

LIVINGSTON PARISH CRI Response Plan

Mass Antibiotic Dispensing: 48 Hour Plan



On behalf of Livingston Parish:

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RECORD OF CHANGES

Mass Antibiotic Dispensing: 48 Hour Plan

Change #	Date of Change	Entered By	Date Entered
1	04-21-12	Sheri Kirley	4-21-12
2	6-5-12	Brandi Janes	6-5-12
3	3-5-14	Brandi Janes	3-5-14
4	12-17-14	Brandi Janes	12-17-14
5	1-26-16	Brandi Janes	1-27-16

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INTRODUCTION

I. Background

According to CDC guidance under the Cities Readiness Initiative (CRI), local jurisdictions must plan for dispensing of prophylaxis medications to its full population within 48 hours of a decision to deploy.

Through its planning activities, Livingston Parish has identified the need to be able to distribute medication throughout Livingston Parish to **135,751** persons within a 48-hour period. Dispensing Methods such as drive thru, traditional General PODS and Occupational PODS etc has been determined to be the most effective and efficient means for distributing prophylaxis medications such as antibiotics to healthy people during a large-scale public health emergency. By utilizing the POD (point of Distribution) distribution approach for mass prophylaxis activities, we can ensure that hospitals and other treatment centers are able to care for anyone who gets sick as a result of the emergency. Livingston Parish has also implemented a modified non-medical model for its drive thru concept of operations. This model takes the traditional clinical setting and streamlines the process in order to provide medication to an extremely large number of persons within a very short time frame. This model was derived in response to CRI guidance.

II. Purpose

The purpose of the *Mass Antibiotic Dispensing: 48 Hour Plan* is to provide guidance for Livingston Parish on implementing mass antibiotic prophylaxis efforts – that is, the operational guidelines needed to distribute medication, coordinate human resources and control the inventory of antibiotics and supplies. The Response Plan should be read and understood prior to a situation in which the activities described are necessary. It is a dynamic document that will be updated to reflect new developments, incorporating changes in response roles and improvements in response capability developed through ongoing planning efforts.

III. Situation

The mission of the Louisiana Strategic National Stockpile's Cities Readiness Initiative (CRI) Program is to minimize the loss of lives during a catastrophic public health emergency by providing needed drugs to 100% of the jurisdiction's identified population within a 48-hour time frame. The CRI program focuses on increasing the capacity to deliver medications and medical supplies from the Strategic National Stockpile (SNS). The SNS is a national cache of medical material, equipment, and pharmaceuticals. These assets are available to supplement local capacity in responding to a widespread terrorist attack, a natural disaster or an industrial incident. CRI will stress the use of the non-medical model in order to attain the objective of dispensing medications in a 48-hour time-frame. In addition to serving its residents, Livingston Parish will also provide prophylaxis to visitors and tourists, and to those who regularly commute to the affected area.

The CDC maintains the Strategic National Stockpile (SNS) and provides technical assistance on dispensing operations to local public health and emergency management planners throughout the United States. However, the SNS and its support staff do not constitute a stand-alone first response operation. Similarly, the National Disaster Medical System (NDMS) has been established by the Department of Health and Human Services to provide rapid response capability for medical disasters throughout the United States, but this system as well is not designed to supplant comprehensive local planning and operations for mass prophylaxis campaigns. Instead, these Federal assets and resources are intended to build on the local and regional first response infrastructure (that is, personnel and planning, but not necessarily stockpiles) for carrying out mass prophylaxis.

This is the Livingston Parish 48-hour Mass Dispensing Response Plan, a part of the Regional SNS Plan. This plan will also be an annex to the Livingston Parish Emergency Operation Plan created by the Livingston Parish Office of Homeland Security and Emergency Preparedness.

