

# Confronting Ebola

Keeping NY patients and healthcare workers safe and healthy



**healthcare  
education  
project**





## healthcare education project

New York's dedicated healthcare workers and providers must prepare to confront the many challenges raised by the possibility of treating patients who have contracted Ebola. Many of you are understandably concerned about the risks involved.

This booklet contains critically important information from the U.S. Centers for Disease Control and Prevention about how to evaluate and treat high-risk patients while ensuring the safety of all members of the healthcare team. These materials include basic information about Ebola, how to evaluate patients who may be at risk, and what to do if you are exposed to Ebola.

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# What You Need to Know about **Ebola**

## The 2014 Ebola epidemic is the largest in history

This outbreak is affecting multiple countries in West Africa. One imported case and associated locally acquired cases in healthcare workers have been reported in the United States.

CDC and its partners are taking precautions to prevent further spread of Ebola within the United States.

## A person infected with Ebola can't spread the disease until symptoms appear

The time from exposure to when signs or symptoms of the disease appear (the incubation period) is 2 to 21 days, but the average time is 8 to 10 days. Signs of Ebola include fever and symptoms like severe headache, muscle pain, vomiting, diarrhea, stomach pain, or unexplained bleeding or bruising.

## Ebola is spread through direct contact with blood and body fluids

Ebola is spread through direct contact (through broken skin or through your eyes, nose, or mouth) with

- Blood and body fluids (like urine, feces, saliva, vomit, sweat, and semen) of a person who is sick with Ebola.
- Objects (like needles) that have been contaminated with the blood or body fluids of a person sick with Ebola.

Ebola is **not** spread through the air, water, or food.

## Protect yourself against Ebola

There is no FDA-approved vaccine available for Ebola. Experimental vaccines and treatments for Ebola are under development, but they have not yet been fully tested for safety or effectiveness.

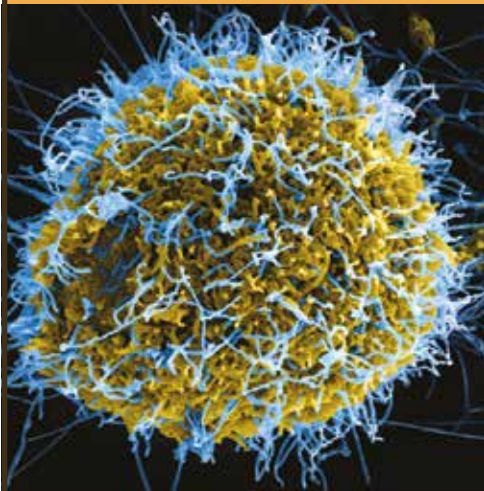
### To protect yourself from Ebola

- **DO** wash your hands often with soap and water or use an alcohol-based hand sanitizer.
- Do **NOT** touch the blood or body fluids (like urine, feces, saliva, vomit, sweat, and semen) of people who are sick.
- Do **NOT** handle items that may have come in contact with a sick person's blood or body fluids, like clothes, bedding, needles, or medical equipment.
- Do **NOT** touch the body of someone who has died of Ebola.



*“Ebola is hard to fight, but we know how to fight it and how to beat it... We’re going to put in extra measures of safety to protect Americans.”*

*—CDC Director Tom Frieden, MD, MPH*



## What to do if you are exposed to Ebola

If you have traveled to an area with an Ebola outbreak or had close contact with a person sick with Ebola, you may be at risk if you

- Had direct contact with blood or body fluids or items that came into contact with blood or body fluids from a person with Ebola.
- Touched bats or nonhuman primates (like apes or monkeys) or blood, fluids, or raw meat prepared from these animals.
- Went into hospitals where Ebola patients were being treated and had close contact with the patients.
- Touched the body of a person who died of Ebola.



*Health advisory for airline travelers*

You should check for signs and symptoms of Ebola for 21 days

- Take your temperature every morning and evening.
- Watch for other Ebola symptoms, like severe headache, muscle pain, vomiting, diarrhea, stomach pain, or unexplained bleeding or bruising.
- Call your doctor even if you do not have symptoms. The doctor can evaluate your exposure level and any symptoms and consult with public health authorities to determine if actions are needed.

