

# THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

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ELEVATED THREAT LEVEL

## Pandemic Influenza: **Updated**

- Last week the Connecticut Department of Public Health sent out the Pandemic Influenza Hospital Preparedness Checklist modified from the HHS Pandemic Flu Plan, Supplement 3 by Yale New Haven Center of Excellence for Bioterrorism Preparedness and Response (YNHHS-CoE). The checklist is designed to guide hospital pandemic influenza planning by identifying key elements of a comprehensive and effective pandemic influenza plan. It also can serve as a way to evaluate the current status of pandemic influenza preparedness. The Connecticut Department of Public Health has requested that hospitals complete the checklist and e-mail this back to Mary Duley at [mary.duley@po.state.ct.us](mailto:mary.duley@po.state.ct.us) as soon as possible. To download this word document, please visit [http://www.yalenewhavenhealth.org/emergency/commu/Pandemic\\_flu\\_hospital\\_checklist\\_1.doc](http://www.yalenewhavenhealth.org/emergency/commu/Pandemic_flu_hospital_checklist_1.doc). To download the PDF document, please visit [http://www.yalenewhavenhealth.org/emergency/commu/Pandemic\\_flu\\_hospital\\_checklist.pdf](http://www.yalenewhavenhealth.org/emergency/commu/Pandemic_flu_hospital_checklist.pdf). For comments, please contact Richard Kleindienst, Sr. at (203) 688-3912 or [richard.kleindienst.sr@ynhh.org](mailto:richard.kleindienst.sr@ynhh.org).
- Although avian influenza A viruses usually do not infect humans, more than 193 confirmed cases of human infection with avian influenza viruses have been reported since 1997. Most cases of avian influenza infection in humans are thought to have resulted from direct contact with infected poultry or contaminated surfaces. However, there is still a lot to learn about how different subtypes and strains of avian influenza virus might affect humans. Because of concerns about the potential for more widespread infection in the human population, public health authorities closely monitor outbreaks of human illness associated with avian influenza. To date, human infections with avian influenza A viruses detected since 1997 have not resulted in sustained human-to-human transmission. However, because influenza A viruses have the potential to change and gain the ability to spread easily between people, monitoring for human infection and person-to-person transmission is important. To read further, please visit [http://www.cdc.gov/flu/avian/gen-info/avian-flu-humans.htm?s\\_cid=ccu040306\\_season4\\_r\\_e](http://www.cdc.gov/flu/avian/gen-info/avian-flu-humans.htm?s_cid=ccu040306_season4_r_e).

## Pandemic Influenza: **New**



According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of April 11, 2006 was 193 cases and 109 deaths.

