

# THE PREPAREDNESS REPORT

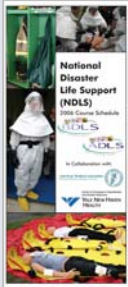
The Center for Emergency Preparedness and Disaster Response

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ELEVATED THREAT LEVEL

## National Disaster Life Support Classes – November 9-12, 2006:

**New**



**There is space available in the November 9<sup>th</sup>-12<sup>th</sup> National Disaster Life Support course to be held in New Haven. Interested participants should register by November 9, 2006.** Credit cards and checks made payable to Yale New Haven Health System are accepted. 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 BDLIS 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. To download a brochure, please visit [http://www.yalenevhealth.org/emergency/commu/NDLS\\_2006CourseSchedule.pdf](http://www.yalenevhealth.org/emergency/commu/NDLS_2006CourseSchedule.pdf).

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. To download a brochure, please visit [http://www.yalenevhealth.org/emergency/commu/NDLS\\_2006CourseSchedule.pdf](http://www.yalenevhealth.org/emergency/commu/NDLS_2006CourseSchedule.pdf).

## Homeland Security Guide for Critical Infrastructure and Key Resources: **Updated**



The US Department of Homeland Security has published a *Pandemic Influenza Guide for Critical Infrastructure and Key Sources* report. This report contains information on roles, responsibilities and authority; pandemic business implications; a continuity of operations guide; partnership and information sharing; and public and media relations. To download a PDF copy of this 84-page report, please visit <http://www.pandemicflu.gov/plan/pdf/CIKRpandemicInfluenzaGuide.pdf>.

## Avian Influenza: **New**

According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of October 16, 2006, is 256 cases and 151 deaths.

- On October 14, 2006, the US Departments of Agriculture and Interior announced test results which confirm that a low pathogenic H5 avian influenza virus was found in samples collected from Northern pintails in Ottawa County, Ohio. This type of avian influenza has been detected several times in wild birds in North America and poses no risk to human health. To read this release in full, please visit <http://www.usda.gov/wps/portal/usdahome?contentidonly=true&contentid=2006/10/0415.xml>.
- On October 13, 2006, the Centers for Disease Control and Prevention (CDC) announced plans to fund eight studies addressing measures such as hand washing, "cough etiquette" and face masks could help limit the extent of the next influenza pandemic. The CDC announced it would provide a total of \$5.2 million to research institutions, some outside the United States, to assess nonpharmaceutical measures for battling pandemic flu. For more information, please visit <http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/oct1306grants.html>.
- In an abstract posted on the Clinician's Biosecurity Network website, Dr. Eric Toner examines research by Dr. Allison McGeer and colleagues from Toronto that shows that oseltamivir treatment of patients admitted to a hospital with influenza or pneumonia secondary to influenza significantly reduced complications and mortality. This reduced response was even for patients for whom oseltamivir treatment was started more than 48 hours after the onset of symptoms, which is usually considered the upper limit of the therapeutic window of opportunity for antiviral treatment in influenza. To read this abstract in full, please visit <http://www.upmc-cbn.org/>.
- Federal scientists have developed a vaccine that protects mice against the 1918 influenza virus. They also have created a technique for identifying antibodies that neutralize this virus, a tool that could help contain future pandemic flu strains. These findings are important, the researchers say, for understanding and preventing the recurrence of the H1N1 influenza virus that caused the 1918 pandemic and for protecting against virulent flu strains in the future, including the H5N1 avian flu virus. To read this article in full, please visit <http://www3.niaid.nih.gov/news/newsreleases/2006/1918vax.htm>.



The International Federation of Pharmaceutical Manufacturers and Associations has created a website addressing seasonal, avian and pandemic flu and flu vaccines. To access this site, please visit <http://www.ifpma.org/influenza/index.aspx?38>.

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## Strong Earthquake in Hawaii: **New**



Rocks are shown on a road in Big Island, HI  
Photo credit: AP  
Photo/Agustin Tabares

On October 15, 2006, an earthquake measuring 6.3 on the Richter Scale shook the Kailua-Kona on the west coast of Hawaii's largest island, Big Island. The quake caused statewide power outages, and phone communications were possible but difficult. The outages were caused because power plants turned off automatically when built-in seismic monitors were triggered by the earthquake.