The Livingston Parish 48-hour Mass Dispensing Response Plan was developed with the assistance of public health officials and response partners from the state, regional, and local levels. Portions of the Livingston Parish 48-hour Mass Dispensing Response Plan Response Plan are confidential. Personnel contact information and documentation of training will be included in an appendix, which will be kept confidential within the Livingston Parish Office of Homeland Security and Region 9 Office of Public Health. This plan will continue to evolve as new information becomes available. This plan will be reviewed annually and updated as determined by the Livingston Parish Office of Homeland Security and Emergency Preparedness, the Department of Health and Hospitals, Office of Public Health, and their response partners.

IV. Assumptions

Recognition of the outbreak may not be immediate. Cases in hospitals will have been processes and confirmed before emergency is recognized.

Parish response activities are dependent upon the State's ability to provide the medication and supplies.

Personnel may be affected by the event and may limit the amount of resources.

Due to industry and offshore activities, and tourists and transient populations, additional prophylaxis medication will be needed.

A non-medical model is going to be used in this operation; anything less is not the CRI plan.

THE PLAN

I. Command and Control

Existing departmental command systems should be applied in accordance to National Incident Management Systems (NIMS) to mass prophylaxis planning and operations in accordance with the designated functions of the Office of Homeland Security and Emergency Preparedness (OHSEP). These structures should delineate operational priorities and identify who is responsible for making decisions related to the public health response to an event requiring mass prophylaxis, for carrying out response activities before, during and after mass prophylaxis activities and for preparing and maintaining the mass prophylaxis plan.

A. Planning

1. The Livingston Parish OHSEP will have the authority to direct planning for the implementation of mass prophylaxis efforts in Livingston Parish
2. The Livingston Parish OHSEP, in conjunction with the Region 9 Office of Public Health, will develop, review and update the Response Plan on an ongoing basis
3. The Livingston Parish OHSEP will coordinate mass prophylaxis planning with Region 9 Parishes, the Region 9 Office of Public Health, and other area jurisdictions
4. The Livingston Parish OHSEP will coordinate planning for the identification, recruitment and training of personnel for mass prophylaxis efforts
5. The Livingston Parish OHSEP, in conjunction with the Department of Health and Hospitals, Office of Public Health will coordinate the planning of communications activities for mass prophylaxis efforts
6. The Livingston Parish OHSEP, in conjunction with the Department of Health and Hospital, Office of Public Health will coordinate the planning for citizen education activities during mass prophylaxis activities
7. The Livingston Parish OHSEP Director will provide the plan to key policymakers and other stakeholders

B. Activation

1. The Office of Public Health, State Epidemiologist, along with the Louisiana State Health Officer, based upon the scenario and information gathered, will determine the need for mass prophylaxis, and make the appropriate recommendations. This information will be communicated to the Livingston Parish OHSEP Director.
2. The Livingston Parish OHSEP Director will request through GOHSEP medications and supplies.
3. As the need for and scope of mass prophylaxis efforts are established, the Livingston Parish OHSEP Director will initiate communication with appropriate local, regional, state and national counterparts.

C. Operation

The purpose of the plan is to describe the distribution of medication to the designated jurisdiction's population within 48 hours of exposure to aerosolized anthrax. The majority of supplies available through SNS are intended for mass prophylaxis. The Receiving, Staging and Storing (RSS) site will deliver medication to the identified Occupational and General PODs of Livingston Parish where the POD will make arrangements to secure the medication.

D. Dispensing

1. The State Receiving, Staging and Storing (RSS) site will deliver medication to the Occupational and General PODs of the Parish to be distributed to prophylaxis the response individuals and distribute medication to the general public.
2. The Parish Emergency Operations Center will coordinate with all agencies to implement the parishes all hazards plan.
3. Patient information sheet is attached as Appendix "A".

E. Security

Livingston Parish Sheriff's Office and Local Police Department will provide personnel to dispensing teams as well as inventory site.

F. Public Information

1. Please refer to annex "7" of the All Hazards Plan.
2. Department of Health and Hospitals, Office of Public Health Shelf kit.

G. Transportation

It is the plan of Livingston Parish that the Cashes of medications will be delivered directly to the PODs. The initial push of the States cash of medications for First Responders will be delivered to the Livingston Parish Police Jury (EOC) where First Responder Agencies will send one representative to secure the medication needed for their agency and their family members. General and Occupational PODs will receive medication directly from the State RSS (Receiving Storing and Staging site).

