr>
<td>45 – 55 (lbs.)</td>
<td>Two and one half (2 ½) teaspoons of the doxycycline mixture</td>
</tr>
<tr>
<td>55 – 65 (lbs.)</td>
<td>Three (3) teaspoons of the doxycycline mixture</td>
</tr>
<tr>
<td>65 – 77 (lbs.)</td>
<td>Three and one half (3 ½) teaspoons of the doxycycline mixture</td>
</tr>
<tr>
<td>77 – 88 (lbs.)</td>
<td>Four (4) teaspoons of the doxycycline mixture</td>
</tr>
</tbody>
</table>

Children heavier than 88 pounds who are exposed to anthrax should take one (1) 100-mg tablet of doxycycline two times a day (at the same time each day if possible) for 60 days. If the child cannot swallow tablets, use the directions for preparing a mixture and give 4 teaspoons twice a day.

How already prepared Doxycycline mixture should be stored

- Doxycycline mixed with any of the recommended foods and drinks will keep for at least 24 hours.
- Store the mixture in a covered container and refrigerate.
- Mixtures made with juice can be stored at room temperature.
- Prepare the doxycycline mixture daily; unused portions should be thrown away.
This card explains how to prepare emergency dosages of **Ciprofloxacin** for infants and children exposed to anthrax.

Once you have been notified by your federal, state, or local authorities that you have been exposed to anthrax, it may be necessary to prepare emergency doses of ciprofloxacin for infants and children using ciprofloxacin tablets.

**You will need:**
- One (1) 500 milligram (mg) ciprofloxacin tablet
- Metal teaspoon
- Measuring spoons [1 teaspoon (tsp); and ½ teaspoon (tsp)]
  (NOTE measuring spoons are preferred, however if not available, use the metal spoon to grind, measure and give the medicine)
- 1 small bowl
- Water
- One of these foods or drinks
  - chocolate syrup
  - maple syrup
  - strawberry jam
  - apple juice

**Directions:**
1. Put one (1) 500-mg ciprofloxacin tablet into a small bowl. Add two (2) level teaspoons (tsp) of water. Stir the water and tablet for 1 minute. Crush the tablet with the back of the metal spoon until no large pieces are seen.

2. Add four (4) level teaspoons (tsp) of a food or drink to the ciprofloxacin and water mixture. Stir them together until the drug looks evenly mixed with the food or drink.

---

**How Much of the Ciprofloxacin Mixture to Give a Child**

The number of teaspoons of the ciprofloxacin mixture to give a child depends on the child’s weight. **If child’s weight is unknown, weigh child before giving the first dose.** The chart tells you how much to give a child for one dose. You should give child two doses each day (one in the morning and one in the evening).

<table>
<thead>
<tr>
<th>If the child weighs</th>
<th>Give the child</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 - 6.5 pounds (lbs.)</td>
<td>One half (1/2) teaspoon (tsp) of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>7 - 12.5 (lbs.)</td>
<td>One (1) teaspoon of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>13 - 18.5 (lbs.)</td>
<td>One and one half (1 ½) teaspoons of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>19 - 24.5 (lbs.)</td>
<td>Two (2) teaspoons of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>25 - 30.5 (lbs.)</td>
<td>Two and one half (2 ½) teaspoons of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>31 - 37 (lbs.)</td>
<td>Three (3) teaspoons of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>37.5 - 43 (lbs.)</td>
<td>Three and one half (3 ½) teaspoons of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>43 - 49 (lbs.)</td>
<td>Four (4) teaspoons of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>49.5 - 55 (lbs.)</td>
<td>Four and one half (4 ½) teaspoons of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>55.5 - 61.5 (lbs.)</td>
<td>Five (5) teaspoons of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>62 - 67.5 (lbs.)</td>
<td>Five and one half (5 ½) teaspoons of the ciprofloxacin mixture</td>
</tr>
<tr>
<td>68 - 73.5 (lbs.)</td>
<td>Six (6) teaspoons of the ciprofloxacin mixture</td>
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</table>

Children heavier than 73.5 pounds who are exposed to anthrax should take one (1) 500-mg tablet of ciprofloxacin two times a day (at the same time each day if possible) for 60 days.