**Click on map for an enlarged view.**  
Map courtesy of <http://www.pandemicflu.gov/>

- Pakistan and Burkina Faso have been added to the list of countries with poultry or wild birds that have the H5N1 or H5 virus. The list also includes:
  - Africa:** Cameroon, Niger, Nigeria and **Burkina Faso (new)**
  - East Asia & the Pacific:** Cambodia, China, Hong Kong (SARPRC), Indonesia, Japan, Laos, Malaysia, Mongolia, Myanmar (Burma), Thailand and Vietnam
  - Europe & Eurasia:** Albania, Austria, Azerbaijan, Bosnia & Herzegovina (H5), Bulgaria, Croatia, Denmark (H5), France, Georgia (H5), Germany, Greece, Hungary, Italy, Poland, Romania, Russia, Serbia and Montenegro (H5), Slovak Republic, Slovenia, Sweden, Switzerland, Turkey and Ukraine
  - Near East:** Egypt, Iraq (H5), Iran, Israel and Jordan
  - South Asia:** Afghanistan, India, Kazakhstan and **Pakistan (H5) (new)**
- To read a current update, please visit <http://www.cdc.gov/flu/avian/outbreaks/current.htm>.
- WHO has published a fifty-four page report that discusses pandemic influenza preparedness and mitigation in refugee and displaced populations. Contents of this report include preparedness during the pandemic alert period (WHO phases 3-5), pandemic mitigation during the pandemic (WHO phase 6), the pandemic preparedness checklist for humanitarian agencies, disinfectants active against human influenza virus, sample calculations and prepositioning of supplies, advice on use of seltamivir and more. To read this report in full, please visit [http://www.who.int/csr/disease/avian\\_influenza/guidelines/avian2006-04-9.pdf](http://www.who.int/csr/disease/avian_influenza/guidelines/avian2006-04-9.pdf).
- The CDC has updated its Questions and Answers About Avian Influenza (Bird Flu) and Avian Influenza A (H5N1) Virus article. Information posted answers questions such as "What is avian influenza (bird flu)?", "How does avian influenza spread among birds?", "How do people become infected with avian influenza viruses?", "How is avian influenza in humans treated?", "What precautions can hunters take to reduce the risk for infection when hunting birds in the United States?", "What changes are needed for H5N1 or another avian influenza virus to cause a pandemic?", "What animals can be infected with avian influenza A (H5N1) viruses?" and others. To read this article in full, please visit <http://www.cdc.gov/flu/avian/gen-info/qa.htm>.
- The Food Safety and Inspection Service (FSIS) advise consumers that cooking raw poultry to a minimum internal temperature of 165°F will eliminate pathogens and viruses. Other concerns and questions such as "Can I become infected with the bird flu by consuming eggs or other poultry products from infected birds?", "Is it safe to eat raw eggs?" and "How can I protect myself from getting the bird flu from food?" are discussed. To read the questions and answers in full, please visit <http://www.foodsafety.gov/~dms/avfluqa.html>.

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## FDA Issues Guidance for Industry on Diagnostic Devices to Detect Influenza A Viruses: **New**

The Food and Drug Administration (FDA) is announcing the availability of the guidance entitled "In Vitro Diagnostic Devices to Detect Influenza A Viruses: Labeling and Regulatory Path." The FDA is issuing this guidance to inform industry and agency staff of steps that are needed to ensure the safe and effective use of in vitro diagnostic (IVD) devices intended for use in the detection of influenza A (or A/B) virus directly from human specimens. The FDA is taking this action because of recent significant public health concerns associated with emergence of an avian influenza A virus strain as a human pathogen in Southeast Asia. This guidance document describes recommendations for fulfilling labeling requirements applicable to all IVDs intended to generally detect influenza A (or A/B) virus directly from human specimens, and outlines the pre-market regulatory path for new or modified devices intended to generally detect influenza A virus, or to detect and differentiate, specific novel influenza A viruses infecting humans. This guidance document is immediately in effect, but it remains subject to comment in accordance with the agency's good guidance practices. For more information, please visit <http://www.fda.gov/OHRMS/DOCKETS/98fr/E6-5203.htm>.

## Flu Exhibit and Lecture – April 19, 2006: **New**

Harvey V. Fineberg will present the 58th Annual Associates lecture on Wednesday, April 19, 2006. The lecture "Preparing for Avian Influenza: Lessons from the Swine Flu Affair" will begin at 4:00 p.m. in Harkness Auditorium. Dr. Fineberg is President of the Institute of Medicine. He served as Provost of Harvard University from 1997 to 2001 following thirteen years as Dean of the Harvard School of Public Health. He has devoted most of his academic career to the fields of health policy and medical decision making. He helped found and served as president of the Society for Medical Decision Making and has also served as a consultant to the World Health Organization. Dr. Fineberg is co-author of *Innovators in Physician Education*, *The Epidemic that Never Was* and *The Swine Flu Affair*. Before the lecture, a ribbon-cutting ceremony at 3:00 p.m. will mark the opening of a new exhibit "The Flu and You: Old and New Threats" in the Medical Library. A reception in the Medical Historical Library follows the lecture. For more information, contact Lynn Sette (203) 737-2963 or visit <http://info.med.yale.edu/library/new/blog.php>.

