



# **Chemical, Biological, Radiological, and Nuclear (CBRN) and Medical Communities of Interest (COI) Information Sharing**

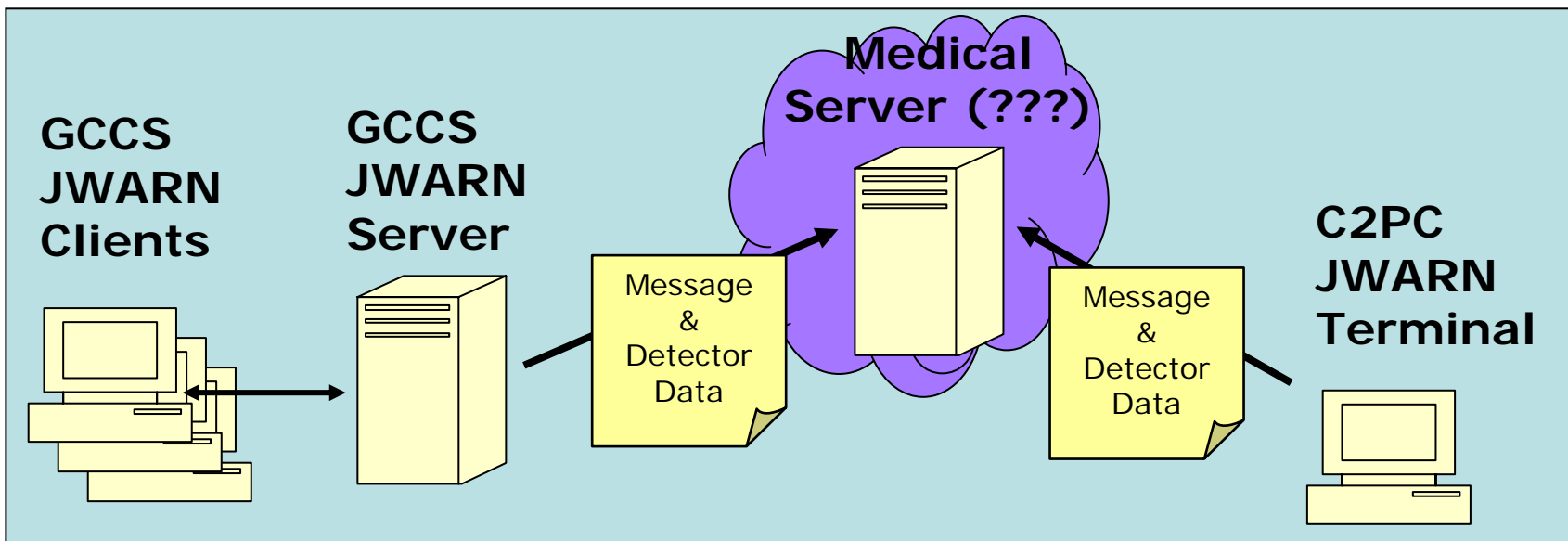
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# CBRN COI ↔ Medical COI Data Sharing (Why a Pilot?)

- CBRN COI to Medical COI data sharing supersedes the requirement for multiple point to point interfaces among the many separate medical and CBRN systems. Opens way for additional COI data sharing.
- No CONOPS exist for CBRN ↔ Medical data sharing, developing notional Use Cases to facilitate CONOPS development, and promote net-centric services (DoD Net Centric Data Strategy & Web Services)
- CBRN Medical Pilot proposal suggests partnering with MSAT ACTD to enhance connectivity of both the Medical and CBRN COIs to interface/interoperate.
- The MSAT ACTD and CBRN PORs would both benefit from data sharing...
  - Pilot promotes CBRN Information Systems (IS) programs of record to:
    - pull medical data to generate CBRN course of action
    - pull medical data to CBRN to conduct crisis and deliberate planning
    - receive medical alerts and display in the CBRN view
  - Pilot promotes MSAT ACTD to:
    - pull CBRN detector/sensor data for medical surveillance
    - pull CBRN hazard prediction data for medical crisis planning/action and analysis
    - push medical alerts to the CBRN view
    - identify medical server

