



Date: October 28, 2014

To: ATCEMS System Providers

From: Paul R. Hinchey, MD, MBA, FACEP
Medical Director

Re: **EBOLA UPDATE**

As you may be aware an Ebola case was identified in New York City. The patient, a physician, acquired the illness while working in West Africa. He was without any symptoms during his trip home and for several days after arrival in the United States. The patient had quarantined himself when he began to develop symptoms. Any contacts while the patient was symptomatic have been identified and are being tracked. The patient is being treated at Bellevue Hospital's infectious disease unit. Here in Texas all Dallas healthcare workers including the Fire Department Paramedics and the family of the original patient have timed out and are no longer at risk for Ebola. The infected nurses have recovered and have been released.

October 8th the CDC and Customs and Border Protection began screening travelers coming from endemic countries at five major US airports. These airports are used by 94% of all travelers from the endemic countries of Sierra Leone, Liberia, and Guinea. The CDC has recently added another layer of protection. They will conduct symptom monitoring for all travelers from endemic countries returning to the United States. This monitoring process is being conducted in conjunction with local health departments who will monitor twice daily temperatures and other symptoms for 21 days after arrival. Individuals who develop symptoms will contact the Health Department for additional instructions and testing. As a result we will know all of these individuals in our community and will work with them to arrange access to the health care if the need should arise.

We continue to conduct 911 call-screening for fever, flu like symptoms and travel to endemic areas. For a positive screen an EMS Special Operations unit will be assigned to the call. It is imperative however that ALL providers conduct screening for symptoms AND travel within the last 21 days using the Ebola checklist provided (10.15.14 is the most current version). Prior to making physical contact inquire about the patients symptoms. If they have fever or flu like symptoms complete the remaining travel questions. If there are symptoms with fever AND travel to the endemic areas providers should back out of the room, don appropriate PPE, and notify communications. Providers should limit physical contact with the patient wherever possible. An EMS special operations unit with additional PPE training will be dispatched to the call to transport the patient.

With the national anxiety about Ebola and the coming flu season we anticipate that we will see an increasing number of 911 callers with a concern that they have Ebola. The likelihood of encountering this is extremely low. Please use the checklist for these patients to assist you in assessing the risk of a patient with Ebola. If you have any questions contact the on-call medical director for additional decision-making support.