

October 21, 2014

## When Caring for Suspect or Confirmed Patients with Ebola

### 1) What SHOULD be done for a patient under investigation (PUI) for Ebola virus disease?

**Health Care Workers**  
**Could it be EBOLA?**

**Think Ebola IF**

- Liberia
- Guinea
- Sierra Leone

The patient has a

- Travel history
- History of exposure to person with Ebola.

**Evaluate the patient**

- Do they have
  - Fever (subjective or  $\geq 100.4^{\circ}\text{F}$  or  $\geq 38^{\circ}\text{C}$ )
  - Other symptoms, including:
    - Severe headache
    - Muscle pain
    - Weakness
    - Diarrhea
    - Vomiting
    - Abdominal (stomach) pain
    - Unexplained hemorrhage (bleeding or bruising)
- Take a detailed **travel and exposure history**. In the past 21 days, has the patient been:
  - To an area with Ebola
  - Exposed to a person with Ebola
- If YES, isolate the patient **IMMEDIATELY**.

**Consult with public health**

- Do you have a question about a possible case of Ebola?
  - For a list of state and local health department numbers, visit: <http://go.usa.gov/174V>
- Do I need to test?
  - You, the health department, and CDC will work together to determine if testing is necessary

**Patient care checklist for patients under investigation for Ebola virus disease**

- Isolate the patient in a separate room with a private bathroom.
- Activate the hospital preparedness plan for Ebola.
- Ensure standardized protocols are in place for PPE use and disposal.
- Wear appropriate PPE when in physical contact with the patient.
- Attend to the patient's medical needs.
- Consider and evaluate patient for alternative diagnoses.
- Obtain detailed information about symptoms, contacts, and travel history.
- Perform only necessary tests and procedures.
- Ensure patient has the ability to communicate with family.
- Allow visitors only if they are wearing appropriate PPE.

(<http://www.cdc.gov/vhf/ebola/pdf/could-it-be-ebola.pdf>)

Could it be Ebola?[PDF - 1 page](<http://www.cdc.gov/vhf/ebola/pdf/could-it-be-ebola.pdf>)

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1. Activate the hospital preparedness plan for Ebola, which should include
  - a. Initiate the notification plan for suspect or confirmed Ebola patient immediately.
  - b. Ensure hospital infection control is notified.
  - c. Create a clinical care team led by a senior level experienced clinician that includes at a minimum a hospital infection control specialist, a senior nurse, an infectious disease specialist, and critical care consultants.
  - d. Assign a senior staff member from the clinical care team to coordinate testing and reporting of results from the hospital laboratory, state health department laboratory, CDC, and local and state public health. For a list of state and local health department phone numbers, see <http://www.cdc.gov/vhf/ebola/outbreaks/state-local-health-department-contacts.html>.
2. Isolate the patient in a separate room with a private bathroom.
3. Ensure a standardized protocol is in place for how and where to remove and dispose of personal protective equipment (PPE) properly and that this information is posted in the patient care area.
4. When interviewing the patient, collect data on:
  - a. Earliest date of symptom onset and the sequence of sign/symptom development preceding presentation to an emergency department.
  - b. Detailed and precise travel history (e.g., dates, times, locations).
  - c. Names of any persons with whom the patient may have had contact during and any time after the earliest date of symptom onset.
5. Consider and evaluate for all potential alternative diagnoses (e.g. malaria, typhoid fever).
6. Ensure patient has the ability to communicate with family.
7. Additionally, if the patient presented to the hospital with family and friends, and they are not symptomatic, please separate them from the general public. Maintain at least 3 feet. Notify both the state public health office and the local health department. They should not leave until cleared to do so by the state or local health officer.

## 2. What **SHOULD NOT** be done for a patient under investigation for Ebola virus disease?

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1. Don't have any physical contact with the patient (e.g., perform examination, collect clinical samples, position for x-rays) without first putting on appropriate PPE and using recommended infection control practices necessary to prevent Ebola virus transmission.
2. Don't neglect the patient's medical needs; assess and treat patient's other medical conditions as indicated (e.g., diabetes, hypertension).
3. Don't forget to evaluate for all potential alternative diagnoses (e.g. malaria, typhoid fever).
4. Don't perform elective tests or procedures; minimize sample collection, laboratory testing, and diagnostic imaging (e.g., blood draws, X-rays) to those procedures necessary to provide acute care.
5. Don't allow family members to visit without putting on appropriate PPE; provide a telephone for family to communicate with patient.