## Radiation Monitoring Equipment for Radiation Emergencies: **New**



Since the events of September 11, 2001, the possibility of a nuclear incident has been recognized by all levels of government. Given that hospital emergency department personnel will be among the first to receive patients potentially contaminated with radiological materials, access to radiation monitoring devices is a necessity. While many hospital nuclear medicine, radiation oncology and radiation physics departments have monitoring instruments, they are dedicated to those areas.

Hospital emergency departments are advised to purchase radiation monitoring equipment specifically for this area. This equipment should be stored in an area readily accessible to ED personnel.

It should be emphasized that reliable measurements depend on proper calibration of radiation monitoring instrumentation and training of personnel. The hospital Radiation Safety Officer (RSO) is responsible for ensuring that all radiation monitoring equipment is properly calibrated and that hospital emergency department personnel are trained in interpreting the readings. Accordingly, the purchase of equipment to monitor radiation levels should be done in consultation with the RSO. For comments or questions, please contact, Dr. Albanese at (203) 688-3316 or [joseph.albanese@ynhh.org](mailto:joseph.albanese@ynhh.org).

## R. David Paulison Nominated to Lead FEMA: **New**



President Bush announced, on April 6, 2006, his intent to nominate R. David Paulison as Under Secretary for Federal Emergency Management at the Department of Homeland Security (DHS). Secretary Michael Chertoff also announced the appointment of Vice Admiral Harvey E. Johnson, Jr., as deputy director and chief operating officer of the Federal Emergency Management Agency (FEMA).

"Dave has provided terrific leadership at FEMA," said Secretary Chertoff. "He is a deeply experienced and accomplished emergency management executive and I am thrilled to have him lead FEMA at this important time. We

are also pleased to announce that Vice Admiral Johnson has accepted our invitation to serve as deputy director and chief operating officer. Harvey is a first class operator who comes to FEMA with substantial Coast Guard experience and skills that will allow him to hit the ground running."

To read this press release in full, please visit <http://www.dhs.gov/dhspublic/>

## Flu Season: **Updated**



The Food and Drug Administration (FDA) on March 29, 2006 approved the use of Relenza (zanamivir for inhalation) for prevention (prophylaxis) of influenza (flu) in adults and children 5 years of age and older. Relenza, an antiviral medication, was previously approved for the treatment of influenza A and B virus infections in adults and children. Tamiflu (oseltamivir phosphate) previously was approved for both prevention and treatment of flu. The approval of Relenza provides Americans with another option for the prevention of influenza A and B. To read this release in full, please visit

<http://www.fda.gov/bbs/topics/NEWS/2006/NEW01341.html>.

### Questions or Comments

Questions, comments or suggestions should be forwarded by fax to (203) 688-4618 or by e-mail to [center@ynhh.org](mailto:center@ynhh.org) [www.yalenewhavenhealth.org/emergency](http://www.yalenewhavenhealth.org/emergency)

## CT Department of Public Health Strategic National Stockpile (SNS) Exercise April 19, 2006: **Updated**

Yale-New Haven Hospital (YNHH) and Norwalk Hospital will participate in a Strategic National Stockpile Exercise (SNS) on April 19, 2006. YNHH and Norwalk Hospital will receive a portion of the SNS that will be used to treat or provide prophylaxis for hospital patients and personnel. Hospital plans should identify a procedure to evaluate, receive, store and distribute assets from the SNS on receipt. Southern Tier Hospitals not participating in the full-scale exercise can conduct their own table-top exercise. For more information, please contact Scott Dilley, Exercise and Design Specialist at (203) 688-2665 or [scott.dilley@ynhh.org](mailto:scott.dilley@ynhh.org).