Kona Community Hospital on the western side of Big Island was evacuated after ceilings collapsed and power was cut off, according to a hospital spokeswoman. At least ten acute care patients were evacuated across the island to a medical center in Hila. About 30 nursing care patients were moved temporarily to a nearby conference center. Mayor Harry Kim estimated that as many as 3,000 people were evacuated from three hotels on the Big Island. For more information, please visit <http://www.wral.com/news/10081139/detail.html>

## HICS Materials Now Posted on Cal EMSA Website: **New**

The California Emergency Medical Services Authority (EMSA) has developed and posted information about Hospital Incident Command Systems (HICS) on its website. This site includes a guidebook, glossary, forms and other materials in Acrobat Reader and Microsoft Word. To access this site, please visit <http://www.emsa.ca.gov/hics/hics.asp>. For more information, please contact Jim Paturas at (203) 688-3496 or [james.paturas@ynhh.org](mailto:james.paturas@ynhh.org).

## The Preparedness Report Archive: **Updated**

Are you looking for a past feature? All Preparedness Reports are archived at <http://www.yalenehwhavenhealth.org/emergency/commu/archives.html>.

## Pandemic Influenza Planning: **New**



Duckbill type N-95 Respirator  
Photo credit: NIOSH

On October 18, 2006, the US Department of Health and Human Services (HHS) issued new guidance calling for stronger respiratory protection for healthcare workers in the event of an influenza pandemic. The report recommends that healthcare workers caring for pandemic flu patients use respirators rated at N-95 or higher during activities likely to generate infectious aerosols, such as intubation, nebulizer treatment, bronchoscopy and resuscitation. In addition, a respirator should be used when providing any kind of direct care for a confirmed or suspected pandemic flu patient who has pneumonia. To read this Interim Guidance in full, please visit <http://www.pandemicflu.gov/plan/maskguidancehc.html>.

- On September 14, 2006, the Yale New Haven Center for Emergency Preparedness and Disaster Response and the State of Connecticut Department of Public Health hosted a Pandemic Influenza Summit on alternative delivery models for healthcare organizations. The summit provided a forum for healthcare delivery organizations and agencies in Connecticut (hospitals, local and state government, local EMS, community health centers, nursing homes, home health agencies, physician groups and urgent care centers) to meet and discuss the coordination of healthcare delivery through alternative systems during a pandemic influenza event. It also provided a focus for planning and launching of ongoing workgroups on alternate healthcare delivery systems, ethical and legal issues, human resources and personnel, risk communications, surge capacity and triage. As a result from each workgroup, priority tasks were determined for the next six months. Workgroups will report their progress at the next Interhospital Workgroup Meeting to be held at the Connecticut Hospital Association on November 9, 2006, from 8:30 a.m. to 9:30 a.m. A summary of the workgroup sessions can be found at <http://www.yalenehwhavenhealth.org/emergency/panflusummit/>.
- A final draft of the Acute Care Hospital, Emergency Management Mutual Aid Agreement was e-mailed to acute care hospitals for final review and comment on October 12, 2006. This nonbinding agreement acknowledges hospitals' intent to work with each of the other hospitals, the Connecticut Department of Public Health and the Centers of Excellence for Bioterrorism Preparedness and Response at the Yale New Haven Health System and Hartford Hospital in the event of a disaster. This document has been reviewed and approved by the Connecticut Department of Public Health and also by the Connecticut Hospital Association and is a requirement of Health Resources and Services Administration. To access this agreement, please visit [http://www.ynhhs.org/emergency/commu/OEP\\_Emergency\\_Management\\_MOU.pdf](http://www.ynhhs.org/emergency/commu/OEP_Emergency_Management_MOU.pdf). For more information, please contact Jim Paturas at (203) 688-3496 or [james.paturas@ynhh.org](mailto:james.paturas@ynhh.org).

## Seasonal Influenza: **New**



During the week of October 1 through October 7, influenza activity was reported as local in two states (Hawaii and Louisiana) and sporadic in five states (Alaska, California, Connecticut, Florida, West Virginia) and Puerto Rico. Forty-one states, New York City and the District of Columbia reported no influenza activity, and two states did not report. To view a full report, please visit <http://www.cdc.gov/flu/weekly/>.

