APPENDIX 1 TO SECTION IV

DESTRUCTIVE WEATHER

Ref: (a) CNRSEINST 3140.1I
(b) Storm Events: http://www.spc.noaa.gov/
(c) Tropical Cyclone: http://www.nlmoc.navy.mil/home1.html
(d) Flood Risk: http://www.hpc.ncep.noaa.gov/
(e) NOAA National Climatic Data Center: http://lwf.ncdc.noaa.gov/oa/ncdc.html

1. **Scope.** This appendix describes hazardous weather elements as including high wind gusts, high sustained winds, thunderstorms, tornadoes, hail, and/or lightning. Because of the Region's location and the installations within its area of responsibility, all are at risk from several hazards existing in and from various weather systems/conditions. This appendix addresses those hazards and the setting preparatory/mitigating tropical cyclone conditions criteria where applicable. References (a) through (e) are germane to this appendix.

2. **Overview**. Naval Air Pensacola is subject to various weather phenomena from mild pleasant conditions to a catastrophic life taking environment. This appendix addresses weather conditions from gales to tropical cyclones.

a. Specific Destructive Weather Data Sheets and associated checklists have been developed and placed in Section VI beginning on page VI-2-3 through VI-2-30. They are presented in the following order to match the categories below:

(1) Small Craft, Gale, or Storm Warning

(2) Freeze Warning

(3) Thunderstorm Warning

(4) Electrical Storm Warning

(5) Tornado Warning

(6) Tropical Wind Warning

(7) Tropical Cyclone Warning

(8) Flood Warning

b. Weather Terms and Definitions

(1) Terminology used in CNRSE Warnings:

(a) Tropical Wind Warnings. Winds 34 - 49 knots (associated with a tropical system). Heavy rains, thunderstorms, lightning, tornadoes, storm surge, and hail may also be expected.

(b) Tropical Cyclone. Tropical system with winds 50 knots or greater. Heavy rains, thunderstorms, lightning, tornadoes, storm surge, and hail may also be expected.

(c) Thunderstorm. Thunderstorms are forecast to impact the warning area with gusty winds with velocities less then 50 knots and/or hail less than 3/4 inch in diameter. Lightning and thunder can be expected.

(d) Severe Thunderstorm. Severe thunderstorms are forecast to impact the warning area with gusty winds with velocities greater then 50 knots and/or hail equal to or greater than 3/4 inch in diameter along with possible tornados.

(e) Tornado. Tornadoes have been sighted or detected by RADAR in or adjacent to the warning area, or have a strong potential to develop in the warning area.

(f) Small Craft Warning. Winds up to 33 knots (including gusts). The lower threshold for issuing such a warning is set by local area authority.

(g) Gale Warning. Sustained winds (non-tropical) between 34 to 47 knots.

(h) Storm Warning. Sustained winds (non-tropical) of 48 knots or greater.

(2) Terminology used by the National Weather Service (NWS):

(a) Severe Thunderstorm or Tornado Watch. Conditions are conducive for tornadic activity and/or severe thunderstorms within and close to the watch area.

(b) Severe Thunderstorm or Tornado Warning. A severe thunderstorm or tornado has been confirmed by observation or indicated by weather radar. Personnel close to the storm should take cover immediately. Those further away should take cover if threatening conditions approach.

(c) Tropical Storm/Hurricane Watch. Tropical Storm/Hurricane pose a possible threat to a specified coastal area within 36 hours.

(d) Tropical Storm/Hurricane Warning. Tropical Storm/Hurricane force winds are expected in a specified coastal area within 24 hours.

c. Tropical Wind Warnings will normally be issued more than 12 hours prior to the arrival of 34 to 49 knot winds.

d. Thunderstorms and Lightning. All thunderstorms are dangerous because they produce lightning and can also produce tornados, strong surface winds, hail, and rapid or flash flooding.

(1) An average of 380 people in the United States are injured annually and 80 are killed.

(2) Not all thunderstorms produce rain, but the affect of lightning has caused many fires, especially in drought stricken woods, forests, and grass type lands.

(3) Thunderstorm Conditions

(a) Condition 2. The possibility of thunderstorms is possible within 25 NM of NAS Pensacola within 6 hours.

(b) Condition 1. The possibility of thunderstorms is possible within 10 NM of NAS Pensacola within 1 hour. A less than 30-minute warning is likely.

e. Tornados. Every Installation in the Southeast Region is susceptible to tornados and the damage they cause. Tornados can occur all year round but the primary tornado season along the Gulf Coast is normally November through February. A tornado is the most violent of all storms. Spawned by strong thunderstorms can cause fatalities and destroy a neighborhood in seconds. Tornados are rotating funnel-shaped clouds extending from a thunderstorm to the ground with whirling winds, possibly reaching 300 miles per hours. Tornados can last just a few minutes to 20 minutes or longer, and the damaging paths they create can range from yards in width to a mile and up to 50 miles long.

(1) Some tornadoes are clearly visible, while rain or nearby low-hanging clouds obscure others. But, clearly visible or obscure, they have a loud roaring noise likened to that of a train.

(2) Waterspouts are tornadoes that form over water. Although their effects normally diminish quickly once they pass over land, some can continue to maintain strength and produce damage.

(3) Tornado Conditions

(a) Watch. Your local National Weather Service (NWS) office (Mobile, AL) has issued a tornado watch for the local area. This means that conditions are favorable for tornadic development.

(b) Warning. Your local National Weather Service (NWS) office (Mobile, AL) has issued a Tornado warning for the local area. This means that a tornado has been spotted or Doppler radar and has confirmed a rotation signifying a tornado.

f. Tropical Cyclones. The tropical winds/cyclones affecting the Southeast Region normally occur between 1 June through 30 November (referred to as the "Tropical Cyclone Season") with September being the peak month for storm activity. Tropical Cyclones have occurred in May and December; however, they have been extremely rare in occurrence.

(1) To prepare for a tropical cyclone arrival, the Region and its installations will be placed into five distinct stages called Conditions of Readiness (COR's). The Southeast Region will transmit yearly a COR V (5) message placing all installations under their watch on 1 June and a COR termination message on 1 December. Installations will transmit a COR V attainment message back to the Region when they attain the conditions in their COR 5 checklists via C4I chat.

(2) Tropical Cyclone Conditions Of Readiness(COR)

(a) COR V - Destructive winds possible within 96 hours. Due to the geographical location of Pensacola, CNRSE requires the base to set and maintain COR V as a minimum state of readiness from 1 June - 30 November.

(b) COR IV. Destructive winds possible within 72 hours.

(c) COR III. Destructive winds possible within 48 hours.

(d) Modified COR III. At the Installation Commanding Officers (ICO's) discretion, a modified version of COR III can be set. This procedure is used to direct action for Departments/Tenant Commands to execute parts of their COR III checklist deemed necessary when full execution is not feasible.

(e) COR II. Destructive winds anticipated within 24 hours.

(f) COR I. Destructive winds are occurring or anticipated within 12 hours.

(3) Categories of Tropical Cyclones. The minimum Tropical Cyclone has no category even though it has winds 34 to 63 knots (39 - 73 miles per hour [mph]). Damage primarily to shrubbery, trees, foliage, and poorly constructed, non-secured utility buildings or fixtures (awnings, lawn furniture, etc.).

(a) Category One (Cat 1)

1. Winds 64 - 82 knots (74 - 95 miles per hour [mph]). Damage primarily to shrubbery, trees, foliage, and unanchored mobile homes. No real damage to permanent building structures.

2. Storm Surge 4 to 5 feet above mean water level. Low-lying coastal roads inundated, minor pier damage.

(b) Category Two (Cat 2)

1. Winds 83 - 95 knots (96 - 110 mph). Considerable damage to shrubbery and tree foliage, some trees blown down. Major structural damage to exposed mobile homes. Some damage to roofing material, windows, and doors - no major damage to permanent building structures.

2. Storm Surges ranging from 6 feet to 8 feet above mean water level. Coastal roads and low-lying escape routes inland cut by rising water. Considerable pier damage, marinas flooded. Evacuation of some shoreline residences and low-lying island areas required.

(c) Category Three (Cat 3)

1. Winds 96 - 113 knots (111 - 130 mph). Damage to shrubbery and trees. Foliage off trees, large trees blown down. Some roofing material damage, some window and door damage, and some structural damage to small residences and utility buildings. Mobile homes destroyed. Minor amount of certain wall failures.

2. Storm Surges 9 feet to 12 feet above mean water level. Serious flooding at coast with many smaller structures near coast destroyed. Larger structures damaged by battering of floating debris. Low-lying escape routes inland cut by rising water.

(d) Category Four (Cat 4)

1. Winds 114 - 135 knots (131 - 155 mph). Shrubs and trees down. Extensive roofing material, window and door damage. Complete failure of roof structures on many small residences and complete destruction of mobile homes.

2. Storm Surges ranging from 13 feet to 17 feet above mean water level. Major damage to lower floors of structures near the shore due to flooding and battering action. Low-lying escape routes inland cut by rising water. Major erosion of beach areas.

(e) Category Five (Cat 5)

1. Winds greater than 135 knots (155 mph). Shrubs and trees down and roofing damage considerable. Very severe and extensive window and door damage. Complete failure of roof structures on many residences and industrial buildings. Extensive glass and some complete building failures; extensive glass failure; some complete building failures; small buildings overturned and blown over or away and complete destruction of mobile homes. Major power distribution failures causing loss of water and sewer for an extended period.

2. Storm Surge, greater than 18 feet above mean water level. Major damage to lower floors of all structures. Low-lying escape routes inland cut by rising water. Evacuation of residential areas situated on low ground within 5 to 10 miles of shoreline may be required.

g. Flooding. Can come from rains, dam/levee failure, and rising rivers. Some floods develop slowly over days while others can develop within minutes without any visible signs of rain.

(1) Floods can local effecting a neighborhood or community to extremely large covering entire river basins and multiple states.

(2) Flash floods are often more dangerous as they develop very quickly and can be in the form of a wall of roaring water that contains rocks, mud, and debris that can sweep most things in its path.

h. Other potential dangerous weather conditions

(1) Extreme Heat. The Region is located where individuals and pets can be affected by heat. The high humidity and high temperatures can cause heat stress and, if proper treatment is not applies, - death. The U.S. Navy has a safety standard for hot humid conditions called flag conditions that pertain how long individuals can work out of doors. The flag conditions are displayed in colors in Blue, Green, Yellow, Red, and Black and range from Blue Flag can work normally all day to Black Flag where exposure is measured in minutes. Flag conditions are set by the NAS Pensacola Quarterdeck.

(2) Winter Storms. Although Region Installations can experience cold weather, it normally doesn't last too long. Most serious is in frost or snow turning into ice forming on grated bridges. Snow fall isn't measured in feet, but in inches whose affects can be devastating. There is little or no snow clearing equipment available and most of the drivers are not experienced in driving on snow covered roads causing many accidents and deaths.

3. **General Guidance**

a. Authority. CNRSEINST 3440.2D.

b. Assumptions. There will be advance warning(s) of a Tropical Storms approach.

c. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

d. Mass Warning and Notifications. Will be made by all means available: Messages, e-mails, telephones, computer networks, marquees, public announcements, etc.

e. Activation Levels. Will be commensurate with Condition of Readiness (COR) settings.

f. Hazard-Specific Procedures. Deploy response units, securing/ relocating equipment/materials, limiting installation population to Category 1A and 5 personnel, and conducting evacuations/relocations as necessary.

4. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Emergency Management Working Group (EMWG) and approved by the Region Commander/NAS Pensacola Commanding Officer.

5. **Training Requirements.** No specific training required.

6. **Equipment Requirements.** No special equipment is required.

7. **Exercise and Evaluation Requirements.** Yearly participation in the Hurricane Exercise (HURREX), evaluating each preparedness checklist items, validating contact numbers, Category 1A/5 personnel, coordinating with EM's for local expected activity, and develop a Lessons Learned After Action Report with corrective actions required by date.

8. **Additional Resources**

a. Activation and deployment of Navy Emergency Preparedness Liaison Officer(s).

b. Should the Region be affected, cellular phone service will probably be interrupted requiring mobile satellite communication towers to be in-place.