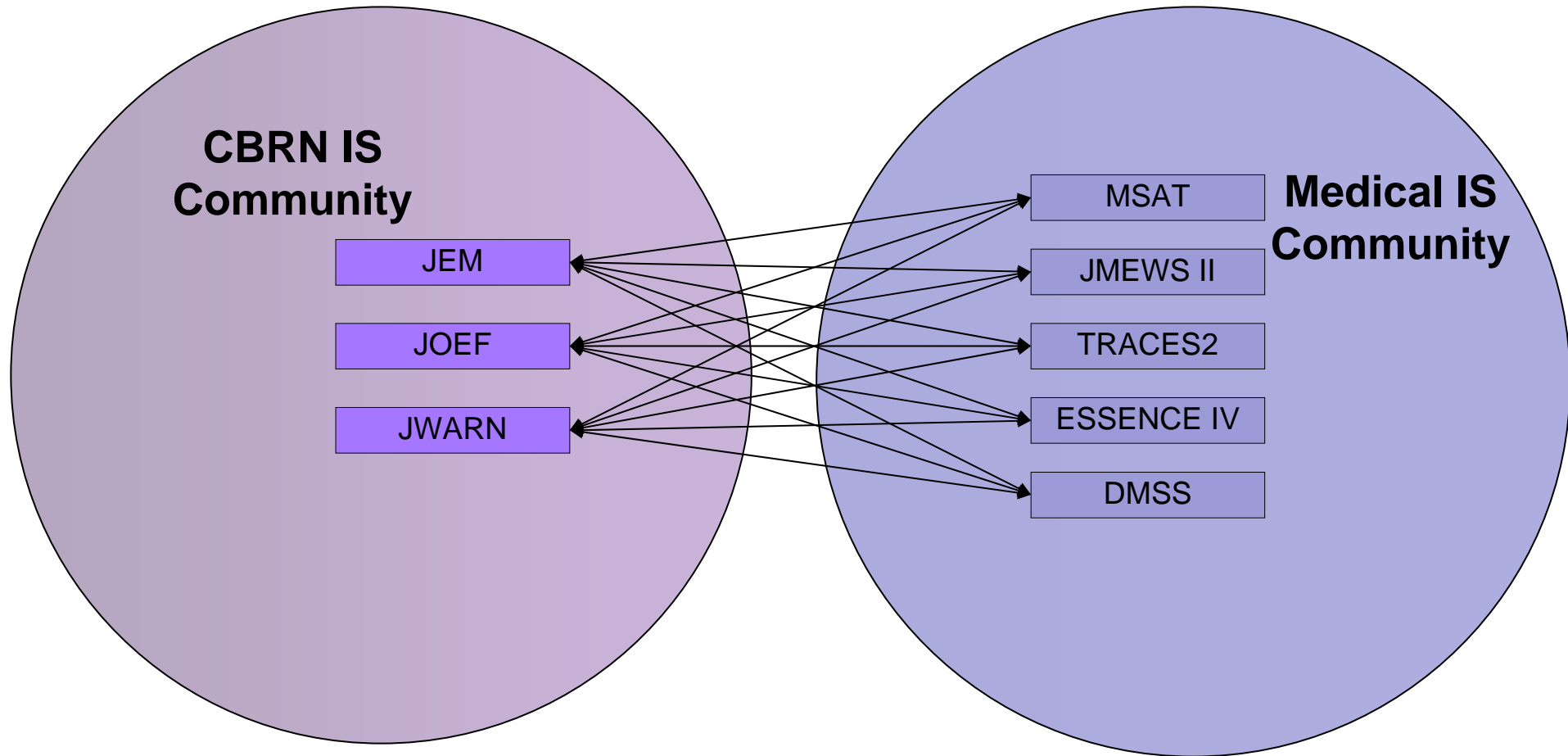
# Notional JWARN Data Sharing Approach



- **Current approach:**
  - Does not have an identified medical end-point / server
  - Is not scalable and is a stove-piped “file-based” solution
  - Does not provide an agreed upon Data Model / Schema for sharing of data between Medical, CBRN and other COIs
  - Does not support real time data exchange “manually intensive”
  - Does not meet DoD’s direction for “net-centric” services



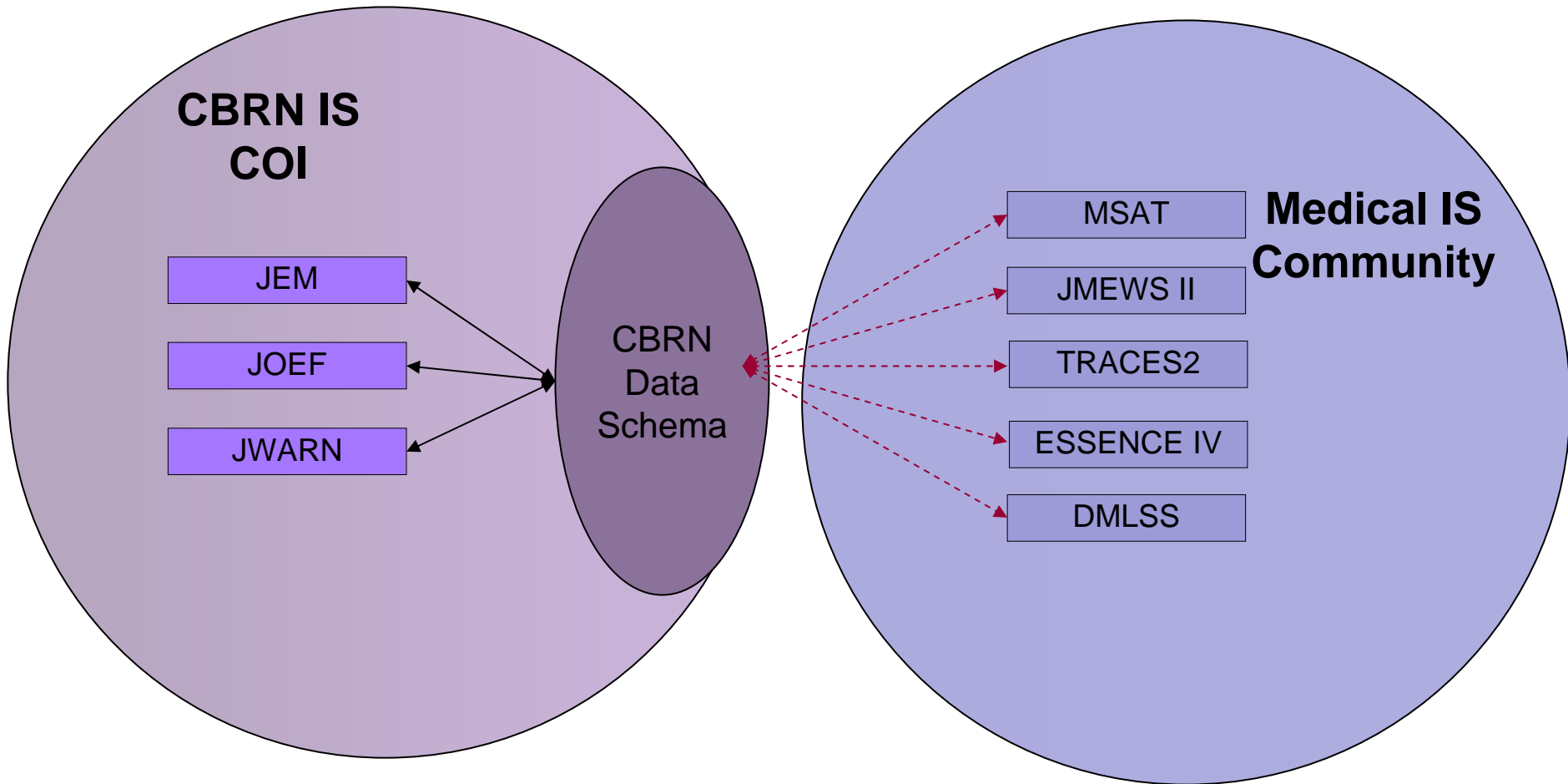
# CBRN ⇔ Medical System to System Data Exchange