II. Prophylaxing Special Populations within 48 Hours

There are a few populations for which OHSEP must make plans that go beyond or are divergent from the procedures outlined above. For example, a number of special considerations must be made when planning for the prophylaxis of first responders, critical infrastructure personnel and institutionalized persons (parish jails). The concerns and strategies that are unique to each of these populations are detailed below.

A. Prophylaxing Healthcare Workers

Many considerations must be made to ensure that healthcare delivery is maintained to the fullest extent possible during an event that requires a mass prophylaxis effort. Requiring healthcare workers to receive their antibiotic at a POD or at their residence would pull valuable manpower away from the settings in which their services are needed. Therefore, during mass prophylaxis events efforts must be made to ensure healthcare workers will receive prophylaxis at their affiliated treatment center. The medication for hospitals will be sent directly from the State Receiving, staging, and storage site to the Hospitals for distribution to the hospital staff their families and the patients in the hospital not patients families at home .

Healthcare Personnel Estimate			
Hospital	Estimated Number of Hospital Staff	Estimated Number of family members	Total
North Oaks Clinic	50	3.5	175
Our Lady of the Lake	180	3.5	630
Parish Health Unit	20	3.5	70
Total	250		875

Last Updated:

B. Prophylaxing First Responders

The prophylaxing of first responder will be done in two phases. The initial cash of state antibiotics will be in short supply and will be used to prophylax first responders who are directly involved in the SNS distribution process. Instantaneously, the state will request federal assets to treat other first responder not directly involved in the SNS process and the general public.

“First responders” are all persons who respond to and manage emergency events. Examples of first responders include fire, law enforcement and emergency medical personnel, as well as public health personnel and others who assist with dispensing.

When responding to an event involving an agent that requires prophylaxis for protection all first responders should receive prophylaxis as soon as the threat is known. These prophylaxis activities must occur rapidly, in order to minimize delays in response activities. In addition, the family/household members of all first responders should receive prophylaxis as well, in order to provide first responders the knowledge that family members are taken care of.

Each first responder organization will be encouraged to identify one (1) representative to obtain prophylaxis from an OHSEP designated location (Livingston Parish Fair Grounds) for all of their first responder staff and their families. It will be the responsibility of each entity to then provide prophylaxis to appropriate staff and their families. Family member **Do Not** need to report to the agency the medication can be taken home to them. OHSEP will work with first responder entities to encourage them to develop an inventory of the information they will need to obtain prophylaxis for their first responder staff, including the applicable number of staff and family members and whether they meet assistance criteria. Such inventories should be updated on a regular basis to ensure that the information is current. First responder agencies will be required to document the name, date of birth, address, date, time and the specific vaccine or medication provided to each person and return this information to the parish. This can be done using the head of household form provided by the parish.

First Responder Personnel Estimates			
Agency or Function	Estimated Number of First Responder Personnel	Estimated Number of Family Members	Total
Acadian Ambulance (Regional)	178	3.5	623 (regional)
Livingston Parish Sheriff Dept	280	3.5	980
Denham Springs Police Dept	67	3.5	235
Walker Police Dept	35	3.5	123
Livingston Police Dept	25	3.5	88
Port Vincent Police Dept	8	3.5	28
French Settlement Police Dept	25	3.5	88
Albany Police Dept	10	3.5	35
Killian Police Dept	12	3.5	42
Springfield Police Dept.	12	3.5	42
911 Center	18	3.5	63
Fire District 1/Albany	24	3.5	84
Fire District 2/Springfield	40	3.5	140
Fire District 3/Denham Springs	30	3.5	105
Fire District 4/Walker	105	3.5	368
Fire District 5/Denham Springs	70	3.5	245
Fire District 6/Livingston	15	3.5	53
Fire District 7/Colyell	35	3.5	123
Fire District 8/French Settlement	25	3.5	88
Fire District 9/Maurepas	24	3.5	84
Fire District 10/Holden	25	3.5	88
Fire District 11/Independence	17	3.5	60
Livingston Parish Office of Homeland Security and Emergency Preparedness	6	3.5	21
Total	1,086		3,806

B. Prophylaxing Critical Infrastructure Personnel

Critical infrastructure personnel are those persons who ensure the integrity of basic community services such as electricity, gas, water and communications. The maintenance of such services during a large-scale emergency is crucial to the health and safety of the population, as well as to the response efforts.

