

# Bio & Terror Bible

## EXPOSING THE COMING BIO-TERROR PANDEMIC

**BIOTERRORBIBLE.COM:** The following bio-terror drills occurred within the calendar year of 2006. The fact that these bio-terror drills exist in mass confirms that an upcoming bio-terror attack is in the cards and may be played in a last ditch effort to regain political, economic and military control of society. Since 9/11, bio-terror drills have become the norm in America but have recently started becoming a weekly occurrence since February of 2011.

### A Few Pertinent Questions:

1. When will the "bio-terror drills" go live?
2. How will police, military and the American people know the difference between "real world" bio-terror and "drilled" bio-terror?
3. Will the video footage of bio-terror drills be used by the government or media for pandemic propaganda purposes at a later date?

### Resounding Bio-Terror Drill Themes:

1. A bio-terror attack and subsequent pandemic is not a matter of "if", but "when".
2. Synchronicity and coordination of ALL local, county, state and federal government emergency agencies is being repeatedly drilled by DHS and FEMA in congruence with COG (Continuity of Government) / [Martial Law plans](#).

**Title:** Eastern Connecticut Leaders Plan Drill To Ready For Terrorism

**Date:** January 24, 2006

**Source:** [Osint](#)

**Abstract:** Should a large-scale disaster strike Northeastern Connecticut, health district officials say an effective response starts locally. Representatives from the Northeast District Department of Health and the state Department of Public Health Friday gave Windham County town leaders a crash course on what they should do in a bioterrorism emergency. The meeting at the Northeastern Connecticut Council of Governments offices was a precursor to a real-time emergency drill scheduled for April to test the Centers for Disease Control's Strategic National Stockpile plan.

The drill will enact a worst-case bioterrorism scenario. "The local action is so important because we are taking care of our neighbors," community health education director Linda Colangelo said. "These town leaders see these people every day. People want to turn to these trusted resources and trusted faces." Sabrina Choquette of Putnam said she has thought about what would happen if such disasters occurred in the region. She thinks drills are a good place to start. "I would be concerned if something happened," Choquette said. "It's always good to do drills. You do it for fires in schools, so why not for bioterrorism." Health officials said responding to a bioterrorism disaster means contacting state and federal emergency offices to dispatch large amounts of medication to counteract any threatening biological agents.

The April drill will be set up at Plainfield High School and will include a triage unit staffed with workers to process the "victims" of an attack. The high school is one of three designated sites in Northeastern Connecticut where antibiotics would be dispensed to residents. Killingly Intermediate School and Putnam Middle School are the other two sites. Pomfret First Selectman Jim Rivers said he is concerned with how

quick his residents will have access to services in an emergency. Rivers said there should be more options, considering Windham County's populace and expansive geographical area. "I want to make sure people in my town get what's coming for them in a medical emergency," Rivers said. "As a region, we're not there yet. I think three central locations for 80,000 people scares me."

Health officials pointed out lessons learned from the slow Federal Emergency Management Agency response after Hurricane Katrina to emphasize the importance of communication and response plans at all levels of government. "You have the perfect example after Katrina, where there was no local response," Joseph Marino, Department of Public Health epidemiologist and Strategic National Stockpile program coordinator, told town officials ([Osint, 2006](#)).

**Title:** Drill Prepares For An Anthrax Attack, Goal Was To Treat 1,500 In An Hour

**Date:** February 3, 2006

**Source:** [Free Library](#)

**Abstract:** Public health officials gathered 1,500 volunteers into the Glendale [Civic Auditorium](#) on Thursday for a simulated [bioterrorism](#) drill designed to prepare emergency response crews for an [anthrax](#) attack.

While the exercise went smoothly, some officials still questioned how the response would be in an actual terrorist strike with the lethal bacteria.

"People say, 'Are you prepared?' That's not the right question," said Dr. [Jonathan Fielding](#), the county's director of public health. "The right question is, 'Are you better-prepared today than you were yesterday? Are you better-prepared tomorrow than you were today?'"

"That's the right question. I think the answer to that question is yes."

[Los Angeles](#) County organized the event as part of a series of exercises.

A crowd of volunteers mostly made up of students carried forms describing pretend anthrax symptoms. Health workers glanced at the forms as they sent the "patients" off to different tables to be given "medication," if they needed it.

