Dear Emergency Management Agency:

On behalf of the Department of Homeland Security (DHS), I appreciate your ongoing commitment to protect and prepare the public in case of disaster. I am writing about an important aspect of emergency public health preparedness that needs attention at the State, territorial and local level. During a time of crisis, patient access to blood products is often critical. Your assistance is needed to ensure that blood support to patients in disasters is appropriately prioritized in State, territorial, tribal and local emergency planning.

An essential treatment in trauma, blood is also required by the chronic needs of over 5,000 U.S. patients each day. This is in addition to those who may be affected by disasters. In the U.S., blood is typically collected, processed, and stored at regional non-profit blood centers and is distributed to hospitals on a daily or weekly basis. In some cases, the blood center may be located several hours away from the hospitals it supplies. This reality can create a set of logistical challenges during a disaster that impacts the local infrastructure (e.g., road damage, power outages, flooding, etc.). Our goal is to maintain an adequate blood supply that can be delivered to patients in need in affected disaster areas.

During previous exercises and actual disasters, including hurricane Katrina, some blood centers encountered difficulties obtaining fuel for generators to collect and maintain blood supplies, emergency vehicles to distribute blood with a limited shelf-life, or reliable access to emergency communications. These deficits represent a significant vulnerability in our readiness, and places disaster victims who may need blood for traumatic injuries and patients with ongoing need for transfusion-related therapies at unwarranted risk.

I respectfully request your assistance in coordinating with the blood centers in your region to ensure that blood is available when and where it is needed in a disaster. This can be accomplished by integrating the organizations responsible for the collection and distribution of blood into your emergency management planning efforts, and by including blood-related scenarios in your drill and exercise programs.

The American Association of Blood Banks (AABB) Inter-organizational Task Force on Domestic Disasters and Acts of Terrorism has encouraged all blood centers to contact their State, local, or territorial emergency management agencies to participate in the emergency management planning process. The Task Force also advocates the education of emergency management personnel on the unique needs of collecting and distributing blood to victims of a disaster while maintaining routine support for ongoing patient care. DHS supports these initiatives.
DHS asks your office to consider developing an operating plan to ensure that licensed or Food and Drug Administration registered blood centers are appropriately prioritized for access to fuel, emergency communications equipment and frequencies, and transportation during disasters. As you revise and exercise your ESF#8 plans, blood collection facilities and the AABB Inter-organizational Task Force should be seen as assets and considered as essential partners in preparedness planning.

Thank you for your prompt attention to this important issue.

Sincerely,

Robert B. Stephan
Assistant Secretary
Infrastructure Protection