APPENDIX 2 TO SECTION IV

SEISMIC/GEOLOGICAL HAZARDS

Ref: (a) Interactive Hazard Map Service:
http://earthquake.usgs.gov/research/hazmaps/interactive/index.php
(b) Earthquake Probability Mapping:
http://earthquake.usgs.gov/research/hazmaps/interactive/index.php
(c) State Geologic Offices:
http://www.stategeologists.org/
(d) Tsunami Events in the United States and Puerto Rico:
http://www.usgs.gov/hazards/images/maps/tsunami_hires.jpg
(e) Potential for Tsunamis Traveling to the East Coast of the United States:
http://www.icao.int/icao/en/ro/nacc/meetings/2005/CARSAR/CARSARip01.pdf
http://www.es.ucsc.edu/~ward/papers/La_Palma_grl.pdf
http://chuma.cas.usf.edu/~juster/Tsunamis/pararas.pdf
(f) Search State Evacuation Zones:
http://www.csc.noaa.gov/hez_tool/mapper.html

1. **Scope.** Areas within the Southeast Region are susceptible to a seismic and/or geological event. References (a) through (f) are germane to this appendix.

2. **Overview**. Those events/locations are as follows:

a. **Earthquake.** A severe earthquake is one of the destructive phenomena of nature and is caused by a slippage of the boundary between two of the earth's tectonic plates. Fault lines in our area are New Madrid, Charleston, and the Gulf Coast. The effects could be unnoticed or mild to totally devastating. The event is immediate, may be violent, and occur without warning at any time of the day or night.

b. **Tsunami**

(1) Tsunamis, also known as seismic sea waves, are a series of waves created by an underwater disturbance such as an earthquake, landslide, volcanic eruption, or meteorite. A tsunami can move hundreds of miles per hour and generate waves as high as 100 feet. The area where tsunami originates causes waves in all directions. Once the waves approach the shore, it builds in height. The topography of the coastline and the ocean floor will influence the size of the wave.

(2) Tsunamis are caused by an underwater earthquake with a magnitude of seven or greater (on the Richter Scale). The size of the wave(s) generated can be ripples on the surface to tremendous in size, destroying all obstacles in its path. But earthquakes of that size do not always cause tsunamis. Just recently, the National Ocean and Atmospheric Administration (NOAA) has begun installing warning buoys in the Atlantic and Gulf of Mexico. When NOAA completes their buoy system, we will be able to receive tsunami advisory warnings prior to their impacting the Southeast Region's coastal areas. The East Coast of Florida and Southeast Coast of Georgia are currently the only areas determined as being susceptible to tsunami effects. A Tab has been developed to receive and pass an NOAA Tsunami warnings (see Section VI, pages VI-2-31 through VI-2-38).

(3) There are three known geological fault areas that are capable of causing a tsunami. The closest is the Puerto Rican Trench and the two distant are the Azores Gibraltar Zone and Canary Islands Cumbrevle Vieja Volcano. However, in order to generate a tsunami, the event must be 7.4 or greater on the Richter Scale. Events of the magnitude occurring in the Atlantic Ocean or Caribbean Sea are extremely rare.

(4) The unforeseen tsunami would be caused a sizeable meteorite impacting the Atlantic Ocean, Caribbean Sea, or the Gulf of Mexico.

c. **Effects.** The expected results of either an earthquake or tsunami have the potential to cause the following devastation:

(1) Multiple injuries and deaths.

(2) Collapsed structures.

(3) Trapped individuals.

(4) Loss of normal and/or emergency utility services.

(5) Fires.

(6) Blocked or impassible roads.

(7) Loss of support to/from local municipalities.

Note: It is imperative that data concerning the extent of the casualty be collected as rapidly as possible and provided to emergency responders and support personnel. In either event, rapid dissemination of information is critical. Actions have been designed to accomplish the widest possible notification to installation populace in the shortest time possible. The initial notification procedures are in the CDO checklist (VI-2-33).

d. **All Commands** will develop checklists for securing activities and evacuation procedures in case an earthquake/tsunami warning is received.

3. **General Guidance**

a. Authority. CNRSEINST 3440.2D.

b. Assumptions. There will be **no advance warning** of an earthquake and at least **minimal advance warning** for the arrival of a tsunami.

c. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

d. Mass Warning and Notifications. Warnings/Notifications will be issued/made via messages, e-mails, telephone networking, marquees, announcements, etc.

e. Activation Levels. The activation level will go from the pre-existing condition directly into a full activation of the EOC to meet the requirements of Section I, Chapter 7, paragraph 4 on pages I-7-5.

f. Hazard-Specific Procedures. Deploy units, securing/relocating equipment/materials, limiting installation population to Category 1A and 5 personnel, and conducting evacuations/relocations as necessary.

4. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Emergency Management Working Group (EMWG) and approved by the Region Commander/Installation Commanding Officer.

5. **Training Requirements.** No specific training is required.

6. **Equipment Requirements.** No special equipment is required.

7. **Exercise and Evaluation Requirements.** None.

8. **Additional.** Below is a listing of Tsunami specific terminology:

a. **Advisory.** An earthquake has occurred which may generate a tsunami.

b. **Warning.** A tsunami was/or may have been generated, which could cause damage; therefore, persons in the warned area are strongly advised to evacuate.

c. **Watch.** A tsunami was or may have been generated, but is at least 2 hours travel time to the area in Watch status.

APPENDIX 3 TO SECTION IV

FIRE HAZARDS

Ref: (a) OPNAVINST 11320.23
(b) NEPA 1500 (Standard on Fire Department Occupational Safety and Health Program
(c) NAVAIR 00-80R-14 (U.S. Navy Fire Fighting and Rescue Manual)
(d) NAVSEA OP-4 (Ammunition Afloat)
(e) NAVSEA OP-5 (Ammunition and Explosives Ashore)

1. **Scope.** All areas within the Southeast Region are susceptible to fire hazards. References (a) through (e) are germane to this appendix.

2. **Overview**

a. Fire can involve chemicals, structures, explosives, aircraft, vehicles/trains, vessels, and wood/grass lands, and some or all can affect a Southeast Region Installation. A fire's cause can be accidental, intentional, or an act of nature. No matter the cause, the effects can be extremely dangerous to the personnel, possessions, material/equipment, and structures. Fires can have a devastating effect of the Navy mission.

b. Heat and smoke from fire can be more dangerous than the flames. Inhaling the super-hot air can sear the linings of the lungs. Asphyxiation is the leading cause of fire related deaths, exceeding burns by a three-to-one ratio. Fires produce poisonous gases that make people disoriented, drowsy, and/or unable to wake from a sleep to seek safety.

3. **General Guidance**

a. Authority. CNRSEINST 3440.2D.

b. Assumptions. There will be some sort of alerting of the fire (sensors, alarms, person's report, etc.).

c. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

d. Mass Warning and Notifications. May not be required; but where appropriate, it will be made by all means available: Messages, e-mails, telephones, computer networks, marquees, public announcements, etc.

e. Activation Levels. Dependent upon the incident, it could range from none, partial, or full activation.

f. Hazard-Specific Procedures. Ensure all personnel:

(1) Are aware of fire reporting procedures.

(2) Know the escape routes.

(3) Know the location of mustering/assembly point(s).

4. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Emergency Management Working Group (EMWG) and approved by the Region Commander/Installation Commanding Officer.

5. **Training Requirements.** References (a) through (e) of this appendix contain detailed information.

6. **Equipment Requirements.** The normal fire fighting gear, equipment, and special equipment needed for Installation assets.

7. **Exercise and Evaluation Requirements**

a. Fire Fighters have scheduled fire exercise activity. Filming all exercises can be a valuable training tool.

b. No-notice fire drills for all populated structures with the results provided to the organizational command.

APPENDIX 4 TO SECTION IV

PANDEMIC INFLUENZA

Ref: (a) World Health Organization www.who.int/csr/disease/avian_influenza/country/en
(b) CNIC Hazard-Specific Appendix - Pandemic Influenza

1. **Scope.** All areas within the Southeast Region are susceptible to pandemic influenza. References (a) and (b) are germane to this appendix.

2. **Overview**

a. Pandemic Influenza requires specific preparedness and response to this hazard. This is a human disease that attacks the respiratory tract and is spread by coughing and sneezing. Seasonal influenza is a yearly occurrence that causes minor economic impact and has a lethal impact in certain immune-compromised individuals and the elderly.

b. Pandemic of influenza occur when a new or different virus (or virus strain) emerges to which the population has little immunity. Public health experts are currently concerned about the risk of a pandemic arising from a novel virus that is capable of human-to-human transmission. The impact of a pandemic cannot be predicted precisely; however, a pandemic disease outbreak (in the absence of an available vaccine and/or effective antiviral medications) is likely to disrupt/severely affect the U.S. Navy's ability to meet mission requirements.

3. **General Guidance**

a. Authority. CNRSEINST 3440.2D.

b. Assumptions

(1) The full extent, nature, and course of a pandemic influenza proportions will be governed by factors unknown in advance.

(2) Successful containment of an influenza outbreak requires effective syndromic surveillance, rapid identification, rapid treatment, and Prophylaxis to targeted groups.

(3) Non-medical containment measures will be the principal means of disease control until adequate supplies of vaccine/antiviral medications are made available.

(4) Disseminating timely, consistent, and accurate information is one of the most important facets of pandemic influenza preparedness, mitigation, and response.

(5) Fear, fatigue, and psychological stress may prevent individuals from going to work and threaten the ability to sustain critical operations, maintain essential operations, and maintain essential services.

(6) The emotional impact of a pandemic may strain coping skills and may result in the need for stress management support.

c. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

d. Mass Warning and Notifications. Will be made by all means available: Messages, e-mails, telephones, computer networks, marquees, public announcements, etc.

e. Activation Levels. The ROC and affected EOC's will be placed in a Level 2 Condition.

f. Hazard-Specific Procedures. Response personnel and Care Givers shall use Universal and Droplet Precautions.

4. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Public Safety Working Group (PSWG) and approved by the Region Commander/NAS Pensacola Commanding Officer.

5. **Training Requirements.** All EM personnel should familiarize themselves with and maintain situational awareness of current and future epidemic/pandemic influenza/disease information, training materials, and other resources available for use as educational and planning tools for personnel.

6. **Equipment Requirements**. None specified.

7. **Exercise and Evaluation Requirements**

a. The Commander shall incorporate pandemic influenza scenarios into applicable exercises.

b. There are three pre-developed exercises available:

(1) FluAid - Developed by Centers for Disease Control and Prevention.

(2) FluSurge - Developed by Centers for Disease Control and Preventio.

(3) Pandemic Influenza (Tabletop Exercise) - Developed by the National Vaccine Program Office.

8. **Additional**. The following section (IV-4-3 through IV-4-17) is an informational handout containing 38 of the most frequent question asked concerning pandemic influenza and the answers to them.

QUESTIONS CONCERNING PANDEMIC INFLUENZA

AND THEIR ANSWERS

1. What is pandemic influenza?

Pandemic influenza is a global outbreak caused by a new influenza virus.
• The virus may spread easily, possibly causing serious illness and death.
• Because so many people are at risk, serious consequences are possible.
• Historically, pandemic influenza has caused widespread harm and death.

Pandemic influenza is different from seasonal influenza (or "the flu").
• Seasonal outbreaks of the flu are caused by viruses that are already among people.
• Pandemic influenza is caused by an influenza virus that is new to people.
• Pandemic influenza is likely to affect many more people than seasonal influenza.

Timing and consequences of pandemic influenza are difficult to predict.
• Pandemic influenza has occurred three times in the last century.
• Flu viruses are constantly changing.
• The most serious was the 1918 pandemic, which killed tens of millions of people worldwide.

Preparing now can limit the effects of pandemic influenza.
• WHO, DHHS, and countries throughout the world have developed emergency plans for a pandemic influenza.
• Informed public participation and cooperation will be needed for effective public health efforts.
• Individuals should stay informed about pandemic influenza and prepare as they would for any emergency.

2. How is pandemic influenza different from seasonal flu?

Pandemic influenza is caused by an influenza virus that is new to people.
• Seasonal flu is caused by viruses that are already among people.
• Pandemic influenza may begin with an existing influenza virus that has changed.
• Fewer people would be immune to a new influenza virus.