Officials sitting on a stage watching the exercise start heard a near-continuous [beeping](#) coming from a nearby device being set off by the ankle bracelets worn by the participants. Organizers used the technology, borrowed from long-distance marathons, to count how many people they were treating in the simulation.

The goal set by the federal government for the exercise: 1,500 people processed per hour.

"This is going pretty well because people are not panicked," said Glendale City Councilman Bob Yousefian. "But on the day that this - God [forbid](#) - happens, you're going to have panic set in so it's not going to go as smooth."

The bacteria that causes anthrax turned up at post offices and on Capitol Hill in the months after the Sept. 11, 2001, [terror attacks](#). Authorities never found out who mailed the bacteria.

Anthrax is a deadly disease caused by contact with [bacillus anthracis](#), not by person-to-person contact, and it kills most victims who do not get treatment in time. But survival chances greatly increase with antibiotic treatment, Fielding said.

Steve Guerrero, 28, a health teacher at Polytechnic High School in Sun Valley, brought 40 of his students on a field trip to participate in the exercise as volunteers.

"It's pretty smooth," Guerrero said. "I think this exercise is a lot better for us who understand it, as

opposed to the students, who are just here to get out of school for a day."

Officials did not expect to know until today whether they met the goal of processing 1,500 people in an hour, which would be the first time that many people had been processed in any bioterrorism exercise nationwide ([Free Library, 2006](#)).

**Title:** Towns Simulate Biological Disaster

**Date:** April 20, 2006

**Source:** [Courant](#)

**Abstract:** A Bristol police Explorer playing the role of a patient infected with the pneumonic plague darted out of New Britain High School's gymnasium carrying bottles of pills during a bioterrorism drill on Tuesday.

Security officers pinned the screaming patient to the ground and escorted him outside, where he would have been taken to the city's police station or hospital.

The role-players were among hundreds of volunteers and officials who participated in the federal Centers for Disease Control and Prevention's first "Strategic National Stockpile" drill at seven sites in the state, including Glastonbury, New London, Milford, Westport, Southbury and Plainfield.

The simulation tested how effectively state officials would be able to dispense medication and provide treatment in the event of a large-scale public health disaster.

"It went really well," said Leonard Guercia, chief of the operations branch of the state Department of Public Health. "We were able to test a lot of the systems we have in place and most importantly our communication with our local health partners."

In the scenario played out Wednesday, the pneumonic plague had been released at two sporting events in Boston and New York City and more than 600 Connecticut residents had died, according to New Britain Fire Department Deputy Chief Robert DiPietro.

"Our objective is to get 1,000 people an hour safely through the ... site while keeping the workers and public safe," DiPietro said.

If the real plague were ever to strike Connecticut, about 75 locations would be designated to distribute medication and treatment, DiPietro said.

During the New Britain site's first hour, 169 patients were "treated," said Chuck Motes, the Southington health department director and the drill's incident commander.

Although the total number of patients treated per hour at the seven sites was not released, William Gerrish, spokesman for the state Department of Public Health, said the state was pleased with the number of participants and the level of interest they displayed at each site.

"Many of the mock patients went through the system more than once," Gerrish said. "A critical mass of people was there to role-play."

Yellow tape and arrows led patients through a series of triage stations designed to determine which medication they should receive. According to age, allergies, medical history and physical conditions, each patient took home specific "medication" ([Courant, 2006](#)).

**Title:** Officials Call Asia-Pacific Pandemic Drill A Success

**Date:** June 9, 2006

**Source:** [CIDRAP](#)

**Abstract:** Australian officials who coordinated an exercise Jun 7 and 8 on pandemic influenza response among Asia-Pacific nations called the drill a success, according to an Agence France-Presse (AFP) story today.

Meanwhile, in Vienna a 2-day international meeting on avian flu that adjourned yesterday called attention to the urgent need for substantial funding and preparedness, especially in Africa, and announced plans for an international meeting in Africa later this year, according to news services.

The pandemic exercise included the 21 countries of the Asia-Pacific Economic Cooperation (APEC). It began in New Zealand and ended yesterday with calls to the United States, according to AFP.

The test scenario involved a new avian flu strain—dubbed the "Malacca Straits Flu"—sparking a pandemic in the region after several infected fishermen were rescued by a cruise ship, AFP reported. APEC countries then needed to respond to the mock crisis and communicate with each other.

"The scenario successfully achieved the goal of testing communication responses during the exercise, which lasted 26 hours across eight time zones," Australian Foreign Minister Alexander Downer and Attorney-General Philip Ruddock said in a statement, according to AFP. They said the exercise "attracted credible responses."