**How already prepared Ciprofloxacin mixture should be stored**

- Ciprofloxacin mixed with any of the recommended foods and drinks will keep for at least 24 hours.
- Store the mixture in a covered container and refrigerate.
- Mixtures made with juice can be stored at room temperatures.
FACT SHEET

Anthrax: What You Need to Know

What Is Anthrax?
Anthrax is a serious disease caused by *Bacillus anthracis*, a bacterium that forms spores. A bacterium is a very small organism made up of one cell. Many bacteria can cause disease. A spore is a cell that is dormant (asleep) but may come to life with the right conditions.

There are three types of anthrax:

- **skin (cutaneous)**
- **lungs (inhalation)**
- **digestive (gastrointestinal)**

How Do You Get It?
Anthrax is not known to spread from one person to another.

**Anthrax from animals.** Humans can become infected with anthrax by handling products from infected animals or by breathing in anthrax spores from infected animal products (like wool, for example). People also can become infected with gastrointestinal anthrax by eating undercooked meat from infected animals.

**Anthrax as a weapon.** Anthrax also can be used as a weapon. This happened in the United States in 2001. Anthrax was deliberately spread through the postal system by sending letters with powder containing anthrax. This caused 22 cases of anthrax infection.

How Dangerous Is Anthrax?
The Centers for Disease Control and Prevention classifies agents with recognized bioterrorism potential into three priority areas (A, B and C). Anthrax is classified as a Category A agent. Category A agents are those that:

- pose the greatest possible threat for a bad effect on public health
- may spread across a large area or need public awareness
- need a great deal of planning to protect the public’s health

In most cases, early treatment with antibiotics can cure cutaneous anthrax. Even if untreated, 80 percent of people who become infected with cutaneous anthrax do not die. Gastrointestinal anthrax is more serious because between one-fourth and more than half of cases lead to death. Inhalation anthrax is much more severe. In 2001, about half of the cases of inhalation anthrax ended in death.

What Are the Symptoms?
The symptoms (warning signs) of anthrax are different depending on the type of the disease:

- **Cutaneous:** The first symptom is a small sore that develops into a blister. The blister then develops into a skin ulcer with a black area in the center. The sore, blister and ulcer do not hurt.
- **Gastrointestinal:** The first symptoms are nausea, loss of appetite, bloody diarrhea, and fever, followed by bad stomach pain.
**Anthrax: What You Need To Know**  
(continued from previous page)

- Inhalation: The first symptoms of inhalation anthrax are like cold or flu symptoms and can include a sore throat, mild fever and muscle aches. Later symptoms include cough, chest discomfort, shortness of breath, tiredness and muscle aches. (Caution: Do not assume that just because a person has cold or flu symptoms that they have inhalation anthrax.)

**How Soon Do Infected People Get Sick?**
Symptoms can appear within 7 days of coming in contact with the bacterium for all three types of anthrax. For inhalation anthrax, symptoms can appear within a week or can take up to 42 days to appear.

**How Is Anthrax Treated?**
Antibiotics are used to treat all three types of anthrax. Early identification and treatment are important.

**Prevention after exposure.** Treatment is different for a person who is exposed to anthrax, but is not yet sick. Health-care providers will use antibiotics (such as ciprofloxacin, levofloxacin, doxycycline, or penicillin) combined with the anthrax vaccine to prevent anthrax infection.

**Treatment after infection.** Treatment is usually a 60-day course of antibiotics. Success depends on the type of anthrax and how soon treatment begins.

**Can Anthrax Be Prevented?**

**Vaccination.** There is a vaccine to prevent anthrax, but it is not yet available for the general public. Anyone who may be exposed to anthrax, including certain members of the U.S. armed forces, laboratory workers, and workers who may enter or re-enter contaminated areas, may get the vaccine. Also, in the event of an attack using anthrax as a weapon, people exposed would get the vaccine.

**What Should I Do if I Think I Have Anthrax?**
If you are showing symptoms of anthrax infection, call your health-care provider right away.

**What Should I Do if I Think I Have Been Exposed to Anthrax?**
Contact local law enforcement immediately if you think that you may have been exposed to anthrax. This includes being exposed to a suspicious package or envelope that contains powder.