The timing of an influenza pandemic is difficult to predict.
• Seasonal flu occurs every year, usually during winter.
• Pandemic influenza has happened about 30 times in recorded history.
• An influenza pandemic could last longer than the typical flu season.

An influenza pandemic is likely to be more severe than seasonal flu.
• Pandemic influenza is likely to affect more people than seasonal flu.
• Pandemic influenza could severely affect a broader set of the population, including young adults.
• A severe pandemic could change daily life for a time, including limitations on travel and public gatherings.

3. Have there been influenza pandemics before?

Influenza pandemics have occurred throughout recorded history.
• About 30 influenza pandemics have been recorded.
• There were three influenza pandemics in the last century.
• The most recent influenza pandemic was Hong Kong Influenza in 1968-1969.

The severity of influenza pandemics has varied.
• The 1918 pandemic killed tens of millions of people worldwide.
• Deaths from the 1968-1969 pandemic were about the same as for seasonal influenza.
• Severe pandemics can have severe adverse effects on the economy and daily life.

It is difficult to predict how the next influenza pandemic will compare to the past.
• The severity of a pandemic influenza will depend on the virus that causes it.
• Increased travel and greater populations could speed the spread of pandemic influenza.
• Better detection and medical treatments could lessen the effects of an influenza pandemic.

4. What are the chances there will be pandemic influenza again?

Pandemic influenza will occur again.
• It is difficult to predict when the next pandemic will occur and how severe it will be.
• Influenza viruses are always changing.
• Occasionally, a new virus emerges that can spread easily among humans. Scientists are concerned that "bird flu" (H5N1 Avian Influenza) in Asia could change, causing pandemic influenza.
• The virus is spreading to birds and other animals in new regions.
• The virus has infected some people, causing severe illness and death.
• In rare cases, the virus has spread from one person to another.

The United States and other countries are preparing to respond to pandemic influenza.
• DHHS and others are developing supplies of vaccines and medicines.
• The United States has been working with WHO and other countries to strengthen detection and response to outbreaks.
• Preparedness efforts are ongoing at the national, state, and local level.

5. How much warning will we have in the United States if a pandemic starts?

Warning time will depend on where the new virus starts.
• New influenza viruses often originate in Asia.
• Many experts believe that the worst recorded outbreak of pandemic influenza—the 1918 pandemic—started in the United States.
• The United States is working with WHO and other countries to strengthen detection and tracking of new influenza viruses.

Warning time will depend on how soon the virus is identified.
• Pandemic influenza is caused by an influenza virus that is new to people.
• Many viruses circulate in animals but do not cause disease in most humans.
• The virus must spread easily among people to become pandemic influenza.

The effectiveness of control measures will depend on where the new virus starts.
• If the new virus starts in Asia, limitations on travel may delay entry into the United States.
• It is unlikely that control measures will prevent pandemic influenza from entering the United States.
• Preparing now can limit the spread and effects of pandemic influenza.

6. How fast would pandemic influenza spread?

When pandemic influenza begins, it is likely to spread very rapidly.
• Influenza is a contagious disease of the lungs.
• Influenza usually spreads by infected people coughing and sneezing.
• Most people will have little or no immunity to pandemic influenza.

Efforts to prepare for pandemic influenza are continuing.
• Public health officials are building on existing disease outbreak plans.
• Researchers are working to produce additional vaccine more quickly.
• Countries are working together to improve detection and tracking of influenza viruses.

Public participation and cooperation will be important to the response effort.
• Severe pandemic influenza could produce changes in daily life, including limits on travel and public gatherings.
• Informed public participation and cooperation will help public health efforts.
• People should stay informed about pandemic influenza and be prepared as they would for any emergency.

7. How many people are likely to get sick in a pandemic? How many will die?

The consequences of pandemic influenza are difficult to predict.
• Pandemic influenza has occurred three times in the last century.
• The most recent, in 1967, was the mildest.
• The most serious was the 1918 pandemic, which killed tens of millions of people worldwide.

During a pandemic many people will be infected.
• One-third of the people in the United States got sick during the 1918 pandemic.
• Historically, most people who get sick will recover.
• Having many people ill can be highly disruptive to daily life.

In general, some people are at greater risk for illness and death.
• People who already have a health problem are often at higher risk.
• People with weakened immune systems (for example transplant patients) are likely to be at higher risk.
• Older people tend to be at higher risk from certain diseases.

8. Will this be like Swine Flu in 1976, when many people were vaccinated, and then the disease didn't appear?

Scientists are confident that an outbreak of pandemic influenza will occur again.
• Influenza pandemics have occurred over 30 times in recorded history.
• There were three influenza pandemics in the last century.
• The 1918 pandemic, the worst, killed tens of millions of people worldwide.

The timing and consequences of pandemic influenza are difficult to predict.
• Scientists are uncertain when pandemic influenza will occur and how severe it will be.
• Influenza viruses are always changing.
• Occasionally, a new influenza virus emerges, or an old one reemerges that can spread easily.

Preparing now can limit the effects of pandemic influenza.
• WHO, DHHS, and countries throughout the world have developed emergency plans for a pandemic influenza.
• Informed public participation and cooperation will be needed for public health efforts.
• Individuals should stay informed about pandemic influenza and prepare as they would for any emergency.

9. How worried should people be about pandemic influenza?

Preparing and staying informed are the best responses now.
• Right now, there is no pandemic influenza in the United States or the world.
• Preparing now can limit the effects of pandemic influenza.
• You can stay informed through http://www.pandemicflu.gov.

The United States and other countries are preparing to respond to pandemic influenza.
• DHHS and others are developing supplies of vaccines and medicines.
• The Unites States is working with WHO and other countries to strengthen monitoring and response to outbreaks.
• Preparedness efforts are ongoing at the national, state, and local level.

Individuals, communities, and businesses can prepare.
• Individuals should stay informed about pandemic influenza and prepare as they would for any emergency.
• Businesses should prepare or review their emergency plans.
• Communities should prepare as for other public health emergencies.

10. Could terrorists make and spread an influenza virus for a pandemic?

Experts believe it highly unlikely that pandemic influenza could result from terrorism.
• Experts believe that other types of terrorist activities, such as bombings, are more likely.
• Developing a pandemic influenza virus would require extraordinary scientific skill.
• Developing a pandemic influenza virus would require sophisticated scientific equipment and other resources.

Preparing now can limit the effects of pandemic influenza, regardless of the source.
• Individuals should stay informed about pandemic influenza and prepare as they would for any emergency.
• Businesses should prepare or review their emergency response plans.
• Communities should prepare as for other public health emergencies.

Public health agencies throughout the world are preparing for pandemic influenza, regardless of the source.
• WHO, DHHS, and countries throughout the world are building on existing plans.
• Researchers are working to produce more vaccine more quickly.
• A coordinated international effort is under way to improve detection and tracking of influenza viruses.

11. If pandemic influenza comes into the United States, who is likely to get it first?

When pandemic influenza begins, it is likely to spread very rapidly.
• Influenza is a contagious disease of the lungs.
• Influenza usually spreads by infected people coughing and sneezing.
• Most people will have little or no immunity to pandemic influenza.

Federal, State, and Local Governments are preparing for pandemic influenza.
• Systems for early detection and containment have been improved.
• Researchers are working to produce additional vaccine more quickly.
• Pandemic influenza could still have serious effects on society.

Individuals should stay informed and prepare as they would for any emergency.
• Right now, there is no pandemic influenza in the United States or the world.
• Because of bird flu in Asia, travelers to this area should be careful.
• People can stay informed about pandemic influenza at http://www.pandemicflu.gov.

12. What should the public know about pandemic influenza now?

Pandemic influenza is a global outbreak caused by a new influenza virus.
• The virus may spread easily, possibly causing serious illness and death.
• Because so many people are at risk, serious consequences are possible.
• Historically, pandemic influenza has caused widespread harm.

Scientists are confident that an outbreak of pandemic influenza will occur again.
• There have been three influenza pandemics in the last century, including an outbreak in 1918 that killed tens of millions of people worldwide.
• Scientists are uncertain when a new pandemic will occur and how severe it may be.
• Influenza viruses are always changing; new influenza viruses emerge or old ones reemerge that can spread easily.

Preparing now can limit the effects of pandemic influenza.
• WHO, DHHS, and countries throughout the world are building on existing disease outbreak plans.
• A coordinated international effort is under way to develop vaccines and improve the detection and tracking of influenza viruses.
• Individuals should stay informed about pandemic influenza and prepare as they would for any emergency.

13. What should people do if there is an outbreak of pandemic influenza?

People should stay informed about prevention and control actions.
• Public health officials will share information about prevention and control actions.

• Information about prevention and control actions will be shared in a variety of ways, including through the CDC Hotline and http://www.pandemicflu.gov.
• Informed public participation and cooperation will be needed for public health efforts.

People should use information about prevention and control actions to care for themselves and their loved ones.
• Public health officials will provide information on the signs and symptoms of the specific disease.
• People should practice good health habits, including eating a balanced diet and getting sufficient rest.
• People should discuss individual health concerns with their health care provider, health department, or other trusted sources.

People should take common-sense actions to keep from spreading germs.
• People should cover their coughs and sneezes and wash their hands frequently.
• People should stay away from sick people as much as possible.
• If you are sick, you should stay away from others as much as possible.

14. How do new influenza viruses come about?

Influenza viruses are always changing.
• Changes can occur whenever the virus reproduces.
• The virus reproduces in those who have influenza.
• The changes can affect how the disease works in the body.

The most common changes are small changes called "drift."
• Drift is why influenza vaccine is changed every year.
• Scientists are always tracking these changes in influenza viruses.
• Drift usually results in an influenza to which some people have immunity.

Occasionally, large changes occur that produce a pandemic influenza.
• Major changes are called "shift" and can result in a new type of influenza virus.
• Shift can result in the reemergence of an old type of influenza virus.
• Shift is the type of change most likely to cause pandemic influenza.

15. Will people with strong immune systems be immune to pandemic influenza?

Almost no one will be immune to a pandemic influenza virus.
• Pandemic influenza comes from a virus that is new to people.
• Immunity to a virus can come from vaccination.
• People who recover from the disease will be immune to it.

During a pandemic many people will be infected.
• One-third of the people in the United States got sick during the 1918 pandemic.
• Historically, most people who get sick recover.
• Having many people ill can greatly disrupt daily life.

Preparing and staying informed are the best responses now.
• Right now, there is no pandemic influenza in the United States or the world.
• Preparing now can limit the effects of pandemic influenza.
• You can stay informed through http://www.pandemicflu.gov.

16. Is everyone at the same risk of illness or death from pandemic influenza?

The severity of pandemic influenza will depend on the virus that causes it.
• The United States is working with WHO and other countries to strengthen detection and tracking of new influenza viruses.
• Antiviral medicines can be used to treat influenza.
• A vaccine for a specific virus can make people immune to that virus.

In general, some people are at greater risk for illness and death.
• People who already have a health problem are often at higher risk.
• People with weakened immune systems (for example, transplant patients) are likely to be at higher risk.
• Older people, young children, and pregnant women tend to be at higher risk of certain diseases.

Preparing and staying informed are the best responses now.
• Right now, there is no pandemic influenza in the United States or the world.
• Preparing now can limit the effects of pandemic influenza.
• You can stay informed through www.pandemicflu.gov.

17. What is bird flu (H5N1 Avian Influenza)?

Bird flu is a disease of wild and domesticated birds.
• This type of influenza can also infect other animals and people.
• Since the 1990's, bird flu outbreaks have occurred in eastern Asia.
• The virus is spreading to birds and other animals in new regions.

This virus has infected some people.
• Although rare, human cases have been reported in Southeast Asia.
• Most human cases probably came from direct contact with infected birds or their droppings.
• More than 200 people have gotten bird flu, and about half of them have died.

We are watching closely for any person-to-person spread of bird flu.
• So far, there has been limited person-to-person spread.
• We are watching for changes in the virus that could lead to easier spread.
• DHHS, WHO, and many others are working together.