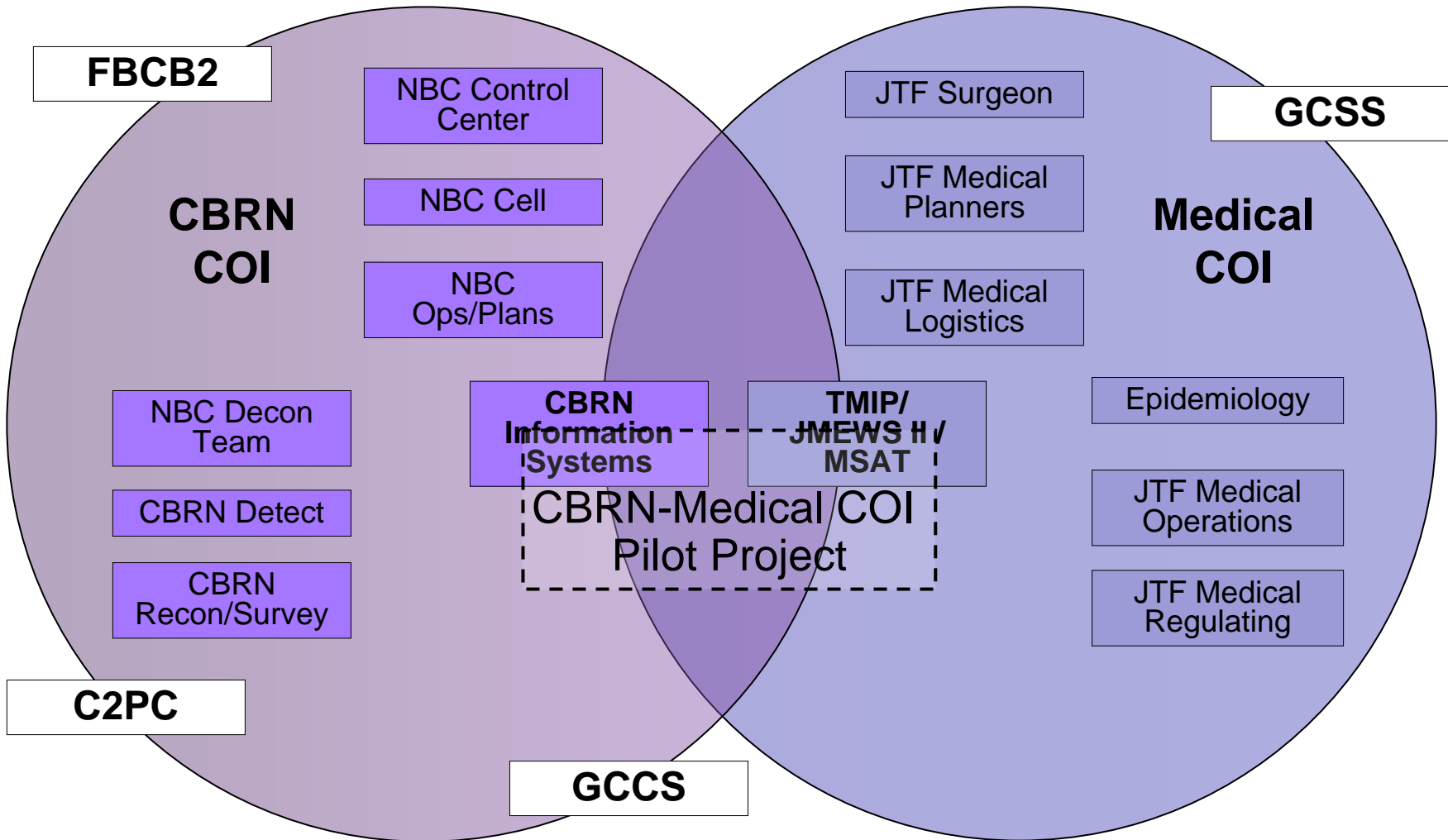
# CBRN COI ↔ Medical Notional Interfaces

