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Health Advisory

Recognizing and Handling Suspect Ebola Cases

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The San Francisco Department of Public Health (SFDPH) provides this guidance based on current information. For the most up-to-date information, visit www.sfdcp.org. Recommendations may change, and SF recommendations may differ from those issued by Centers for Disease Control & Prevention (CDC) or California Department of Public Health (CDPH).

This Advisory updates the Health Advisory “Recognizing and Handling Suspect Ebola Cases in Outpatient Settings” dated Oct. 27, 2014 (available at www.sfdcp.org/healthalerts.html). Please continue to check our website for additional updates on Ebola Virus Disease (EVD).

Travelers to the US from Ebola-affected countries receive enhanced screening and risk assessment by US Customs and Border Protection and CDC upon arrival. Returning travelers from Ebola-affected countries are risk-stratified, and are subject to active daily monitoring and movement protocols by state and local public health departments for 21 days from the date of their departure from West Africa. (See: www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html). These procedures greatly reduce, but do not fully eliminate, the likelihood that a patient with Ebola could present unannounced to a local healthcare setting, and so local facilities need to remain vigilant and prepared.

1. All Healthcare Settings Should be Prepared to Identify and Isolate Possible Ebola Cases; Emergency Departments Should Also be Prepared to Receive and Manage Possible Cases

All healthcare settings should implement procedures to identify and immediately isolate patients who have travel/exposure risk for EVD plus symptoms compatible with EVD. Notification to SFDPH Communicable Disease Control Unit (CDCU) should also be made immediately to (415) 554-2830.

Ambulatory health care settings such as offices and clinics should follow the guidance in our Oct. 27, 2014 Health Advisory, as well as more recently published CDC guidance for ambulatory care.

See: www.cdc.gov/vhf/ebola/pdf/ambulatory-care-evaluation-of-patients-with-possible-ebola.pdf

Emergency departments should follow CDC guidance for Emergency settings and be prepared to identify, isolate, and also to receive and manage possible EVD patients, using PPE and infection control procedures designated for the care of hospitalized patients.

See: www.cdc.gov/vhf/ebola/hcp/ed-management-patients-possible-ebola.html
www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html

Health Alert: Conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: Provides important information for specific incident or situation; may not require immediate action.

Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.

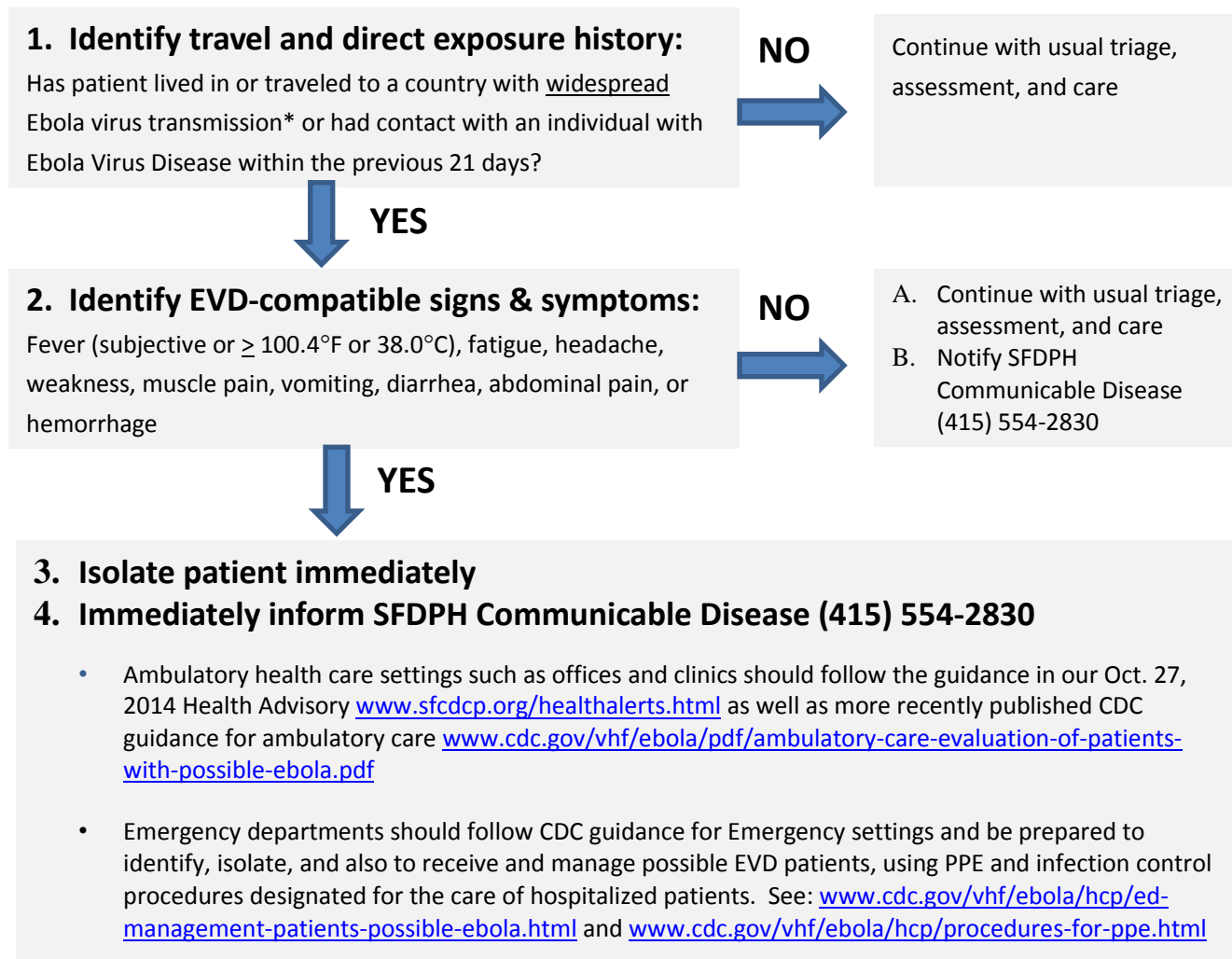
2. Asymptomatic Persons with Ebola Travel/Exposure Risk

Persons reporting Ebola travel/exposure risk, but who are asymptomatic and therefore not in need of isolation and transport, should be reported promptly to CDCU at (415) 554-2830 so that appropriate public health action can be taken. Such action includes, but is not limited to, active daily monitoring of these individuals for symptoms during the 21-day incubation period.

3. Screening Questions: CDC Now Recommends Asking Travel/Exposure History First

CDC algorithms now advise screening patients for Ebola travel/exposure risk before asking about EVD-compatible symptoms. Only persons with Ebola travel/exposure risk require this second-level symptom screening. This is an efficient approach since few individuals in the US currently have travel/exposure risk for EVD. As before, a patient must answer 'yes' to both the travel/exposure questions and the EVD-compatible symptom questions to be considered a suspect case.

Algorithm for Recognizing and Handling Suspect Ebola Cases (adapted from CDC)



*Currently there is widespread transmission only in Liberia, Guinea, and Sierra Leone. CDC also reports local transmission in Mali. See: www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html