18. How many people have gotten bird flu (H5N1 Avian Influenza)? How many have died?

More than 100 people, in Asia and Eastern Europe, have died from bird flu.
• About half of the people who got bird flu died.
• Most cases come from contact with infected birds.
• New cases are expected as bird flu occurs in new regions.

There may be more human cases than have been reported.
• Disease tracking methods sometimes miss cases.
• To date, most outbreaks of bird flu (H5N1) have occurred in developing countries.
• Mild cases may not be recognized or reported.

WHO and many nations are working to improve disease tracking.
• Resources are being devoted to monitoring and detection.
• Health care workers in Asia are being trained to use test kits.
• Disease experts from many nations are working on this effort.

19. Why are public health officials preparing for pandemic influenza?

Pandemic influenza can be a serious and prolonged outbreak affecting all aspects of society.
• Some pandemics caused widespread illness and death, changing day-to-day life.
• The timing and consequences of pandemic influenza can be difficult to predict.
• The 1918 pandemic caused more deaths than World War II.

Scientists are watching "bird flu" (H5N1 Avian Influenza) because of its potential to change into pandemic influenza in people.
• The virus is spreading to animals in new regions.
• The virus has infected some people, causing severe illness and death.
• In rare cases the virus has spread from one person to another.

Preparing now can limit the effects of pandemic influenza.
• WHO and many countries are working together to plan.
• DHHS is working with states and communities to prepare.
• Individuals can stay informed and prepare as for any emergency.

20. If bird flu (H5N1 Avian Influenza) becomes pandemic, what will happen?

Pandemic influenza can be a serious worldwide event.
• Most pandemics cause widespread illness and death.
• The timing and consequences of pandemic influenza can be difficult to predict.
• Because one-third of the population can be sick, there are severe social consequences.

Public participation and cooperation will be important to the response effort.
• In a pandemic, travel and public gatherings could be limited.
• Other emergency measures might be needed.
• People should stay informed about pandemic influenza and prepare as they would for any emergency.

The United States and other countries are preparing to respond to pandemic influenza.
• DHHS and others are developing supplies of potential vaccines and medicines against influenza.
• The United States has been working with WHO and other countries to strengthen detection and response to outbreaks of influenza.
• Preparedness efforts are ongoing at the national, state, and local level.

21. What is being done to keep bird flu (H5N1 Avian Influenza) from becoming a pandemic disease?

We are watching closely for any person-to-person spread of bird flu.
• So far, there has been limited person-to-person spread of bird flu worldwide.
• We are watching for changes in the virus that could lead to easier spread between people.
• DHHS, WHO, and many others are working together. Public health officials already have some systems to help be ready for pandemic influenza.
• There is a program for fast distribution of vaccines and medicines.
• There are several systems for rapidly sharing emergency health information.
• A worldwide network of laboratories detects and tracks influenza viruses.

The United States and other countries are preparing to respond to pandemic influenza.
• DHHS and others are developing supplies of potential vaccines and medicines.
• The United States has been working with WHO and other countries to strengthen monitoring and response to outbreaks.
• Preparedness efforts are ongoing at the national, state, and local level.

22. How does bird flu (H5N1 Avian Influenza) get from birds to humans?

Bird flu is a disease of wild and farm birds.
• This type of influenza can also infect other animals and people.
• Since the 1990's, bird flu outbreaks have occurred in Asia and Europe.
• We are watching for changes in the bird flu virus that could lead to easier spread between people.

Although rare, human cases of bird flu have been reported.
• All human cases of bird flu have been in Asia and Eastern Europe.
• A few reports are linked to drinking uncooked poultry blood.
• Most human cases probably came from direct contact with infected birds or their droppings.

There is worldwide coordination to control the spread of bird flu.
• Flocks are monitored for bird flu.
• Possibly infected birds are kept separate.
• Sick and possibly infected birds are killed.

23. How easily does bird flu (H5N1 Avian Influenza) spread from human-to-human?

So far, bird flu has rarely passed from human-to-human.
• Bird flu is a disease of wild and farm birds.
• Most human cases in Asia probably came from direct contact with infected birds or their droppings.
• The few people who got bird flu from other people did not pass it on.

Scientists are watching bird flu because of its potential to change into pandemic influenza in people.
• The virus is spreading to animals in new regions.
• The virus has infected some people, causing severe illness and death.
• In rare cases, the virus has spread from one person to another.

We are watching closely for any person-to-person spread of bird flu.
• So far, there has been limited person-to-person spread.
• We are watching for changes in the virus that could lead to easier spread between people.
• DHHS, WHO, and many others are working together.

24. Given concerns about bird flu, is it safe to buy and eat chicken and duck?

It is safe to eat properly cooked poultry in the United States.
• H5N1 (the bird flu from Asia) has not been found in the United States.
• Cooking destroys germs, including the bird flu virus.
• The United States bans imports of poultry from areas with bird flu.
Note: Overseas, it is important to emphasize and advise personnel of safe purchasing, handling, and cooking of poultry.

There is worldwide coordination to control the spread of bird flu.
• Flocks are monitored for illness.
• Possibly infected birds are kept separate.
• Sick and possibly infected birds are killed.

As usual, you should take steps to control the spread of germs from poultry.
• Keeps hands, utensils, and surfaces clean.
• Because of bird flu in Asia, travelers to this area should be careful.
• Fully cook poultry.

25. What advice would you give someone traveling to Southeast Asia or other countries where bird flu has been identified?

During travel you should take steps to minimize risk.
• Avoid contact with chickens and ducks (including droppings and blood).
• Follow good health habits, such as frequent hand washing.
• Avoid "live markets," birds farms, and partially cooked bird. Before travel, take other steps.
• Check travel advisories for DOD personnel or contractors and the CDC's Web site http://www.cdc.gov for travel advisories.
• Be sure your shots are up-to-date and your health insurance covers you overseas.
• Contact the U.S. Consulate there to learn of available health care.

There are things to do after your travel to Southeast Asia, or other countries where bird flu has been identified.
• If you have any illness within 10 days, see your health care provider.
• Tell your health care provider about your travel.
• To date, no travelers to Southeast Asia or other counties where bird flu has been identified have gotten bird flu.

26. What are the symptoms of bird flu (H5N1 Avian Influenza) in people?

Symptoms of bird flu are like those for other influenza viruses.
• A high fever that lasts for several days.
• Muscle aches occur and feel worse if they are touched.
• Coughing and shortness of breath are common

We are watching closely for any person-to-person spread of bird flu.
• So far, there has been limited person-to-person spread worldwide.
• We are watching for changes in the virus that could lead to easier spread between people.
• DHHS, WHO, and many others are working together.

So far, all human cases of bird flu have been in Asia and Eastern Europe.
• Human cases are rare.
• Spread from person-to-person is very rare.
• Most human cases probably came from direct contact with infected birds or their droppings.

27. Why is bird flu (H5N1 Avian Influenza) so deadly?

The bird flu virus is new to people and mostly in developing countries.
• Few people are immune to a new virus.
• All human cases of bird flu in people have occurred in Southeast Asia and Eastern Europe.
• Where bird flu is occurring, people may have less access to health care.

We are watching closely for any person-to-person spread of bird flu.
• So far, there has been limited person-to-person spread worldwide.
• We are watching for changes in the virus that could lead to easier spread between people.
• DHHS, WHO, and many others are working together.

WHO and many nations are working to improve detection and tracking of influenza viruses.
• Funding for detection and tracking has been increased.
• Health care workers in Asia are being trained to use kits to test for bird flu.
• Disease experts from many nations are working on this effort.

28. How can infection with bird flu (H5N1 Avian Influenza) be prevented?

So far, all human cases of bird flu have been in Asia and Eastern Europe.
• Most human cases of bird flu probably came from direct contact with infected birds or their droppings.
• Passing of bird flu from one person to another is very rare.
• Travelers to Southeast Asia should take steps before, during, and after travel.

We are watching closely for any person-to-person spread of bird flu.
• So far, there has been limited person-to-person spread of bird flu worldwide.
• We are watching for changes in the virus that could lead to easier spread between people.
• DHHS, WHO, and many others are working together.

WHO and many nations are working to improve detection and tracking of bird flu.
• Resources are being devoted to detection and tracking of influenza viruses.
• Health care workers in Asia are being trained to use kits to test for bird flu.
• Disease experts from many nations are working on this effort.

29. How are patients with bird flu (H5N1 Avian Influenza) treated?

Antiviral medicines can help lessen the severity of influenza.
• Antiviral medicines work against a number of types of viruses.
• Each type of influenza virus must be tested to learn if antiviral medicines work against it.
• So far, research shows that some antiviral medicine works against bird flu.

Antiviral medicines could be important if bird flu becomes widespread in people.
• The United States has a supply of antiviral medicines.
• The United States has ordered more to increase its supplies as part of planning for pandemic influenza.
• There is a system to distribute these medicines quickly to where they are needed.

Bird flu is also treated by supportive care.
• Supportive care is treatment of the symptoms of a disease (for example, reducing fever).
• Supportive care includes treating other germs if they infect someone sick with bird flu.

• Supportive care includes treating other medical conditions the patient has, such as heart disease.

30. Is there a test that can tell if someone has bird flu (H5N1 Avian Influenza)?

There is a test for bird flu.
• Health care workers in Asia are being trained to use kits to test for bird flu.
• Most often, diagnosis of bird flu is made by symptoms a patient has.
• Laboratories worldwide work to detect and track bird flu.

For now, only selected people with symptoms are tested for bird flu.
• Usually, they are from areas where there is bird flu (Asia).
• Usually, they are people with direct contact with birds.
• Some other people and animals are tested to see if bird flu is spreading.

WHO and many nations are working to improve the detection and tracking of bird flu.
• Funding for detection and tracking bird flu has been increased.
• Health care workers in Asia are being trained to use kits to test for bird flu.
• Disease experts from many nations are working on this effort.

31. How will you know if a pandemic has started?

The first sign of pandemic influenza will be the appearance of a new or rarely seen influenza virus.
• Laboratories in many countries are watching for new influenza viruses.
• Bird and animal populations are being constantly tested.
• Doctors and scientists are on alert worldwide.

This new influenza virus will spread quickly among people.
• The new influenza virus will spread as easily as normal seasonal flu.
• International travel may speed up the spread of pandemic influenza.
• Because the virus will be new, people will not be immune to it.

Outbreaks of pandemic influenza may occur in different places at different times.
• Outbreaks may occur in waves of 6- to 8-week time periods.
• These waves of influenza may occur over several months or years.
• Different people may be affected during each wave.

32. What is quarantine?

Quarantine is a method used to stop or limit the spread of disease.
• Quarantine is one of the first actions taken by health officials in response to an outbreak of infectious disease.
• Quarantine during pandemic influenza may last for as long as 10 days.
• Quarantine has been successfully used in the past to prevent the spread of infectious disease.

Quarantine separates and restricts the movement of people.
• Quick action by health officials is needed to stop person-to-person spread of a contagious disease.
• Quarantine may be voluntary or involuntary.
• People exposed to the disease but not quarantined may accidentally spread disease to others.

Quarantine applies to people who have or might have been exposed to an infectious disease.
• People who have been exposed to an infectious disease might not know it.
• People may have an infectious disease without showing symptoms.
• People with influenza can spread the disease, even if they have no symptoms.

33. What is isolation?

Isolation is a way to limit the spread of disease.
• Isolation is a standard public health practice for disease control.
• Hospitals have plans that describe how to isolate patients.
• Isolation is a medical decision that can be legally enforced.

Isolation applies to people infected with a disease.
• Isolation allows for the delivery of specialized care to infected persons.
• People infected with a disease can spread it to others, even if they have no symptoms.
• Isolation helps keep infected people from spreading a disease to others.

Isolation separates infected people from others.
• Isolation protects healthy people and caregivers from disease.
• Isolation protects infected people from getting other diseases.
• Isolation protects family and friends of infected people from getting sick.

34. Where are people quarantined and isolated?

Quarantine and isolation are often done in hospitals and in homes.
• Quarantine and isolation sites are determined in part by the number of cases.
• Many hospitals have facilities equipped for quarantine and isolation.
• In some circumstances, quarantine and isolation may be done at home.

Specialized facilities may be needed if large numbers of people are involved.
• Facilities may be needed to quarantine and isolate many people in many locations.
• Local and state emergency plans identify facilities that can be used for quarantine and isolation.
• The Federal Government is working with states and cities to identify additional facilities for quarantine and isolation.

