



January 12, 2015

**Re: Information on Ebola virus disease (EVD) preparedness activities in BC,
and resources for post-secondary institution health facilities**

The Ebola outbreak continues to be a concern in West Africa. While the risk to British Columbians remains very low, I would like to provide you with an update on our preparedness activities here in B.C., and direct you to resources that may be of use to health care clinics on campus at your institution.

To be clear, there are no confirmed cases of Ebola in B.C. In fact, there has never been a confirmed case of Ebola in this country.

It is important to note that the Ebola virus does not spread easily from person to person or through casual contact but is spread through direct contact with infected bodily fluids such as blood, sweat, saliva, vomit, urine or faeces. An individual not displaying symptoms is not contagious.

Our front line response has been forged by our experiences in managing the SARS outbreak in 2003 and the H1N1 outbreak in 2009. Through these experiences, we developed protocols that are used to identify, isolate, test and treat any suspected infectious disease, like Ebola.

Infection control systems and procedures in Canadian hospitals are supported by a series of infection control guidelines used across the country, and BC emergency rooms and hospitals remain ready to identify, isolate, test and treat any suspected Ebola cases.

In addition, a number of procedures are in place to reduce the risk of travellers returning ill from West Africa, including:

- Comprehensive procedures are in place at our borders to identify sick travellers;
- Border services is asking all returning travellers whether or not they have been to one of the affected West African countries. Those who have are immediately referred to a quarantine officer, who further assesses whether they are at risk of Ebola;
- Any travellers identified as being high-risk are given quarantine orders, and local public health is contacted;
- Also, all airlines and airport authorities are required to report ill travellers arriving on international flights to the on-site Quarantine Officers.

Public health officials here in British Columbia (and across Canada) are working with aid organizations such as the Red Cross and Doctors Without Borders, to identify those who will be travelling to West Africa to aid in the fight against Ebola there, so we are able to proactively work with individuals to outline conditions for return, such as remaining within two hours of a designated hospital, and self-monitoring.

All of the measures outlined above mean that those travellers who would be most likely to come in to an on-campus health facility, such as volunteers or international students, will already be in close contact with public health officials here in B.C., and be monitored closely for the 21-day incubation period.

While the likelihood is extremely low that someone would present to one of your health care clinics on campus, if there are questions coming from your clinics around how to respond to someone concerned about Ebola, our provincial guidance is captured in the EVD Primary Care Guideline, located on the BC Provincial Health Officer website, at www.health.gov.bc.ca/pho (direct link to the primary care guidelines: www.health.gov.bc.ca/pho/pdf/bc-ebola-virus-disease-primary-care-guidelines.pdf).

There is also a poster that can be put up at clinics to help identify patients from West Africa who may be at risk (<http://www.health.gov.bc.ca/pho/pdf/ebola-poster-for-primary-care-settings.pdf>).

Please feel free to use the resources on the PHO website as needed. If you have additional questions or need more information, please contact the local medical health officer in your region.

Sincerely,

A handwritten signature in black ink, appearing to read 'P.R.W. Kendall', written over a horizontal line.

P.R.W. Kendall
OBC, MBBS, MHSc, FRCPC
Provincial Health Officer