## Pilot Project (Phase 1)

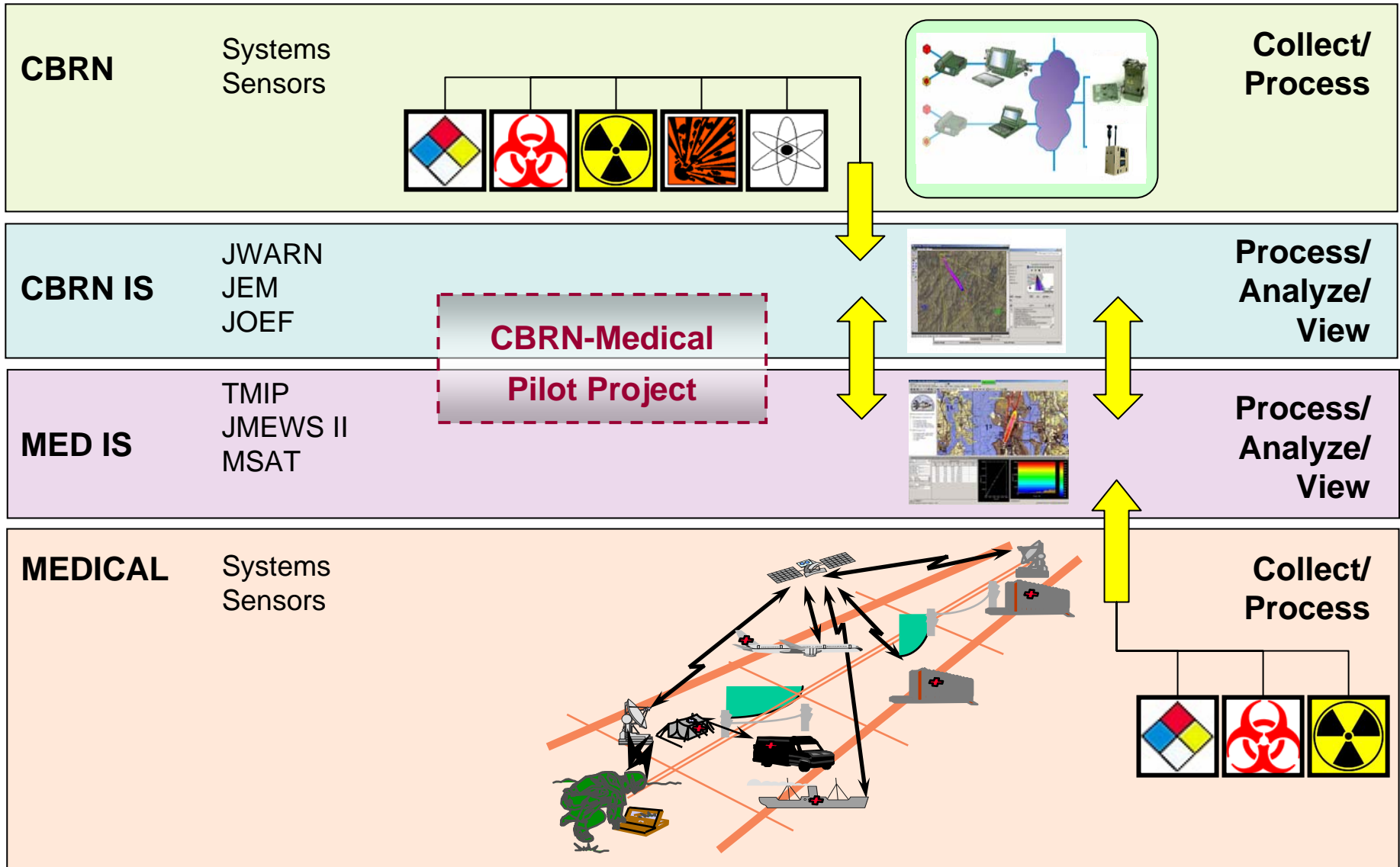




# CBRN ↔ Medical COI Data Sharing Pilot Project (Phase 2)



# CBRN IS ↔ Medical IS Data Sharing





# Sample Use Cases for Data Sharing

- ⇒ **Medical Surveillance**
  - 1) Low Level/Long Term Exposure
- ⇒ **Crisis Planning/Action**
  - 2) WMD Hazard Alert/Prediction
  - 3) Casualty Prediction
  - 4) Medical Logistics Requirements





Medino

Book Arts

MARCEP ISLAND

MARCER Island City

Hard

T-4

Great Spar

266

243  
220

300  
KING/100  
BENTON

250

75

78

200

200

200

200

200

300

400

500

600

700

800

CLASSIFICATION LEVEL HERE

TMIP | Joint Medical Workstation II

Welcome back, System Administrator  
[Home Page](#) [Manage Filters](#) [Help](#) [Logout](#)

- [Unit Status](#)
- [Surveillance](#)
- [Map View](#)
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- [Subjective](#)
- [Blood](#)
- [Equipment](#)
- [Supplies](#)
- [Beds](#)
- [Event View](#)
- [AnnexQ Report Status](#)

Your Location: [Unit Status](#) > [Beds](#)

Your Filters: **PACOM Only, consisting of 10 Units in: PACOM** [\(Change filter\)](#) [\(Remove filter\)](#) [\(View Units in filter\)](#)

Bed Status

This page displays the most recent bed status, as reported by units in their most recent AnnexQ report.

8 of 10 joined units (80%) have filed **MedSitRep** in the last 4 day period.

Type	Authorized	On Hand	Mission Capable	Total Occupied	USA	USAF	USN	USMC	USCG	Non-US Military	EPW	US Civilian	Other Civilian	Other	Status
<a href="#">Level 2 beds</a>	656	656	656	0	0	0	0	0	0	0	0	0	0	0	<b>G</b>

Export options: [Excel](#) | [XML](#) | [CSV](#)

Key to this Chart

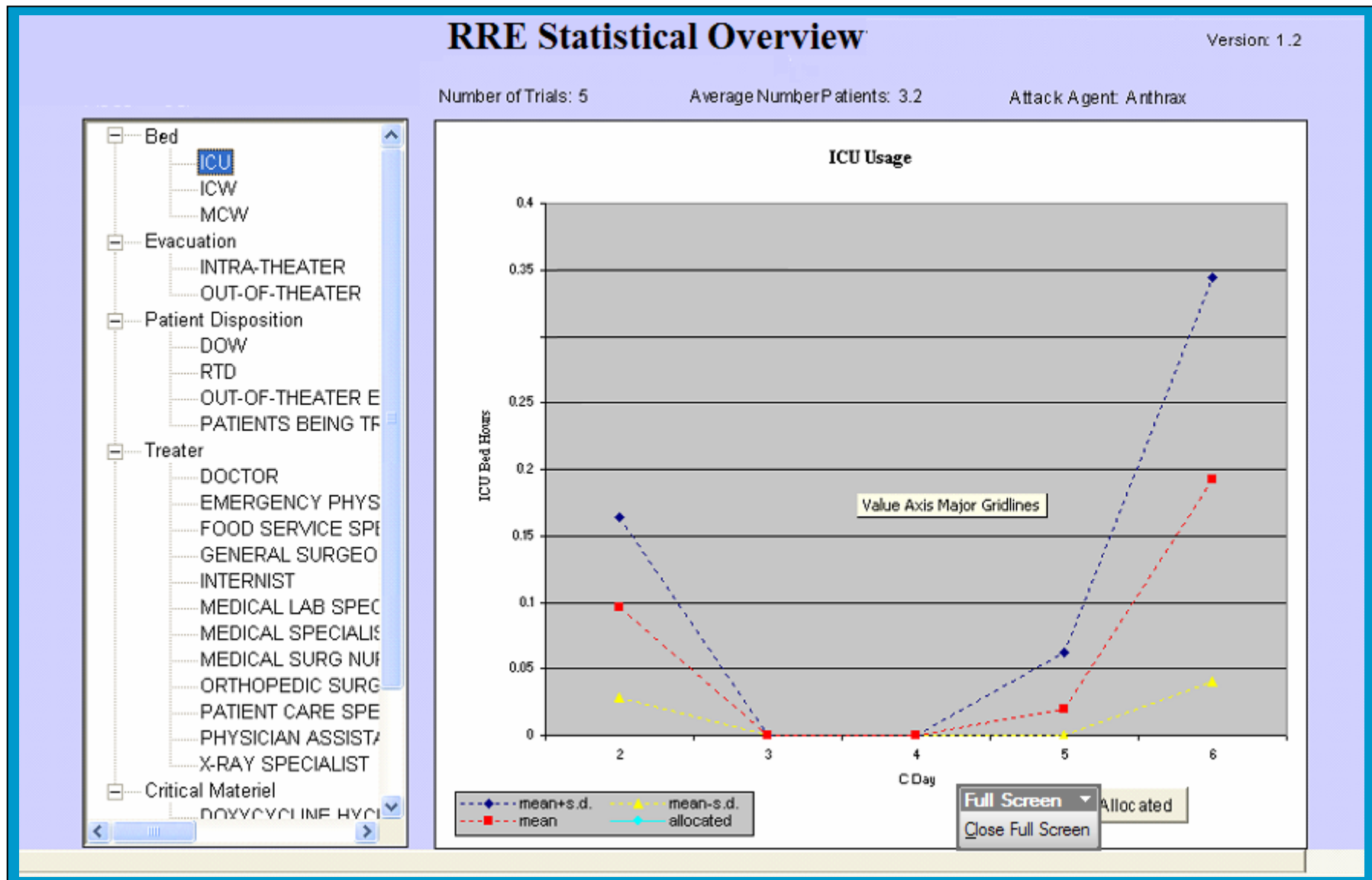
- G - 0-30% Occupied
- Y - 31-50% Occupied
- R - >50% Occupied