Most communities and hospitals have plans for operating quarantine and isolation facilities during a disease outbreak.
• Disease control plans describe the equipment needed to do quarantine and isolation.
• These plans describe the supplies needed for quarantine and isolation.
• These plans describe the medicines needed for quarantine and isolation.

35. Will quarantine and isolation be effective in limiting the spread of pandemic influenza?

Quarantine and isolation have been used for hundreds of years to control the spread of disease.
• Quarantine is one of the first steps taken by health officials in response to a disease outbreak.
• Quick action by health officials is needed to limit person-to-person spread of a contagious disease.
• Quarantine and isolation have helped limit the spread of diseases, such as plague and smallpox.

In the early stages of pandemic influenza, quarantine and isolation may slow the spread of the disease.
• Slowing the spread of pandemic influenza can reduce demands on hospitals.
• Slowing the spread of pandemic influenza can provide more time for preparation.
• Slowing the spread of pandemic influenza can provide more time for vaccine development.

Quarantine and isolation will help protect people from pandemic influenza while vaccines are being developed.
• People who have been infected with pandemic influenza may not know it.
• People infected with pandemic influenza can spread the disease, even if they have no symptoms.
• People exposed to the disease but not quarantined may spread disease to others without knowing it.

36. What is expected from the media regarding pandemic influenza?

The media will be a vital partner in pandemic influenza planning and response.
• The media can quickly provide urgent information during an influenza pandemic.
• The public will turn to the media before and during an influenza pandemic.
• The media may provide key information to those leading planning and response efforts.

Health officials count on the media to be informed about pandemic influenza.
• Universities are sharing research with the media about pandemic influenza.
• The Federal Government is making a media guide for pandemic influenza.
• State and local officials are updating local reporters on pandemic influenza.

Health officials count on the media to provide accurate and timely reports about pandemic influenza.
• The media can inform the public on current events and what can be expected in regards to pandemic influenza.
• The media can bring attention to pandemic influenza issues.
• The media can inform the public of available services and actions that should be taken.

37. What is different between 1918 and now that suggests pandemic influenza might go differently?

There have been many advances in the detection and tracking of influenza.
• Diagnosis and patient care have improved since then.
• Antiviral medicines did not exist in 1918 and could help in an influenza pandemic today.
• Influenza vaccines have been developed since 1918 and could help in an influenza pandemic.

The world's population is denser and global travel is much greater than in 1918.
• Faster movement of more people could speed the spread of a new influenza virus.
• Economic effects would be felt around the world more quickly than in 1918.
• Population density, especially in major cities, is greater now that it was in 1918, and even remote areas of the globe are more accessible.

It is difficult to predict how the next influenza pandemic might differ from the past.
• The severity of pandemic influenza would depend on the virus that causes it.
• Increased travel and greater population could speed the spread of pandemic influenza.
• Better detection and medical treatment could lessen the effects of an influenza pandemic.

38. During an influenza pandemic, what will you recommend that people do if they show symptoms of influenza?

In a pandemic, health officials would advise the public about what they should do.
• The best actions to take will depend on the specific situation.
• Advice would also change as the pandemic progresses.
• Right now, there is no pandemic influenza in the United States or the world.

During an influenza pandemic, people could take steps to prevent its spread and to care for themselves and their loved ones.
• Health officials would describe the signs and symptoms of the specific disease.
• Some steps are as simple as practicing good health habits, including proper hygiene, eating a balanced diet, and getting enough rest.
• People should discuss their own health concerns with their doctor, health department, or other trusted sources.

Preparing and staying informed are the best responses now.
• Right now, there is no pandemic influenza in the United States or the world.
• Preparing now can limit the effects of pandemic influenza.
• You can stay informed through http://www.pandemicflu.gov/.

APPENDIX 5 TO SECTION IV

HAZARDOUS MATERIALS SPILL/RELEASE

Ref: (a) Hazardous Materials Incident Data, Office of Hazardous Materials Safety, U.S. Department of Transportation http://hazmat.dot.gov/pubs/inc/hmisframe.htm
(b) OPA 90 (Oil Pollution Act 1990)
(c) Emergency Response Guide

1. **Scope.** All areas within the Southeast Region are susceptible to a hazardous materials spill/release. References (a) through (c) are germane to this appendix.

2. **Overview.** Chemicals are found everywhere and all U.S. Navy Installations have their share ranging from exotic fuels, special cleaning agents, to protective paints. Hazards can occur during production, storage, transportation, use, or disposal. If hazardous material is used unsafely or released in harmful amounts into the environment, it places the installation and surrounding community at risk.

3. **General Guidance**

a. Authority. CNRSEINST 3440.2D.

b. Assumptions. May become an incident of national attention.

c. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

d. Mass Warning and Notifications. Mass notifications are normally not required. When appropriate/needed, notifications will be made by any means available to get the word out; i.e., Messages, e-mails, telephones, computer networks, marquees, public announcements, etc.

e. Activation Levels. As a minimum, a partial activation of the affected Installation EOC. The Regional Operations Center will be staffed according to the severity/complexity of the incident.

4. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Emergency Management Working Group (EMWG) and approved by the Region Commander/Installation Commanding Officer.

5. **Training Requirements.** Installations should be proficient in containment (both on land and water), clean-up, and proper storage procedures.

6. **Equipment Requirements.** Hazard dependent and can vary from skin covering to requiring a fully encapsulated suit.

7. **Exercise and Evaluation Requirements.** Exercises rest within OPA 90 for oil spills/releases based on their frequency and evaluations.

8. **Additional.** The U.S. Coast Guard may be involved if the contamination enters in major water ways, coastal water, and the ocean. Additionally, the Environmental Protection Agency (EPA) as well as State Natural Resource Agencies may become involved.

APPENDIX 6 TO SECTION IV

TRANSPORTATION ACCIDENTS

1. **Scope.** All areas within the Southeast Region are susceptible to transportation accidents.

2. **General Guidance**

a. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

b. Mass Warning and Notifications. Not normally required. But where appropriate/needed will be made by all means available; i.e., messages, e-mails, telephones, computer networks, marquees, public announcements, etc.

3. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Emergency Management Working Group (EMWG) and approved by the Region Commander/Installation Commanding Officer.

APPENDIX 7 TO SECTION IV

STRUCTURAL FAILURE/COLLAPSE

1. **Scope.** All areas within the Southeast Region are susceptible to a structural/building failure.

2. **General Guidance**

a. Authority. CNRSEINST 3440.2D.

b. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

c. Mass Warning and Notifications. Not normally needed. But where and when appropriate will be made by all means available; i.e., messages, e-mails, telephones, computer networks, marquees, public announcements, etc.

3. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Emergency Management Working Group (EMWG) and approved by the Region Commander/Installation Commanding Officer.

APPENDIX 8 TO SECTION IV

INFRASTRUCTURE OR UTILITY LOSS OR INTERRUPTION

1. **Scope.** All areas within the Southeast Region are susceptible to infrastructure or utility loss or interruption.

2. **General Guidance**

a. Authority. CNRSEINST 3440.2D.

b. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

c. Mass Warning and Notifications. Will be made by all means available; i.e., messages, e-mails, telephones, computer networks, marquees, public announcements, etc.

3. **Functional Area Guidance**

a. Regional Operations Center.

b. Regional Dispatch Center (not currently operational).

c. Communications.

d. Category 1 Personnel.

e. Emergency Management.

f. Fire and Emergency Services (F&FS).

g. Emergency Medical Services (EMS).

h. Naval Security Services (NSF) - Region will have to rely on installation support.

i. Explosive Ordnance Disposal (EOD).

j. Health Service Support - Region will have to rely on installation support.

k. Industrial Hygiene Support.

l. Occupational Safety and Health.

m. Public Works - Region will have to rely on installation support.

n. Public Affairs.

o. Mass Care.

p. Meteorology and Oceanographic (METOC) Support.

q. Mortuary Affairs - Will be provided by local resources.

r. Supply and Logistics.

s. Emergency Response Team (ERT).

t. Search and Rescue.

u. Evacuation Management Team.

v. Local Safe Haven Management Team.

w. Shelter Management Team.

APPENDIX 9 TO SECTION IV

ENVIRONMENTAL POLLUTION/CONTAMINATION

Ref: (a) U.S. EPA Superfund Information Systems:
http://cfpub.epa.gov/supercpad/cursites/srchsites.cfm
(b) CERCLIS Database:
http://cfpub.epa.gov/supercpad/cursites/srchsites.cfm
http://www.epa.gov/superfund/sites/npl/npl.htm

1. **Scope.** All areas within the Southeast Region are susceptible to environmental pollution/contamination hazards. References (a) and (b) are germane to this appendix.

2. **General Guidance**

a. Authority. CNRSEINST 3440.2D.

b. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

c. Mass Warning and Notifications. Will be made by all means available; i.e., messages, e-mails, telephones, computer networks, marquees, public announcements, etc.

3. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Emergency Management Working Group (EMWG) and approved by the Region Commander/Installation (name) Commanding Officer.

APPENDIX 10 TO SECTION IV

AGRICULTURAL INCIDENTS/FOOD QUARANTINE

Ref: (a) U.S. Forest Service Code 5 and applicable State regulations
(b) Wildland Fire Statistics: http://www.nifc.gov/stats/index.html
(c) National Weather Service's National Fire Weather Map http://fire.boi.noaa.gov/

1. **Scope.** All areas within the Southeast Region are susceptible to agriculture hazards. References (a) through (c) are germane to this appendix.

2. **Overview**. Agricultural hazards can be categorized into two separate divisions - natural and man-made. Examples of natural include: Storms, Water (too much/little), Temperature (too hot/cold), Infestation (insect/vermin), Disease and Fire, etc. Examples of man-made include: Spillage, Construction, Land Usage, Fire, etc. Either too much of any or combination thereof will have a direct affect on crops or animal husbandry, causing shortages and/or changes in styles of living for many individuals. The only agricultural hazard effecting an installation is Grassland and/or Forest Fires.

3. **General Guidance**

a. Authority. CNRSEINST 3440.2D

b. Assumptions. Will have no or minimal affect on an installation's overall mission. However, may have a short-term effect due to smoke and firefighting activity.

c. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

d. Mass Warning and Notifications. None.

e. Activation Levels. None.

f. Hazard-Specific Procedures. Guidance provided by State Forestry Service.

4. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Emergency Management Working Group (EMWG) and approved by the Region Commander/Installation Commanding Officer.

5. **Training Requirements.** Training can be received by the local Forestry Department.

6. **Equipment Requirements.** No special equipment is required.

7. **Exercise and Evaluation Requirements.** Joint participation exercise with the local Forestry Service and Fire Departments (if deemed necessary by the Installation's Hazard Analysis).

8. **Additional Resources**. Mutual-aid.

APPENDIX 11 TO SECTION IV

TERRORISM INCIDENTS

Ref: (a) Terrorism Knowledge Base: http://www.tkb.org

1. **Scope.** Any installation within the Southeast Region could be the target to terrorism, foreign or domestic. Reference (a) is germane to this appendix.

2. **Overview.** Terrorist attacks are calculated and planned over a period of time; they are not a haphazard spur of the moment occurrence. Examples: The explosion at the Federal Building in Oklahoma City took months to carry out while the destruction of the Twin Towers took several years. Terrorists use various means to accomplish their goals, but they revolve around five basic types: Chemical, Biological, Radiological, Nuclear, or High Explosive. The acronym for these types of events is CBRNE. All but the explosive event is concerned with their lasting effects of contamination. Some contamination is short lived and are ineffective in hours (like some biological agents exposed to sunlight) while others have effects that can last for years or longer (radiological/nuclear).

