



**ESF #8 – HEALTH AND MEDICAL
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ESF #8 – HEALTH AND MEDICAL

Primary Agencies:	Miami County Public Health Upper Valley Medical Center (UVMC)
Support Agencies:	Local Emergency Medical Services (EMS) Miami County Emergency Management Agency (MCEMA) Ohio Department of Health Ohio State Medical Board Ohio Emergency Management Agency (OEMA) US Department of Health and Human Services
Related Federal ESFs:	ESF #6: Mass Care, Housing, and Human Services ESF #8: Public Health and Medical Services
Ohio Revised Code:	Sections 313, 3701, 3709

I. INTRODUCTION

A. PURPOSE

This Emergency Support Function (ESF) describes the policies and procedures for mobilizing and managing health and medical services during emergency situations. This ESF includes provisions for accomplishing the necessary actions related to lifesaving transport, treatment of the injured, disposition of the deceased, and disease control activities related to sanitation and prevention of contamination of water and food supplies during response operations and in a post-disaster environment.

II. PLANNING ASSUMPTIONS AND CONSIDERATIONS

A. SITUATION

1. Miami County is vulnerable to a number of hazards, including floods, winter storms, tornadoes, epidemics, and hazardous materials incidents. These hazards could result in serious health risks and other situations that adversely affect the daily life of the citizens of Miami County.
2. Miami County Public Health, located at 510 W. Water Street, Troy, Ohio (573-3500) is a county-wide public health agency serving all communities (except Piqua). The Piqua Health Department is located in the City Building, 201 W. Water Street, Piqua, Ohio (778-2060).
3. There are sixteen facilities that are on the Public Health Communications List. See Appendix 1.

4. The Miami County Coroner’s Office is located in Troy, Ohio. The County Morgue is located at the Upper Valley Medical Center (UVMC).
5. Emergency situations could result in the loss of water supply, wastewater, and solid waste disposal services, which would create potential health hazards.
6. The facilities that provide medical/health care and services to special needs populations may be damaged or destroyed in major emergency situations.
7. The facilities that remain in operation and have the necessary utilities and staff could be overwhelmed by the “walking wounded” and seriously injured survivors transported to facilities in the aftermath of a disaster.
8. Uninjured persons who require frequent medications such as insulin and antihypertensive drugs or regular medical treatment such as dialysis, may have difficulty in obtaining these medications and treatments in the aftermath of an emergency situation.
9. During any major health-related event (such as a bio-terrorist attack), the health system can expect many people who were not exposed to the event (the worried well) to contact or visit health facilities for treatment.

B. ASSUMPTIONS

1. During most emergencies, on-site facilities such as command posts or triage centers may be set up by the individual in charge of the operation.
2. Although many health-related problems are associated with disasters and these problems may over-tax county medical resources, there is an adequate regional capability to meet most emergency situations.
3. Public and private medical, health, and mortuary services resources located in the county will be available for use during emergency situations. However, these resources are limited and they may be adversely impacted by the emergency.
4. The initial medical care during an emergency situation (other than first aid rendered by firefighters or civilians) will be rendered by Emergency Medical Services (EMS) personnel, which are most critical within the first 60 minutes of the disaster.
5. Damage to chemical storage areas, sewer lines, water distribution systems, and secondary hazards such as fires could result in toxic environmental and public health hazards that pose a threat to response personnel and the general public. This includes exposure to hazardous chemicals, biologicals, radiological substances, and contaminated water supplies, crops, livestock, and/or food products.

6. Volunteers will come forward to help perform essential tasks; their efforts must be anticipated and coordinated.

III. CONCEPT OF OPERATIONS

A. MEDICAL

1. Medical care is a primary concern during all phases of emergency management, particularly during the response phase. The initial care administered by EMS and triage teams can have considerable impact on survivability for disaster survivors.
2. Local emergency management officials, in concert with surrounding hospitals, should take all actions necessary to insure the continued functions of the hospitals in emergency situations.
3. During emergency situations, an on-site command post utilizing those who are in charge of each emergency operation at the scene will be established. A triage system and treatment area will be established under the direction of the Emergency Medical Services (EMS) officer in charge.
4. Appropriate disaster mental health services need to be made available for disaster survivors, survivors, bystanders, responders and their families, and other community caregivers during response and recovery operations. Services may include crisis counseling, critical incident stress management, information and referral to other services, and education about normal, predictable reactions to a disaster experiences and how to cope with them.
5. All ambulances and emergency rescue vehicles serving Miami County will be equipped with Field Triage Tags and other equipment as required by law and the Ohio Ambulance Licensing Board.
6. If the response to an incident is escalated, additional Miami County ambulances will be dispatched to staging areas or to the scene as the situation dictates. It is the responsibility of the first EMT/paramedic who arrives on the scene to institute triage and to implement actions that may be required by the situation. The Upper Valley Medical Center would be called upon to coordinate a regional response.
7. When it becomes apparent that the incident is beyond the local medical community's capacity to respond, the EMS officer in charge shall report to the Incident Commander (IC) as outlined in the National Incident Management System (NIMS). The IC may request assistance from the EOC.

