

Date: October 2, 2014

Subject: Ebola Virus Disease in West Africa – Update for Health Care Providers

Dear colleague,

In light of recent international exportation of Ebola Virus Disease (EVD) to the United States, I am writing to provide you with updated information regarding investigation of patients with clinical symptoms of EVD, reporting to Public Health, testing guidelines and infection control precautions.

Because initial symptoms of EVD are non-specific, knowledge of and screening for travel history and other exposures in febrile patients is critical.

Clinical Symptoms

Patients with EVD generally have onset of illness 8 to 10 days after exposure (range 2 to 21 days). Early symptoms generally include sudden onset of fever (≥ 38.6 degrees Celsius) and fatigue, muscle pain, headache and sore throat. This is followed by vomiting, diarrhea, rash, symptoms of impaired kidney and liver function, and in some cases, both internal and external bleeding (e.g. oozing from the gums, blood in the stools, etc).

For clinical management recommendations, refer to *Ebola Clinical Care Guidelines a Guide for Clinicians in Canada Interim Report* on the Public Health Agency of Canada's EVD health professionals' website (www.phac-aspc.gc.ca/id-mi/vhf-fvh/ebola-professionals-professionnels-eng.php)

Reporting

Regional Medical Officers of Health (RMOH) are prepared to assist you in a timely manner by providing a rapid risk assessment in order to determine if EVD is a possible diagnosis, facilitate any testing, and conduct further public health management of the case. RMOHs can advise primary care clinicians of the provincial protocols for flow of potential EVD cases through the health care system. RMOHs and public health also are resources for information on infection prevention and control recommendations like patient transportation modalities, environmental cleaning and health care worker protection.

Immediately call RMOH pager: 1-506-557-0441, for all cases (suspect and confirmed) of EVD:

Persons with symptoms compatible with EVD AND

- who have returned from an area where EVD transmission is active within 21 days of symptom onset

OR

- have been in unprotected close contact with a symptomatic traveller from areas where EVD transmission is active.

Refer to [World Health Organisation Global Alert and Response](http://www.who.int/csr/disease/ebola/en/) (www.who.int/csr/disease/ebola/en/) for updated information on affected areas.

Testing

Due to the infection prevention and control requirements for specimens from EVD suspect patients, **no laboratory tests should be ordered without consultation with the RMOH.**

Laboratories **must** be informed about any specimens that may contain Ebola virus so that appropriate transport and handling can be arranged.

Regional microbiology laboratories in New Brunswick have the capacity to perform a limited number of

specific diagnostic tests on specimens from an EVD suspect patient, including malaria testing, blood cultures, and EVD diagnostic sample collection (which will be shipped to the National Microbiology Laboratory).

Specimens collected to support clinical management of the patient (basic hematology, chemistry and coagulation parameters) currently are processed **only** at the Saint John Regional Hospital Laboratory (SJRH). Patients requiring such additional testing will need to be transferred to the SJRH.

Infection Control Precautions

Refer to protocols in your facility for protection from blood and body fluids:

- Post a sign at patient reception asking febrile patients to identify themselves so that they can be rapidly assessed;
- Isolate suspect patients in a single room with the door closed;
- Use personal protective equipment (PPE) when assessing the patient. Appropriate PPE for suspect EVD patients includes gowns, gloves, mouth and nose protection, and eye protection when within 2 metres of the patient;
- Use hand hygiene frequently before and after contact with suspected patients;
- Limit use of needles and sharps as much as possible; and
- Use additional precautions when performing aerosol generating procedures (including respiratory protection).

Sincerely,

A handwritten signature in blue ink, appearing to read "Jennifer Russell".

Dr. Jennifer Russell BA. MD. CCFP.
Acting Chief Medical officer of Health