3. **General Guidance**

a. Authority. CNRSEINST 3440.2D.

b. Assumptions. That agencies (such as: FBI, CIA, NCIS, etc.) will be able to gain enough intelligence to raise the threat level allowing for preparedness and increased security measures prior to the incident occurring.

c. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets. The actions of the Region or Installation will be the same regardless of the type of incident (Chemical, Biological, etc.). Also, the actual control of the Region or Installation is limited by time. When the FBI arrives (within hours) on scene, they will assume command responsibility of any terrorist incident.

d. Mass Warning and Notifications. Will be made by all means available; i.e., messages, e-mails, telephones, computer networks, marquees, public announcements, etc.

e. Activation Levels. The activation levels for the Installation involved in a Terrorist incident will be a full activation of the Emergency Operations Center (EOC) and the assumption of Force Protection Condition (FP-CON) Delta. Other Installations will assume the appropriate or directed EOC and FP-CON settings.

f. Hazard-Specific Procedures. Extreme caution shall be used for searching for secondary devices, containing/evacuating personnel (because of their possibility of being contaminated or their spreading it), the need for the establishment of decontamination procedures, and treatment of injured/infected as quickly as possible.

4. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Emergency Management Working Group (EMWG) and approved by the Region Commander/Installation Commanding Officer.

5. **Training Requirements.** Training will be required by all Installation personnel. Category 1 through 5 personnel will have to know what symptoms to look for, what self protection is available to them, and what protective measures they must employ. Category 5 personnel will also have to be trained in the use of PPE, DECON procedures, and treating contaminated personnel.

6. **Equipment Requirements.** Equipment needs will be based on the Group and ROC Levels of the Installation.

7. **Exercise and Evaluation Requirements.** Full Scale Exercises should be conducted annually for those Installations having received Installation Protection Program (IPP) Lite (a variation of Protection Management (PM) Guardian) equipment. Installations not yet receiving IPP Lite equipment should evaluate existing procedures during a table top exercise (TTX).

8. **Additional**. A Glossary has been included on pages IV-11-3 through IV-11-5 of this Appendix, addressing CBRNE terminology.

TERRORIST RELATED GLOSSARY

Aero-medical Evacuation System. A system which provides: (1) control of patient movement by air transport; (2) specialized medical attendants and equipment for in-flight medical care; (3) facilities on or in the vicinity of air strips and air bases for the limited medical care of transit patients entering, en route, via or leaving the system; and (4) communication with originating, destination, and en route medical facilities concerning patient transportation.

Antiterrorism (AT). Defensive measures used to reduce the vulnerability of individuals and property to terrorist acts, to include limited response and containment by local military forces.

Bio-chemicals. The chemicals that make up or are produced by living things.

Biological Agent. A microorganism that causes disease in personnel, plants, or animals, or causes the deterioration of material.

Biological Warfare (BW). The intentional use of biological agents as weapons to kill or injure humans, animals, plants, or to damage equipment.

Buddy Aid. The administration of a chemical agent antidote to a person exhibiting symptoms of severe chemical agent poisoning when that person is unable to administer self-aid.

Chemical, Biological, Radiological, Nuclear, and High Explosive (CBRNE). Any weapon or device that is intended or has the capability of causing death or serious bodily injury to a significant number of people through the release, dissemination, or impact of: Toxic or poisonous chemicals or their precursors, a disease organism, radiation, or radioactivity.

Chemical Agent. A chemical substance which is intended for use in military operations to kill, seriously injure, or incapacitate personnel through its physiological effects. The term excludes riot control agents, herbicides, smoke, and flame.

Chemical Monitoring. The continued or periodic process of determining whether or not a chemical agent is present.

Chemical Survey. The directed effort to determine the nature and degree of chemical hazard in an area and to delineate the perimeter of the hazard area.

Contamination Avoidance. Actions to prevent contamination from getting on mission-essential resources and personnel, whether directly from agent deposition or by transfer from contaminated surfaces.

Contamination Control Area (CCA). An area in which chemically contaminated PPE is removed; people, equipment, and supplies are decontaminated to allow processing between a toxic environment and a toxic free area; and people exiting a toxic free area may safely don PPE.

Contamination Control. Procedures to avoid, reduce, remove, or render harmless, temporarily or permanently, nuclear, biological, and chemical contamination for the purpose of maintaining or enhancing the efficient conduct of military operations.

Decontamination. The process of making any person, object, or area safe by absorbing, destroying, neutralizing, making harmless, or removing chemical or biological agents or by removing radioactive material clinging to or around it. As a part of the contamination control process, decontamination operations are intended to help sustain or enhance conduct of military operations by preventing or minimizing performance degradation, casualties, or loss of material.

Exclusion Area. The area immediately surrounding one or more receptacles in which chemical agents are contained. Normally, the boundaries of an exclusion area are the walls, floor, ceiling of a storage structure, secure container, or a barrier that establishes the boundary of the exclusion area (such as an igloo or a fence).

Force Protection. Security program designed to protect service members, civilian employees, family members, facilities, and equipment in all locations and situations. Force Protection is accomplished through planned and integrated application of combating terrorism, physical security, operations security, personal protective services and law enforcement, and supported by intelligence, counterintelligence, and other security programs to ensure combat capability.

G-Series Nerve Agents. Chemical agents of moderate to high toxicity developed in the 1930's. Examples are tabun (GA), sarin (GB), soman (GD) and GF.

Hazardous Material (HAZMAT). All hazardous substances, petroleum, natural gas, synthetic gas, acutely toxic chemicals, and other toxic chemicals, including hazardous waste.

Incapacitating Agents. Produce temporary physiological and/or mental effects via action on the central nervous system.

Initial Response Element. The first responders that deploy immediately to the disaster scene to provide initial command and control, to save lives, and to suppress and control hazards (Also known as an Incident Response Team (IRT).

Line-Source Delivery System. A delivery system in which the biological agent is dispersed from a moving ground or air vehicle in a line perpendicular to the direction of the prevailing wind.

National Command Authorities (NCA). The President and the Secretary of Defense or their duty deputized alternates or successors.

Non-Persistent Agent. A chemical agent that, when released, dissipates and/or loses its ability to cause casualties after 10 to 15 minutes.

On-Scene Commander (OSC). The OSC is designated by the Installation Commander to coordinate the actions at the incident site. All responders at an incident scene are under the operational command and control of the OSC. The senior fire official will serve as the OSC until a designated OSC arrives and is briefed on the situation.

Persistent Agent. A chemical agent that when released remains able to cause casualties for more than 24 hours to several days or weeks.

Personal Protective Equipment (PPE). In nuclear, biological, and chemical warfare, the personal clothing and equipment required to protect an individual from biological and chemical hazards and some nuclear effects.

Point-Source Delivery System. A delivery system in which the biological agent is dispersed from a stationary position.

Risk Management. The effective use of available resources (i.e., time, manpower, and funding) to prioritize and complete actions required to reduce risk, either through preventive actions or increased response capability.

Shelters. Structures that protect personnel from exposure to CB contamination. As a minimum, they provide a physical barrier that keeps a portion of the contamination away from the people inside.

Spore. A reproductive form of microorganism that becomes resistant to environmental conditions, such as extreme heat or cold while in a "resting stage."

Toxin Agent. A poison formed as a specific secretion product in the metabolism of a vegetable or animal organism as distinguished from inorganic poisons. Synthetic processes can also manufacture such poisons.

Virus. An infectious microorganism that exists as a particle rather than as a complete cell. Viruses are not capable of reproducing outside of the host cell.

APPENDIX 12 TO SECTION IV

CIVIL DISTURBANCE

(Riots, Strikes, Protests, or Mass Panic)

1. **Scope.** All areas within the Southeast Region are susceptible to a civil disturbance.

2. **Overview**. Civil disturbances against the military have been sporadic in the years after WWII. They have been triggered by one of two reasons: Hate or Fear. Most recent incidents have been peaceful in nature and have been targeted toward "Ban the Bomb" or "Nuclear Propulsion," primarily against nuclear submarines. Protests of the 60's and 70's were more of a violent nature against the war in Viet Nam; but, not so much against the military, but directed toward the U.S Government and the national policy at the time. The protests of today are again targeting the U.S. Government and national policies; however, the military is held in high esteem. That is why the probability of this type of incident is rated very low.

3. **General Guidance**

a. Authority. CNRESINST 3440.2D.

b. Assumptions. Civil disturbances or protests will take place outside of an Installation fence line.

c. Roles and Responsibilities. Are assigned in the transmittal letter and the position emergency management action sets.

d. Mass Warning and Notifications. Will be made by all means available; i.e., messages, e-mails, telephones, computer networks, marquees, public announcements, etc.

e. Activation Levels. Would be fairly low, minimal staffing in the EOC, FPCON Bravo for fence line security, and showing military working dogs. (Just showing dogs adds security emphasis - even if not attack trained.)

f. Hazard-Specific Procedures. The most common hazards to be used against an Installation are thrown non-lethal objects (rocks, bottles, debris, etc.). Anything lethal would have to be dealt with on a case-by-case basis. Civil disturbances will be dealt with by local, state law enforcement officials, and/or National Guard personnel. Military security forces will be demonstrating force preparedness inside the fence line.

4. **COOP and Business Continuity Guidance.** Shall be in accordance with the direction and policy developed by the Emergency Management Working Group (EMWG) and approved by the Region Commander/Installation Commanding Officer.

5. **Training Requirements.** Navy Police/Security will have to have training in crowd control measures.

6. **Equipment Requirements.** Crowd control gear: boots, helmet, face shield, body armor, body shields, batons, etc.

7. **Exercise and Evaluation Requirements.** Exercises and evaluations should be conducted with local and, where applicable, state law enforcement agencies.

8. **Additional**. The Installation Fire Department (to spray water on anyone attempting Installation access) and EMS (to administer medical aid) may be placed in a standby status.

SECTION V HAZARD SPECIFIC APPENDICES

APPENDIX 1 - TORNADO WARNING

1. **Scope.** All areas within the Southeast Region are susceptible to destructive weather relating to tornadoes.

2. **Overview**. Every Installation in the Southeast Region is susceptible to tornados and the damage they cause. A tornado is the most violent of all storms. Spawned by strong thunderstorms, they can cause fatalities and destroy a neighborhood in seconds. Tornados are rotating funnel-shaped clouds extending from a thunderstorm to the ground with whirling winds possibly reaching 300 miles per hours. Tornados can last just a few minutes to 20 minutes or longer and the damaging paths they create can range from yards in width to a mile and up to 50 miles long.

3. **Installation Guidance**

a. Issuance - Tornado warnings originate from:

(1) Norfolk weather.

(2) NAS Pensacola Emergency Manager.

(3) Local warning system; i.e., weather radio, local television/radio, or weather channel.

b. Mass Notification System Siren - The tornado warning siren will sound as a steady tone from the time the threat begins until the threat ends. All clear will evident as the siren tone ceases. Normally, threats will consist of short durations; i.e., from 2-20 minutes in time.

c. Activation - The tornado warning siren can be activated from several locations:

(1) NAS Pensacola Quarterdeck.

(2) NAS Pensacola Security.

d. Authority to Activate - the Commanding Officer, Executive Officer, Command Duty Officer, and Emergency Manger have the authority to give the command to activate the tornado warning siren.

e. Dissemination of Warning - there are several other ways of possibly dissemination of a tornado warning in addition to the siren (if time allows):

(1) Audio broadcast over the base television network.

(2) Computer Desktop Notification System.

(3) Email.

f. The EOC Activation Levels - Depending on damage, a partial or full activation of the Installation EOC could be ordered.

g. Personnel Responsibilities - All personnel are required to abide tornado warnings. Possible Scenarios include:

(1) If indoors, go to the interior of the building on the first floor and take cover

(2) If outdoors on foot, proceed immediately to the nearest building first floor for cover

(3) If outdoors in a vehicle, AND TIME PERMITS, proceed carefully to the nearest building and take cover on the first floor

(4) If outdoors in a vehicle, AND TIME DOES NOT PERMIT, pull over immediately and take cover in the nearest ditch or low lying area

SECTION V HAZARD SPECIFIC APPENDICES

APPENDIX 2 - FUEL SHORTAGE PLAN

1. **Scope.** All areas within the Southeast Region are susceptible to fuel shortages because of the proximity of commercial fuel farms to coastal regions and the risk of damage to offshore oil equipment from tropical systems.

2. **Purpose.** The purpose of the fuel shortage plan is to provide guidance on the short-term hardship of employees finding and purchasing fuel for travel to and from work. It is essential that measures be taken to ensure NAS Pensacola's overall operational and mission readiness remains in tact.