- The American Lung Association has developed a site that can locate locations that will be administering flu shots during the 2006-2007 season. Please visit <http://www.facesofinfluenza.org/home.php> for a location close to you.
- On October 24, 2006, the CDC will be hosting a conference call on influenza from 1:00 p.m. to 2:00 p.m. EST. The call-in number is (888) 889-4431, passcode "influenza." Objectives for this call are to understand the burden of influenza disease in children and adults, identify recommended groups for vaccination, understand the vaccine supply and distribution for 2006-2007 seasons and understand how best to communicate with patients. For more information, please visit <http://www.bt.cdc.gov/coca/callinfo.asp>.

## NOAA Public Alert Radio:

### New

The Connecticut Department of Emergency Management and Homeland Security (DEMHS) and the Connecticut State Department of Education (SDE) in cooperation with the National Weather Service (NWS) are currently installing NOAA Public Alert Radios in every public school in Connecticut. These radios are part of the DEMHS and SDE continuing effort to provide the best possible warnings to Connecticut's schools in the event of severe weather or other emergencies. To learn more, download this word document, [http://www.ct.gov/demhs/lib/demhs/weather/naa\\_public\\_alert\\_radio\\_guidance.doc](http://www.ct.gov/demhs/lib/demhs/weather/naa_public_alert_radio_guidance.doc).

## Mandatory Anthrax Shots to Return: **New**



On October 17, 2006, *The Washington Post* reported that the Defense Department will resume mandatory anthrax vaccinations for more than 200,000 troops and defense contractors within 60 days, a Pentagon official said. The vaccinations will be required for

most military units and civilian contractors assigned to homeland bioterrorism defense or deployed in Iraq, Afghanistan or South Korea, said William Winkenwerder Jr., a physician and the assistant secretary of defense for health affairs. As troops rotate in and out of those regions, the number receiving vaccinations will grow considerably, he said. To read this article in full, please visit

<http://www.washingtonpost.com/wp-dyn/content/article/2006/10/16/AR2006101601084.html?referrer=email&referrer=email&referrer=email>.

### 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.yalenehavenhealth.org/emergency](http://www.yalenehavenhealth.org/emergency)

## Mobile Field Hospital: **Updated**



On October 20th between 7:30 a.m. - 8:30 p.m. and on October 21st between 8:30 a.m. and 4:00 p.m., MidState Medical Center and the State of Connecticut Department of Public Health (DPH) will host an "open house" showcasing a 25-bed module of the Ottilie W. Lundgren Memorial Field Hospital (MFH).

Planning for the eventuality of a future devastating event is an ongoing process in hospitals and healthcare agencies across the state. Funded with a combination of state and federal money, the MFH is believed to be one of the first non-military MFHs in the United States. At its full capacity, the 100-bed MFH can be erected within hours of an emergency situation and includes intensive care, isolation, ambulatory and triage areas outfitted with medical supplies and equipment that can provide immediate emergency/disaster medical care. In the words of Dr. J. Robert Galvin, Commissioner of DPH at the April 2006 MFH dedication, "Ottilie Lundgren represents us all. Naming this hospital in her honor allows us to forever remember Mrs. Lundgren's long life and remain cognizant that her untimely death led to the state's ability to better protect its residents." For more information, contact DPH at (860) 509-7975, email [ECP@ynhh.org](mailto:ECP@ynhh.org) or follow this link to the open house invitational flyer, <http://www.ynhhs.org/emergency/commu/StofCTflier091906.pdf>.

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



Development of the database used to support the State of Connecticut Emergency Credentialing Program for Healthcare Professionals (ECP) is nearly complete. Unique UserIDs and passwords that will be required for access to the system have been assigned and will be distributed to each of the designated hospital contacts early in November. A UserID and Password will be necessary to 1) access that portion of the database that allows for credential verification of those non-physician or mid-level

volunteers who have enrolled in the program and have reported that they are employed by your hospital and 2) access to names, specialty and contact information for all volunteers (all hospitals and non-hospital agencies) across the state.

Hospital contacts for the ECP are responsible only for ensuring that credentials are verified by the appropriate manager for behavioral health professionals, clinical lab professionals, diagnostic imaging/radiographers, nurses, pharmacists, pharmacy technicians and respiratory therapists. Physicians and midlevel providers (APRNs, dentists and physician assistants) will continue to be recruited and credentialed through the medical staff office at each hospital. It's important to remember that the database is a volunteer resource for hospital personnel surge capacity and will contain confidential information offered by ECP volunteers. Like all personnel information, access to the information and the database should be made available only to those individuals who will be validating volunteer credentials or hold a recognized position in your hospital's Emergency Operations Center (EOC) organization structure. Carol Luddy will schedule time with each ECP hospital contact to provide information about the credential verification process and about desktop management of the ECP database using FileMaker(TM). Like Adobe Acrobat Reader, FileMaker is "user-friendly", free-of-charge and will not require any special application license or desktop installation.

