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Radiation Injury Treatment Network® Overview

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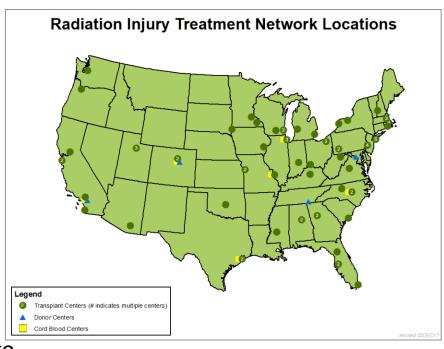
Agenda

- History
- Concept of Operations
- Accomplishments
- Future Initiatives



What is RITN?

- RITN is a collaborative effort, led by the NMDP-Be The Match and the ASBMT, of hospitals preparing for the medical surge resulting from a distant radiological incident
- RITN hospitals prepare to provide specialized care to patients with Acute Radiation Syndrome (ARS) following a mass casualty radiological incident
 - Hospitals near the incident will not be activated as part of the RITN
 - RITN expertise is for "radiation only" injuries, trauma patients should be sent to other NDMS hospitals





Why the RITN Was Created?

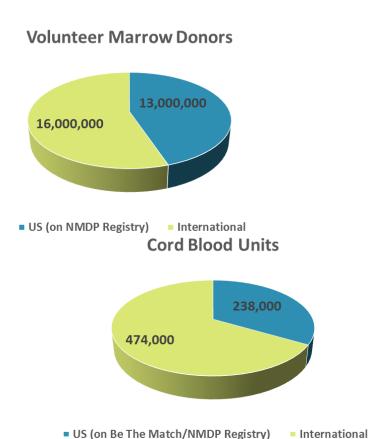
- The gap of specialized care for ARS patients was identified by ASPR as well as the Office of Naval Research
- Following the leadership of the Office of Naval Research, the NMDP-Be The Match was developing capacity at Bone Marrow Treatment clinics in hospitals to prepare
- IN 2005 ASPR engaged the NMDP-Be The Match and American Society for Blood and Marrow Transplantation (includes industry leaders in transplantation) to collaborate on bridging the gap



NMDP Capabilities

- The NMDP-Be The Match lab network is able to conduct over 39,000 marrow typings per month
- Lab results are automatically sent to NMDP
- Facilitated over 100,000 transplants since 1987
- Access to 29 million volunteer marrow donors and over 700,000 stored cord blood units







RITN Timeline

Key NMDP Dates

1984 National Organ Transplant Act 1987 NMDP established & operates National Bone Marrow Registry 1990 ONR begins funding NMDP 1991 HRSA begins funding NMDP

