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## COUNTY OF ORANGE HEALTH CARE AGENCY

## HEALTH DISASTER MANAGEMENT EMERGENCY MEDICAL SERVICES

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TO: ORANGE COUNTY EMS BASE HOSPITALS

ORANGE COUNTY EMS ALS PROVIDERS ORANGE COUNTY AMBULANCE PROVIDERS

FROM: SAM J. STRATTON, MD, MPH

October 17, 2014

ORANGE COUNTY EMS MEDICAL DIRECTOR

SUBJECT: EMS RELATED EBOLA UPDATE #4

Orange County Emergency Medical Services (OCEMS) has received a number of questions relative to EMS and the potential for a Ebola infected patient. The following are replies to questions recently received by OCEMS:

1. Will OCEMS start using dispatch center call screening for potential Ebola?

OCEMS has issued instructions to 9-1-1 emergency dispatch and ambulance dispatch centers to begin call screening for potential Ebola victims (OCEMS Ebola Update # 3).

2. What are the appropriate on-scene actions for a potential Ebola victim?

Recognition of an Ebola risk is the most important aspect of field management. When responding to a call for which there is a complaint of fever <u>and</u> abdominal pain, vomiting, diarrhea, headache, or muscle aches it is important to next ask if there has been travel within the <u>past three weeks</u> to the African countries of <u>Liberia</u>, <u>Sierra Leon</u>, or <u>Guinea</u>. If there are positive symptoms <u>and</u> travel history, the patient should be considered to possibly be infected with Ebola until laboratory testing prove otherwise.

On-scene safety for an Ebola risk includes:

 Limit the number of personnel who come in contact or into the same structure housing the potential victim. If during call screening, it is determined there is a potential Ebola victim, only one to two personnel should enter the scene area (room, house, or clinic) with other response personnel remaining outside until the level of risk is determined from initial history taking.

- If the risk of potential Ebola is identified, all public safety personnel in contact with the patient should use personal protective equipment (PPE). The following PPE is recommended for field personnel by OCEMS:
  - Water impermeable coverall suit with hood
  - Water impermeable shoe/boot covers and leg covering (if not part of coverall suit)
  - Goggles
  - Face shield (use in combination with goggles)
  - N-95 or P-100 respirator
  - Two sets of medical gloves (for double gloving)
  - Second person to act as buddy to don and remove PPE safely
- Potential Ebola victims should be transported in ambulances prepared with plastic sheeting that encloses the inside of the patient compartment.
- Contaminated waste should be double bagged in red plastic medical waste bags and held by the EMS provider agency until further direction is provided by the Orange County Health Care Agency. Waste may need to be held until final testing is completed to determine if the patient is positive for Ebola (up to six days).
- Personnel with exposure to body fluids of potential Ebola patients should follow OCEMS policy number 330.96 (ERC Communicable Disease Exposure Guidelines for Prehospital Care Personnel) for post-exposure instructions and follow-up.
- Response equipment (including ambulance) should be decontaminated by a HCA approved procedure or bio-waste decontamination contractor prior to being placed back into service.
- 3. What are the reporting requirements for suspected Ebola victims?

After assessment on scene, if there is a suspected Ebola case, the Orange County Health Care Agency is to be notified at (714) 834-8180.

CC: HCA HDM Program Manager
OCEMS Program Administrator
OCEMS ALS Coordinator

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