In an event that requires a mass prophylaxis effort, critical infrastructure personnel should receive prophylaxis at their place of work in order to prevent disruption of services. Each critical infrastructure organization will be encouraged to identify a representative to obtain prophylaxis from an OHSEP-designated location (Livingston Parish Fair Grounds) for all of their critical infrastructure staff and their families. It will be the responsibility of each entity to then provide prophylaxis to the appropriate staff and their families. Family members **Do Not** need to report to the agency the medication can be taken home to them. OHSEP will work with these organizations to encourage them to develop an inventory of the information they will need to obtain prophylaxis for their critical infrastructure staff, including the applicable number of staff and whether they meet assistance criteria. Such inventories should be updated on a regular basis, to ensure that the information is current. First responder agencies will be required to document the name, date of birth, address, date, time and the specific vaccine or medication provided to each person and return this information to the parish. This can be done using the head of household form provided by the parish (provided to parish by Public Health Emergency Response Coordinator, Region 9).

Critical Infrastructure Personnel Estimates			
Entity	Estimated Number of Critical Infrastructure Personnel	Estimated Number of Family Members	Total
Entergy	165	3.5	578
Demco	100	3.5	350
Diversion Water comp	10	3.5	35
Albany Water	5	3.5	18
Colyell Water	5	3.5	18
Denham Springs Water	10	3.5	35
French Settle. Water	5	3.5	18
Livingston Utilities	10	3.5	35
Port Vincent Water	10	3.5	35
Denham Springs Gas	15	3.5	53
French Settlement Gas	3	3.5	11
Walker Utilities	21	3.5	74
Denham Springs Sewer	15	3.5	53
Ward II Water	26	3.5	91
Denham Springs DPW	20	3.5	70
Walker DPW	65	3.5	228
Livingston DPW	70	3.5	245
Gravity Drainage Dist.1	19	3.5	67
Gravity Drainage Dist.2	15	3.5	42
Gravity Drainage Dist.3	16	3.5	56
Total	605		2118

Last Updated: 12/17/14

C. Prophylaxing Institutionalized Populations

Institutionalized populations include residents of criminal justice, long-term care and nursing home facilities. In an event that requires a mass prophylaxis effort; institutionalized populations should receive prophylaxis at their resident facilities. In addition, the staff of these facilities should also receive prophylaxis at their place of work in order to minimize the disruption of services to resident populations. Each of these 600 entities will be encouraged to identify a representative to obtain prophylaxis from an OHSEP-designated location for all of their residents and staff. It will be the responsibility of each entity to then provide prophylaxis to the residents and staff. OHSEP will work with these organizations to encourage them to develop an inventory of the information they will need to obtain prophylaxis for their residents and staff, including the applicable number of staff and residents and whether they meet assistance criteria. Such inventories should be updated on a regular basis to ensure that the information is current.

However, long-term care and nursing home facilities will be receiving their medications directly from the State Receiving, staging, and storage site. These facilities will be responsible for the distribution of the medications to their patients, staff and the staff's families.

Institutionalized Population Estimates				
Institution	Estimated Number of Residents	Estimated Number of Staff	Estimated Number of Family Members	Total
Livingston Parish Prison	600	85	3.5	898
Golden Age Nursing Home	175	168	3.5	763
Harvest Manor Nursing Home	171	160	3.5	731
La Plantation Asst. Living	75	22	3.5	152
Totals:	1021	435		2544

III. Communicating with the Public

Communicating information to the public about large scale prophylaxis activities will be carried out according to policies and procedures described in the *Crisis and Emergency Risk Communication Plan (Emergency Public Information Plan)*. This document details the means, organization and steps by which OHSEP, in conjunction with the Department of Health and Hospitals, Office of Public Health will provide information and instructions to the public about who should be prophylaxed and the process for receiving antibiotics.