2001

NMDP

begins

developing

RITN

concept

2003

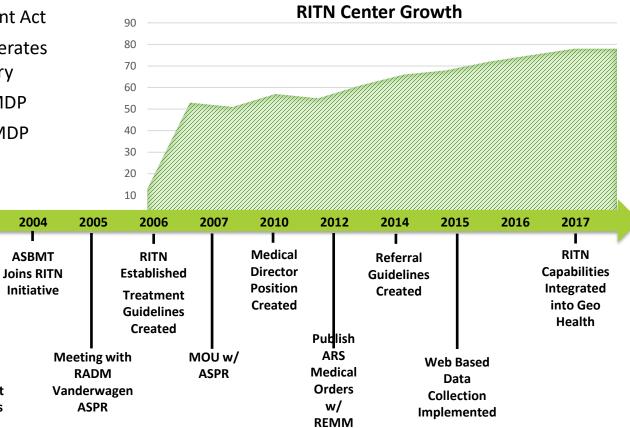
NMDP

Engages

Transplant

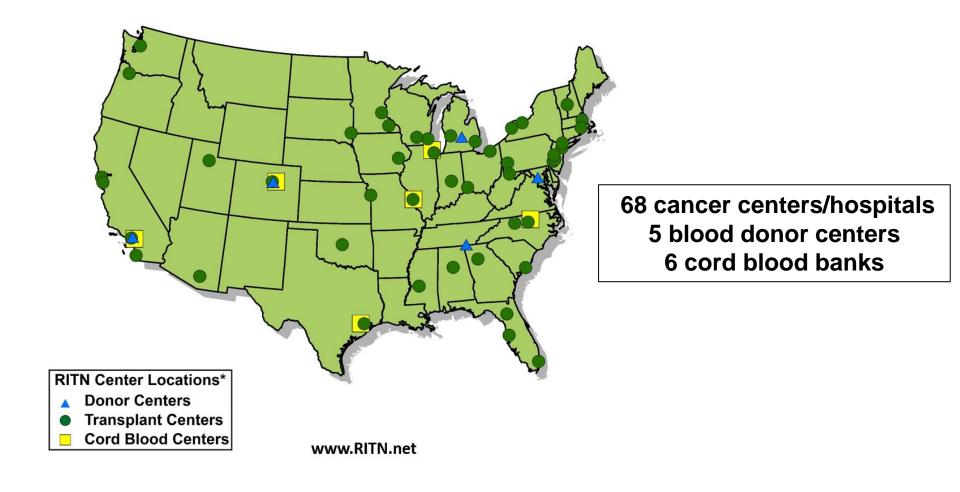
Physicians

for Input





RITN Locations Map





Why Cancer Hospitals

- Acute Radiation Syndrome (ARS) mimics what BMT/hematology/oncology staff see daily while treating patients with blood cancers
- Bone marrow is a the most sensitive organ in the body to ionizing radiation
- Bone marrow is the source of production of:
 - Red blood cells ----- for oxygen
 - White blood cells -- for immunity
 - Platelets ----- for clotting
- Failure to restore blood production following radiation injury would result in <u>death from marrow suppression</u>



Federal Plans Involving the RITN

- White House: Planning Guidance for Response to a Nuclear Detonation
- FEMA: Nuclear/Radiological Incident Annex
- ASPR: Radiological Dispersal Device Playbook
- ASPR: Rad/Nuke Annex to All Hazards Plan
- ASPR: State & Local Planners Playbook for Medical Response to a Nuclear Detonation
- ASPR: Medical Planning and Response Manual for a Nuclear Detonation Incident
- NLM: REMM-RITN Prototype for Adult & Pediatric Medical Orders During a Radiation Incident









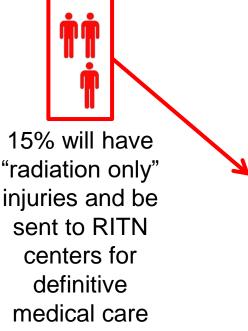


RITN Patient Profile

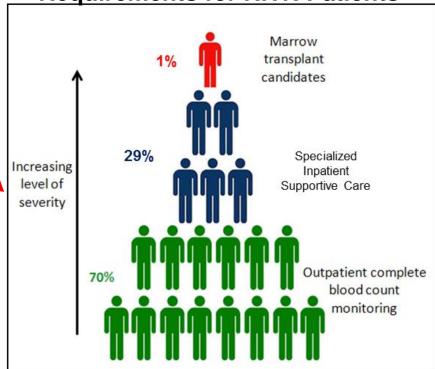
Total IND Casualties



85% of casualties will have trauma or combined injuries and receive treatment elsewhere



Expected Patient Care
Requirements for RITN Patients



Casualty Estimates adapted from: Knebel AR, Coleman CN, Cliffer KD; et al. Allocation of scarce resources after a nuclear detonation: setting the context. Disaster Med Public Health Prep. 2011;5 (Suppl 1):S20-S31



RITN PREPAREDNESS EFFORTS

Since **2006**

580 exercises

***All exercise materials available on RITN.net

13,500+ medical staff trained

***Free web-based courses available on RITN.net

16,900+ doses of G-CSF in operational inventory

***Fluctuates throughout year, is sum of inventory at each RITN hospital



Accomplishments

Medical Guidance

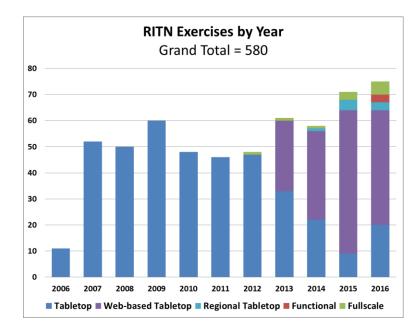
- ARS Treatment Guidelines
- Referral Guidelines
- Adult and Pediatric Medical Orders in collaboration with REMM

Training

- Mobile REAC/TS course
- ARS Medical Grandrounds training
- Web based training courses (basic radiation, ConOps, etc...)
- Non-medical Radiation Awareness Course Adopted by NNSA for USAID staff

Operations

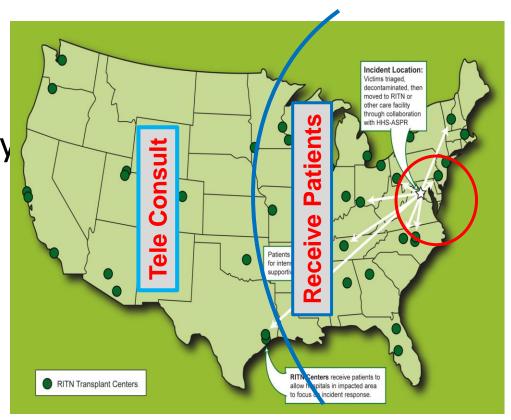
- Web based data collection
- Integration of RITN capabilities into GEO Health





Future Initiatives

- Grow RITN
- Triage guidelines for ARS
- Tele-consultation
- Expand on-hand inventory of Cytokines (G-CSF and GM-CSF) at RITN centers for a user managed inventory





RITN Partners

Partners































Contact Info

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