## Crisis and Emergency Risk Communication Conference Call – May 2, 2006: **New**

The CDC will be sponsoring a conference call to discuss crisis and emergency risk communication on May 2, 2006 from 1:00 to 2:00 EST. Call objectives include understanding the accepted definitions of emergency risk and crisis communication concepts and their applicability to pandemic influenza, exploring the communication needs of the general public and stakeholders during a public health emergency, describing the emotional range expected by persons involved in chaotic life events and examining the psychology of a public health emergency and what messages the public will need from their health professionals. Slides for this call will be available at <http://www.bt.cdc.gov/coca/callinfo.asp>.

## Ottillie W. Lundgren Memorial Field Hospital Dedication: **Updated**



Photo from <http://www.reevesdecon.com/>

On April 4, 2006, the Ottillie W. Lundgren Memorial Field Hospital was unveiled. This \$8.25 million mobile hospital, funded with a combination of state and federal money, can be erected and staffed within hours of an emergency situation. The 100-bed unit includes intensive care, isolation, ambulatory and triage areas and is outfitted with medical supplies and equipment that can provide immediate emergency/disaster medical care.<sup>1</sup> The mobile hospital has electricity, heat, air conditioning, fresh water, showers and bathrooms and can be broken down into 25-bed units for regional emergencies. The mobile hospital is staffed with a combination of personnel from the Connecticut Disaster Management Assistance Team, state government agencies and the state's 31 acute care hospitals through the state of Connecticut Emergency Credentialing Program.

The field hospital was named after Ottillie W. Lundgren an Oxford, Connecticut resident who died after anthrax exposure in November of 2001. "Ottillie Lundgren represents us all," said Dr. J. Robert Galvin, commissioner of the state Department of Public Health. "She lived a quiet life in rural Connecticut - far from where terror is supposed to strike," he said. "Her untimely death proved that terrorism knows no bounds and that our state plays an important part in responding to such incidents," he continued. "Naming this hospital in her honor allows us to forever member Mrs. Lundgren's long life and remains cognizant that her untimely death led to the state's ability to better protect its residents."

To read this article in full, please visit <http://www.courant.com/news/local/hc-ctottillie0406.artapr06.0.4376155.story>.

1. Fillo, Mary Ellen. "Ottillie's Legacy May Save Lives." *The Hartford Courant* 6 Apr. 2006 <<http://www.courant.com/news/local/hc-ctottillie0406.artapr06.0.4376155.story>>.

## Emergency Credentialing Program (ECP): **New**



To date, 1 out of 25 healthcare professionals licensed in Connecticut - nearly 3,500 physicians, nurses, respiratory therapists, pharmacists, and behavioral health, laboratory medicine, radiology professionals - have enrolled in the State of Connecticut Emergency Credentialing Program (ECP) for Healthcare Professionals. This is a great start but we need to do more to reach our program goal of 12,000 healthcare professionals or at least 1 out of every 10 healthcare professionals licensed in Connecticut. As you celebrate your hospital volunteers and their daily contributions to patient care during Volunteer Week, remember to talk to your colleagues about the ECP program and encourage them to visit [www.ct-esar-vhp.org](http://www.ct-esar-vhp.org) to enroll online. Although history has shown that healthcare professionals will come forward to help when the need is great, individuals who are enrolled in the ECP will have access to special training and state sponsored liability and workers compensation coverage. More importantly, by volunteering some of their time to assist during a large-scale disaster or public health emergency, your colleagues will be ensuring that their family, friends and neighbors will have uninterrupted access to vital healthcare resources when they need it most! For additional information about the ECP program, download the program's [Frequently Asked Questions \(FAQs\)](#) or contact Carol Luddy, RN by email at [ECP@ynhh.org](mailto:ECP@ynhh.org) or by phone at (203) 688-3224.

