HEALTH UPDATE

Preventing the spread of Ebola –
Update in the wake of Texas healthcare worker infections

October 22, 2014

Dear Kitsap County Providers,

With two nurses in Texas now infected with Ebola after caring for an Ebola case in a Dallas hospital, I want to remind all healthcare facilities and providers about the importance of screening, isolation, and infection control measures. The likelihood of having an Ebola case in Kitsap County is very low. However, patients exposed in West Africa who become ill after arriving in the U.S. may present at any healthcare facility. Thus it is essential that all healthcare facilities have systems in place to identify and isolate a potential Ebola patient. Early recognition is critical to controlling the spread of Ebola virus.

Healthcare facilities should ensure that staff are familiar with infection control measures and personal protective equipment (PPE). Meticulous attention must be paid to proper use of PPE. Lessons learned from U.S. hospitals dealing with Ebola patients have shaped new guidance on PPE use from the Centers for Disease Control and Prevention (CDC). The Health District is sharing and discussing this guidance with our local hospitals. See resources below to review the complete details.

Healthcare providers must be vigilant in identifying potential Ebola patients as early as possible in the clinical encounter. The public's health depends on providers remaining alert, making evidence-based decisions, and rapidly and appropriately consulting the Health District. Providers should remain vigilant for Ebola, but also recognize that the symptoms of Ebola overlap with other, more common medical conditions, such as malaria and respiratory infections. Facility protocols should include the following:

1. ***Obtain a travel history*** from any patient presenting with a fever (>=100.4°F) **OR** other symptoms consistent with Ebola (e.g., myalgia, headache, abdominal pain, vomiting, diarrhea, or unexplained bleeding, bruising, or hemorrhage).
   - Consider incorporating questions about travel into appointment scheduling algorithms for patients calling and requesting to be seen for fevers. A protocol for triaging such calls to a clinical staff for further evaluation and contacting the Health District should be included.

2. ***Isolate* and employ infection control measures*** (standard, contact, and droplet) for all patients who are exhibiting Ebola symptoms **AND** have had any of the following Ebola risk factors in the 21 days before symptom onset:
   - Travel to or residence in an Ebola-affected country in West Africa. Countries currently include Guinea, Liberia, and Sierra Leone.
   - Contact (healthcare, laboratory, household, or sexual) with a known or suspected Ebola patient OR with the patient's blood/body fluids or remains.
   - Direct handling of bats or non-human primates in an Ebola-endemic area.

Isolation should include a closed private room with private bathroom. If the setting is an outpatient/ambulatory clinic, the exam room door should be closed and signage put up to prevent unnecessary entry until the Health District has been consulted. Minimize and document staff involved in patient care. See detailed guidance in resources below.

3. *Immediately notify* Kitsap Public Health District (360) 337-5235 of any patient meeting the criteria above. Be prepared to discuss clinical information, travel history, and exposure risk factors to determine whether Ebola testing and/or transfer of a patient to a hospital is indicated. Postpone or minimize phlebotomy and laboratory testing until after consultation with the Health District; if testing is medically essential, be sure clinical staff and laboratory staff are wearing appropriate PPE.

Remember that it is highly unlikely that we will have an Ebola patient in our County, but taking a travel history on a patient has long been an important element of an infectious disease evaluation. Likewise, being familiar with and strictly adhering to infection control measures are applicable to communicable disease control in general. This is a good opportunity to review these routine, but fundamental, practices.

This is a rapidly evolving situation and guidance from federal and state public health officials may change. Kitsap Public Health District will alert providers as necessary.

CDC Ebola Resources:
- *New* PPE guidance for healthcare workers caring for Ebola patients in U.S. hospitals (Oct. 20, 2014): http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html
- Infection prevention and control recommendations: http://www.cdc.gov/vhf/ebola/hcp/infection-prevention-and-control-recommendations.html
- Checklist for Patients Being Evaluated for Ebola in the U.S.: http://www.cdc.gov/vhf/ebola/pdf/checklist-patients-evaluated-us-evd.pdf
- Information for Healthcare Workers: http://www.cdc.gov/vhf/ebola/hcp/index.html

Kitsap Public Health District Resources:
- Ebola resources page: http://www.kitsappublichealth.org/news/info_alert.php

Please call 360-337-5235 if you have additional questions. This message will be posted on our website at http://www.kitsappublichealth.org/healthcare/disease_alerts.php.

Sincerely,

Scott Lindquist MD MPH
Health Officer
Kitsap Public Health District

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