Percentage occupied is defined as Total Occupied / Mission Capable Count.

This report shows data from the following Units: US ARMY: SambAS (SAMBAS),CSH1 (CSH1),STAGING (STAGING),BAS1 (BAS1),CSH2 (CSH2),BAS2 (BAS2),BAS3 (BAS3),BAS4 (BAS4),MTF (MTF),CSH3 (CSH3)



# Operational Planning - JOEF

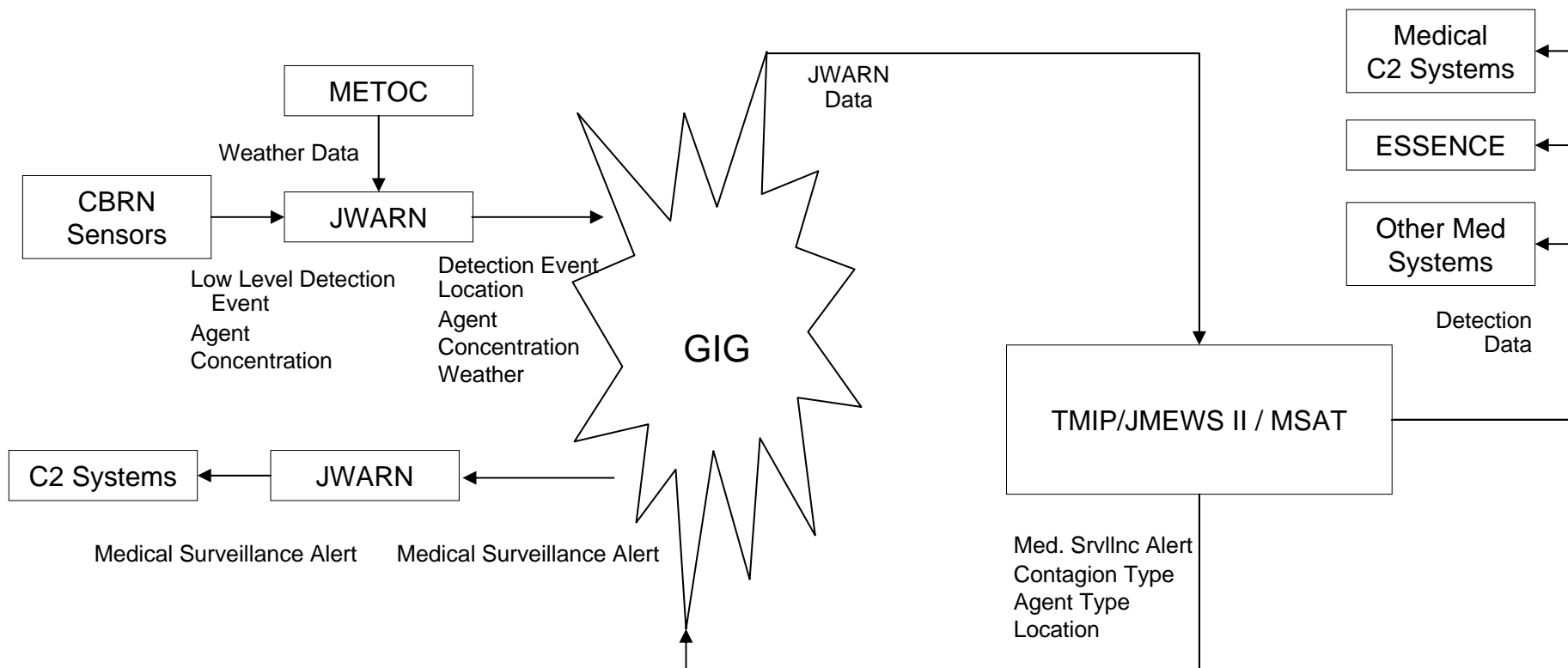




# Medical Surveillance

## 1) Low Level/Long Term Exposure

- a) Raw detector data from CBRN sensors used by Medical Applications to accomplish long term surveillance.

