and severe outcomes. SARS is a new disease, and there are many features of SARS that might be similar to an outbreak caused by an unknown biological warfare agent, to include initial symptoms being non-specific and common, high attack rates, respiratory transmission, little or no understanding of the etiology and origin of the disease, and high public fear and anxiety. The World Health Organization, through the Global Outbreak Alert and Response Network, led the international response to SARS.

SARS has taught many lessons for detecting and responding to such an outbreak. These lessons include the importance of preparedness, global surveillance, global leadership, a scientific basis to control measures, transparency, surge capacity, international collaboration, and communications. These lessons can be applied to assess and improve global capacity to respond to other infectious disease threats most notably the next influenza pandemic and the possible deliberate use of a biological agent.

Keywords: collaboration; communication; infectious diseases; leadership; pneumonia; preparedness; response, international; severe, acute-onset, respiratory syndrome (SARS); surveillance; surge capacity; transparency
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Role of the OPCW in Response to Chemical Accidents

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In accordance with Article X of the Chemical Weapons Convention (CWC), the Organisation for the Prohibition of Chemical Weapons (OPCW) (www.opcw.org) carries out the following implementation measures of assistance.

1. The coordination and delivery to States Parties for protection against Chemical Weapons (CW) including: (a) Detection equipment; (b) Alarm systems; (c) Protection equipment; (d) Decontamination equipment; (e) Decontaminants; (f) Medical antidotes; (g) Treatments; and (h) Advice on any of these protective measures.
2. The OPCW is able to provide States Parties with information on protective measures against CW, providing expert advice for capacity building, establishing a voluntary fund for assistance, and the conclusion of bilateral agreements between States Parties for offers of assistance.
3. The OPCW has adopted a programme for the establishment of permanent stockpiles of protective equipment including inspection and serviceability. Associated with the use of such stockpiles is a programme of assistance in developing emergency plans, legislation, training programmes, procedures, and standards.
4. In the case of an alleged use of CW, the requesting State Party may request the OPCW to conduct an investigation to collect facts to determine whether CW has been used.

This presentation will provide further insight into the role that OPCW has in the provision of assistance to States Parties under Article X of the CWC.

Keywords: advice; assistance; chemical weapons; Chemical Weapons Convention (CWC); equipment; funding; Organisation for the Prohibition of Chemical Weapons (OPCW); protection; stockpiles
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Preventing the Militarization of Biology: Biological Warfare Past, Present, and Potential Future

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There is increasing concern relative to the possible use of biological weapons of mass destruction. This current concern is set in the context of the history of offensive biological weapons programs over the last 100 years. It is argued that while the present threat is limited, it could escalate substantially over the next decades. All previous scientific and technological solutions have been applied in major ways to military purposes, and this looks as if it also will happen to the ongoing revolution in the life sciences.

The potential outcomes of significant militarization of biology are detailed in two key areas: (1) microbiology and (2) neuroscience. It is argued that the potential outcomes are in nobody's interest, and that all possible means should be undertaken to prevent militarization of biology.

Keywords: microbiology; military; neurosciences; outcomes; revolution of life sciences; weapons, biological; weapons of mass destruction
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Disaster Medicine

Hospital Disaster and Emergency Planning

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For the past decade, at least one disaster has occurred somewhere every day, affecting hospitals throughout the world.[1] With increasing population growth and maldistribution, increasing urbanization, increasing environmental degradation, and continuing economic imbalance, the impact of disasters or emergencies on hospitals is likely to increase. Hospitals play a critical role in the local response system to emergencies, providing: (1) initial triage, decontamination, and emergency medical care for victims able to flee the disaster scene; (2) definitive medical care for the vast majority of victims; and (3) continued medical care to the community with ongoing medical problems.

This presentation considers the process and structure of effective hospital emergency planning. Hospital emergency planning optimally incorporates processes that are multidisciplinary, evidence-based, relevant to the community at risk, and cost-effective. Components of the hospital disaster plan include the plan definition including risk assessment, coordination and control system, plan activation, medical operations, logistical operations, planning operations