The unique nature of mass prophylaxis activities requires crisis and risk communications planning. Guided by its *Emergency Public Information Plan*, OHSEP, in conjunction with the Department of Health and Hospitals, Office of Public Health will develop messages to ensure that the public receives timely and accurate information about the following:

1. Basic information about the disease or threat in question, including high-risk populations and recommended preventive practices
2. Basic information about the antibiotic in question
3. The availability of antibiotic and the rationale for the prophylaxis scenario that is being employed
4. The persons who should seek prophylaxis
5. The persons who should not seek prophylaxis

APPENDIX A: FORMS TEMPLATES

Head of Household Form

Date: _____

Name _____ Phone 1: _____ Phone 2: _____

Address _____ City: _____ State: _____ ZIP: _____

For each question, circle YES or NO for each person for whom you are picking up medicine. If you need another form, ask the POD staff.

First and Last Name (Please Print)	PERSON 1		PERSON 2		PERSON 3		PERSON 4		PERSON 5	
	SELF									
Date of Birth										
Symptoms of disease?	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
Allergic to Ciprofloxacin?	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
Allergic to Doxycycline?	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
Allergic to Amoxicillin?	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
Pregnant or Breastfeeding?	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
For children, give age and weight, if known.	Age: _____		Age: _____		Age: _____		Age: _____		Age: _____	
	Weight: _____		Weight: _____		Weight: _____		Weight: _____		Weight: _____	
DO NOT WRITE BELOW THIS LINE – FOR POD STAFF USE ONLY										
Medical evaluation needed?	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
Instructions for POD Screening Staff: For each person choose the appropriate antibiotic IF SYMPTOMATIC, MUST GO TO MEDICAL EVALUATION Adults – check “Adult dose” box Children by weight chart – check “Child” box and mark the number of teaspoons needed every 12 hrs using the pediatric dosing guide (every 8 hrs if amoxicillin)	Ciprofloxacin <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 12 hrs		Ciprofloxacin <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 12 hrs		Ciprofloxacin <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 12 hrs		Ciprofloxacin <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 12 hrs		Ciprofloxacin <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 12 hrs	
	Doxycycline <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 12 hrs		Doxycycline <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 12 hrs		Doxycycline <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 12 hrs		Doxycycline <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 12 hrs		Doxycycline <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 12 hrs	
	Amoxicillin <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 8 hrs		Amoxicillin <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 8 hrs		Amoxicillin <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 8 hrs		Amoxicillin <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 8 hrs		Amoxicillin <input type="checkbox"/> Adult dose <input type="checkbox"/> Child by weight chart _____ tsp every 8 hrs	
Place stickers from medicine bottles here										
Medical Consultation Note:										
Instructions for Dispensing Staff										
Adults – Place 1 sticker from medication bottle on the medication information sheet, place the second sticker from the medication bottle on this sheet. Write name directly on medication information sheet. Give medication information sheet and the medication to the person.										
Children – Place 1 sticker from the medication bottle on the crushing instruction sheet, place the second sticker from the medication bottle on this sheet. Write name and pediatric dosage on medication crushing instructions sheet. Give medication information sheet and medication to the person.										
POD Name: _____			Parish: _____			Region: _____				

Rev. 2-9-2012

Patient: _____

Doxycycline *Take this medicine as prescribed.*

Doxycycline belongs to a class of drugs called tetracycline antibiotics. It is approved by the Food and Drug Administration (FDA) to treat and protect people who have been exposed to anthrax spores.

How to take doxycycline

ADULTS: Take 1 tablet every 12 hours as directed.

CHILDREN: A child's dose depends on body weight. Give the medicine to your child as directed by the doctor.

