When chemical releases happen suddenly, ATSDR can provide local authorities with valuable help through the ACE program.

What resources does ACE provide?

ACE provides training on how to perform an epidemiologic assessment after a chemical incident. The ACE Toolkit, available at http://www.atsdr.cdc.gov/ntsip/ace.html, is a helpful resource to assist local authorities in responding to or preparing for a chemical release.

The toolkit contains materials that can quickly be modified to meet the needs of a local team performing an epidemiologic assessment, including:

- Surveys
- Consent forms
- Medical chart abstraction form
- Interviewer training manual
- Epi Info™ databases to enter and analyze the data

When an incident occurs, ACE provides technical assistance by forming a multi-disciplinary, often multi-agency, team to assist the state and local health department. Team members may assist from ATSDR headquarters in Atlanta, Georgia or deploy to the scene.

Other support the ACE team can provide is:

- GIS mapping and assistance with sample methodologies
- Clinical testing, if appropriate
- Liaising with other federal agencies

What happens during an ACE investigation?

ACE talks with incident responders and hospital staff that treated patients to understand

- what happened,
- who was exposed,
- steps taken to protect public health, such as an evacuation or shelter-in-place order,
- communication during the response, and
- lessons learned during the response.

ACE also interviews people who may have been exposed to collect detailed information on

- exposure history,
- symptoms experienced,
- who was exposed,
- health services used,
- needs resulting from the exposure,
- medical history,
- how people received information about the release, and
- health impacts on pets.

ACE typically reviews hospital medical charts to learn more details about health effects experienced as a result of the release. ACE may also assist in collecting and analyzing clinical samples if a laboratory test is available to determine exposure to the substance. If testing is done, results are sent to participants to share with their physicians.
Why do an ACE investigation?
State and local health departments can use information obtained from rapid assessments to
• assess impact of the release on individuals as well as the community,
• direct the public health response,
• target outreach to prevent similar incidents,
• assess the need to modify emergency response procedures, and
• identify a group of exposed people that may need to be followed for long-term effects.

A body of data from multiple incidents can be used for education and training to prepare for future incidents.

How do we request ACE assistance or learn more about ACE?
ACE representatives can be contacted via phone and email. A representative can help local authorities determine what assistance is needed. If an Epi-Aid—on-site field assistance—is appropriate, approval of the state epidemiologist must be secured. An ACE team can then be rapidly deployed to the field to provide assistance for up to 4 weeks. After leaving the field, the team continues working with the local authorities to analyze data and prepare reports.

A toxic substance release qualifies for an ACE deployment when three conditions are met:
• The substance can cause serious health effects
• A large number of people, generally 30 or more, have potentially been exposed
• Exposure levels are high enough to cause acute health effects

To request information or assistance, call the ACE program at 404-567-3256 or e-mail ATSDRACE@cdc.gov.

You can also contact the CDC Emergency Operations Center 24/7 at 770-488-7100 and ask to speak with someone from the ACE team.

ACE is part of the National Toxic Substance Incidents Program (NTSIP), a federal program at the Agency for Toxic Substances and Disease Registry (ATSDR).