

November 19, 2014

# LACDPH Health Update: Ebola Virus Disease (Ebola) Update #2

This message is intended for emergency medicine, internal medicine, travel medicine, urgent care, infectious disease, and primary care providers. Please distribute as appropriate.

# **Key communication**

- Returning travelers from Mali are now considered at risk for Ebola following several cases
  in that country. Providers should report all persons traveling from an Ebola-affected
  country (currently Liberia, Guinea, Sierra Leone, and Mali) in the past 21 days to the LAC
  DPH Acute Communicable Disease Control Program (ACDC) at 213-240-7941 (8:00 a.m. to
  5:00 p.m. M-F; after hours/weekends/holidays 213-974-1234, ask for the AOD).
- National protocols have been implemented to monitor all travelers arriving in the U.S. from Ebola-affected countries; DPH is actively monitoring all persons in LAC for 21 days to detect any illness. This reduces, but does not eliminate, the risk of a provider encountering a previously unknown and symptomatic traveler in an outpatient or ED setting.
- Cal-OSHA has issued <u>interim guidance</u> for Ebola in hospital settings that defines standards for personal protective equipment and other controls to protect hospital workforce.
- LAC DPH Ebola preparedness guidance continues to be updated. Since the last LAHAN message on Ebola on October 21, 2014, updates include:
  - 1. An updated and simplified <u>algorithm</u>, 'Evaluation of Persons for Potential Ebola Exposure and Illness' (attached)
  - 2. A revised guidance document, 'Ebola Preparedness and Response for Outpatient Health Care Providers'
  - 3. A new Ebola website for health care professionals.

#### Situation

West Africa

Ebola outbreaks continue to affect Guinea, Liberia, and Sierra Leone in West Africa. While the rate of new cases in Liberia and Guinea appears to have leveled off, the rate of rise in Sierra Leone continues to accelerate. Interventions to contain the disease include infection prevention and control; diagnosing, isolating and treating patients; contact tracing; and safe and dignified burials.

There have been several confirmed cases of Ebola in Mali and many people who may have been exposed. As a precaution, CDC has added Mali to the list of Ebola-affected nations. Recent

travel to Mali has been added as an epidemiological risk for Ebola and persons entering the U.S. from Mali will be screened and reported to health departments for monitoring.

#### U.S.

There are no cases of Ebola in Los Angeles County. No cases of Ebola currently are being treated in the U.S. Healthcare workers in New York and Nebraska who cared for recent patients are being monitored during the 21 day incubation period following their patient contact. The 21 day incubation period has now passed for all of the contacts of the 3 Texas Ebola cases; there were no new cases.

New traveler screening and monitoring protocols are in place throughout the U.S. Since October 8, all travelers entering the U.S. from an Ebola-affected country are required to enter through one of five airports (New York's JFK International, Washington-Dulles, Newark, Chicago-O'Hare, and Atlanta). Travelers who are healthy and not at high risk are allowed to proceed to their final destination where they are actively monitored for 21 days for fever and other symptoms of Ebola. LAC DPH receives reports of approximately three travelers a week. If symptoms develop, plans are in place to transport patients by designated EMS units to a hospital in LAC that is prepared to evaluate, isolate, and treat Ebola.

Due to this monitoring, it is now very unlikely that a symptomatic Ebola case will present for care at an LA facility independent of LAC DPH. However, it is critical that health care providers remain vigilant for fever and other Ebola-related symptoms in persons traveling from an Ebola-affected country and have a plan in place to isolate suspect cases until DPH has been consulted. In addition, health care providers should report to DPH all travelers from Ebola-affected countries and all persons who have had contact with an Ebola case, regardless of the presence of symptoms.

On November 14, 2014, Cal-OSHA issued <u>interim guidance</u> for Ebola in hospitals to protect the workforce. An Aerosol Transmissible Disease (ATD) standard is applied which requires PPE that includes coverage of all surfaces of the body and use of a PAPR when a risk of aerosol exposure exists. Although the focus of the guidance is hospitalized patients, Cal-OSHA states that EDs should have plans to rapidly identify and isolate patients, inform public health, transfer the patient, and ensure worker safety. In hospitals and EDs, engineering and work practice controls and PPE all should contribute to worker protection.

NOTE: These recommendations are current as of 11/19/2014. As the outbreak in West Africa evolves and best practices continue to emerge these recommendations may be revised as needed.