## FY07 Federal Budget: **Updated**

The fiscal year 2007 Homeland Security Budget has been released. The budget includes \$188 million for the CDC for ongoing pandemic influenza preparedness response to initiate new activities. Other Homeland Security initiatives include catastrophic disaster planning that will provide a response and recovery both during and after a catastrophic event, emergency alert system (EAS) upgrade used for catastrophic events and biodefense countermeasures that involve critically needed vaccines and medications for the strategic national stockpile. To view the entire budget, please visit [http://www.dhs.gov/interweb/assetlibrary/Budget\\_BIB-FY2007.pdf](http://www.dhs.gov/interweb/assetlibrary/Budget_BIB-FY2007.pdf).

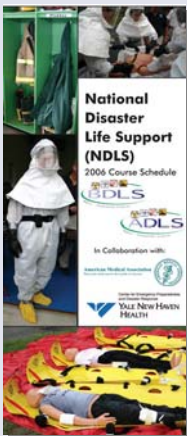
## Surveillance for World Trade Center Disaster Health Effects Among Survivors of Collapsed and Damaged Buildings:

### New

A surveillance study was recently done to assess the physical and mental health conditions and symptoms reported by building survivors, especially those who had been occupants of collapsed buildings (e.g., WTC-1 and WTC-2) using data from the World Trade Center Health Registry baseline interviews conducted during September 5, 2003--November 20, 2004, and to examine relations between reported experiences and exposures and health outcomes. Health outcomes include injuries on September 11, new and worsening respiratory and non-respiratory symptoms and conditions after September 11, and mental health symptoms during the 30 days preceding the interviews. To read this study, please visit [http://www.cdc.gov/mmwr/preview/mmwrhtml/s5502a1.htm?s\\_cid=ss5502a1\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/s5502a1.htm?s_cid=ss5502a1_e)

## Training and Education:

### Updated



There is still space available in the May 18<sup>th</sup> - 21<sup>st</sup> National Disaster Life Support course to be held in New Haven. Basic Disaster Life Support is an eight-hour course that provides an in-depth overview of disasters for all healthcare and public health professionals. The Advanced Life Support course provides physicians, physician assistants, nurses and paramedics with two days of intensive training on mass casualty triage, decontamination and

treatment. Individuals completing the BDLS and ADLS programs will receive CME credits and are eligible to take the instructor course, which prepares them to conduct a course at their own facility. Hospitals are encouraged to consider using some of their HRSA hospital preparedness education and training funds to send appropriate individuals to any or all of these courses. For more information, please contact David Burich at (203) 688-3721 or [david.burich@ynhh.org](mailto:david.burich@ynhh.org).

## Training and Education: **New**



Reminder, Best Practices for the Protection of Hospital-Based First Receivers (EM 120) is now available on CD and on the YNHHS-CoE Learning Management System at [http://ynhhs.emergencyeducation.org/sign\\_in\\_em120.asp](http://ynhhs.emergencyeducation.org/sign_in_em120.asp). This course meets the awareness-level training requirements of the Occupational Safety and Health Administration (OSHA) and is a prerequisite for an operations-level course. The course provides information on hazardous substances and the risks associated with them as well as procedures needed to ensure the safety of health care workers. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).