During the time that you are watching for signs and symptoms, you can continue your normal activities, including going to work.

If you get sick after you come back from an area with an Ebola outbreak

- Get medical care **RIGHT AWAY** if you have a fever, severe headache, muscle pain, vomiting, diarrhea, stomach pain, or unexplained bleeding or bruising.
- Tell your doctor about your recent travel to West Africa or contact with a person who was sick with Ebola and your symptoms **BEFORE** you go to the doctor’s office or emergency room. Calling before you go to the doctor’s office or emergency room will help the staff care for you and protect other people.

For more information: [www.cdc.gov/ebola](http://www.cdc.gov/ebola)

# Ebola Virus Disease (Ebola)

## Algorithm for Evaluation of the Returned Traveler



**FEVER** (subjective or  $\geq 100.4^{\circ}\text{F}$  or  $38.0^{\circ}\text{C}$ ) or compatible Ebola symptoms\* in a patient who has resided in or traveled to a country with wide-spread Ebola transmission\*\* in the 21 days before illness onset

\* headache, weakness, muscle pain, vomiting, diarrhea, abdominal pain, or hemorrhage

**NO**

**Report** asymptomatic patients with high- or low-risk exposures (see below) in the past 21 days to the health department

**YES**

1. Isolate patient in single room with a private bathroom and with the door to hallway closed
2. Implement standard, contact, and droplet precautions (gown, facemask, eye protection, and gloves)
3. Notify the hospital Infection Control Program and other appropriate staff
4. Evaluate for any risk exposures for Ebola
5. **IMMEDIATELY** report to the health department

### HIGH-RISK EXPOSURE

Percutaneous (e.g., needle stick) or mucous membrane contact with blood or body fluids from an Ebola patient

**OR**

Direct skin contact with, or exposure to blood or body fluids of, an Ebola patient

**OR**

Processing blood or body fluids from an Ebola patient without appropriate personal protective equipment (PPE) or biosafety precautions

**OR**

Direct contact with a dead body (including during funeral rites) in a country with wide-spread Ebola transmission\*\* without appropriate PPE

### LOW-RISK EXPOSURE

Household members of an Ebola patient and others who had brief direct contact (e.g., shaking hands) with an Ebola patient without appropriate PPE

**OR**

Healthcare personnel in facilities with confirmed or probable Ebola patients who have been in the care area for a prolonged period of time while not wearing recommended PPE

### NO KNOWN EXPOSURE

Residence in or travel to a country with wide-spread Ebola transmission\*\* without HIGH- or LOW-risk exposure

### Review Case with Health Department Including:

- Severity of illness
- Laboratory findings (e.g., platelet counts)
- Alternative diagnoses

**Ebola suspected**

**Ebola not suspected**

### TESTING IS INDICATED

The health department will arrange specimen transport and testing at a Public Health Laboratory and CDC

The health department, in consultation with CDC, will provide guidance to the hospital on all aspects of patient care and management

### TESTING IS NOT INDICATED

#### If patient requires in-hospital management:

- Decisions regarding infection control precautions should be based on the patient's clinical situation and in consultation with hospital infection control and the health department
- If patient's symptoms progress or change, re-assess need for testing with the health department

#### If patient does not require in-hospital management:

- Alert the health department before discharge to arrange appropriate discharge instructions and to determine if the patient should self-monitor for illness
- Self-monitoring includes taking their temperature twice a day for 21 days after their last exposure to an Ebola patient



U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

\*\* CDC Website to check current countries with wide-spread transmission:  
<http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/case-counts.html>

This algorithm is a tool to assist healthcare providers identify and triage patients who may have Ebola. The clinical criteria used in this algorithm (a single symptom consistent with Ebola) differ from the CDC case definition of a Person Under Investigation (PUI) for Ebola, which is more specific. Public health consultation alone does not imply that Ebola testing is necessary. More information on the PUI case definition: <http://www.cdc.gov/vhf/ebola/hcp/case-definition.html>





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