Neil Head, director of development with Emergency Management Australia, which coordinated the exercise, told AFP he found the level of cooperation among countries encouraging.

"The things that make [a pandemic threat] preventable are early detection, close cooperation and information sharing, and the rapid sourcing and the development of appropriate antibodies and medicines," Head told AFP. "The fact that these [countries] seem willing to do all these things, we would have to say, is a very positive outcome."

Detailed results of the drill will be presented at an APEC leaders conference in November, according to the AFP story.

In addition to Australia and New Zealand, APEC countries that played a major role in the drill, according to a Jun 7 Reuters report, were Chile, China, Indonesia, Japan, South Korea, Malaysia, Thailand, and Vietnam.

#### **Africa needs more money, conferees say**

Officials at the donors meeting in Vienna this week discussed funding efforts and said Africa now needs \$760 million for avian flu preparedness, far more than previously discussed, according to news reports.

The Influenza Partners' Senior Officials Meeting was cosponsored by the United States, the European Union, and China and involved the World Bank, United Nations Food and Agriculture Organization (FAO), World Organization for Animal Health (OIE), and representatives from African countries.

The meeting, said US Under Secretary of State for Global Affairs Paula Dobriansky in a Jun 7 Reuters story, was a "strong . . . appeal to those who have not fulfilled their commitments." Dobriansky, the top US official present, was referring to the \$1.9 billion pledged worldwide last January in Beijing to fight avian flu, only \$286 million of which has been paid (see link to earlier story below).

The donors meeting determined that Africa now needs \$760 million, or three times the funding allocated at the Beijing conference, according to the Reuters report, because in January the H5N1 virus had not been detected on the continent. Since February, at least seven African nations have reported outbreaks, with human cases confirmed in Egypt and Djibouti.

"In Beijing the cost was calculated only for prevention," OIE Director-General Bernard Vallat told Reuters during the Vienna conference. "But when a country is infected, the cost is multiplied by at least three or four."

"We need money to be moving into Africa in support of countries very quickly indeed," added David Nabarro, UN senior coordinator for avian and pandemic influenza, in a Bloomberg report today.

Amid increased concern about Africa's plight, meeting officials announced a follow-up meeting to be held on that continent later this year, according to the Bloomberg story. Host city and specific dates are to be determined, but the story said Bamako, Mali, might be the site.

In other conference news, the European Commission announced it has pledged \$58 million to a new trust fund to help developing countries prepare for a possible avian flu outbreak, according to a Reuters report yesterday. This is separate from money already promised during the January Beijing conference.

#### **China, Hungary report poultry outbreaks**

China has reported its first avian flu outbreak among poultry since February, AFP reported today. China's Ministry of Agriculture said the H5N1 outbreak occurred on a farm in China's northwestern Xinjiang region, but the number of birds killed by the virus was not specified.

More than 17,100 poultry were culled to contain the outbreak, and the area has been disinfected, Xinhua reported Friday, quoting Ministry of Agriculture sources, according to AFP.

The affected farm is in Hetian County, which is on a flight path for birds migrating between eastern Africa and western Asia, today's AFP story said.

The last reported outbreak in domestic poultry in the country occurred in February in the eastern province of Anhui, AFP reported. The latest incident brings the total of officially reported outbreaks on Chinese farms to 35 since October 2005.

Also today, Hungary reported an outbreak of a deadly strain of H5 avian flu in a flock of domestic geese, according to news accounts. "The suspicion is that it is highly pathogenic H5," Agriculture Ministry Deputy Chief Veterinarian Lajos Bognar told Reuters today.

Hungary detected H5N1 in wild swans in February, but it has reported no H5N1 outbreaks in domestic birds.

An AFP report today said Hungarian officials have slaughtered all 2,300 geese on the affected farm and were also culling poultry and ducks within 1 km of the site in Bacs-Kiskun, in southern Hungary.

Samples have been sent to the European Union's reference lab in Weybridge, UK, to determine whether the H5N1 strain is the culprit.

Also, authorities in Niger have begun culling poultry in the southeastern part of the country to stop H5N1 spread, according to an AFP story today. The slaughter focused on the area of Boko Mai Gao, where avian flu was detected for the first time last week.

Last week's outbreak in Boko Maigao village, 434 miles east of the capital of Niamey and near the Nigerian border, was the first among domestic birds in Niger since February, the AFP report said.

