

socially isolated. This presentation describes a risk-based approach to analyzing the factors that should be considered when managing the companion animals of this special population. The application of these principles will be demonstrated through discussion of a US Public Health Service veterinary mission, in a US Health and Human Services Federal Medical Station established for evacuees of Hurricane Ike, which struck the US gulf coast in September 2008.

Methods: A structured approach was applied to develop the most effective method for managing each pet that presented, which included a hazard identification based on owner, pet, environmental, and animal interaction factors. Based on an analysis of these factors, a method was developed to manage each animal, which could include hospitalization, quarantine, or regular on-site visits. An unforeseen byproduct of this approach was an improvement of morale for shelter residents and medical personnel.

Results: Approximately 300 evacuees presented with about 30 companion animals (dogs and cats). The mission resulted in 100% rabies vaccination, 100% reunification, veterinary care as needed, zoonotic disease risks identified and mitigated, and the human animal bond maintained for the duration of the evacuation.

Conclusion: The case study demonstrated that public health pet management is important to the animals, patients, and staff in a disaster scenario. A structured hazard identification process requires a team approach including medical, mental health, veterinary, sanitarian, and community partners.

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The Promoting of Wellbeing Before, During, and After an Animal Health Emergency Response

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Study/Objective: Animal health disease responses can expand to become emergencies that affect responders and agricultural workers differently. The effects of stress from long days, uncertainty, decision making or new duties can manifest themselves during and well after an event is concluded. As many emerging and notifiable diseases are zoonotic, the use of One Health principles are required for effective leadership and decision making to protect human and animal health.

Background: Utilizing the pillars of emergency management, the preparedness phase is to assess response needs and to develop protocols that should include human resources that minimise risks to responders for their safe return to normal duties. Also part of the assessment is the continuation of business, and decisions will be required for the prioritizing of tasks. Wellbeing is defined by the World Health Organization (WHO) as 'a state of mind in which an individual is able to realize his or her own abilities, cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community'.

Methods: During preparedness and tabletop disease simulations, all potentially affected parties should be included for the sharing of knowledge, discussion, modelling, and prioritization

for response and business continuity. The sharing of responder experiences is an effective method to introduce the topic of wellbeing and good practices that support resilience. Additional time should be scheduled for group discussion and good practices, for the development of protocols that support wellbeing as part of responder health and safety.

Results: Normally well-being may be taken for granted; however, during an extended response it is necessary to support and encourage good wellbeing practices for all of those affected the response.

Conclusion: The self-monitoring of staff during and after a response is a good practice to be supported by awareness training.

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An Emergency Exercise in the Veterinary Diagnostic Laboratory - Preparing for a Foreign Animal Disease Outbreak

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Study/Objective: The objectives of this simulation were to design and conduct an operational exercise to test the Standard Operating Procedure (SOP) for management of a suspected Foreign Animal Disease (FAD) case in the postmortem laboratory, and to evaluate joint coordination and communication networks between the veterinary diagnostic laboratory and regulatory agencies involved in outbreak response.

Background: In this era of heightened awareness of the risks of emerging and transboundary diseases, postmortem facilities remain a problematic site for potential exposure and spread of high-risk pathogens. A producer experiencing high mortality on a farm is likely to bring a carcass to a laboratory for postmortem examination. Should this animal be infected with a Foreign Animal Disease (FAD) such as foot and mouth disease, the biosecurity and notification procedures implemented in the first few hours following a tentative diagnosis by the pathologist will assist in containment of the disease, and limit potential spread to other clients using diagnostic laboratory facilities.

Methods: Employing templates developed by the Justice Institute of British Columbia, exercise and evaluation guides were developed to describe scope, objectives, expected actions, and desirable timelines during the simulation.

Results: This FAD simulation was deemed a success, based upon formal feedback provided by the evaluator. All exercise participants fulfilled their respective roles and worked as a cohesive team, remaining calm and handling challenges as they arose. An informal "hotwash" networking session held immediately following the exercise included partners from several animal health regulatory agencies. A gap analysis was performed, and after-action plans were developed to resolve the identified deficiencies.

Conclusion: A well-designed operational exercise ensures a successful outcome, measured by an opportunity to practice