Many of these lessons from Exercise Supreme Truth now have become incorporated into Australian practice, but still more questions remain unanswered.

Keywords: Australia; contamination; Exercise Supreme Truth; field exercise; mass casualty; terrorism

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The Bioterrorism Preparedness and Response Wall Chart

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Prior to the anthrax attacks in the United States, the Principle Investigators for the Bioterrorism Preparedness and Response Wall Chart were addressing the American Emergency Medical community's preparedness for a bioterrorism attack. The stealth nature of bioterrorism agents is inherent in their varied incubation periods, initial "non-specific" manifestations, and ability to be disseminated covertly, making recognition, diagnosis, and prompt treatment challenging.

Bioterrorism agent information was available, but lacked comprehensiveness and user-friendly packaging. One solution was the development of the Bioterrorism Preparedness and Response Wall Chart—a ready reference tool that could be hung in emergency departments and other clinical venues and used as a diagnostic aid.

The Bioterrorism Preparedness and Response Wall Chart captures nuances of the 13 aerosolized bioterrorism agents most likely to be deployed, using a systematic approach. Clinical manifestations for dermatological, gastrointestinal, neurological, respiratory, ocular, systemic, and other systems are listed. Agent-specific manifestations are denoted by "classic", "less common", "rare", and "hallmark" as they pertain to findings, and color-coded to enhance recognition. Additional agent-specific information is also provided.

Other features of the Wall Chart include: (1) an Infection Control section specifying precautions for each agent; (2) a list of Covert Assault Clues; (3) addresses for online resources; and (4) space where critical contact numbers can be inserted.

The Memorial Institute for the Prevention of Terrorism (MIPT) funded development, printing, and shipping to all United States emergency departments. Since debuting in 2003, nearly 30,000 Bioterrorism Preparedness and Response Wall Charts have been provided for emergency departments, first responders, and other clinicians by the MIPT.

Keywords: Bioterrorism Preparedness and Response Wall Chart; emergency departments; first responders; preparedness; terrorism Prebasp Disast Med 2005;20(2):s58

Disaster Nursing and Emergency Preparedness for Chemical, Biological, and Radiological Terrorism: An International Curriculum for the Twenty-First Century

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The extent to which we are able to address the complex challenges of the 21st Century, respond to the ubiquitous threat of terrorism, and continue to improve world health depends, in large part, upon the quality and preparedness of our healthcare workforce, particularly nurses. Nurses number the largest sector of any workforce, and as such, are certain to be "first responders" to any major public health event.

This publication is a comprehensive curriculum designed to prepare a global nursing workforce with the knowledge and skill-set to respond to any type of disaster or major public health emergency. This project represents the Companion Curriculum to the textbook, *Disaster Nursing and Emergency Preparedness for Chemical, Biological and Radiological Terrorism and Other Hazards* that was published in 2003 by Springer Publishers and won the 2003 AJN Book of the Year Award.

This interactive workshop will present twenty critical modules that include response strategies for all types of natural and man-made disasters, public health emergencies, and international, complex human emergencies. The content reflects the most current and reliable information available on each topic of interest. All content was subjected to a lengthy peer review process by expert reviewers, and was mapped to the educational competencies for nurses responding to disasters published by the International Nursing Coalition for Mass-Casualty Education. The curriculum includes a series of PowerPoint presentations, case studies, disaster scenarios, and methods for evaluation.

Keywords: curriculum; international; nurses; preparedness; terrorism Prebosp Disast Med 2005;20(2):s58

"Sentinel" Drills for Emergency Departments— A Way to Assess Bio-Terrorism Preparedness

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Introduction: In October and November 2001, 22 American civilians were infected with anthrax. Five of them died. Letters sent through the United States Postal Service (USPS) spread the spores. Eleven (50%) of the cases were respiratory anthrax, a disease characterized by respiratory symptoms, pulmonary and/or mediastinal radiographic findings, and meningeal involvement (rare). If discovered and treated early, respiratory anthrax is a fatal disease that can be cured. The disease can be prevented by early administration of preventive antibiotic therapy to individuals who were exposed to the bacteria. Therefore, early diagnosis of the first case can improve the prognosis