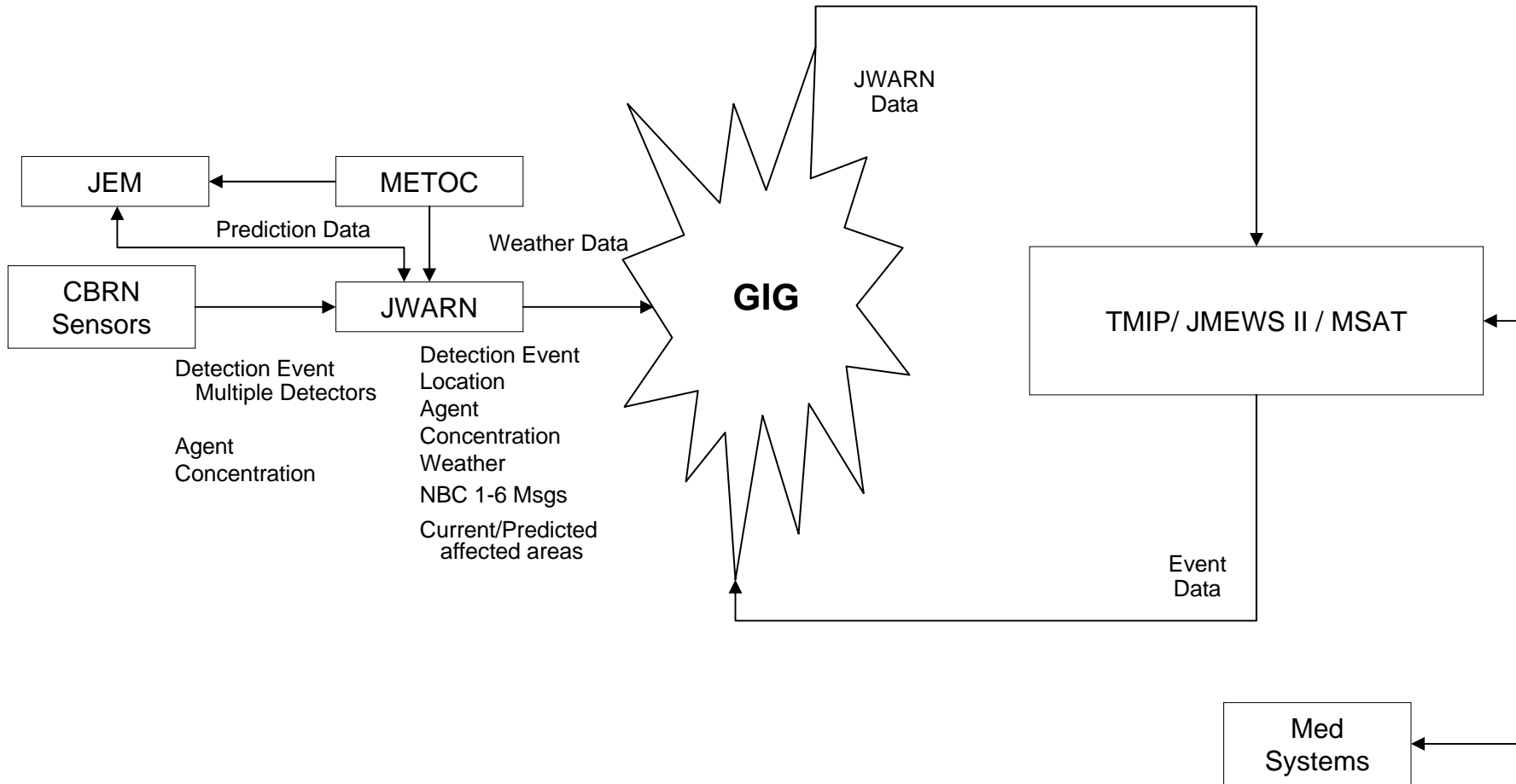


- b) Medical COI Alerts to CBRN COI of long term events/hazards



# Crisis Planning/Action

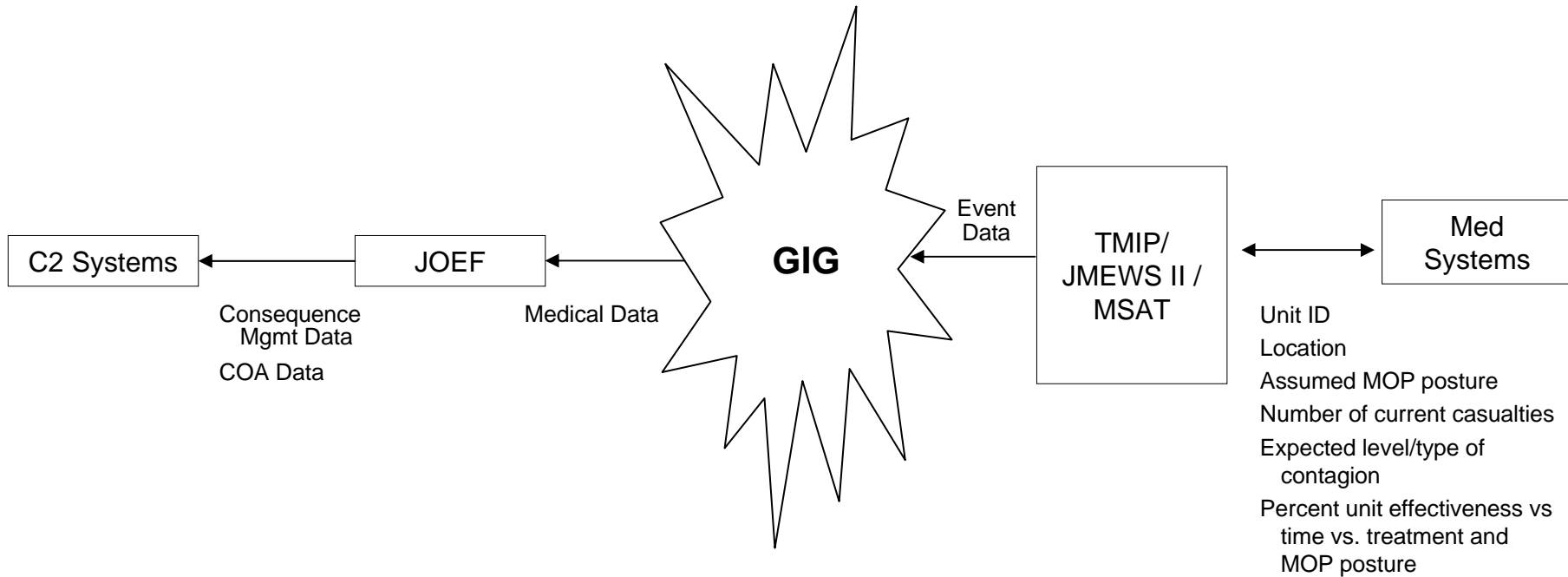
## 2) WMD Hazard Alert/Prediction





# Crisis Planning/Action

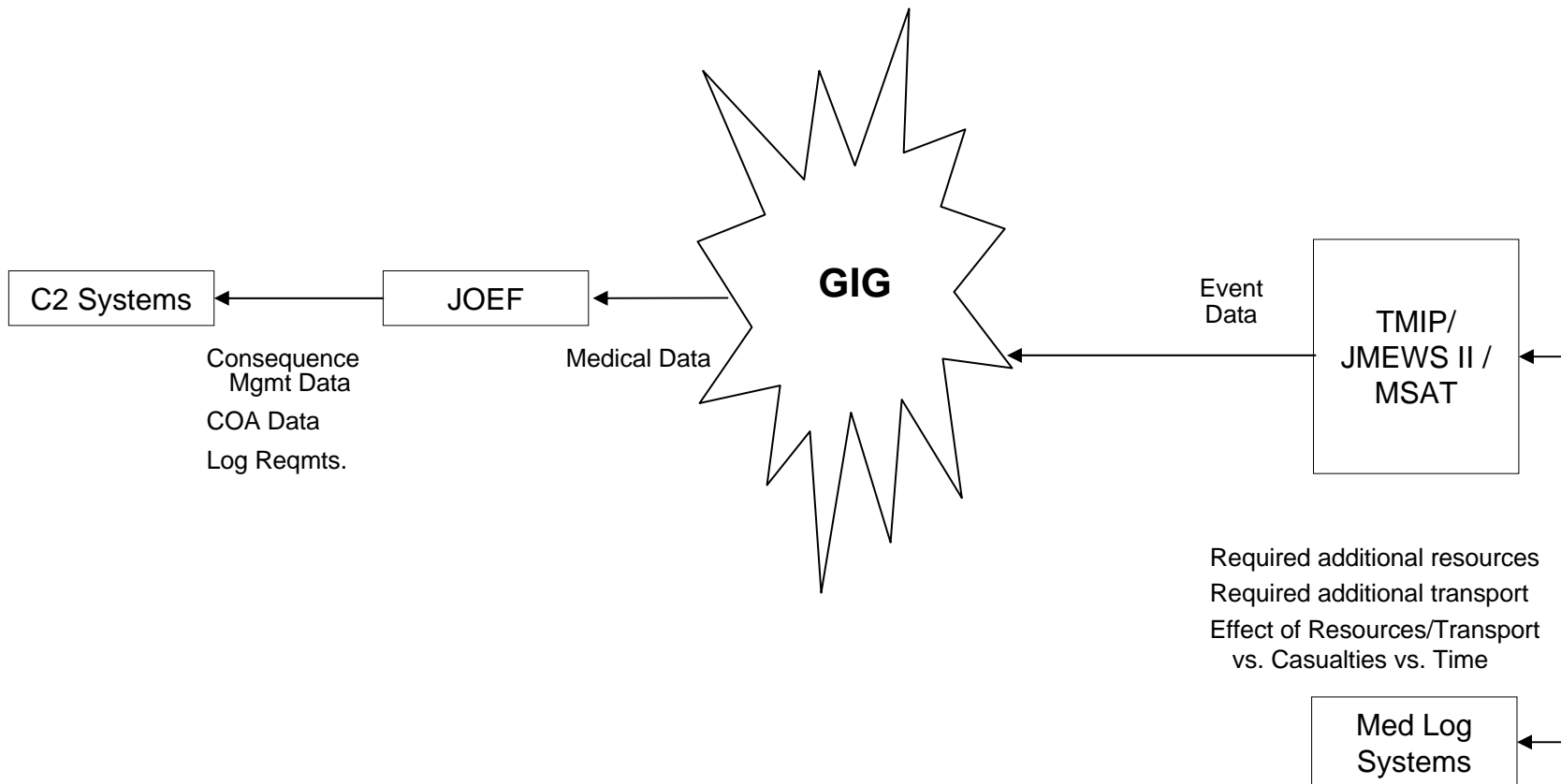
