

EBOLA UPDATE

Guidance for clinical staff in primary care, including family physicians' offices, urgent care centres and walk-in clinics.

As you know, there is an on-going outbreak of Ebola virus affecting countries in West Africa. This is the largest ever known outbreak of this disease, prompting the World Health Organisation (WHO) to declare a Public Health Emergency of International Concern in August 2014. Countries currently affected by the disease are Guinea, Liberia, Sierra Leone. It remains highly unlikely, but not impossible, that travellers infected in Guinea, Liberia, Sierra Leone could develop symptoms after their return to British Columbia, and present to primary care. This is to help you prepare for such an event. Please share this information with your colleagues who interact with patients, including your administrative staff.

Ebola virus disease was first identified in 1976, and the clinical and epidemiologic features of this infection are well known. In particular, we know that:

- Ebola can only be transmitted from an infected person **with symptoms**. The virus is transmitted through direct contact with blood or bodily fluids (particularly diarrheal feces and vomitus). People do not transmit Ebola before they develop symptoms.
- The incubation period (time from infection to onset of symptoms) of Ebola virus ranges from 2 to 21 days. For patients who returned to BC more than 21 days ago, Ebola does not need to be considered in the differential diagnosis.

Consider Ebola virus disease in the differential diagnosis of patients who:

- Have EVD compatible symptoms* not attributable to another condition. (EVD compatible symptoms are fever of $>38.0^{\circ}\text{C}$ or one symptom of *malaise, myalgia, severe headache, conjunctival injection, pharyngitis, abdominal pain, vomiting, diarrhea that can be bloody, bleeding not related to injury (e.g., petechiae, ecchymosis, epistaxis), unexplained hemorrhage, erythematous maculopapular rash on the trunk*)

AND

- Have returned from an affected country (as outlined above) in the previous 21 days OR have cared for or come into contact with body fluids of or handled clinical specimens (blood, urine, faeces, tissues, laboratory cultures) from an individual or animal known or strongly suspected to have Ebola

What to do if Ebola is in your differential diagnosis:

- **Isolate your patient in a side room.** Where possible the side room should be clear of removable items to reduce cleaning requirements later if the patient is diagnosed with Ebola. Please make your **MOAs** aware that patients who identify themselves as being unwell and having visited an Ebola affected area in the past 21 days should not sit in the general waiting room area. They should be isolated in a side room as soon as possible.
 - Contact your local Medical Health Officer, and ask to speak to the Medical Health Officer right away. The Medical Health Officer for your region can be reached at:
 - Vancouver Coastal Health 604-675-3900 (during working hours) and 604-527-4893 (after hours)
 - Fraser Health: 604-587-3828 (during working hours) and 604-527-4806 (after hours)
 - Interior Health: 1-866-457-5648 (24/7)
 - Northern Health: 250-565-2000
 - Island Health: 250-519-3406 (during working hours) and 1800-204-6166 after working hours.

- Staff should put on the appropriate PPE (surgical facemask and eye protection, gloves, single use gown) and perform hand hygiene after removing PPE. Please check now to make sure you have these supplies available in your clinic.

What to do for patients on the telephone:

Individuals who telephone the clinic and report that they are unwell and have visited an affected area in the past 21 days **should be advised not to visit the clinic**. Please consult your local Medical Health Officer for advice on transport and appropriate referral.

How to transfer patients to hospital if further assessment or management required:

Patients should take their own vehicle if they can drive themselves or be driven by someone who has already had contact with them. Otherwise, patients should be transferred via ambulance. The receiving institution and the dispatch service should be notified that Ebola is on the differential diagnosis, so they can take appropriate precautions

Reportable disease requirements:

By consulting the local Medical Health Officer as outlined above, you have met your responsibility for reporting.

Decontamination of rooms:

Cleaning and decontamination of rooms in which a patient has been isolated, or any facilities used by the patient, should be discussed with the local Medical Health Officer. Do not use the room in which the patient was isolated until you speak with a Medical Health Officer.

Public areas where the patient has passed through and spent minimal time in (such as corridors) but which are not visibly contaminated with bodily fluids do not need to be specially cleaned and disinfected.

More information on Ebola can be found here:

BCCDC: http://www.bccdc.ca/dis-cond/a-z/_e/Ebola/default.htm

Provincial Health Officer: <http://www.health.gov.bc.ca/pho/pdf/ebola-clinical-care-guidelines-2014-8-28a.pdf>

PHAC: <http://www.phac-aspc.gc.ca/id-mi/vhf-fvh/ebola-eng.php>