Take doxycycline with food and least one full glass of water. Avoid taking antacids (like Tums or Maalox), cholestyramine (Questran), colestipol (Colestid), dairy products (like milk or yogurt) or vitamins 3 hours before or after taking doxycycline.

If you miss a dose, start again taking 1 pill every 12 hours. Do not take 2 pills to make up for the missed dose. *Finish all your pills, even if you feel okay, unless your doctor tells you to stop. If you stop this medication too soon, you may become ill.*

Side effects

Common side effects of doxycycline include an upset stomach, vomiting, or diarrhea. If you have problems with any of these symptoms, tell your doctor. Less common side effects include dark urine, yellowing of the eyes or skin, sore throat, fever, unusual bleeding or bruising, fatigue, white patches in the mouth. If any of these symptoms occur, call your doctor right away.

Allergic reactions are rare. Signs of an allergic reaction are rash, itching, swelling of the tongue, hands or feet, fever, and trouble breathing. If any of these symptoms occur, call your doctor right away.

SPECIAL NOTE FOR CHILDREN: *This medicine may cause staining of the teeth in children younger than 8 years old. This means that their teeth can become grayish in color and this color does not go away. This medicine can also cause bone growth delay in premature infants but this side effect goes away after the medicine is finished.*

SPECIAL NOTE FOR PREGNANT WOMEN: *There is little data about side effects from the use of this drug during pregnancy. If the mother of an unborn baby takes doxycycline, staining of baby teeth or poor bone development can result. There is a remote chance of severe liver disease in some pregnant women.*

Precautions

- Be sure to tell the doctor if you are allergic to any medicine.
- It is very important to tell the doctor the names of ALL medicines that you are currently taking even pills bought at the store such as vitamins and antacids.
- Doxycycline can make skin very sensitive to the sun which increases the chance of getting severe sunburn. Avoid the sun as much as possible. When outside, wear a long sleeve shirt and hat and always apply sunscreen (30 SPF).
- Birth control pills may not work as well when taking this medication. Be sure to use condoms or another form of birth control until you are finished the entire course of treatment. If you are pregnant or breastfeeding, tell your doctor.
- In women, doxycycline can cause vaginal itching and discharge commonly known as a yeast infection. Tell your doctor if this happens.
- Tell the doctor if you have ever had problems with your liver or kidneys, or if you have frequent heartburn.

PRESCRIBER _____

State Health Officer or Regional Medical Director

DISPENSED BY: LOUISIANA OFFICE OF PUBLIC HEALTH

For more information, visit www.la.cdc.gov/agent/anthrax, or call CDC at 800-CDC-INFO (English and Spanish) or 888-232-6348 (TTY).

This card explains how to prepare emergency dosages of
Doxycycline

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

You will need:

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

Directions:

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



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



NAME _____ AGE/WT: _____

DOSAGE: TAKE _____ TEASPOONFULS EVERY 12 HOURS

PRESCRIBER: _____

(STATE HEALTH OFFICER OR REGIONAL MEDICAL DIRECTOR)

DISPENSED BY: LOUISIANA OFFICE OF PUBLIC HEALTH

How Much of the Doxycycline Mixture to Give a Child

The number of teaspoons of the doxycycline mixture to give a child depends on the child's weight. **If child's weight is unknown, weigh child before giving the first dose.** The chart tells you how much to give a child for one dose. You should give the child two doses each day (one in the morning and one in the afternoon) for 10 days.

If the child weighs

Give the child

12 - 22 (lbs.)	One (1) teaspoon (5mL) of the doxycycline mixture
23 - 33 (lbs.)	One and one half (1 ½) teaspoons (7.5mL) of the doxycycline mixture
34 - 45 (lbs.)	Two (2) teaspoons (10mL) of the doxycycline mixture
46 - 55 (lbs.)	Two and one half (2 ½) teaspoons (12.5mL) of the doxycycline mixture
56 - 65 (lbs.)	Three (3) teaspoons (15mL) of the doxycycline mixture
66 - 77 (lbs.)	Three and one half (3 ½) teaspoons (17.5mL) of the doxycycline mixture
78 - 88 (lbs.)	Four (4) teaspoons (20mL) of the doxycycline mixture (or 1 tablet)

Children heavier than 88 pounds who are exposed to anthrax should take one (1) 100-mg tablet of doxycycline two times a day (at the same time each day if possible) for 10 days. If the child cannot swallow tablets, use the directions for preparing a mixture and give 4 teaspoons twice a day.

