

# Public Health in Action: Responding to Emergencies Across the Nation

## Selected Biological Incidents



### SALMONELLA

December 2009, Multiple states – **Salmonella Typhimurium outbreak linked to frogs.** Public health officials investigated infections and determined source of outbreak.

### ANTHRAX



December 2009, New Hampshire – **Anthrax linked to animal hides.** State health departments determined that a case of gastrointestinal anthrax was linked to hides used in drum making and a drumming circle.



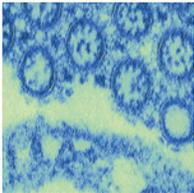
### MUMPS

August 2009-Spring 2010, New Jersey and New York – **Mumps outbreak.** Investigations and testing led to identification of thousands of cases, most in religious communities.

### E. COLI



June-July 2009, Multiple states – **E.coli O157:H7 outbreaks linked to raw prepackaged cookie dough and to beef.** Public health officials and federal agencies investigated outbreaks and identified associations with food sources.



### H1N1

Spring 2009, Multiple states - **2009 H1N1 Influenza Pandemic.** In April 2009, states began to implement their pandemic plans. Activities included disease monitoring, ongoing communication updates, appropriate use of mitigation measures, implementation of H1N1 vaccination campaigns, and the coordination of response efforts with partners.

### SALMONELLA



February 2009, Nebraska – **Salmonella Saintpaul outbreak linked to alfalfa sprouts.** 235 persons from 14 states were infected; initial investigation by Nebraska health department led to investigations in 13 additional states.



### SALMONELLA

January 2009, Multiple states – **Salmonella Typhimurium outbreak linked to peanut butter.** Public health epidemiologists, sanitarians, and laboratorians led investigations for product recalls that stopped the spread of outbreaks.

While state and local agencies devoted a significant amount of their time, energy, and resources to respond to the 2009 H1N1 influenza pandemic, many other events also required their attention and expertise. Support from CDC's Public Health Emergency Preparedness cooperative agreement helped state and local public health departments build and strengthen their abilities to respond effectively. Below are examples of biological incidents and natural disasters – including H1N1 – to which state and local health departments responded.

## Selected Natural Disasters

December 2009, Northeast U.S. – **Severe Winter Weather.** Public health officials issued guidance for staying safe and healthy during severe snow storms. Guidance included protection against hypothermia, carbon monoxide poisoning from indoor heaters, and preparations for extended periods of confinement.

**SEVERE  
WINTER  
WEATHER**



September 2009, American Samoa – **Tsunami Response.** A magnitude 8.0 earthquake generated three separate tsunami waves. Public health and partners worked together to ensure appropriate medical response.



**TSUNAMI**

September 2009, Multiple states – **Southeast U.S. Floods.** Public health officials provided guidance on sanitation, hygiene, and safety to protect against disease and injury to the thousands affected by floods.

**FLOODS**



April-May 2009, Multiple states – **Wildfires.** Public health officials issued guidance about air quality and care and services for evacuees, evacuation centers, at-risk populations, and responders. The health department also issued guidance that addressed exposures, clean up from fires, and subsequent response.



**WILDFIRES**

February 2009, Kentucky – **Ice Storm.** Severe storm caused 36 deaths and left 770,000 residents without power. State health department secured equipment for shelters, provided prescription medications to individuals in shelters, and issued guidance on food safety and other public health issues related to power outages.

**ICE STORMS**



March 2009, Alaska – **Volcano.** Mt. Redoubt eruption cloud estimated at 50,000 feet. Public health officials monitored ash plume and issued air quality assessments, evacuation recommendations, and instructions for at-risk persons.



**VOLCANO**

March 2009, North Dakota – **Floods.** Public health officials coordinated evacuations, temporary housing, healthcare for acute injuries and other long-term health risks including hypothermia, bacteria, and mold.

**FLOODS**



Note: Information on pages 4-5 is adapted from a fact sheet from the Association of State and Territorial Health Officials.