Our Emergency Credentialing Program remains "ahead of the curve" when compared to the capability of similar programs across the country. Our success to date can be attributed to the commitment of the Statewide Credentialing Committee, our colleagues representing their professional associations, our hospitals and our State Department of Public Health for ensuring that Connecticut's citizens have uninterrupted access to healthcare during a large-scale disaster or public health emergency. Please visit [www.ct-esar-vhp.org](http://www.ct-esar-vhp.org) to learn more about the program or contact Carol Luddy at (203) 688-5544 or carol. [luddy@ynhh.org](mailto:luddy@ynhh.org) information.

## Training and Education: Updated

- Frontline staff may not recognize victims of a bioterrorism attack, drills are unlikely to improve their knowledge much, and even staff who suspect exposure to a bioterrorism agent may not notify all the required authorities, according to a study in the August 2006 *Annals of Emergency Medicine*. Mock patients with signs of anthrax exposure were sent to the emergency departments (EDs) of 23 general hospitals in Israel. While 21 of the EDs admitted the patient, only 14 suspected anthrax exposure, and only 10 completely followed their protocols to notify hospital officials, infectious disease specialists, infection control practitioners and local public health institutions. Such notification is necessary to perform an epidemiologic investigation and rapidly contain an outbreak. Questionnaires given to ED physicians found a low level of knowledge about anthrax, with the average score rising from 54.5% before the drill to 59.3% after the drill. For this reason, it is important to take **Bioterrorism Preparedness for Clinicians (EM 201)**. EM 201 is a 50-minute course designed to prepare physicians and other clinicians for a bioterrorist event or other potential public health emergency. This course is available at <http://ynhhs.emergencyeducation.org>. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).
- **Mental Health Aspects of Emergencies and Disasters for Non-Mental Health Professionals (EM 230)** is now available at [http://ynhhs.emergencyeducation.org/sign\\_in\\_em230.asp](http://ynhhs.emergencyeducation.org/sign_in_em230.asp). This 50-minute course trains health professionals in the recognition, treatment and referral of patients exhibiting behavioral health consequences related to public health emergencies and incorporates 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).

## Education and Training Services: Updated

- At the request of the National Incident Management System (NIMS) Integration Center, the Department of Emergency Management and Homeland Security is working with YNH-CEPDR in collaboration with the State of Connecticut Department of Public Health to receive approval of two courses, Introduction to Emergency Management (EM 103 NIMS) and Incident Command Systems (ICS) for Healthcare with NIMS (EM 140 NIMS), as a strategy to meet the NIMS training requirements for all healthcare organizations. For more information, please contact Scott Selig at (203) 688-2587 or [scott.selig@ynhh.org](mailto:scott.selig@ynhh.org).
- YNH-CEPDR has developed a series of emergency preparedness courses and workshops designed to prepare healthcare workers in community health centers for their roles in disaster response. These instructor-led sessions combine didactic lecture and group exercises that address topics including triage, personal protective equipment, infection control, risk communications and incident command. The course objectives ensure compliance with NIMS 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 Lynette Lines at (203) 688-2590 or [lynette.lines@ynhh.org](mailto:lynette.lines@ynhh.org).
- YNH-CEPDR is committed to developing and delivering services that advance healthcare planning, preparedness and response for emergencies and disasters. YNH-CEPDR offers the following services to hospitals, other healthcare delivery organizations, emergency management professionals, the business community and others.
  - **ASSESSMENTS:** Hazard Vulnerability Analysis, Business Impact Analysis and Gap Analysis
  - **PLANNING:** Emergency management plans and business continuity plans
  - **EDUCATION and TRAINING:** Course development and course delivery in various modalities (including web-based)
  - **DRILLS and EXERCISES:** Development, facilitation and evaluation

For more information, please contact Scott Selig at (203) 688-2587 or [scott.selig@ynhh.org](mailto:scott.selig@ynhh.org).

## Training and Education: Updated



**Introduction to Emergency Management with NIMS (EM 103 w/NIMS)** is now available at

[http://ynhhs.emergencyeducation.org/sign\\_in\\_em103nims.asp](http://ynhhs.emergencyeducation.org/sign_in_em103nims.asp).