Officials said the culling operation would last one day and that bird owners were being compensated on the spot, according to AFP ([CIDRAP, 2006](#)).

**Title:** Saturday Mail Drill Simulates Response To Bioterror Attack

**Date:** November 10, 2006

**Source:** [Seattle Times](#)

**Abstract:** In case of a bioterrorism attack, be on the lookout for a mail carrier bearing drugs.

That's one possible medication-delivery method that government officials will be testing Saturday at about 38,000 households in northeast Seattle neighborhoods, which will get little empty boxes in the mail with a flier explaining it's all just a drill.

After a real attack, the box would contain antibiotics to counteract anthrax, plague, tularemia or some other deadly bacteria that terrorists might spread.

"If there were a bioterrorist attack in Seattle, a large number of people would need medications quickly to keep them from becoming sick," said Dorothy Teeter, interim director of Public Health — Seattle & King County. "This is to test our capacity to deliver the medications."

After an actual attack, such deliveries by postal carriers would add to drug distribution by about 12 centers that would be set up in schools, community centers and other locations in King County. Public Health already has held drills to test those centers.

Between 7:30 a.m. and 4:30 p.m. Saturday, 41 mail carriers will deliver the test boxes to home mailboxes or drop slots in an area that includes ZIP codes 98115 and 98125. The test area is roughly framed by Northeast 145th Street to the north, Northeast 60th Street to the south, Lake Washington to the east and First Avenue Northeast to the west.

Police will accompany the carriers, but will not approach the residences. In a real event, the police would be there to ensure safe, quick delivery.

The drill is the first of its kind in the nation. It's part of the federal government's Cities Readiness Initiative and will be followed by similar exercises in other cities, said Dr. William Raub, senior science adviser to the U.S. Secretary of Health and Human Services. Seattle was selected because of previous "quality work" in preparing for an attack, he said.

In an actual attack, medications would be delivered within 12 hours from a national stockpile of emergency medical supplies, stored strategically around the country. For the Saturday exercise, a truck will simulate that delivery.

Raub said federal health officials plan to encourage storage of medications by corporations, universities and other organizations that have health workers and ways to distribute the drugs.

In addition, Raub said, the Centers for Disease Control and Prevention (CDC) is now conducting a study of how well 5,000 St. Louis households store and keep track of medication that could be used after an attack ([Seattle Times, 2006](#)).

**Title:** Drive-By Shot Clinic And Bioterror Drill Flu Inoculation Provide Practice

**Date:** November 18, 2006

**Source:** [Free Library](#)

**Abstract:** They practiced first on oranges, then on fellow students at [College of the Canyons](#). Now, they're prepared to help in a terrorist attack.

On Friday, a team of nursing students stood in makeshift aisles in the college parking lot, injecting drivers and passengers with free [flu vaccines](#) in a drive-through clinic. The program actually was designed with a much more serious threat than the flu in mind.

Organizers staged the clinic to see how a drive-through program would work in the event of a major bioterrorism attack that left the entire [Santa Clarita Valley](#) in need of an [antidote](#).

Whanie Powell of Valencia sat parked in her Lexus an hour and 20 minutes before the clinic opened.

"I always get everywhere early," said Powell, who was getting her first-ever flu shot.

A few cars behind her, Pat Nelson read newspapers as she waited about a half hour for the operation to begin.

"I was going to get one anyway, and I like that they were doing this for preparation," said Nelson, who gets a flu vaccination every year.

By 10 a.m. when the first of 1,000 shots were administered, 150 vehicles were in line, snaking through the otherwise empty parking lot. One crew managed the line, one handled paperwork, one directed traffic through four lines and another helped count cars and patients as they left. The clinic was a joint effort by the college, the county Health Department, the city of [Santa Clarita](#) and the Fire and Sheriff's departments.

"The worst thing that could happen is another [New Orleans](#)," public health nurse [Martha Collins](#) said. ``We're trying to work out everything in advance so we're prepared in a real emergency."

The drive-through plan is designed for mass traffic in the event of a disaster, college spokesman John McElwain said. With tens of thousands of people in need of inoculations, parking lots and surrounding streets would be jammed with cars.

"With 20... 30... 40,000 people, you don't want to have people park and leave there cars," he said. ``It really is an efficient way to move the people -- and their cars" ([Free Library, 2006](#)).