8. The U.S. Department of Health and Human Services is responsible for deploying assets from the Strategic National Stockpile (SNS).
9. Under ESF #8 of the National Response Framework (NRF), the federal government may provide assistance in the assessment of medical needs, supplementation of medical care personnel, and additional medical equipment and supplies during incidents of national significance.
10. Hospitals will coordinate their capacities with other facilities by using the Greater Dayton Area Hospital Association (GDAHA) Surgenet, and Ohio Hospital Association OHtrac systems.

B. PUBLIC HEALTH

1. Emergency operations for public health services will be an extension of normal duties. Emergency public health activities will be conducted in accordance with procedures outlined in the MCPH Emergency Response Plan. The Health Commissioner is responsible for prioritization, coordination, vaccination, quarantine, and PODs.
2. Sanitation is a very significant aspect of public health. One of the primary considerations is the continuation of water disposal under disaster conditions. Medical facilities may need periodic sanitation inspections. Miami County Public Health is responsible for developing bioterrorism plans and other procedures for health emergencies within the framework of the state health and medical services plans and operating within the legal authority delegated to the county, including the municipalities. Various Municipal, village and township administrations have mosquito control programs. They do not specifically report on those programs to MCPH. When an incident occurs requiring response by Public Health personnel; the Health Commissioner is notified and required personnel are contacted. Call-down rosters are maintained for all personnel and are included as part of Public Health's internal Standard Operation Guidelines (SOGs).
3. Under ESF #8 of the NRP, the federal government may provide assistance in the assessment of public health needs and public health surveillance during incidents of national significance.

C. TRIAGE PRIORITIES

1. Patients with certain conditions or injuries have priority for transportation and treatment over others utilizing the Simple Triage and Rapid Treatment (START) method. An outline of these conditions is as follows:
 - a. **Red Category** – First priority, most urgent airway and breathing difficulties, uncontrolled or suspected severe bleeding, shock, open chest or abdominal wounds, severe head injuries.
 - b. **Yellow Category** – Second priority, urgent burns, major or multiple fractures, back injuries with or without spinal damage.
 - c. **Green Category** – Third priority, non-urgent transportation and treatment is required for minor injuries but not necessarily by EMS personnel, minor fractures, or other injuries of a minor nature.
 - d. **Black Category** – Deceased, non-urgent.

D. HUMAN SERVICES

1. The Miami County Department of Job and Family Services (MCDJFS) will act as the primary organization responsible for providing human services to emergency and/or disaster survivors.
2. The Director of the MCDJFS will assess the total emergency or disaster situation and communicate with the various divisions of the department in establishing the need for and priority of service delivery.
 - a. MCDJFS staff from neighboring counties may be contacted if additional staff is necessary.
 - b. Staff from neighboring counties will work under the general operation of the local MCDJFS Director.
3. Press releases dealing with human services will be handled by the Director of the local MCDJFS, in coordination with the County PIO.
4. Federal human services response is listed under ESF #6 of the National Response Framework (NRF). Support includes services for survivors with special federal assistance (financial) programs.

E. WATER RESPONSE

1. The need to furnish life support service to flood survivors and fishermen, swimmers, boaters, or other recreational water enthusiasts could arise at any time. Trained

personnel and medical supplies for providing advanced life support to trauma survivors are available on land and timely deployment to the scene of the incident can save lives.

2. A request for waterway medical assistance should include details of the trauma to the extent necessary to determine the victim's needs, location, the name and description of the vessel, a description of medical items that are available, and other pertinent information.
3. The MCEMA, in conjunction with responding agencies is responsible for the overall coordination of the transportation activity and will be assisted by other agencies as requested.

