

EBOLA VIRUS DISEASE

Urgent Care and Outpatient Healthcare Providers

Ebola Virus Disease (Ebola): Synthesis of CDC Guidance for Outpatient and Urgent Care Healthcare Providers “Ask. Isolate. Call.”

This is a rapidly evolving situation. We anticipate that the Centers for Disease Control and Prevention (CDC) will continue to update their Ebola guidance. Please see the CDC website for the most current recommendations: <http://www.cdc.gov/vhf/ebola/index.html>

Information and contacts

All suspect cases should be immediately reported to the Colorado Department of Public Health and Environment (CDPHE) at 303-692-2700 (evenings and weekends: 303-370-9395). CDPHE will coordinate communication with CDC.

Background

Ebola virus is spread person-to-person through direct contact with bodily fluids (such as blood, vomit, diarrhea, urine, sweat, semen, saliva, and breast milk). The incubation period is usually 8-10 days (range 2-21 days). Patients can transmit the virus while febrile and through later stages of disease, as well as postmortem. Patients are not contagious until symptomatic.

- For information on the Ebola outbreak in West Africa, see: <http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/index.html>
- For the case definition for Ebola see: <http://www.cdc.gov/vhf/ebola/hcp/case-definition.html>
- For specific information on clinical presentation, clinical course, pathogenesis, and laboratory findings please see: <http://www.cdc.gov/vhf/ebola/hcp/clinician-information-us-healthcare-settings.html>

ASK: Evaluating Risk of Exposure of Persons to Ebola Virus Disease

Clinicians and triage staff should ask about travel to Liberia, Sierra Leone, and Guinea (in West Africa) for any patient experiencing fever or other symptoms of Ebola (severe headache, muscle pain, vomiting, diarrhea, abdominal pain, or unexplained hemorrhage). Early recognition is critical to controlling the spread of Ebola virus. Health care providers should be alert for and evaluate any patients with symptoms consistent with Ebola and potential exposure history.

CDC checklists and a decision trees are available here:

- <http://www.cdc.gov/vhf/ebola/pdf/ebola-algorithm.pdf>
- <http://www.cdc.gov/vhf/ebola/pdf/checklist-patients-evaluated-us-evd.pdf>
- <http://www.cdc.gov/vhf/ebola/pdf/evd-screening-criteria.pdf>
- <http://www.cdc.gov/vhf/ebola/hcp/monitoring-and-movement-of-persons-with-exposure.html>

CDPHE poster for healthcare providers to ask about Ebola:

- https://www.colorado.gov/pacific/sites/default/files/ComDis_CD-Ebola-Ask-About-Ebola-Poster.pdf

ISOLATE: Infection Prevention and Control of Suspected Ebola Patients

Patients who report a travel history to an Ebola-affected country (currently Liberia, Sierra Leone, and Guinea) and who are exhibiting Ebola symptoms should be **isolated** and immediately placed in a private room (with a private bathroom if possible) and implement standard, contact, and droplet precautions (gowns, facemask, eye protection, and gloves). CDPHE should be called immediately as below to discuss safe transfer to a hospital. Facilities should maintain a log of all persons entering the patient's room.

- Infection Prevention and Control Recommendations of Hospitalized Patients with Known or Suspected Ebola Virus Disease: <http://www.cdc.gov/vhf/ebola/hcp/infection-prevention-and-control-recommendations.html>
- How to safely put on personal protective equipment: <http://www.cdc.gov/vhf/ebola/pdf/ppe-poster.pdf>
- For full details of standard, contact, and droplet precautions, see: http://www.cdc.gov/hicpac/2007IP/2007ip_part2.html#e
- Environmental infection control for outpatient disinfection: <http://www.cdc.gov/vhf/ebola/hcp/environmental-infection-control-in-hospitals.html>
- Safe Management of Patients in U.S. Hospitals: <http://www.cdc.gov/vhf/ebola/hcp/patient-management-us-hospitals.html>

CALL: Report all suspect cases/Safe transfer to a hospital

Call CDPHE immediately at **303-692-2700 (evenings and weekends: 303-370-9395)** to report patients with travel to affected countries and any of the symptoms listed above and to discuss diagnostic testing and to discuss safely transferring the patient to a hospital equipped to care for a patient with Ebola.

Additional Resources:

Clinical Guidance

- <http://www.cdc.gov/vhf/ebola/hcp/clinician-information-us-healthcare-settings.html>
- <http://www.cdc.gov/vhf/ebola/treatment/index.html>
- <http://www.cdc.gov/vhf/ebola/outbreaks/guinea/qa-experimental-treatments.html>

First Responder information:

- Interim Guidance for Emergency Medical Services (EMS) Systems and 9-1-1 Public Safety Answering Points (PSAPs) : <http://www.cdc.gov/vhf/ebola/hcp/interim-guidance-emergency-medical-services-systems-911-public-safety-answering-points-management-patients-known-suspected-united-states.html>
- Guidance on Air Medical Transport for Patients with EVD: <http://www.cdc.gov/vhf/ebola/hcp/guidance-air-medical-transport-patients.html>

Ebola Hemorrhagic Fever Fact Sheet/Infographics:

- <http://www.cdc.gov/vhf/ebola/resources/pdfs/Ebola-FactSheet.pdf>
- <http://www.cdc.gov/vhf/ebola/pdf/infographic.pdf>
- <http://www.cdc.gov/vhf/ebola/pdf/ghs-ebola-materials.pdf>
- <http://www.cdc.gov/vhf/ebola/pdf/west-africa-outbreak-infographic.pdf>

FAQs about Ebola:

- <http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/qa.html>

What is CDC doing?

- <http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/what-cdc-is-doing.html>



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