DC | HEALTH
GOVERNMENT OF THE DISTRICT OF COLUMBIA

Ebola Preparedness Guidance for DC Healthcare Facilities
Last Updated/Reviewed: March 14, 2019

DOCUMENT SUMMARY:

Who this is for: This messaging is for District of Columbia (DC) healthcare facilities that provide urgent, emergency, outpatient, or short-stay acute care services.

What this is for: This messaging is in response to an ongoing outbreak of Ebola Virus Disease (EVD) in the Democratic Republic of Congo. DC healthcare facilities should maintain vigilance and readiness in case there is an imported EVD case. This includes reviewing infection prevention and control processes, specifically those pertaining to the safe identification and management of patients with communicable infections. This communication provides Centers for Disease Control and Prevention (CDC) infection prevention and control guidance, and addresses EVD preparedness concerns that are pertinent to U.S. healthcare facilities and personnel.

How this relates to other Ebola preparedness documents and actions: This document is intended to serve as high level guidance for DC healthcare facilities that might encounter a patient under investigation (PUI) for EVD. All information in this document should be used in concert with the Ebola Readiness Assessment (ERA) reports from 2015/16 (if applicable) and with resources available through the CDC, the National Ebola Training and Education Center (NETEC), and other relevant organizations.

KEY MESSAGES:

Strengthen Patient Triage and Notification Processes:
- **Ask about international travel histories at initial triage and document as much detail as possible, if warranted (for example: country, county/region, city, of suspected EVD exposure).** This information can alert healthcare personnel to the possibility of communicable infections, such as viral hemorrhagic fevers or emerging respiratory viruses, and other health conditions, such as malaria, that need specific treatment.

AND

- **Identify patients who have fever and other signs and symptoms of EVD infection** and might warrant isolation pending further evaluation.

- **Immediately notify DC Health about a PUI or EVD patient by calling the Epidemiologist on-call at 844-493-2652; communicate the provider's name and direct phone number, the PUI's travel history and pertinent signs and symptoms.** A member of the infectious disease epidemiology team is available 24/7 at this number.

- **Post contact information for DC Health in easily visible locations for infection control personnel.**

Communicate with Staff:
- Healthcare workers and laboratory personnel who travel to countries impacted by EVD should notify their employers about any events that warrant self-monitoring for symptoms.

Assess PPE Availability:
- Separate personal protective equipment (PPE) guidance remains in place for the management of [Clinically Stable PUIs] and [Confirmed Ebola Patients or Clinically Unstable PUIs].

- A [PPE Calculator Tool] is available to assist healthcare facilities in determining the appropriate supply of PPE to have on hand to manage a PUI or patient with confirmed EVD.

Review your facility's role as part of the DC's EVD Treatment Network:
- **Healthcare facilities should be aware of their DC EVD categorization** (frontline, assessment, or treatment). DC Health can provide on-site technical assistance to validate your facility's level of preparedness; email [Julia.Ritch@dc.gov] to set up an in-person visit.

- Healthcare facilities should have established plans for how PUIs or EVD patients are to be managed and referred.

- Healthcare workers with infection control responsibilities should be in communication with facility emergency preparedness counterparts and DC Health to ensure mutual understanding facilities preparedness activities.

DC Healthcare Facility Ebola Preparedness Categories: This structure provides guidance to acute care hospitals and other emergency care settings for the development of preparedness plans for PUIs and patients with EVD. DC Health has adapted this structure from guidance provided by the CDC and best practices from other jurisdictions.

	Ambulatory and Outpatient Facilities	Frontline Acute Care Hospitals	Assessment Hospitals	Ebola Treatment Centers
Expected Actions and Resource Requirements	Quickly identify and isolate patients with possible Ebola Notify your facility's infection control lead and the DC Health Epidemiologist on-call (844-493-2652) Stock enough Ebola-appropriate PPE for 8 hours of care	Quickly identify and isolate patients with possible Ebola Notify your facility's infection control lead and the DC Health Epidemiologist on-call (844-493-2652) Stock enough Ebola-appropriate PPE for 12-24 hours of care	Safely receive and isolate patient with possible Ebola Notify your facility's infection control lead and the DC Health Epidemiologist on-call (844-493-2652) Provide immediate laboratory evaluation and coordinate Ebola testing Care for patient for up to 5 days or until the Ebola test is confirmed or ruled out Stock enough Ebola-appropriate PPE for 5 days of care	Receive and isolate a patient with confirmed Ebola Notify your facility's infection control lead and the DC Health Epidemiologist on-call (844-493-2652) Care for patients with Ebola for duration of illness Stock enough Ebola-appropriate PPE for at least 7 days of care and able to restock if necessary Sustain a staffing plan to manage several weeks of care
DC Facility Categorizations	▪ Primary Care Clinics ▪ Urgent Care Centers	▪ Sibley Memorial Hospital ▪ MedStar-Georgetown University Medical Center ▪ United Medical Center ▪ Veterans Affairs Medical Center	▪ Howard University Hospital	▪ Children's National Medical Center ▪ MedStar Washington ▪ Hospital Center ▪ George Washington Hospital

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ADDITIONAL EBOLA READINESS RESOURCES:

DRC Updates:
- World Health Organization Ebola Situation Reports: Democratic Republic of Congo: https://www.who.int/ebola/situation-reports/drc-2018/en/

General Preparedness:
- Main CDC EVD portal: https://www.cdc.gov/vhf/ebola/index.html
- CMS Emergency Preparedness Final Rule Interpretive Guidelines and Survey Procedures June 2, 2017:https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Policy-and-Memos-to-States-and-Regions-Items/Survey-and-Cert-Letter-17-29.html
- ASPR TRACIE Topic Collection- VHF/EVD: https://asprtracie.hhs.gov/technical-resources/45/vhf-ebola/43
- Health Sector Resilience Checklist for High-Consequence Infectious Disease- Informed by the Domestic US Ebola Response: http://www.centerforhealthsecurity.org/our-work/pubs_archive/pubs-pdfs/2017/HCID_Final_Report_05.23.2017.pdf

Training:
- NETEC (National Ebola Training and Education Center): https://netec.org/
- ASPR TRACIE Mystery Patient Drill Toolkit: https://asprtracie.hhs.gov/technical-resources/resource/3989/mystery-patient-drill-toolkit

PPE:
- CDC Ebola Personal Protective Equipment (PPE): https://www.cdc.gov/vhf/ebola/healthcare-us/ppe/
- JAMA Putting On and Removing Personal Protective Equipment: https://www.nejm.org/doi/full/10.1056/NEJMvcm1412105

Laboratory:
- Joint Commission- Your Lab and Ebola: What you need to know from the CDC and the Joint Commission February 25, 2015: https://www.jointcommission.org/your_lab_and_ebola_cdc_joint_commission/