F. MORTUARY SERVICES

1. Law enforcement is responsible for investigating deaths that are not due to natural causes or that do not occur in the presence of an attending physician. The county coroner is responsible for determining the cause of death, authorizing/requiring autopsies to determine the cause of death, authorizing forensic investigations to identify unidentified bodies, and authorizing the removal of bodies from incident sites.
2. The county coroner shall arrange for the transportation of bodies requiring autopsy. It may be necessary to establish a temporary morgue and other holding facilities and obtain additional mortuary service assistance.
3. In a mass casualty situation, the coroner shall determine when the deceased are removed from the scene.
4. The Miami County Coroner will determine the location(s) of a temporary morgue in mass casualty emergencies.
5. The Ohio Department of Agriculture (ODA), Ohio Department of Natural Resources (ONDR), Disaster Mortuary Operational Response Team (DMORT) and other state resources will provide for the disposal of deceased animals.

G. REQUESTING EXTERNAL ASSISTANCE

1. If health and medical problems resulting from an emergency situation cannot be resolved with local resources, those obtained pursuant to inter-local agreements, or those resources obtained by the resource management staff in the EOC, local government may request medical or mortuary assistance from the Montgomery County Coroner's Office regional response unit, Ohio Department of Health, poison control, Center for Disease Control and Prevention, etc, which are requested from Ohio EMA. The MCEMA Director should make requests for such assistance to the OEMA.

2. Resource requests should be made in accordance with the “Emergency Medical Services” and “Health and Medical” resource section of the NIMS Resource Definitions.
3. Any additional medical supplies (Chempack, SNS, etc.) needed will be requested through the MCEMA and forwarded to OEMA.

H. ANIMAL CARE

1. Miami County Animal Control/Humane Society will provide animal services including the rescue, recovery, housing of displaced pets/livestock, the treatment of endangered wildlife, and oversee the removal and disposal of carcasses.

IV. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. ORGANIZATION

1. Response agencies are responsible for developing Operating Guidelines (OGs) that integrate in county policies and procedures and provide an adequate response.
2. Miami County Public Health is regulated by State laws. The Miami County Board of Health appoints the Health Commissioner. The Health Commissioner advises and assigns responsibilities.
3. County agencies normally responsible for public health and welfare will provide these services during an emergency to the extent of their capability. State and private agencies (such as the ARC and Salvation Army) will be called upon for assistance as necessary.
4. The county Health Commissioner will acquaint him/herself with the situation as it develops and be prepared, with the assistance of the county medical staff and the ARC Disaster Supervisor, to assume direction and/or coordination of the medical and health operations in the event this section of the EOC staff is activated.
5. The Miami County Health Commissioner is responsible for the planning and coordination of all public health services on a daily basis and is responsible for directing operational response of departmental personnel during a major emergency.

B. ROLES AND RESPONSIBILITIES

Primary Agency

1. Miami County Public Health Commissioner

- a. Respond to the threat of communicable diseases regarding epidemic intelligence, evaluation, prevention, inoculation and detection of biological agents. Coordinate with other county and state agencies and advise on the testing and monitoring of potential chemical, biological, radiological, nuclear, explosive (CBRNE) contamination of all property, air, waterways, land sites, and any other areas impacted. Work with other agencies to develop risk analyses and strategies to address issues while communicating with those agencies
- b. Re-establish health and sanitary services in affected areas.
- c. Oversee the collection of all environmental samples, submission of samples for testing at a certified facility, review the analysis of all samples, and take appropriate action based on the confirmation of results.
- d. Supervise and manage all food, drug, and potable water supplies, including monitoring, inspection, disposal of potentially contaminated supplies, and ensuring alternate, uncontaminated necessary provisions are available. The Ohio Department of Transportation (ODOT) may provide appropriate tanker trucks to transport if necessary and available.
- e. Local fire departments may provide appropriate tankers to transport non-potable water if necessary and available.
- f. If the disaster that occurs is of a magnitude that indicates that resources of the local department will be overtaxed, the Ohio Department of Health may respond in accordance to the prescribed doctrines. Assistance can be obtained from regional and state agencies as well as the SNS, and/or regional caches.
- g. Miami County Public Health is responsible for the issuance of health instructions to the general public concerning private water sources, boil orders, use of private wells, as well as the disposal of human waste. The release of information concerning detailed medical and health operations at the site of the disaster will be the responsibility of the designated PIO in charge. (see ESF #15 Public Information and Warning)
- h. If local health authorities see the need for additional emergency health services due to overcrowding or other causes at local hospitals, activation of the Medical Reserve Corps (MRC) may be requested.
- i. Collect vital disease statistics and forward findings to appropriate state and/or federal officials.