- **A narrated version of Introduction to Emergency Management (EM 103)** for hospital employees is also available. The CD-ROM based version of EM 103 is playable on most computers and can be used to complement instructor-led training events such as workshops or new hire orientation. This course is available on HealthStream and the YNHHS-CoE Learning Management System. An instructor guide for EM 103 is currently under development. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).
- **Bioterrorism Preparedness for Clinicians (EM 201)** is a 50-minute course designed to prepare physicians and other clinicians for a bioterrorist event or other potential public health emergency. Now available at <http://ynhhs.emergencyeducation.org/>, EM 201 helps clinicians recognize bioterrorism agent disease syndromes, learn the precautions they should take and understand their roles in the event of a public health emergency. This course is available in a Connecticut and a national version. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).
- **Introduction to Radiological Response (EM 110)** is expected to be available in the Spring of 2006. At the end of the 30 minute course, individuals will be able to describe the harmful effects of radiation, identify steps that can ensure personal safety from harmful radiation and identify ways to assist in the response to a radiation emergency including decontamination and psychological first aid. A more advanced radiological preparedness course is under development and will be released later this year. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).
- **Mental Health Aspects for Emergencies and Disasters for Non-Mental Health Professionals (EM 230)** is currently under review on the Yale New Haven Health System Learning Management System and is expected to be available later this month. This 50 minute course will train health professionals in the recognition, treatment and referral of patients exhibiting behavioral health consequences related to public health emergencies and will incorporate brief video vignettes to enhance the learner experience. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).
- As part of compliance with the National Incident Management System, organizations are required to document completion of FEMA- sponsored incident management training or its equivalent by all staff. In order to facilitate compliance by healthcare organizations, YNHHS-CoE is working on incorporating the FEMA training objectives into Introduction to Emergency Management (EM 103), currently a requirement for all YNHHS-CoE staff and recommended by the State of Connecticut Department of Public Health for other healthcare organizations in Connecticut. Additional objectives targeted to staff at the supervisory level and above are being incorporated into EM 140, Incident Command Systems for Healthcare. YNHHS-CoE will develop recommendations for which hospital staff should be required to take this intermediate-level course. For more information, please contact Elaine Forte at (203) 688-3391 or [elaine.forte@ynhh.org](mailto:elaine.forte@ynhh.org).
- YNHHS-CoE has developed a series of emergency preparedness courses and workshops specifically to prepare healthcare workers in community health centers for their roles in disaster response. These instructor-led sessions combine didactic lecture and group exercises to address topics including triage, personal protective equipment, infection control, risk communications and incident command, including objectives that ensure compliance with the National Incident Management System training requirements. These courses may be further adapted to better meet the needs of other healthcare delivery organizations such as home health agencies and skilled nursing facilities. For more information, please contact Scott Selig at (203) 688-2587 or [scott.selig@ynhh.org](mailto:scott.selig@ynhh.org).

## Upcoming Meetings and Events

DATE	TIME	EVENT	LOCATION
4.21.06	8:30 a.m. to 4:30 p.m.	Conference on Avian Reservoirs of Human Pathogens Sponsored by the Yale Institute for Biospheric Studies' <a href="#">Center for EcoEpidemiology</a>	Yale School of Medicine, Harkness Auditorium 333 Cedar Street, New Haven, CT To register for the event, please contact Susan Van Ness at <a href="mailto:susan.vanness@yale.edu">susan.vanness@yale.edu</a> or call 203-785-3223. Additional information is available online at <a href="http://www.yale.edu/yibs/avian_forum.html">http://www.yale.edu/yibs/avian_forum.html</a> .
5.4.06	8:30 a.m. to 10:30 a.m.	Southern Tier Meeting	Connecticut Hospital Association

## Upcoming Training and Education

DATE	TIME	EVENT	LOCATION
4.26.06	2:00 p.m. to 3:00 p.m.	Communications, News, Equipment and Training Conference Call Sponsored by the National Terrorism Preparedness Institute	To participate, please visit <a href="http://www.dlnets.com/ntpi_26Apr06.htm">http://www.dlnets.com/ntpi_26Apr06.htm</a> .
5.2.06	1:00 p.m. to 2:00 p.m. EST	Crisis and Emergency Risk Communication Sponsored by the CDC	Slides for this call can be found at <a href="http://www.bt.cdc.gov/coca/callinfo.asp">http://www.bt.cdc.gov/coca/callinfo.asp</a>
5.16.06-5.18.06	8:00 a.m. to 5:00 p.m.	Emergency Response to Domestic Biological Incidents Sponsored by the RI Emergency Management Agency	Radisson Airport Hotel, 2081 Post Road, Warwick, RI To register, please visit <a href="http://www.yaleneewhavenhealth.org/emergency/Domestic_Bio_Incidents.pdf">http://www.yaleneewhavenhealth.org/emergency/Domestic_Bio_Incidents.pdf</a> .

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