

**State of New Jersey  
BIOTERRORISM ON-CALL ROSTER**

As most of you know, the Commissioner of Health has asked the Infectious Diseases community, through the IDSNJ, to participate in the state's bioterrorism preparedness by creating an on-call list of individuals willing to provide expert opinion in the case of a possible bioterrorism event. We would like to have enough participants so that we will have individuals on call for the north, central and south of New Jersey and so that we could consult one another should there be a difficult decision to be made. A call schedule made up of 1 or 2-week blocks of time will be devised. Obviously most or all of us who participate will never be called. Please help us by completing the information below:

**NAME** \_\_\_\_\_

- I will not participate
- I will participate (complete rest of form)

**TITLE** \_\_\_\_\_

**AFFILIATION** \_\_\_\_\_

**MAILING ADDRESS** \_\_\_\_\_

**OFFICE PHONE** \_\_\_\_\_ **FAX** \_\_\_\_\_ **EMAIL** \_\_\_\_\_

**HOSPITAL/SERVICE PHONE** \_\_\_\_\_ **HOME PHONE** \_\_\_\_\_

**BEEPER** \_\_\_\_\_ **MOBILE PHONE** \_\_\_\_\_

**I AM UNAVAILABLE DURING THE FOLLOWING TIME PERIODS:**

- |                                   |       |                                |       |
|-----------------------------------|-------|--------------------------------|-------|
| <input type="checkbox"/> November | 1-15  | <input type="checkbox"/> March | 1-15  |
| <input type="checkbox"/> November | 16-30 | <input type="checkbox"/> March | 16-31 |
| <input type="checkbox"/> December | 1-15  | <input type="checkbox"/> April | 1-15  |
| <input type="checkbox"/> December | 16-31 | <input type="checkbox"/> April | 16-30 |
| <input type="checkbox"/> January  | 1-15  | <input type="checkbox"/> May   | 1-15  |
| <input type="checkbox"/> January  | 16-31 | <input type="checkbox"/> May   | 16-31 |
| <input type="checkbox"/> February | 1-15  | <input type="checkbox"/> June  | 1-15  |
| <input type="checkbox"/> February | 16-28 | <input type="checkbox"/> June  | 16-30 |

Please return form to:

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