How already prepared Doxycycline mixture should be stored

- Prepare the doxycycline mixture daily, store mixture in covered container and refrigerate.
- Doxycycline mixed with any of the recommended foods will keep for at least 24 hours.
- Throw away any unused portions.

Dosing Chart for Doxycycline Mixture

This chart shows you the amount to give a child for one dose. You should give a child two doses (one in the morning and one in the evening) each day for 60 days. Use measuring spoons to measure the dose accurately.

Oral Dosing Regimen for One Dose		
If the child weighs	Give the child	which is
0-12.5 lbs.	One half (1/2) teaspoon of the doxycycline mixture	12.5 mg of doxycycline
12.5 – 25 lbs.	One (1) teaspoon of the doxycycline mixture	25 mg of doxycycline
25 - 37.5 lbs.	One and one half (1 ½) teaspoons of the doxycycline mixture	37.5 mg of doxycycline
37.5 – 50 lbs.	Two (2) teaspoons of the doxycycline mixture	50 mg of doxycycline
50 - 62.5 lbs.	Two and one half (2 ½) teaspoons of the doxycycline mixture	62.5 mg of doxycycline
62.5 – 75 lbs.	Three (3) teaspoons of the doxycycline mixture	75 mg of doxycycline
75 - 87.5 lbs.	Three and one half (3 ½) teaspoons of the doxycycline mixture	87.5 mg of doxycycline
87.5 - 100 lbs.	Four (4) teaspoons of the doxycycline mixture	100 mg of doxycycline

APPENDIX B: ACRONYMS

CDC	Centers for Disease Control and Prevention
CRI	Cities Readiness Initiative
NIMS	National Incident Management System
OHSEP	Office of Homeland Security and Emergency Preparedness
OPH	Office of Public Health
POD	Point of Dispensing
SNS	Strategic National Stockpile

APPENDIX C: RESOURCES

1. City Police Departments
2. Parish Employees
3. Livingston Parish Sheriff's Office
4. All Parish Fire Departments
5. Parish Resources
6. Critical Infrastructure Offices
7. Parish Municipalities

APPENDIX D: Regional POD In A Box Inventory

Item	Container	Quantity per Kit	Number of Kits	Total Quantity
Hand Soap	A	10	10	100
First Aid Kit	A	2	10	20
Can Liners	A	1	10	10
Extension Cords	B	4	10	40
Clipboards	B	8	10	80
Storage Clipboards	B	1	10	10
Stapler	C	7	10	70
Standard Staples	C	2	10	20
Legal Ruled Writing Pads	C	3	10	30
Paper Clips	C	4	10	40
Manila Folders	C	1	10	10
Scissors	C	5	10	50
Rubber Bands	C	2	10	20
Packaging Tape	C	1	10	10
Scotch Tape	C	1	10	10
Duct Tape	C	2	10	20
Caution Barrier Tape	C	4	10	40
Ballpoint Pens (Blue)	C	19	10	190
Mechanical Pencil	C	50	10	500
Permanent Markers	C	2	10	20
Utility Knife	C	2	10	20
Utility Knife Refill Blades	C	1	10	10
POD Signage	External	1 (set)	10	10
Megaphones	External	1	10	10
Traffic Cones	External	8	10	80
Easels	External	5	10	50
Surge Protector	External	2	10	20
Bank Radio Charger	External	1	10	10
Toilet Tissue	External	2 (cs)	10	20
Paper Towels	External	2 (cs)	10	20
700/800 Mhz Radios	Pelican Case	1	10	10
Walk About Radios	Pelican Case	5	10	50
Xerox Paper	External	1 (cs)	10	10

Kept by Region 9 until needed by Livingston Parish.