

FOCUS

COBRA Domestic Preparedness Training

► SUMMARY

COBRA, a highly secure government facility, is one of the few places in the world where emergency first responders can receive hands-on training in a real hot zone. This training is a good way for teams to gain confidence if responding to situations such as a HazMat spill or a terrorist chemical weapons incident.

► MORE INFORMATION

www.firstrespondertraining.gov www.dhs.gov/index.shtm www.fema.gov/

Yes, the threat is real.

By Brian Haughton

After several days of training preparations, it all culminated into the final event—entering the COBRA. Our small contingent of students donned our Personal Protection Equipment (PPE) gear with the utmost care. The task at hand really ramped up the moment as we prepared to enter COBRA Alley. The uniform consisted of three layers of latex gloves, a chemical response body suit with hood, boots and the Air Purifier Respirator (APR) face mask. Special attention was given to the APR mask. It was checked, re-checked and checked a third time for the perfect seal on our faces.

This highly secure government facility is one of the few places in the world where emergency first responders can train "hands on" in a real hot zone. Entering into the chemical sampling room was the moment of truth for me. It was similar to a SWAT high risk warrant service in some homicide suspect's house, where inside there is a deadly threat and you have got to be on your game to survive!

I carefully approached the barrel in the center of the room where the live agents were placed. Next, I delicately dipped the Mil-Spec chemical detection paper I held in my hand into the plate containing an oily, clear liquid. The desired color change to the paper was achieved. Wow! This was the genuine article, and I successfully came less than an inch away from one of the most lethal substances known to man and survived. The detection paper's color change had indicated the chemical agent called VX. This COBRA has deadly venom all right!

Center for Domestic Preparedness

Welcome to DHS/FEMA's Center for Domestic Preparedness (CDP) in Anniston, Ala. The CDP's Chemical, Ordnance, Biological and Radiological Training Facility, referred to by the staff and graduates as COBRA Alley, is the nation's only facility that provides real-world response exercises for first responders conducted in a genuine toxic environment.

By toxic, I am speaking about facility personnel and instructors who enter the secured facility sampling room and deposit small amounts of real chemical agents, such as Sarin and VX nerve agent, in this controlled environment with students standing just a few feet away preparing their equipment.

First responder safety is a strong component of the CDP's method of business. One example of the serious safety concerns the CDP adheres to is the need for all students who enter COBRA Alley to have their blood drawn prior to the exercise with the nerve agents. Then on the last morning of travel from the facility, all students have their blood drawn again to check for the unlikelihood of exposure to the agent registering in their blood.

The training course I attended is "Weapons of Mass Destruction: Law Enforcement Protective Measures (LEPM) and Law Enforcement Response Actions (LERA)." The training is funded by the Federal Emergency Management Agency and









the U.S. Department of Homeland Security. The CDP runs the courses for DHS and is staffed with some very professional instructors who possess a wealth of knowledge in the field, having served as former police tactical operators, fire department HazMat specialists, and even former military chemical weapons unit veterans.

The Philadelphia Police Department has been sending officers to the CDP for the past few years, and I recently attended along with several other members of our department's Homeland Security Unit and the Advanced Major Incident Response Team (MIRT). The Advanced MIRT officers are members of the department who are pooled from Patrol Divisions part time to receive extensive training in preparation for response operations to Chemical, Biological, Radiological, Nuclear and Explosive (CBRNE) terrorist incidents, as well as the possibility of active shooter scenarios and mass casualty incidents (MCIs), while working in tandem with SWAT in victim rescue and medical treatment.

The CDP's LERA and LEPM course encompasses several days of instruction discussing and demonstrating the response operations for terrorist incidents and concludes with a Hands On Training (HOT) portion of the course—the COBRA Alley exercise with real nerve agents like Sarin (GB) and VX. The training programs, staff and the facilities at the CDP are top notch. I recommend any

first responder who is interested in attending contact your individual state's Homeland Security training coordinator on how to apply for this type of instruction. All expenses are covered: air fare, bus transportation to and from the Atlanta airport, CDP facility's lodging accommodations and all meals.

The learning skills provided at the CDP are a great opportunity to gain the first-hand knowledge that the equipment you wear will protect you in a Haz-Mat-WMD exposure event, and the procedures you are taught at the CDP center will keep you safe. It is a great way to gain self confidence as well as team confidence regarding safety if your team is ever called out for response operations at a HazMat spill, terrorist chemical weapons incident or location of a suspected threat.

Is the Threat Real?

One only has to recall the 1995 Sarin attack in one of the world's busiest commuter transportation centers, the Tokyo subway system. This chemical weapon terror attack was carried out by several followers of the Aum Shinriyko Doomsday religious cult. Small amounts of the deadly Sarin nerve agent were disseminated inside the interior of five different subway train cars, causing the death of 12 people, severely injuring 50 others and temporarily causing vision problems to 1,000 other passengers on the subway system.

About 5,000 patients flooded the Tokyo hospitals; a majority of them turned out to be fine, but they flocked in because they were overcome with panic that they may have been affected by the Sarin nerve agent. This is just another example of how commanding and efficient a tool chemical weapons would be for the terror cell that plans to utilize it in a future terrorist operation.