- j. Miami County Public Health will coordinate with Tri-County Board of Recovery and Mental Health Services, American Red Cross, or other public service agencies to monitor the mental health issues of disaster survivors, survivors, bystanders, responders and their families, and other community caregivers during response and recovery operations.
 - k. The Miami County Public Health is responsible in overseeing vector control services. This includes insect and rodent control, biological waste/contamination, use of pesticides, etc.
 - l. The Miami County Public Health is responsible for isolation/quarantine of individuals that may have been infected by any possible infectious diseases that may pose a threat to the health of the community.
2. Emergency Medical Services
- a. Respond to the scene with appropriate emergency medical personnel and equipment.
 - b. Upon arrival at the scene, assume an appropriate role in the ICS. If ICS has not been established, initiate it and report to the Miami County Communication Center (MCCC).
 - c. Triage, treat, and transport the injured.
 - d. Coordinate with the nearest hospital(s) to ensure casualties are transported to the appropriate facilities.
 - e. Evacuate patients from disaster/emergency affected hospitals and other care facilities if necessary.
 - f. Establish and maintain field communications, coordination with other responding emergency teams (medical, fire, police, public works, etc.), and maintain radio and/or telephone communications with hospitals, as appropriate.
 - g. Direct the activities of private, volunteer, other emergency medical units, and/or bystander volunteers, as needed.
 - h. Assist with the warning and evacuation of patients from affected medical facilities and nursing homes, if needed.
3. Miami County Animal Control/Humane Society
- a. Will assess and provide animal care services (rescue/recovery of displaced pets, livestock and endangered wildlife, removal and disposal of carcasses, etc.)

Support Agencies

4. Miami County Department of Job and Family Services
 - a. Provide emergency financial assistance.
 - b. Provide services to children deprived of parental care.
 - c. Provide services to aged and disabled individuals in need of shelter and care.
 - d. Payments for basic needs and medical care through the regular public assistance programs.
5. Miami County Coroner
 - a. Conduct inquests for the deceased and prepare death certificates.
 - b. Order autopsies, if necessary, to determine cause of death.
 - c. Assist forensic investigators to identify unidentified bodies.
 - d. Authorize removal of bodies from incident sites to morgue or mortuary facilities.
 - e. Provide information through the County PIO to the news media for the dissemination of public advisories, as needed.
6. County Public Information Officer (PIO)
 - a. Disseminate emergency public information provided by health and medical officials in collaboration with the Health Officer.
7. Miami County Schools
 - a. In the event of a medical emergency, notify EMS/911.
 - b. Notify students' parents and/or guardian.
 - c. Administer medication by order of a doctor, if appropriate.
 - d. Observe for respiratory difficulty.
 - e. Record time and site of an insect sting, food ingested, name of medicine, dosage, and time administered.
8. US Department of Health and Human Services
 - a. Deploy appropriate personnel and resources under ESF #8 of the NRP.

V. DIRECTION AND CONTROL

1. The county Health Commissioner will be responsible for the direction and control of public health activities.
2. External agencies providing health and medical support during emergencies will be expected to conform to the general guidance provided by the Incident Commander and EOC decision-makers and carry out mission assignments under their direction.

However, organized response units will normally work under the immediate control of their own supervisor.

3. If the County EOC is activated, the Health Commissioner or their designee reports to the EOC. Otherwise, direction and control is provided from the Public Health offices. The dispatch center will maintain contact and coordination with EOC personnel during emergencies.
4. EMS units are dispatched through a central dispatch center, using a trunked 800 MHz enhanced 911 system. EMS units have a common group of frequencies and can communicate with each other.

VI. ADMINISTRATION AND LOGISTICS

A. ADMINISTRATION

1. In addition to reports that may be required by their parent organizations, health, medical and human services agencies participating in emergency operations will provide appropriate situation reports to the IC, or if an IC operation has not been established, to the Health Commissioner/designee in the EOC. The IC will forward periodic reports to the EOC.
2. Pertinent information from all sources will be incorporated into the initial Emergency Report and the periodic Situation Reports (SITREP) that is prepared and disseminated to key officials, other affected jurisdictions, and state agencies during major emergencies.
3. During declared emergencies, Miami County Public Health may obtain crisis augmentation of health personnel from near-by counties, the State Department of Health, the Federal Centers for Disease Control and Prevention and the American Red Cross.
4. In order to assure that a record of events is preserved for use in recovery of emergency operations expenses, response costs, settling claims, assessing the effectiveness of operations, and updating emergency plans and procedures, health and medical operations records generated during an emergency will be collected and filed.
5. Local drills, tabletop exercises, functional exercises, and full-scale exercises based on the hazards faced by Miami County will periodically include health and medical services. Additional drills and exercises may be conducted by various agencies and services for the purpose of developing and testing abilities to make health and medical response to various types of emergencies more effective.

