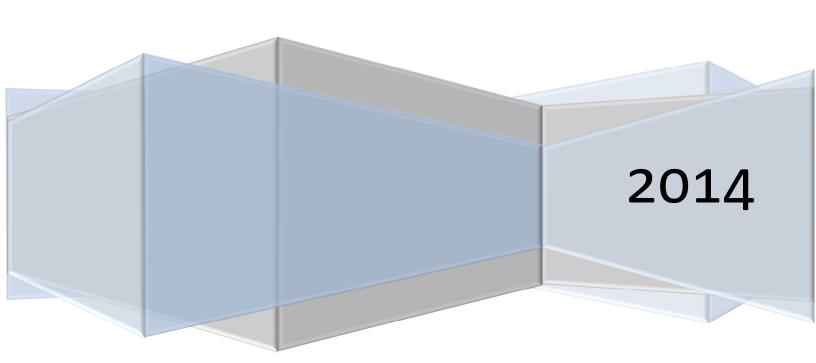
# **Hamilton County EMS**

# **CDC Guidelines for EMS**

**Ebola Patients** 

**Captain Darlene Poole** 



### **Ebola CDC Guidelines for EMS**

#### **PPEs**

Gloves, face shields, goggles, impervious gowns, shoe *coverings*, *N95 respirators* 

PPE should be in place **BEFORE** contact with the patient/body, worn during process of patient care/placement in body bags, and should be removed immediately after and discarded as regulated medical waste. Use caution when removing PPE as to avoid contaminating the wearer. Hand hygiene (washing your hands thoroughly with soap and water or alcohol based hand rub) should be performed immediately following the removal of PPE, if hands are visibly soiled, use soap and water.

Leave any intravenous lines or endotracheal tubes that may be present in place.

Leak-proof plastic bag not less than 150 um thick and zippered closed, and place that into a second body bag with same requirements.

In the event of leakage of fluids from the body bag, thoroughly clean and decontaminate areas of the environment with EPA registered disinfectants which can kill a broad range of viruses in accordance with label instructions. Reusable equipment should be cleaned and disinfected according to standard procedures.

## Signs / Symptoms for Ebola include

Many of the signs and symptoms of Ebola are non-specific and similar to those of other common infectious diseases such as malaria, which is commonly seen in West Africa.

- Fever (greater than 38.6 C or 101.5 F
- Severe headache
- Muscle pain
- Weakness
- Diarrhea
- Vomiting
- Abdominal (stomach) pain
- Unexplained hemorrhage (bleeding or Bruising)
- Have they been out of the Country

Symptoms may appear anywhere from 2 to 21 days after exposure to Ebola, but the average is 8 to 10 days.

Ebola virus can be transmitted by lacerations and puncture with contaminated instruments, human remains without appropriate PPE's,

EMS personnel refers to all persons, paid and volunteer who provide pre-hospital emergency medical services and have the potential for direct contact exposure (through broken skin or mucous membranes) with an Ebola patient's blood or body fluids, contaminated medical supplies and equipment, or contaminated environmental surfaces.

Every EMS agency and system, including those that provide non-emergency and/or inter-facility transport, should ensure that their personnel can detect a person under investigation (PUI) for Ebola. Protect themselves and safely care for the patient, and respond in a coordinated fashion.