3. **Overview.** Fuel shortages can occur at any time and for a number of reasons, but the most common is approaching tropical systems. When tropical systems enter the Gulf of Mexico, depending on size and trajectory, oil platforms could shut down partially or totally. Furthermore, if a tropical system makes landfall in the vicinity of the northwestern Gulf Coast region, one or more fuel facilities could be shut down or destroyed. The Gulf Coast installations from Texas to Northwest Florida rely on these companies as our main source of fuel. Backup supplies take time to organize and ship, therefore interrupting our practically daily shipments of fuel.

4. **Installation Guidance**

a. Authority to Activate - The Installation Commanding Officer has the authority to restrict fuel sales to personnel deemed necessary to continue the Installation's operational and mission readiness.

b. Affected Areas - Includes all service stations on board the NAS Pensacola Complex, to include NAS Pensacola Corry Station.

c. Activation - Upon activation, the only personnel allowed to purchase fuel will be:

(1) Critical Personnel identified.

(2) Essential Personnel identified.

(3) NAS Pensacola Corry Station, Saufley Field, and NAVHOSP critical and essential personnel identified.

d. Identifying Personnel - A list of personnel from each department/ tenant command will be forwarded to the NASP Emergency Manager for consideration. Stickers will be given to personnel identifying personnel Critical, Essential, NAS Pensacola Corry Station, Saufley Field, and Naval Hospital Critical and Essential personnel (please see Section V HSA Appendix 3 for details).

e. Purchase Sites - There are three service stations based on the NAS Pensacola Complex. Priority will be given by station to restrict public access. Priority of installation stations are Touch and Go (located on Sherman Field), Auto Mart (Building 470 by Aviation Plaza), and NEX NAS Pensacola Corry Station.

f. Restrictions - The Installation Commanding Officer has the authority to restrict purchased fuel amounts. The recommended standard amount allowed for purchase is 15 gallons.

g. Priority Levels - Depending on severity of local fuel shortage, the fuel shortage plan will have execution levels. Each station that is restricted becomes off limits to all personnel except those identified in section d above:

(1) EXECUTION LEVEL I - restricts priority 1 station.

(2) EXECUTION LEVEL II - restricts priority 1 and 2 stations.

(3) EXECUTION LEVEL III - restricts all stations.

SECTION V HAZARD SPECIFIC APPENDICES

APPENDIX 3 - EVACUATION PLAN

1. **Scope.** All areas within the Southeast Region are susceptible to evacuation because of the proximity of installations to coastal regions or the possibility of installation contamination from man-made sources.

2. **Purpose.** The purpose of the evacuation plan is to provide guidance on the process and procedures of an evacuation.

3. **Overview.** Evacuations can be ordered for approaching natural disasters or for short notice CBNRE events, either terrorist related or accidental. This plan will allow for a structured execution of either scenario.

4. **Installation Guidance**

a. Authority to Activate - the Installation Commanding Officer has the sole authority to order an evacuation. All other subordinate CO's/OIC's/ Managers in charge in the NAS Pensacola Complex are required to comply with the evacuation order.

b. Affected Areas - Includes the NAS Pensacola Complex, NAS Pensacola Corry Station, and Saufley Field.

c. Designated Safe Haven - For the purpose of TAD orders, Atlanta, Georgia, has been designated as the area for evacuation. Personnel are authorized to travel to any location within a 350 NM radius of Atlanta with TAD orders.

d. Muster Team - A designated group of enlisted personnel with an OIC/CPOIC will travel to Meridian, Mississippi, 48 hours prior to landfall of a tropical system. With any immediate/unplanned evacuations, team will deploy to a closer designated location TBD. Further specific instructions are included in HSA Appendix 4 Muster Team Operations Plan.

e. Categories of Personnel - CNIC has assigned a category system for personnel on installations. Only two categories of personnel are stationed on board NAS Pensacola Complex:

(1) Category 2 - the majority of personnel assigned to the NAS Pensacola Complex; this group will evacuate.

(2) Category 5 - first responders and personnel that will man the EOC.

f. Evacuation Process

(1) Tropical Related - Once deemed that evacuation is imminent (normally between COR IV and III) several actions are required:

(a) **ICO.** Orders evacuation along with effective date and time.

(b) **Finance.** Arrange to obtain TAD orders from the region

(c) **All Personnel.** Ensure your NFAAS and/or TWMS data is current; this information determines how your TAD orders are processed

(d) **Muster Team.** Obtain and follow instructions of Muster Team Operations Plan (Section V HSA Appendix 4).

(f) **Emergency Manager.** Contact Meridian EM informing that evacuation is imminent and Muster Team will deploy follow instructions of Muster Team Operations Plan (Section V HSA Appendix 4). Assist Muster Team with any issues. Confirm muster line is operational. Confirm information line is operational.

(g) **Concept of Operations Plan (COOP).** If conditions warrant the evacuation of Category 5 personnel, the COOP is covered in (Section V HSA Appendix 6).

2009 STICKERS

CRITICAL

ESSENTIAL

Corry and Saufley/NAVHOSP

Housing occupants

Figure (1)

		Status (sticker color)			Evacuation Status							
Dept	Name	Critical		Fire/ Security/ Dispatch	EOC	Fire/ Security	working at base shelter	staying at local address	staying at local shelter	leaving area*	TWMS/ NFASS Data updated ?	Is family evacuating? If yes, give location

Figure (2)

SECTION VI

GENERAL APPENDICES

This appendix applies to the entire Installation EM Plan and is provided to establish terms of reference and assist in the identification of standard and applicable acronyms.

Tab 1 - Terms and Definitions.

Tab 2 - Acronyms.

APPENDIX 1 TO SECTION VI

DEFINITIONS

The principal terms used within this instruction are defined as follows:

Antiterrorism (AT). Defensive measures used to reduce the risk of individuals and property to terrorist acts, to include limited response and containment by local military and civilian forces. The AT Program is one of the several security-related programs that fall under the overarching Force Protection and Combating Terrorism programs.

Base Support Installation (BSI). A military installation of any service or agency designated by the Department of Defense, in or near an actual or projected domestic operational area to support DOD forces conducting civil support operations.

Casualty. Any person who is lost to the organization by having been declared dead, duty status - whereabouts unknown, missing, ill, or injured.

Civil-military operations. Group of planned activities in support of military operations that enhance the relationship between the military forces and civilian authorities and population and which promote the development of favorable emotions, attitudes, or behavior in neutral, friendly, or hostile groups.

Combatant Commander. A Commander-in-Chief of one of the unified or specified combatant commands established by the President of the United States.

Combating Terrorism (CbT). Combating terrorism within DOD encompasses all actions, including AT (defensive measures taken to reduce risk to terrorist acts), counter-terrorism (offensive measures taken to prevent, deter, and respond to terrorism), terrorism consequence management (preparation for and response to the consequences of a terrorist incident/event), and intelligence support (collection and dissemination of terrorism-related information) taken to oppose terrorism throughout the entire threat spectrum, including terrorist use of chemical, biological, radiological, nuclear materials, or high-yield explosive devices (CBRNE).

Command and Control. The exercise of authority and direction by a properly designated commander over assigned and attached forces in the accomplishment of the mission. Command and control functions are performed through an

arrangement of personnel, equipment, communications, facilities, and procedures employed by a commander in planning, directing, coordinating, and controlling forces and operations in the accomplishment of the mission.

Consequence Management (CoM). Offensive and defensive 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, including support missions as described in other Federal operations plans, such as predictive modeling, protective action recommendations, and mass decontamination.

Continuity of Operations Plan (COOP). The plan adopted by the Region or Installation that outlines how the command will restore mission essential functions at an alternate site and performs the functions for up to 30 days before returning to normal operations.

Crisis Management (CrM). Offensive and defensive measures to identify, acquire, and plan the use of resources needed to anticipate, prevent, and/or resolve a threat or act of terrorism including law enforcement, intelligence, surveillance, tactical operations, negotiations, forensics, and investigations, as well as technical support missions, such as agent identification, search, render safe procedures, transfer and disposal, and limited decontamination.

Critical Infrastructure. Those facilities, structures, systems, and equipment necessary to maintain the nation's national security, governance, public health and safety, economy, and public confidence. In the context of this Plan, it also includes mission sustainability.

Decontamination. The process of making any person, object, or area safe by absorbing, destroying, neutralizing, making harmless, or removing chemical or biological agents, or by removing radioactive material clinging to or around it.

Disaster declaration. A declaration by the President under the Stafford Act, following a request by a State Governor, directing that the resources of the Federal Government be sent to augment the state and local emergency response. Similar to an emergency declaration with the difference being the amount of funding the Federal Government will provide to the affected state.

Emergency Declaration (under 501(b) of the Stafford Act). Any occasion or instance for which, in the determination of the President, Federal assistance is needed to supplement State and local efforts and capabilities to save lives and to protect property and public health and safety, or to lessen or avert the threat of a catastrophe in any part of the United States. All requests for a declaration by the President that an emergency exists shall be made by the Governor of the affected State. The President may exercise any authority with respect to an emergency when he determines that an emergency exists for which the primary responsibility for response rests with the United States.

Emergency Operations Center (EOC). The site from which military or civil government officials (Federal, State, Local, or other services) exercise direction and control in an emergency.

Emergency Support Function (ESF). A functional area of response activity established to facilitate coordinated Federal delivery of assistance required

during the response phase to save lives, protect property and health, and maintain public safety. These functions represent those types of Federal assistance that the State likely will need most because of the overwhelming impact of a catastrophic event on local and State resources.

Emergency Responder. Military, Federal, and Host Nation emergency management and operations personnel, disaster preparedness officers, medical treatment providers at medical treatment facilities and clinics, preventive medicine, public health, industrial hygiene, safety, environmental, legal, public works, public affairs/information, mortuary affairs, and/or other designated personnel that actively support emergency operations either at or off the actual incident site.

Department of Homeland Security (DHS)/Federal Emergency Management Agency (FEMA). The Federal agency tasked to establish federal policies for and coordinate all civil defense and civil emergency planning, management, mitigation, and assistance functions of Executive Branch Agencies.

First Responder. Military, Federal, or Host Nation law enforcement, fire, rescue, emergency medical, EOD, public works, or HAZMAT response personnel who arrive on the scene of an incident and take action to save lives, protect property, and meet basic human needs.

Force Protection (FP). Actions taken to prevent or mitigate hostile actions against DOD personnel (to include family members), resources, facilities, and critical information. These actions conserve the force's fighting potential so it can be applied at the decisive time and place and incorporate the coordinated and synchronized offensive and defensive measures to enable the effective employment of the joint force while degrading opportunities for the enemy. Force protection does not include actions to defeat the enemy or protect against accidents, weather or disease.

Force Protection Condition (FPCON). A Chairman of the Joint Chiefs of Staff approved program standardizing the Military Services' identification of and recommended responses to terrorist threats against U.S. personnel and facilities. This program facilitates inter-Service coordination and support for antiterrorism activities. There are four FPCON's above normal.

Host Nation. A nation that receives the forces and/or supplies of allied nations, coalition partners, and/or NATO organizations to be located on, to operate in, or to transit through its territory.

Immediate Response Rule. Under terms outlined in **DODINST 3025.1/OPNAV 3440.16C** for Military Support to Civil Authorities (MSCA), when guidance cannot be obtained from higher headquarters on a timely basis because of emergency circumstances, a Commander may apply resources to facilitate saving human life or mitigate human suffering and to protect, preserve, or restore essential services of state and local governments, subject to reimbursement. Any Commander who is directed, or undertakes, to perform such functions shall facilitate the reestablishment of civil responsibility at the earliest time possible.

Immediate Response. Any form of action taken by the DOD component or military Commander to assist civil authorities or the public in saving lives, preventing human suffering, mitigating property damage under imminently serious conditions, when there is insufficient time to obtain formal approval for assistance from the chain of command.

Incident Command System (ICS). A system established by NIMS as a standard management organization for management of all major incidents.

Joint Information Center (JIC). A center established to coordinate the Federal public information activities on-scene. It is the central point of contact for all news media at the scene of the incident. Public information officials from all participating Federal agencies should collocate at the JIC. Public information officials from participating Federal, State, Local, Other Service, and/or private agencies also may collocate at the JIC.

