One of the larger preparedness programs at DSNS is the Cities Readiness Initiative (CRI), a multi-agency Federal effort designed to increase readiness in the nations largest cities. DSNS also manages a program to assist states in the event of a nerve agent attack, when patients may need to be treated within minutes. The CHEMPACK project places federally-owned nerve agent antidotes at local sites to support local response to a nerve agent attack.

The decision to deploy SNS assets may be based on:

- Local health care systems becoming overwhelmed in the event of a terrorist attack, natural disaster or large scale public-health emergency
- Evidence showing overt release of an agent that might affect public health
- Unusual morbidity or mortality based on surveillance

During an emergency, a state determines if there is a need for SNS assets, at the local level, and then requests federal assistance. Discussions between state and federal organizations are initiated, and a decision is made at the federal level to deploy assets. DSNS works with state and local health officials to determine what assets are needed. The material is shipped to the state receiving site where state and local authorities manage distribution of assets.

Stockpile assets have been used to increase preparedness for national security events, such as political conventions and elevated terror threat levels. Assets have also been deployed to respond to the terrorist attacks on September 11, 2001, and to the anthrax attacks that followed the same year.

DSNS responded to the devastation caused by Hurricanes Katrina, Rita, and Wilma by sending personnel, pharmaceuticals, medical supplies, and beds. TARU personnel were on the ground in Louisiana the night before Hurricane Katrina hit, and supplies began arriving less than an hour after landfall. More than $38 million worth of supplies and support were deployed for Hurricane Katrina alone.

1600 Clifton Rd NE
Mailstop D-08
Atlanta, GA 30333
(404) 639-0324

Helping State and Local Jurisdictions Prepare for a National Emergency

Division of Strategic National Stockpile

Deliver critical medical assets to the site of a national emergency

DIVISION OF STRATEGIC NATIONAL STOCKPILE

CDC's ***Strategic National Stockpile*** *(SNS)* is a national repository of antibiotics, chemical antidotes, antitoxins, vaccines, and other life-saving medications. During a public health emergency, state and local public health systems may be overwhelmed. The SNS is designed to supplement and re-supply state and local public health agencies in the event of such an emergency, anywhere and at anytime, within the United States or its territories. The Division of Strategic National Stockpile (DSNS) also provides technical assistance to local officials ensuring that capacity is developed at federal, state, and local levels to receive, store, stage, distribute and dispense SNS assets.

The SNS is organized for flexible response. The first line of support lies with 12-hour Push Packages - so called because they can be delivered anywhere in the U.S. or its territories within 12 hours of the federal decision to deploy. These are 50-ton caches of pharmaceuticals, antidotes, and medical supplies designed to provide rapid delivery of a broad spectrum of assets for an ill-defined threat. The 12-hour Push Packages are positioned in strategically located secure warehouses, ready for immediate deployment .

If the nature of a public health emergency is well-defined, DSNS can ship Managed Inventory (MI) supplies. MI is maintained at facilities managed by DSNS or the manufacturer. This arrangement provides the necessary access and resources to customize and provide pharmaceuticals, supplies, and products specific to the suspected threat or confirmed need. Supplies will be shipped to begin arriving within 24 to 36 hours of the federal decision to deploy. If medical supplies are needed that are not part of the standard SNS inventory, DSNS can negotiate the rapid purchase the needed supplies.

DSNS also deploys a Technical Advisory Response Unit (TARU) with the 12-hour Push Package or medical supplies. The TARU staff will coordinate with state and local officials so that the SNS assets can be efficiently received and distributed upon arrival at the site. The materials will be transferred to state and local authority for distribution upon receipt. TARU members will remain onsite in order to assist and advise state and local officials.

DSNS is part of a nationwide preparedness program for state and local health care providers, first responders, and federal, state and local governments. Training programs explain the mission and operations of DSNS, as well as alerting state and local emergency response officials to the important issues they must plan for in order to receive, secure and distribute SNS assets. CDC and DSNS staff are currently working with federal, state, and local partners to conduct and coordinate these preparedness efforts.