**What Is CDC Doing To Prepare For a Possible Anthrax Attack?**
CDC is working with state and local health authorities to prepare for an anthrax attack. Activities include:
- Developing plans and procedures to respond to an attack using anthrax.
- Training and equipping emergency response teams to help state and local governments control infection, gather samples, and perform tests. Educating health-care providers, media, and the public about what to do in the event of an attack.
- Working closely with health departments, veterinarians, and laboratories to watch for suspected cases of anthrax. Developing a national electronic database to track potential cases of anthrax.
- Ensuring that there are enough safe laboratories for quickly testing of suspected anthrax cases.
- Working with hospitals, laboratories, emergency response teams, and health-care providers to make sure they have the supplies they need in case of an attack.
Ántrax: Lo Que Debe Saber

¿Qué es el ántrax?
El ántrax es una grave enfermedad causada por una bacteria que forma esporas llamada Bacillus anthracis. Una bacteria es un organismo muy pequeño compuesto de una célula. Muchas bacterias pueden causar enfermedad. Una espora es una célula que está inactiva (dormida) pero que puede activarse bajo las condiciones adecuadas.

Existen tres tipos de ántrax:
- de la piel (cutáneo)
- pulmonar (inhalación)
- digestivo (gastrointestinal)

¿Cómo puede contraer el ántrax?
Hasta ahora no se sabe de ningún caso en el que una persona le haya transmitido el ántrax a otra persona.

Ántrax de los animales. Los seres humanos pueden infectarse con ántrax al tocar productos de animales infectados con ántrax o al respirar las esporas del ántrax de productos animales infectados (como la lana, por ejemplo). Las personas también pueden infectarse con el ántrax gastrointestinal al comer carne poco cocida proveniente de animales infectados.

El ántrax como arma. El ántrax también puede utilizarse como arma. Esto ocurrió en los Estados Unidos en el 2001, cuando el ántrax fue propagado en forma deliberada por medio del envío de cartas con polvo que contenía ántrax. Esto causó 22 casos de infección por ántrax.

¿Qué tan peligroso es el ántrax?
Los Centros para el Control y la Prevención de Enfermedades clasifican los agentes en tres áreas prioritarias (A, B y C) de acuerdo con su potencial reconocido de bioterrorismo. El ántrax está clasificado como un agente de Categoría A. Los agentes de Categoría A son aquellos que:
- representan la mayor amenaza posible de causar efectos negativos en la salud pública
- pueden transmitirse a grandes áreas o necesitan que el público tome conciencia de esa amenaza
- requieren mucha planeación para proteger la salud pública

En la mayoría de los casos, el tratamiento a tiempo con antibióticos puede curar el ántrax cutáneo. Aún si no se trata, el 80 por ciento de las personas infectadas con ántrax cutáneo no muere. El ántrax gastrointestinal es más grave porque entre un cuarto y más de la mitad de los casos provocan la muerte de la persona. El ántrax por inhalación es mucho más grave. En el 2001, cerca de la mitad de casos de ántrax por inhalación provocaron la muerte de la persona.

¿Cuáles son los síntomas?
Los síntomas (signos de advertencia) del ántrax son diferentes de acuerdo con el tipo de la enfermedad:
- Cutáneo: El primer síntoma es una pequeña llaga que se convierte en ampolla. La ampolla luego se convierte en una úlcera de la piel que tiene un área negra en el centro. La llaga, la ampolla y la úlcera no duelen.
Ántrax: Lo Que Debe Saber
(continuación de la página anterior)

- Gastrointestinal: Los primeros síntomas son náusea, pérdida del apetito, diarrea con sangre y fiebre, seguidos de fuertes dolores estomacales.
- Inhalación: Los primeros síntomas del ántrax por inhalación son parecidos a los del resfriado o gripe y pueden incluir dolor de garganta, fiebre leve y dolor muscular. Los síntomas más adelante pueden incluir tos, malestar en el pecho, dificultad para respirar, cansancio y dolor muscular. (Advertencia: No suponga que sólo porque una persona tiene los síntomas de un resfriado o de la gripe pueda tener ántrax por inhalación).

¿Qué tan rápido se enferma la persona infectada?
Los síntomas pueden presentarse para todos los tres tipos de ántrax dentro de los 7 días siguientes a la entrada en contacto con la bacteria. Los síntomas del ántrax por inhalación pueden presentarse en una semana o pueden demorar hasta 42 días en aparecer.