Local Government. Any county, city, village, town, district, or political subdivision of any State, and Indian tribe or authorized tribal organization, or Alaska Native village or organization, including any rural community or unincorporated town or village or any other public entity.

Medical Treatment Facility. Refers to any medical facility, including a Base Medical Clinic or civilian or Host Nation hospital or clinic.

Mitigation. Lasting, often permanent, reduction of exposure to, probability of, or potential loss from emergencies.

Mutual Aid Agreement (MAA). Similar to Memorandums of Understanding/Agreement (MOU/MOA); Reciprocal assistance by Host Nation or other non-Military entity to an Installation for emergency services under a prearranged plan.

Memorandum of Understanding (MOU). Similar to MAA.

National Incident Management System (NIMS). The National Incident Management System, published on 1 March 2004, established standardized incident management processes, protocols, and procedures for all responders on any level will use to prepare for, prevent, respond to, and recover from domestic incidents regardless of size, cause, or complexity.

National Response Plan (NRP). The Federal Government's plan of action for assisting affected States and local jurisdictions in the event of a major disaster or emergency situation in which there is a need for Federal assistance under the authorities of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 USC 5 121 et seq. The Department of Homeland Security's Federal Emergency Management Agency is responsible for developing and maintaining the NRP.

Organic Assets. Personnel, equipment, or other resources which are inherent or owned by a particular organization.

Press Center: A location at or near the Joint Information Center from which media representatives can establish a working office.

Preparedness. Establishing authorities and responsibilities for emergency actions and garnering the resources to support them, conducting operations, and establishing the knowledge base to prepare for emergency actions to be taken on a time critical basis.

Public Affairs Officer (PAO). Official at headquarters or in the field responsible for preparing and coordinating the dissemination of public information in cooperation with other responding agencies.

Recovery. The effort to restore infrastructure and the social and economic life of a community to pre-emergency conditions.

Response. Those activities designed to address the immediate and short-term effects of the onset of an emergency or disaster.

Risk Assessment. A DOD, command, or unit-level evaluation (assessment) to determine the risk of terrorist attack to a installation, unit, exercise, port, ship, residence, facility, or other site. Identifies areas of improvement to withstand, mitigate, or deter acts of violence or terrorism.

Risk Management. The process of identifying, evaluating, selecting, and implementing actions to reduce risk. Using Risk Management as a decision making tool allows Commanders to take a disciplined approach to a complex, and often subjective decision, which balances the likelihood of an incident occurring and the impact of the incident if it occurs.

Stafford Act (Robert T. Stafford Disaster Relief and Emergency Assistance Act). Legislation enacted [42 U.S.C. 5121 - 5206] to provide an orderly and continuing means of assistance by the Federal Government to State and local governments in carrying out their responsibilities to alleviate the suffering and damage which result from disasters.

Terrorism. The calculated use of violence or threat of violence to induce fear; intended to coerce or to intimidate governments or societies, in the pursuit of goals that are generally political, religious, or ideological.

Unified Command (UC). A component of ICS that provides the organizational management tool to coordinate the effective involvement of the various agencies. The UC brings together the "incident commanders" of all major organizations involved in the response. The Unified Command is depicted as a triangle; the member placed at the top of the triangle has the final authority within ICS for the response.

Weapons of Mass Destruction (WMD). Any weapon or device that is intended, or has the capability of a high order of destruction and/or of being used in such a manner as to destroy large numbers of people. Can be nuclear, chemical, biological, radiological, or large explosive device weapons, but excludes the means of transporting or propelling the weapon where such means is a separable and divisible part of the weapon. Termed a CBRNE terrorism event within the context of the Navy Shore Installation EM Program.

APPENDIX 2 TO SECTION VI

ACRONYMS

AAR	After Action Review
ADCON	Administrative Control
AFRAT	Air Force Radiological Assessment Team
AOR	Area of Responsibility
APOD	Aerial Port of Debarkation
ARC	American Red Cross
AT	Anti-terrorism
ATO	Anti-terrorism Officer
AVMA	Animal Veterinary Medical Association
BOL	BUPERS on Line
BGAN	Broadband Global Area Network
BSI	Base Support Installation
BUMED	Bureau of Medicine and Surgery
C2F	Second Fleet
C4ISR	Command, Control, Communications, Computers, Intelligence, Surveillance, and Reconnaissance
CAMEO	Computer-Aided Management of Emergency Operations
CBB	Capabilities Based Budgeting
CBIRF	U.S. Marine Corps' Chemical Biological Incident Response Force.
CBRNE	Chemical, Biological, Radiological, and Nuclear Explosive
CB-RRT	U.S. Army Chemical, Biological Regional Response Team
CDO	Command Duty Officer
CEPPO	Chemical Emergency Preparedness and Prevention Office
ERCLA	Comprehensive Environmental Response, Compensation, and Liability Act (Also known as Superfund)
CERT	Community Emergency Response Team
CF	Critical Infrastructure
CFFC	Combined Fleet Forces Command (now USFFC)

CIP	Critical Infrastructure Protection
CMF	Critical Mission Facility
CNIC	Commander, Naval Installations Command
CO	Commanding Officer
COLS	Common Output Level Standards
COG	Continuity of Government
CoM	Consequence Management
COOP	Continuity of Operations Plan
COP	Common Operational Picture
COR	Conditions of Readiness
COTS	Commercial Off the Shelf
CPX	Command Post Exercise
CrM	Crisis Management
CVAMP	Consolidated Vulnerability Assessment Management Plan
DAT	Damage Assessment Team
DCC	Donations Coordinating Center
DCO	Defense Coordinating Officer
DECON	Decontamination
DHS	Department of Homeland Security
DMIS	Disaster Management Interoperability Services
DOC	Department Operations Center
DOD	Department of Defense
DODRDS	Department of Defense Resource Data Base
DOE	Department of Energy
DON	Department of the Navy
DOS	Department of State
DCT	Donations Coordination Team
DSCA	Defense Support to Civil Authorities
EAS	Emergency Alert System

EAP	Emergency Action Plan
ECG	Exercise Control Group
EEI	Essential Element of Information
EM	Emergency Management
EMAC	Emergency Management Assistance Compact
EMCA	Emergency Management Capability Assessment
EMO	Emergency Management Officer
EMS	Emergency Medical Services
EMTS	Emergency Management of the Transportation System
EMWG	Emergency Management Working Group
EOC	Emergency Operations Center
EOD	Explosive Ordnance Disposal
EOP	Emergency Operating Procedure
EP	Emergency Preparedness
EPA	Environmental Protection Agency
EPCRA	Emergency Planning and Community Right-to-Know Act
EPI	Emergency Public Information
EPLO	Emergency Preparedness Liaison Officer
EPR	Emergency Preparedness and Response
ERS	Emergency Relocation Site
ERT	Emergency Response Team
ESF	Emergency Support Function
FAC	Family Assistance Center
F&ES	Fire and Emergency Services
FD	Fire Department
FEMA	Federal Emergency Management Agency
FORCECOM	U.S. Army's Force Command
FOUO	For Official Use Only
FP	Force Protection

FRP	Federal Response Plan (Replaced by National Response Plan - NRP)
FTX	Field Training Exercise
GETS	Government Emergency Telecommunications Service
GIS	Geographical Information System
GOTS	Government Off the Shelf
GSO	General Service Organization
HAZMAT	Hazardous Materials
HEICS	Hospital Emergency Incident Management System
HHS	Department of Health and Human Services
HMS	Hazardous Materials Regulations
HSPD-5	Homeland Security Presidential Directive 5
HSPD-8	Homeland Security Presidential Directive 8
HSS	Health Service Support
HVAC	Heating Ventilation and Air-Conditioning
IAB	Interagency Board for Equipment Standardization and Interoperability
IAIP	Information Analysis and Infrastructure Protection
IAP	Incident Action Plan
IC	Incident Command
ICO	Installation Commanding Officer
ICP	Incident Command Post
ICS	Incident Command System
IH	Industrial Hygiene
IMS	Incident Management System
INS	Incident of National Significance
ISSA	Inter-Service Support Agreement
IT	Information Technology
IVA	Integrated Vulnerability Assessment
JAG	Judge Advocate General

JFMCC	Joint Forces Maritime Component Commander
JFO	Joint Field Office
JHOC	Joint Harbor Operations Center
JIC	Joint Information Center
JOC	Joint Operations Center
JRSOI	Joint Reception, Staging, Onward Movement, and Integration
JSIVA	Joint Service Integrated Vulnerability Assessment
JTF	Joint Task Force
JTTF	Joint Terrorism Task Force
LEL	Lower Explosive Level
LEPC	Local Emergency Planning Committee
M&S	Modeling & Simulation
MAA	Mutual Aid Agreement
MBAC	Military Biological Advisory Committee
MCP	Mobile Command Post
MEF	Mission Essential Function
MMRS	Metropolitan Medical Response System
MOA	Memorandum of Agreement
MOOTW	Military Operations other than War
MOU	Memorandum of Understanding
MTF	Medical Treatment Facility
NAVFAC	Naval Facilities Command
NAVOSH	Navy Occupational Safety and Health
NAVSEA	Naval Sea Systems Command
	NAVSUP Naval Supply Systems Command
NCIS	Naval Criminal Investigation Services
NCH	Natural and Cultural Resources and Historic Properties
NCP	National Contingency Plan (or National Oil and Hazardous Substances Pollution Contingency Plan)

NCS	National Communications System
NEHC	Navy Environmental Health Center
NEMA	National Emergency Management Association
NEO	Non-Combatant Operations
NERMS	Navy Emergency Response Management System
NEPA	National Environmental Policy Act
NGO	Non-governmental Organization
NIMS	National Incident Management System
NIOSH	National Institute for Occupational Safety and Health
NMCC	National Military Command Center
NMS	National Military Strategy
NNPP	Naval Nuclear Propulsion Program
NPC	Navy Personnel Command
NRCC	National Response Command Center
NRP	National Response Plan
NS	National Security
NSF	National Security Force
NSF	Naval Security Force
NSSC	National Special Security Events
NVOAD	National Voluntary Organization Active in Disaster
OIC	Officer-in-Charge
OPNAVINST	Chief of Naval Operations Instruction
OSA	Operational Staging Area
OSH	Occupational Safety and Health
OSHA	Occupational Safety and Health Administration
PAO	Public Affairs Office/Officer
PAS	Personal Accountability System
RFF	Request for Forces
RFI	Request for Information

PFO	Principal Federal Official
PID	Pre-Determined Response (basic)
PM	Program Manager
POA&M	Plan of Action and Milestones
POD	Port of Debarkation
PPE	Personal Protective Equipment
PHEO	Public Health Emergency Officer
PSWG	Public Safety Working Group
PST	Public Safety Technology
RCRA	Resource Conservation and Recovery Act
RDC	Region Dispatch Center
REPAT	Repatriation
RFA	Request for Assistance
ROC	Regional Operational Center
ROC	Required Operational Capability
ROICC	Regional Officer-in-Charge of Construction
ROM	Restriction of Movement
RPA	Regional Planning Agent
RTO	Recovery Timeframe Objective
RWO	Regional Watch Officer
SEL	Standardized Equipment List
SERC	State Emergency Response Commission
SITREP	Situation Report
SITSUM	Situation Summary
SMART	U.S. Army Special Medical Augmentation Response Team
SME	Subject Matter Expert
SOP	Standard Operating Procedures
SPOD	Sea Port of Debarkation
SWF	Strategic Weapons Facility

SWO	Senior Watch Officer
TSP	Telecommunications Service Priority
TSWG	Technical Support Working Group
TTP	Tactics, Techniques, and Procedures
TTX	Table Top Exercise
UC	Unified Command
UCS	United Command System
USAR	Urban Search and Rescue
USATEU	U.S. Army Technical Escort
USEPAERT	U.S. Environmental Protection Agency Environmental Response Team
USFFC	United States Fleet Forces Command
USG	U.S. Government
USGC	U.S. Coast Guard
USDA	U.S. Department of Agriculture
VMATS	Veterinary Medical Assistance Teams
VOAD	Voluntary Organization Active in Disaster
WSP	Wireless Priority Service
WMD	Weapons of Mass Destruction