This course provides awareness-level emergency preparedness training for the healthcare delivery workforce. Based on NIMS objectives, EM 103 w/NIMS is designed to assist healthcare workers in understanding their role in providing continuous care

for existing patients and additional patients in the event of an emergency or a terrorist event. This course meets the NIMS objectives for IS 100: An Introduction to ICS; IS 700: An Introduction to the National Incident Management System; and parts of IS 800: Introduction to the National Response Plan for healthcare delivery organizations as described in the document *NIMS: National Standard Curriculum Training Development Guidance*, October 2005. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).



Incident Command System  
(Photo credit: FEMA)

**Incident Command Systems (ICS) for Healthcare with NIMS (EM 140 NIMS)** is a 1-hour and 15-minute course which offers an introduction to ICS for healthcare workers and is available at [http://ynhhs.emergencyeducation.org/sign\\_in\\_em140nims.asp](http://ynhhs.emergencyeducation.org/sign_in_em140nims.asp).

This course describes the ways an ICS can provide a consistent approach to command, control and coordination of all efforts aimed at protecting life, preserving property, supporting the emergency response and stabilizing the operations of a healthcare site during an emergency or disaster. EM 140 NIMS

meets NIMS objectives for IS 200, Basic ICS; IS 700: An Introduction to the National Incident Management System; and IS 800: Introduction to the National Response Plan for healthcare delivery organizations as described in the document *National Incident Management System: National Standard Curriculum Training Development Guidance*, October 2005. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).

## Training and Education: Updated

- **Best Practices for the Protection of Hospital-Based First Receivers (EM 120)** is available at [http://ynhhs.emergencyeducation.org/sign\\_in\\_em120.asp](http://ynhhs.emergencyeducation.org/sign_in_em120.asp). EM 120 is aligned with the Occupational Safety and Health Administration (OSHA) required awareness-level competencies for first receivers. Job classifications that will be required to complete EM 120 in order to ensure compliance with OSHA standards include: (1) All employees who work in the emergency department (such as clinicians, housekeeping, security, patient registration, etc.); (2) All employees who are regularly scheduled to be on call for the emergency department; (3) Volunteers and residents assigned to the emergency department; (4) Employees involved in setting up, taking down or maintaining decontamination facilities, regardless of their primary job role and location; (5) Nursing leadership who function as potential nursing administrators on call; (6) All members of the hospital decontamination team. This course is a prerequisite to a series of operations-level courses currently under development.

The operations-level decontamination course will also align with OSHA operations-level competencies and will be a prerequisite to a practical session designed for employees involved in setting up, taking down or maintaining decontamination facilities and for employees responsible for performing decontamination procedures. 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 a 30-minute narrated CD-ROM course which provides the learner with the basic principles of radiation, definitions of terms commonly encountered in radiological and nuclear incidents, a description of the health risks associated with radioactive material, recommendations for safeguarding personal safety during a radiological or nuclear incident and an outline of the strategies for addressing the psychological impact of radiological and nuclear incidents. This introductory course has been designed for nurses, doctors, radiology technicians, radiation oncologists, radiation safety officers, patient care associates, technical assistants, nuclear medicine workers, EMS workers and mental health professionals. A more advanced radiological preparedness course is under development and will be released later this year. For more information or a copy of the CD-ROM, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).

## Upcoming Meetings and Events

DATE	TIME	EVENT	LOCATION
11.9.06	8:30 a.m. to 9:30 a.m.	Statewide Interhospital Working Group	Connecticut Hospital Association
11.9.06	9:30 a.m. to 10:30 a.m.	Southern Tier Meeting Only	Connecticut Hospital Association

## Upcoming Training and Education

DATE	TIME	EVENT	LOCATION
10.24.06	1:00 p.m. to 2:00 p.m.	<i>Sponsored by the CDC</i> Influenza Conference Call	Call-in number: (888) 889-4431 Passcode: Influenza For more information, visit <a href="http://www.bt.cdc.gov/coca/callinfo.asp">http://www.bt.cdc.gov/coca/callinfo.asp</a> .
11.9.06 to 11.12.06	8:00 a.m. to 4:30 p.m.	National Disaster Life Support Classes	More information is available at <a href="http://www.yalenehavenhealth.org/emergency/commu/ndls_events.html">http://www.yalenehavenhealth.org/emergency/commu/ndls_events.html</a>

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