## 3) Casualty Predictions





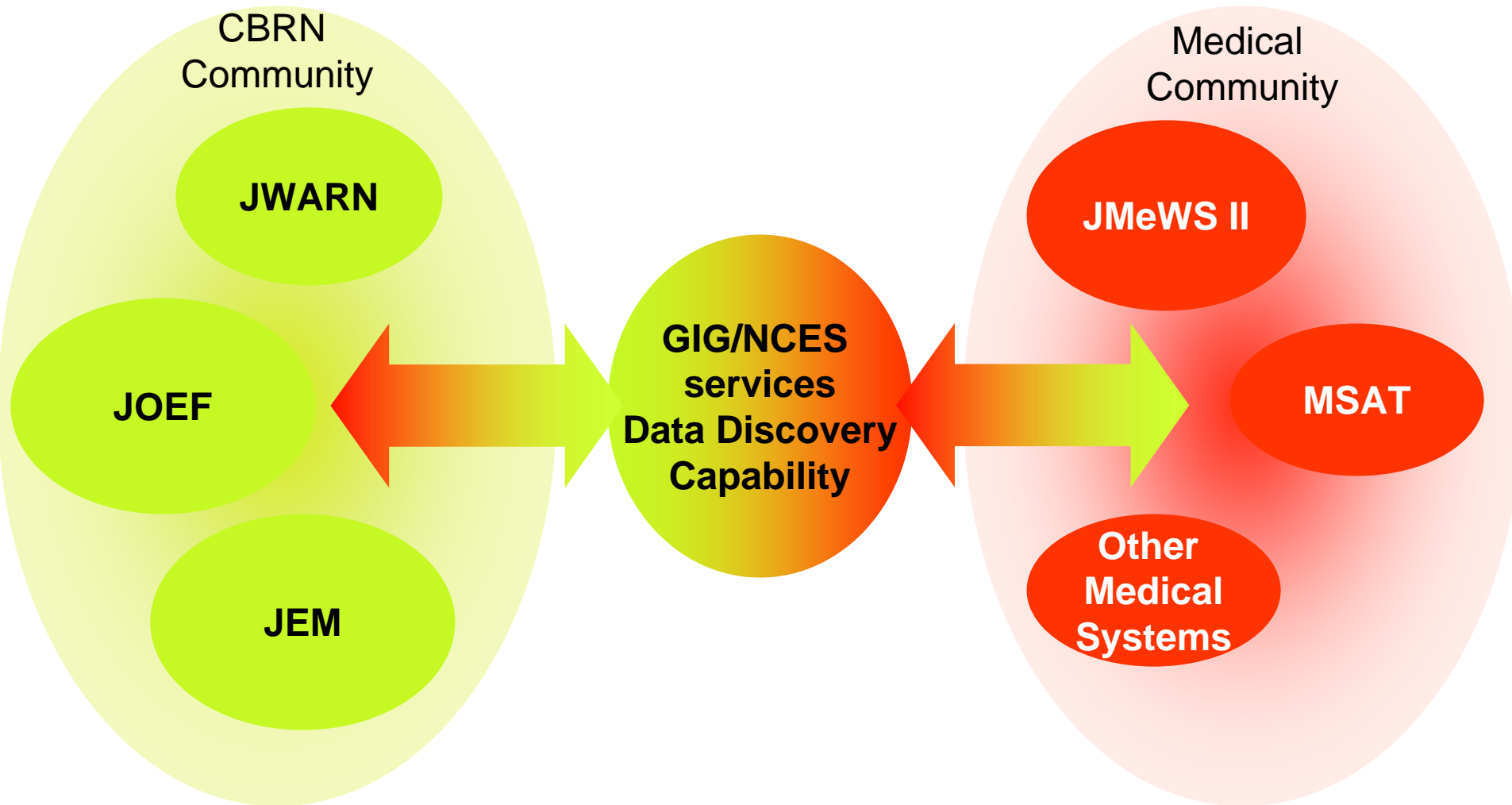
# Crisis Planning/Action

## 4) Medical Logistics Requirements





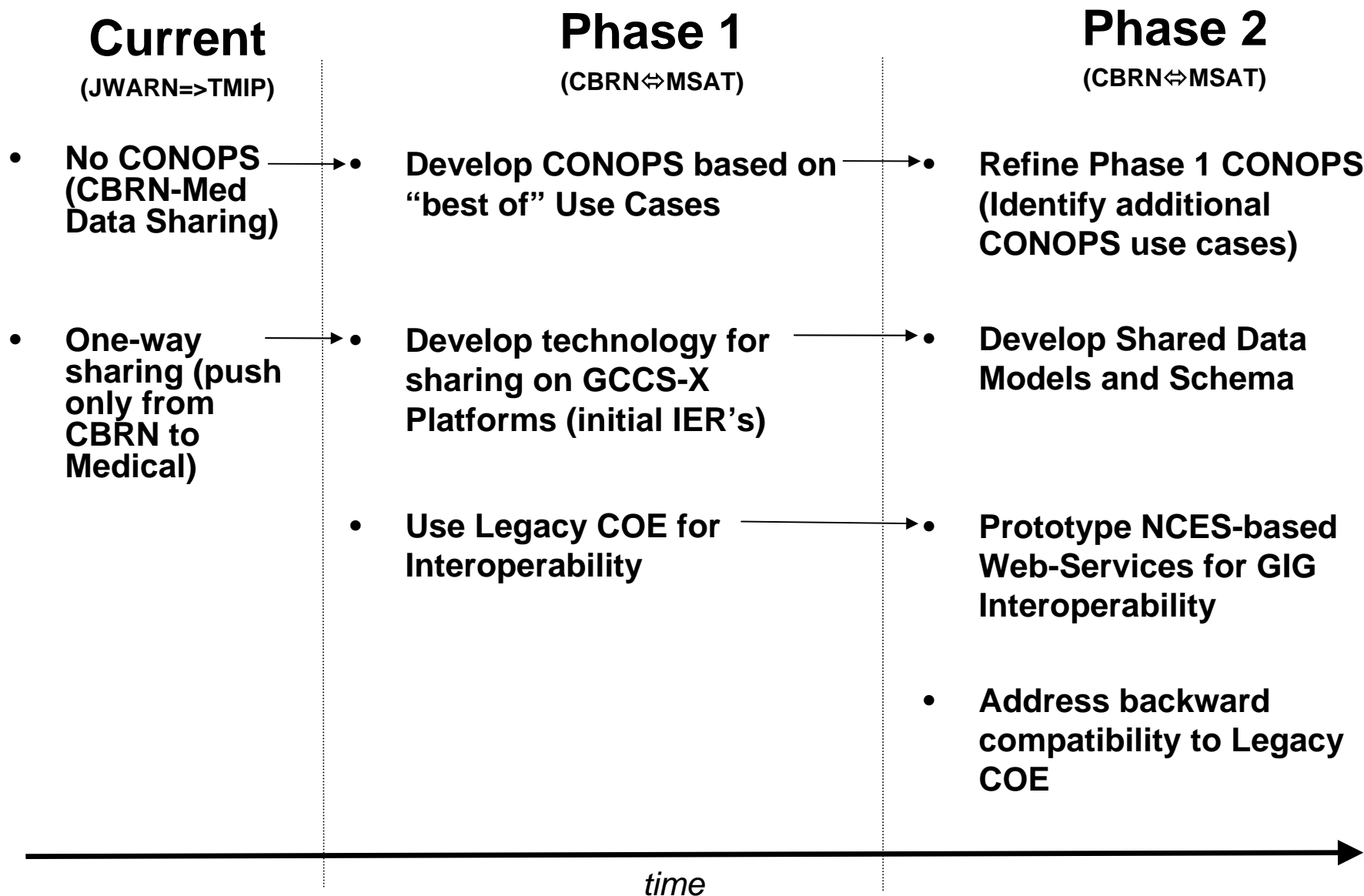
# CBRN ⇔ Medical Interoperability







# Phased CBRN ↔ Medical Migration





# Way Forward

- ✓ **Brief out to MSAT ACTD to get “thumbs up”/buy-in that they are the Pilot’s best fit from Medical community**
- **Receive S&T Resource Support for CBRN to participate in MSAT ACTD for CBRN ↔ Medical Initial Capability Demonstrations**
- **Preparation of Pilot MOU/MOA (time-phased technical approach, resource commitment, expected outcome)**