B. LOGISTICS

1. Expenses incurred during response by health and medical service agencies for certain hazards may be recoverable from the responsible party or other sources. Therefore, all departments and agencies will maintain records of personnel, equipment and supplies used or consumed during large-scale health and medical operations.
2. Vital health and medical records should be protected from the effects of a disaster. Should records be damaged during an emergency situation, professional assistance for preserving and restoring those records should be obtained as soon as possible.
3. Administrative and support personnel may be made available from the local and county governments as necessary.
4. The NIMS Resource Definitions include health and medical resources. If such resources are needed, requests for them can be made through the local EOC, UVMC, Metropolitan Medical Response System, Ohio Fire Chief's Association Emergency Response System, GDAHA using the types and definitions. See ESF #7: Resource Support.

VII. CONTINUITY OF GOVERNMENT

A. LINE OF SUCCESSION (Public Health)

1. Health Commissioner
2. Director of Nursing
3. Director of Environmental Health
4. WIC Director

B. LINE OF SUCCESSION (Medical)

1. Hospital Administrator
2. Assistant Hospital Administrator
3. The lines of succession for the Coroner, EMS, and mental health agencies are as determined by law and in existing internal Operating Guidelines (OGs).

VIII. ESF DEVELOPMENT, MAINTENANCE AND TRAINING

1. The Health Commissioner will work with the EMA Director, other medical and human services personnel, and the agencies specified in this Emergency Support Function (ESF) in its development and maintenance. The ESF must be reviewed, tested and

updated annually.

2. All organizations that support this ESF will develop and maintain their own organizations updated Operating Guidelines (OGs), as appropriate
3. The County Health Director, in coordination with other county emergency organizations, will schedule and conduct required training activities to ensure understanding of this ESF.

IX. LIST OF APPENDICES

Appendix 1 – Miami County Hospitals, Clinics, Nursing Homes, Ambulance Services, and Pharmacies

X. AUTHENTICATION

5-14-19
Date

Jane Imcison for Dennis Protes
Health Commissioner

5-13-19
Date

Teressa Bumbaker
Job & Family Services Representative

MIAMI COUNTY EMERGENCY OPERATIONS PLAN

APPENDIX 1 TO ESF #8

MIAMI COUNTY PUBLIC HEALTH AGENCY LIST

FACILITY	ADDRESS	CITY	PHONE	EMAIL or WEBSITE
Nursing Home				
<u>COVINGTON CARE CENTER</u>	75 MOTE DRIVE	COVINGTON	(937)473-2075	melissa.edwards@covingtoncarecenter.com; james.manuel@covingtoncarecenter.com;
<u>HEARTLAND OF PIQUA</u>	275 KIENLE DRIVE	PIQUA	(937)773-9346	Piqua@heartlandnursing.com
<u>KOESTER PAVILION</u>	3232 NORTH COUNTY ROAD 25A	TROY	(937)440-7663	amy.kentner@koesterpavilion.com
<u>PIQUA MANOR</u>	1840 WEST HIGH STREET	PIQUA	(937)773-0040	administrator@piquamanager.com
<u>SPRINGMEADE HEALTHCENTER</u>	4375 SOUTH COUNTY ROAD 25 A	TIPP CITY	(937)667-7500	tom.nick@springmeadehealthcenter.com; april.hall@springmeadehealthcenter.com;
<u>TROY CENTER</u>	512 CRESCENT DRIVE	TROY	(937)335-7161	alisha.metz@genesishcc.com; Mark.Johnston@GenesisHCC.com; tiffany.hammer@genesishcc.com;
Home Health Care				
<u>AMERICAN NURSING CARE INC</u>	81 ROBIN HOOD LANE, SUITE A	TROY	(937)773-0023	http://www.americannursingcare.com/
<u>TRUSTED HOMECARE SOLUTIONS LLC</u>	5205 SOUTH COUNTY ROAD 25A SUITE B	TIPP CITY	(937)506-7063	http://trustedhomecaresolutions.com/
Dialysis Center				
<u>UPPER VALLEY KIDNEY CENTER</u>	3190 NORTH COUNTY ROAD 25A	TROY	(937)332-3733	crystal.heitkamp@davita.com;
Resident Assisted living				
<u>BROOKDALE PIQUA</u>	1744 WEST HIGH STREET	PIQUA	(937)773-0500	Jdenson@brookdale.com; ttilton@brookdaleliving.com; ctoon@brookdaleliving.com; dlewis6@brookdale.com; jfritts@brookdaleliving.com;
<u>BROOKDALE TROY</u>	81 SOUTH STANFIELD ROAD	TROY	(937)335-5900	Jdenson@brookdale.com; ttilton@brookdaleliving.com; ctoon@brookdaleliving.com; dlewis6@brookdale.com; jfritts@brookdaleliving.com;
<u>CALDWELL HOUSE</u>	2900 CORPORATE DRIVE	TROY	(937)339-5199	http://www.seniorlifestyle.com/property/caldwell-house/