Remember SLUDGEM

Our training course highlighted some advantages of chemical agents usage by terrorists as a WMD. They can be relatively easy to make or acquire, usually have an immediate effect, are easily spread or disseminated at the target location, and will have a strong psychologimpact. Speaking of psychological impact on the public and the first responders, imagine rolling up on a suspected chemical terror strike and finding victims suffering from signs and symptoms of SLUDGEM.

SLUDGEM is the acronym for describing Salivation, Lacrimation (tearing), Urination, Diarrhea, Gastric Distress, Emesis (vomiting) and Miosis (pinpointed pupils). Victims who suffer a large exposure via inhalation can also exhibit muscle fasciculations (involuntary muscle twitching); generalized seizures; and copious oral, nasal and respiratory secretions. What a disturbing sight it would be and what horrors the victims would suffer dying at the crime scene of a chemical





weapon attack with a nerve agent.

Other types of chemical weapons were highlighted in the course in addition to the nerve agents, like choking or pulmonary agents (phosgene and chlorine), cyanide or blood agents (hydrogen cyanide and cyanogen bromide) and vesicant or blister agents (lewisite and mustard). All of these agents in the chemical weapons collection can be extremely deadly, but the nerve agents are the most lethal. For example, if you compare the lethality of chlorine to humans, Sarin is 200 times more lethal than chlorine and, incredibly, VX is 600 times more lethal than chlorine. Just one tiny pinhead-sized droplet of VX to the skin is deadly.

Other portions of the training were very valuable in the LERA/LEPM combined course. Our class of students worked



in an "assembly line" of victim rescue operations in the field, simulating a mass casualty incident of contaminated victims of a chemical attack. We were tasked with moving these patients out of the hot zone and onto a decontamination station. These simulated victims were life-like, full size and weight, adult mannequins.

We were in full PPE Level B gear (Tyvek® type chemical protective suits and APR mask) operating at an intense pace. It was a good workout that day, moving the mannequins out of the hot zone to the decon area and washing off the patients via water hoses, sponges and sprayers. Other sections of the training consisted of an active shooter response, again with PPE gear worn, in poor lighting and smoked out rooms. Another day's training had the class visit a room located in the large CDP headquarters, made to appear as a bomb maker's factory.

The students enter and learn to assess and identify threats and potential hazards in these kind of operations, i.e., what could be used by the bad guys as a "booby trap" and what are some materials found at a scene that can be indicators for explosive components, like containers of acetone and peroxide.

Also, there was another room made to represent a clandestine meth lab, with particular attention paid to the dangers involved in those events, such as the volatile, explosive, corrosive dangers to first responders and even the possibility of poisonous gases being produced from the chemicals involved in the meth street drug production.

Emergency Medical and Triage

One section of the various classes which I found very intense was the medical portion of the training, when students entered into a mock-up of a fast food restaurant after a suicide bombing attack has occurred. The students were to triage the numerous "bodies" found at the post-blast site and identify the rating of their survival as indicated on cards found on their bodies.

For example, one simulated victim would have a card which read, "severe bleeding from chest wound and loss of both legs," or another victim's card would read, "minor laceration to forehead and complaints of hearing loss." We would then act as the medical responders and tag the patients with various color-coded labels indicating the urgency of medical treatment, such as: green colored tags for minor injuries (walking wounded); yellow for delayed action (serious but non-life threatening); red for immediate life threatening injuries; or black for the morgue (those victims found to be pulseless / non-breathing).

This particular training exercise of triaging the victims in the restaurant was an eerie reminder to me of the downtown Jerusalem Sbarro pizza shop suicide bombing attack that occurred in August 2001 in Israel. The pizzeria was packed with customers, many of them families out for a pleasant lunch on a Friday afternoon, when a Palestinian suicide bomber entered the store and detonated his shrapnel-laced vest of explosives.

The scenes of carnage that day were brutal, as 15 innocents were killed and 130 wounded. I remember seeing the footage on the news, thinking to myself how lucky we were here in the U.S. to be free from such terrorist events like the suicide bomber, only to have our national tragedy of Sept. 11, 2001,









take place just a few weeks later.

For attendees to the CDP who are part of the training staff, and instructors from their respective police, fire or EMS departments, this type of facility provides an excellent opportunity to gain the knowledge of lessons learned and various successful WMD response procedures that can protect your team and also earn the "bragging rights" of claiming to have performed in these dangerous WMD environments and succeed in the mission.

An impressive point of reference for an instructor to relay to his team members and students, some of whom may be skeptical of the APR mask and personal protection suits utilized at these events, is that if you do things the right way, follow the procedures outlined and always check your PPE as well as your teammates, you will live to tell about it. Prepare, train, and expect the worst.

Brian Haughton is a corporal and 15-year veteran with the Philadelphia Police Department. He spent eight years as an officer on the department's full-time SWAT unit and worked as a sniper and EMT on the team. He is currently assigned as an instructor at the Philadelphia Police Academy, and serves as a team leader on the department's Major Incident Response Team responsible for CBRN operations. He can be reached at Bri3rdqenblue@aol.com.

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