¿Cómo se trata el ántrax?
Se utilizan antibióticos para tratar todos los tres tipos de ántrax. Es importante que la enfermedad sea detectada y tratada con prontitud.

Medidas de prevención después de la exposición. El tratamiento es diferente para una persona que ha estado expuesta al ántrax pero que todavía no está enferma. Los profesionales de la salud utilizarán antibióticos (como ciprofloxacina, doxiciclina o penicilina) en combinación con la vacuna contra el ántrax para prevenir la infección.

El tratamiento después de la infección. El tratamiento consiste usualmente de un régimen de 60 días de antibióticos. El éxito del tratamiento depende del tipo de ántrax causante de la infección y de la prontitud con la que se inicie el tratamiento.

¿Puede prevenirse el ántrax?
Vacunación. Existe una vacuna para prevenir el ántrax pero todavía no está disponible para el público en general. Toda persona que pueda estar expuesta al ántrax, entre ellas ciertos miembros de las fuerzas armadas de los Estados Unidos, trabajadores de laboratorio y empleados que pueden entrar o reingresar a áreas contaminadas, puede recibir la vacuna. También, en caso de un ataque con ántrax, las personas expuestas pueden recibir la vacuna.

¿Qué debo hacer si creo tener ántrax?
Si está presentando los síntomas de una infección por ántrax, llame de inmediato a su proveedor de atención médica.

¿Qué debo hacer si creo tener ántrax?
Comuníquese de inmediato con las autoridades locales si cree que puede haber estado expuesto al ántrax. Esto incluye haber estado expuesto a paquetes o sobres sospechosos que contengan polvos o talco.

¿Qué están haciendo los CDC para prepararse frente a un posible ataque con ántrax?
Los CDC están trabajando con las autoridades de salud locales y estatales para prepararse frente a un ataque con ántrax. Estas actividades incluyen, entre otras:

- Elaborar planes y procedimientos para responder ante un ataque con ántrax.
- Capacitar y equipar los grupos de emergencia de reacción rápida para ayudarles a los gobiernos locales y estatales a controlar la infección, recoger muestras y realizar pruebas. Educar a los proveedores de atención médica, a los medios de comunicación y al público en general de lo que se debe hacer ante la eventualidad de un ataque.
Áñtrax: Lo Que Debe Saber
(continuación de la página anterior)

- Trabajar más estrechamente con los departamentos de salud, los veterinarios y los laboratorios para estar atentos a la presencia de casos sospechosos de ántrax. Elaborar una base de datos electrónica a nivel nacional para hacerle seguimiento a casos potenciales de ántrax.
- Asegurar que hay suficientes laboratorios de seguridad para la rápida realización de pruebas de casos sospechosos de ántrax.
- Trabajar con hospitales, laboratorios, equipos de emergencia de reacción rápida y proveedores de atención médica para asegurar que tengan los suministros necesarios en el caso de un ataque.

Para más información, visite [www.bt.cdc.gov/agent/anthrax/](http://www.bt.cdc.gov/agent/anthrax/) o llame a la línea de ayuda de los CDC para información al público al (888) 246-2857 (español), (888) 246-2675 (inglés), o (866) 874-2646 (TTY).
Closed POD Event Summary Form

Complete this document and return to your local or regional health department after deactivating your Closed POD site.

**Agency Information**
Name of Organization: ______________________________________________
Address: _________________________________________________________
_________________________________________________________________

We screened:

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<td>Other:</td>
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We dispensed the following numbers of antibiotics:

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Client/Services Information: *(if applicable)*

Our clients are: *(Check as many as apply.)*

- □ Homebound
- □ Living in a Residential Facility (Name: _______________________________)
- □ Living in a Skilled Nursing or Similar Facility (Name: ______________________)
- □ Disabled
- □ Seniors
- □ Clients with Specific Language Needs
- □ Homeless
- □ Estimated number of clients *only* speaking a language other than English: __________

Fax completed form to DSHS Region 8 Office: 210-949-2054
# ATTACHMENT 8

Inventory Tracking Sheet

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<th>Quantity Shipped (Units)</th>
<th>Quantity Received by POD (Units)</th>
<th>Quantity Dispensed (Units)</th>
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Example Organizational Chart
These can be produced in Microsoft PowerPoint, Microsoft Visio, or Microsoft Word.
Sample POD Layout with POD flow (arrows)