

UNCLASSIFIED

**Defense Technical Information Center  
Compilation Part Notice**

**ADP013450**

**TITLE:** Description of the US National Pharmaceutical Stockpile Program

**DISTRIBUTION:** Approved for public release, distribution unlimited

**This paper is part of the following report:**

**TITLE:** Chemical and Biological Medical Treatment Symposium - Industry  
II World Congress on Chemical and Biological Terrorism

**To order the complete compilation report, use:** ADA411272

The component part is provided here to allow users access to individually authored sections of proceedings, annals, symposia, etc. However, the component should be considered within the context of the overall compilation report and not as a stand-alone technical report.

**The following component part numbers comprise the compilation report:**

ADP013371 thru ADP013468

UNCLASSIFIED

## **81. DESCRIPTION OF THE U.S. NATIONAL PHARMACEUTICAL STOCKPILE PROGRAM**

Steven D. Bice  
Centers for Disease Control and Prevention (CDC)  
National Center for Environmental Health  
4770 Buford Highway, S.E.  
Mail Stop F-23  
Atlanta, Georgia 30341, USA

### **ABSTRACT**

A release of selected biological or chemical agents targeting the U.S. civilian population will require rapid access to large quantities of pharmaceuticals and medical supplies. Few U.S. state or local governments have the resources to create sufficient pharmaceutical stockpiles on their own. The Centers for Disease Control and Prevention, under U.S. Congressional mandate, has developed and implemented a National Pharmaceutical Stockpile (NPS) to address this need. The NPS Program is a key component of the Nation's plan to mitigate health consequences of biological and/or chemical terrorism. CDC's NPS Program is organized into a two-phased approach that includes pre-positioned caches of pharmaceuticals and medical materiel standing ready for immediate deployment to a terrorism incident—with plans in place assuring delivery within 12 hours of a decision to deploy. Each NPS cache contains enough pharmaceuticals and medical supplies for the treatment and prophylaxis of hundreds of thousands of persons for agents such as anthrax, plague, and tularemia for several days. If the incident requires additional pharmaceuticals and/or medical supplies, the second phase of the Program will be implemented, and large quantities of follow-on supplies will be shipped within 24 to 36 hours to support the emergency response efforts at the incident site.

### **INTRODUCTION**

A release of selected biological or chemical agents targeting the U. S. civilian population will require rapid access to large quantities of pharmaceuticals and medical supplies. Such quantities may not be readily available unless special stockpiles are created. No one can anticipate exactly where a terrorist will strike and few state or local governments have the resources to create sufficient stockpiles on their own.

As part of the Department of Health and Human Services 1999 Bioterrorism Initiative, CDC was designated to lead an effort working with governmental and non-governmental partners to upgrade the nations' public health capacity to respond to biological and chemical terrorism and establish a Bioterrorism Preparedness and Response Program. Critical to success of this initiative is to ensure that capacity is developed at U.S. federal, state, and local levels.

The National Pharmaceutical Stockpile (NPS) is a national repository of pharmaceuticals, antidotes to chemical poisons, supplies for administering drugs, and emergency medical equipment for rapid deployment to the site of a biological or chemical terrorism. The NPS Program is designed to supplement and re-supply state and local public health agencies in the event of a biological or chemical terrorism incident anywhere, at anytime within the U.S. or its territories.

## **APPROACH**

The NPS is segregated into several packages. First, there are several immediate response Push Packages that are caches of pharmaceuticals, antidotes, and medical supplies designed to address a variety of biologic or chemical agents. These Push Packages are positioned in secure regional warehouses ready for immediate deployment to an airfield close to the affected area within 12 hours of the federal decision to release the assets.

If the incident requires additional pharmaceuticals and/or medical supplies, follow-on vendor managed inventory supplies known as VMI Packages will be shipped to arrive within 24 to 36-hours. The follow-on VMI packages can be tailored to provide pharmaceuticals, equipment, supplies and/or products specific to the suspected or confirmed agent or combination of agents.

## **DETERMINING AND MAINTAINING NPS ASSETS**

The Centers for Disease Control and Prevention (CDC) partnered with U.S. intelligence experts who evaluate chemical and biological terrorism to ensure that the NPS formulary reflects current, potential biological, and/or chemical threats to the U.S.— as determined through national security analyses. CDC and its U.S. federal partners use this information to prioritize the potential biological and chemical agents and to determine NPS contents. NPS assets are stored at strategic locations throughout the U.S. to assure the most rapid response possible. CDC ensures that all medical materiel will be rotated and kept within potency shelf life limits.

## **RAPID COORDINATION & TRANSPORT**

CDC commits to have the first NPS Push Package delivered anywhere in the continental U.S. within 12 hours of a Federal decision to deploy. CDC also plans to reach sites beyond the continental U.S. in 12 hours (delivery may take longer in some circumstances). The Push Packages are configured to facilitate immediate loading onto trucks or cargo aircraft-- to ensure the most rapid transportation. Concurrent to NPS transport, CDC will be coordinating with state and/or local officials so that the NPS can be efficiently received and distributed upon its arrival at the site.

## **WHEN AND HOW IS THE NPS DEPLOYED?**

The decision to deploy NPS assets may be based on evidence showing the overt release of an agent or credible intelligence information. It is more likely, however, that subtle indicators, such as unusual morbidity and/or mortality identified through the Nation's disease outbreak surveillance and epidemiology network, will alert health officials to the possibility (and confirmation) of a biological or chemical terrorism incident. To receive NPS assets, the affected state can directly request the deployment of the NPS from the Director of CDC. Once requested, the Director of CDC has the authority, in consultation with the Surgeon General, the Secretary of Health and Human Services, the Federal Emergency Management Agency (FEMA) and the Federal Bureau of Investigation (FBI), to order the deployment of the NPS.

## **TRANSFER OF NPS ASSETS TO STATE AND/OR LOCAL AUTHORITIES**

In a biological or chemical terrorism event, state, local, and private stocks of medical materiel will deplete quickly. The NPS Program can support local first response efforts with a Push Package followed by quantities of materiel specific to the terrorist agent used (VMI). The NPS is not a first response tool— state and local first responders and health officials can

use the NPS to bolster their response to a biological or chemical terrorism attack— thereby increasing their capacity to more rapidly mitigate the results of this type of terrorism.

CDC will transfer NPS materiel to the state and/or local authorities once it arrives at the airfield. State and/or local authorities will then repackage and label bulk medicines and other NPS materiel according to their state terrorism contingency plan. CDC's technical advisors will accompany the NPS in order to assist and advise state/local officials in putting the NPS assets to prompt, effective use.

#### **TRAINING AND EDUCATION**

The NPS Program is charged with leading a nationwide preparedness training and education program for state and local health care providers, first responders, and governments (to include Federal officials, Governors' offices, state/local health departments, and emergency management agencies). This training not only explains the NPS mission and operations, it alerts state and local emergency response officials to the important issues they must plan for in order to receive, secure, and distribute NPS assets.

#### **KEY WORDS**

Pharmaceuticals, medical supplies, stockpile, emergency response, repository, national asset