<u>GARBRY RIDGE</u>	1567 GARBRY ROAD	PIQUA	(937)778-9385	Cheryl.banning@garbryridge.com; Debbie.atkins@garbryridge.com; Rhonda.weldy@garbryridge.com;
<u>RANDALL RESIDENCE OF TIPP CITY</u>	6400 SOUTH COUNTY ROAD 25A	TIPP CITY	(937)667-8200	TCHWD@Randallresidence.com;
Hospice				
<u>HOSPICE OF MIAMI COUNTY INC</u>	550 SUMMIT AVENUE	TROY	(937)335-5191	ALeVan@ohiohospice.org
Hospital				
Upper Valley Medical Center	3130 NORTH COUNTY ROAD 25A	TROY	(937)440-7853	https://www.uvmc.com/

Miami County Pharmacies		
CVS Pharmacy	154 North College Street Piqua, Ohio 45356	778-6094
CVS Pharmacy	914 West Main Street Tipp City, Ohio 45371	667-8428
CVS Pharmacy	804 West Main Street Troy, Ohio 45373	335-5688
Hocks Pharmacy	5175 S. County Road 25-A Tipp City 45371	667-5803
Kroger Pharmacy	1510 Covington Ave Piqua, Ohio 45356	773-6168
Kroger Pharmacy	751 West Market Street Troy, Ohio 45373	615-7020
Medicine Shoppe Pharmacy	649 West High Street Piqua, Ohio 45356	773-1778
Meijer Pharmacy	1900 West Main Street Troy, Ohio 45373	332-0510
Owl Drugs	1165 South Miami Street West Milton, Ohio 45383	698-3292
Walgreen Drug Store	20 West Market Street Troy, Ohio 45373	339-8341
Wal-Mart Pharmacy	1801 West Main Street Troy, Ohio 45373	339-6335
Wal-Mart Pharmacy	1300 East Ash Street Piqua, Ohio 45356	615-9968
Ambulance Services		
Bethel Twp. Fire Dept.	8735 S. Second Street Tipp City, Ohio 45373	845-4274
Bradford Fire & Rescue	200 S. Miami Ave. Bradford, Ohio 45308	448-2686
Christiansburg Fire Company	P.O. Box 300 Christiansburg, Ohio 45289	N/A

Covington Fire & Rescue	14 South High Street Covington, Ohio 45318	473-2101
Elizabeth Twp Fire Dept	2287 South Children's Home Rd Troy, OH 45373	845-8401
Huber Heights Fire Department	7008 Brandt Pike Huber Heights, Ohio 45424	233-1564
JSP Fire District	403 West Main St. Paris, Ohio 45072	663-4955
Piqua Fire Dept.	229 West Water Street Piqua, Ohio 45356	778-2012
Pleasant Hill-Newton Twp Fire Dept.	8 West High Street Pleasant Hill, Ohio 45359	676-2248
Troy Fire Dept.	19 East Race Street Troy, Ohio 45373	335-5678
Tipp City EMS	260 South Garber Drive Tipp City, Ohio 45371	667-3112
City of Union Fire Department	109 West Martindale Road Union, Ohio 45322	836-8624
Union Twp. Life Squad	4960 S Davis Road West Milton, Ohio 45383	698-8857