#### **Actions requested of providers**

- ✓ Report all potential Ebola exposures and illness to your local public health department (see reporting section below).
- ✓ Hospitals should plan workforce protection approaches consistent with <u>Cal-OSHA guidance</u> and conduct training and exercises of the plan.
- ✓ Ensure that your Ebola resources and materials are up-to-date:

- Use the updated LAC DPH documents '<u>Evaluation of Persons for Potential Ebola Exposure and Illness</u>' and the '<u>Ebola Preparedness and Response for Outpatient Health Care Providers</u>' and discard older versions.
- Replace waiting room posters, screening tools, and other Ebola materials with <u>updated versions</u> that include Mali as a country of risk.
- ✓ Keep current by visiting the DPH Ebola webpage for health care providers: <u>publichealth.lacounty.gov/media/ebola-HealthCare.htm</u>. (*Please note that some DPH materials are currently being updated to include Mali*).

#### Reporting potential Ebola exposure and illness:

### Los Angeles County DPH ACDC:

- Weekdays 8:00 am-5:00 pm call 213-240-7941
- Non-business hours (evenings, weekends and holidays) call 213-974-1234. Ask for the AOD.

## **Long Beach Health and Human Services:**

- Week days 8-5PM call 562-570-4302
- After hours call 562-435-6711 and ask for Communicable Disease Lead

#### Pasadena Public Health Department:

• 626-744-6043

# **Additional Resources**

LAC DPH webpages:

- Ebola homepage : <a href="http://publichealth.lacounty.gov/media/ebola.htm">http://publichealth.lacounty.gov/media/ebola.htm</a>
- LAHAN (Los Angeles Health Alert Network) for Ebola and other disease updates and alerts: http://publichealth.lacounty.gov/lahan/

#### Centers for Disease Control and Prevention (CDC) webpages:

- Information about the epidemic: <a href="http://www.cdc.gov/vhf/ebola/index.html">http://www.cdc.gov/vhf/ebola/index.html</a>
- Information for healthcare providers: <a href="http://www.cdc.gov/vhf/ebola/hcp/index.html">http://www.cdc.gov/vhf/ebola/hcp/index.html</a>

This Health Update was sent by Dr. Laurene Mascola, Chief, Acute Communicable Disease Control Program, Los Angeles County Department of Public Health.

# **Evaluation of Persons for Potential Ebola Exposure and Illness**

## **Identify Exposure History in the Last 21 Days**

- Traveled from risk area in West Africa\* OR
- Contact with a person with confirmed Ebola?



 No Ebola; evaluate patient for other illnesses

Yes

# **Identify Symptoms**

- · Measured or subjective fever OR
- Ebola compatible symptoms including: fatigue, diarrhea, vomiting, headache, myalgia, abdominal pain or hemorrhage.



- Evaluate patient for other illnesses
- Call ACDC\*\* which will monitor patient for 21 days after last exposure

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# Suspect Ebola Case

#### **Isolate Patient**

- Place patient in private room or area, preferably enclosed, with private bathroom or with alternative option for toileting
- Avoid unnecessary direct contact
- Limit entry to essential personnel
- Post a <u>sign</u> on the door to log people who enter

# **Determine choice of PPE**

Non-hospital settings

<u>If patient is clinically stable</u> health workers should wear this PPE at a minimum:

- · Face shield & surgical face mask
- Impermeable gown
- · 2 pairs of gloves

<u>If patient exhibits</u> obvious bleeding, vomiting, copious diarrhea, use PPE designated for the care of hospitalized patients (see Cal-OSHA)

Hospitals including EDs
Use PPE consistent with Cal-OSHA guidance

#### Inform

Immediately call ACDC\*\* which will assess Ebola risk and, if indicated, will:

- Arrange for Ebola specimen collection, transport & testing
- Arrange patient transfer to a designated facility
- Arrange contact tracing
- Advise on cleaning/ disinfection



#### **Further Evaluation and Management**

- After consultation with ACDC\*\* AND ONLY if determined indicated/essential:
  - Conduct history and/or physical examination
  - Use dedicated equipment (e.g. stethoscope) for any evaluation
  - · Perform needed interventions

\*As of 11/16/14, travelers from Guinea, Liberia, Mali and Sierra Leone may be at risk of Ebola

### **Important Phone Numbers**

- Report suspect Ebola patients AND asymptomatic persons with recent exposures to Health Department:
  - Los Angeles County ACDC: weekday 213-240-7941, night/weekend 213-974-1234-ask for the AOD
  - \*\*Long Beach Health and Human Services: weekday 562-570-4302 night/weekend 562-435-6711
  - \*\*Pasadena Pubic Health Department 626-744-6043
- General public in Los Angeles County with Ebola-related questions dial 2-1-1

#### For updated information visit these Ebola websites

- LAC Department of Public Health <a href="http://publichealth.lacounty.gov/media/ebola-HealthCare.htm">http://publichealth.lacounty.gov/media/ebola-HealthCare.htm</a>
- CDC http://www.cdc.gov/vhf/ebola/hcp/index.html

