

Ebola Virus Disease

Recommendations for Emergency Responders

August 14, 2014

Situation Update

There is currently a large outbreak of Ebola virus disease (EVD) in the West African countries of Guinea, Liberia, Sierra Leone and Nigeria. The U.S. Centers for Disease Control and Prevention (CDC) has issued a level 3 travel warning advising against all non-essential travel to the first 3 countries and a level 2 travel warning for Nigeria, indicating that travelers should practice enhanced precautions. A case of Ebola was identified in an international traveler to Nigeria. In addition, two cases in U.S. aid workers in West Africa have been reported.

As of August 13, 2014, a cumulative total of 1,975 suspect and confirmed EVD cases with 1,069 suspected case deaths have been reported. No cases of EVD acquired in the U.S. have been reported.

Infection Control Measures

- Use Standard, Contact, and Droplet Precautions
- Refer to illness categories for information on type of infections and how they are spread.
- Personal Protection:
 - Treat all body fluids as though they are infectious.
 - Hand hygiene is the single most important infection control measure:
 - Wash hands with soap and water for at least 20 seconds after physically assisting inmates/patients or coming in contact with body fluids or surfaces that may be contaminated.
 - An alcohol-based hand cleaner is an alternative to hand-washing, but it will not be effective if hands are visibly soiled.
 - Avoid touching your mouth, eyes, and nose with unwashed or gloved hands.
 - Disposable gloves (gloves do not replace proper hand hygiene)
 - Wear impermeable, disposable gloves when:
 - Physically tending to an ill person.
 - Coming in contact with body fluids (such as: used tissues, blood, vomit, or diarrhea), and potentially contaminated surfaces.
 - Remove gloves carefully to avoid contaminating yourself or your clothing.
 - Properly dispose of soiled gloves after use into plastic bag, and do not re-use.
 - Wash your hands with soap and water or with an alcohol-based hand cleaner after removing gloves.
 - Face masks
 - Surgical-type facemasks worn by an ill person may help reduce the spread of respiratory germs from coughing, sneezing or talking; however, surgical facemasks are not recommended for use by a person who is not ill.
 - If performing aerosol generating procedures (e.g., intubations; open suctioning of airways), a N-95 or more protective respirator should be used.

Environmental Infection Control

Diligent environmental cleaning and disinfection and safe handling of potentially contaminated materials is paramount, as blood, sweat, emesis, feces and other body secretions represent potentially infectious materials.

- Appropriate disinfectants for Ebola virus and other filoviruses include 10% sodium hypochlorite (bleach) solution, or hospital-grade quaternary ammonium or phenolic products.
- Healthcare providers/emergency responders performing environmental cleaning and disinfection should wear recommended PPE (described on Page 1) and consider use of additional barriers (e.g., shoe and leg coverings) if needed.
- Face protection (face shield or facemask with goggles) should be worn when performing tasks such as liquid waste disposal that can generate splashes. Follow standard procedures, per company policy and manufacturer's instructions for cleaning and/or disinfecting of environmental surfaces, equipment, textiles, laundry, food utensils and dishware.

Severely Ill Passengers Arriving from the Ebola Impacted Country

- A severely ill passenger suspected of having EVD should be transported with appropriate precautions to an emergency department (ED).
- The ED must be notified that a patient suspected of having EVD will be transported to their facility, so appropriate precautions can be taken.
- Notify Disease Control immediately.
- Potentially exposed emergency response employees (ERE):
 - If an ERE has unprotected contact with the blood, feces, or other body fluids of a person with or suspected to have EVD, he/she should immediately wash the affected area.
 - Report the incident to their Designated Officer (DO).
 - Follow the established agency procedures for work place exposure.
 - There are no CDC recommendations at this time for exclusions from work of potentially exposed EREs.
 - Potentially exposed EREs should monitor their temperature two times per day for 21 days.
 - If fever develops, the ERE should be excluded from work.
 - The ERE should seek immediate medical care if he/she develops fever, vomiting, and/or diarrhea.

Asymptomatic Individuals Potentially Exposed on Air Flights from an Impacted Country

- Determine if the flight crew have advised individuals on the flight of potential exposure to a passenger with or suspected to have EVD.
- Specific codes related to communicable diseases during air travel:
 - 42 CFR 70.4 requires the commander in charge of the aircraft (interstate flights) to report before arrival, a case or suspected case of communicable disease among passengers or crew members to the local health authority with jurisdiction for the arrival airport.

- 42 CFR 71.21 (b) requires the commander of an aircraft (international flights) arriving into the U.S. to report before arrival, any deaths or illnesses (as defined in the regulations) among passengers or crew to the Centers for Disease Control and Prevention's (CDC) quarantine station.
- Conditions that require reporting are explicitly defined in the regulations for international travel, but not in the regulations for interstate travel. CDC recommends that airlines apply the same "required" and "requested" reporting standards for international flights to interstate flights.
- Ensure potentially exposed passengers have been educated about the signs and symptoms of EVD and the need to self-monitor for fever two times per day for 21 days.
- The individual should seek immediate medical care if he/she develops fever, vomiting, and/or diarrhea.
- There are no CDC recommendations at this time to quarantine potentially exposed individuals who are asymptomatic. CDC will determine if any follow-up is required and will communicate with the California Department of Public Health (CDPH). CDPH will communicate with the local public health department on any action to be taken.

Notification

- Notify Department of Public Health Disease Control immediately about a suspect Ebola case with the airline, flight number, date and time. Business hours: (951) 358-5107. After hours: (951) 782-2974 (ask for the Public Health Second Call Duty Officer).
- Disease Control will contact the CDPH for assistance in obtaining locating information from CDC on the exposed individuals. Individuals will be monitored for the development of illness.
- If CDPH is notified by CDC of a potential EVD exposure on a flight, they will notify the local public health department for any recommended follow-up.