

Ebola virus:

TRANSMISSION & RISK

- Ebola virus is spread through direct contact with the blood or body fluids (including but not limited to feces, saliva, urine, vomit, and semen) of a person who is sick with Ebola. The virus in blood and body fluids can enter another person's body through broken skin or unprotected mucous membranes in, for example, the eyes, nose, or mouth.
- The virus also can be spread through contact with objects (like needles and syringes) that have been contaminated with the virus, or with infected animals.
- Ebola is not spread through the air or by water or, in general, by food; however, in Africa, Ebola may be spread as a result of handling bushmeat (wild animals hunted for food) and contact with infected bats.

SYMPTOMS

- Signs of Ebola include fever (even low-grade) OR additional symptoms, such as severe headache, muscle pain, vomiting, diarrhea, abdominal (stomach) pain, or unexplained hemorrhage (bleeding or bruising).
- Symptoms appear in 2 to 21 days but the average is 8 to 10 days.
- Ebola should be considered with travel or exposure (see below).

CLINICAL GUIDANCE

- DPH is making revised guidance available at www.dph.ga.gov/ebola
- DPH is awaiting potential revised guidance on appropriate use of PPE.
- Ask patients about their travel histories to determine if they have traveled to West Africa within the last three weeks.
- Health care providers should be alert for, and evaluate, any patient who has:
 - A fever (*including low-grade*) OR compatible Ebola symptoms (headache, weakness, muscle pain, vomiting, diarrhea, abdominal pain or hemorrhage)
 - AND
 - Travel during the 21 days before symptom onset from an Ebola-affected area OR contact with an individual who has Ebola. Ebola-affected areas can be found at www.cdc.gov/vhf/ebola
- Patients meeting these criteria should immediately be reported to DPH at 1-866-PUB-HLTH (866-782-4584), while implementing standard, contact, and droplet precautions.
 - **Isolate the patient:** Patients should be isolated in a single patient room (containing a private bathroom) with the door closed.
 - **Wear appropriate personal protective equipment (PPE):** Health care providers entering the patient's room should wear gloves, gown (fluid resistant or impermeable), eye protection (goggles or face shield), and a facemask.
 - **Restrict visitors:** Avoid all entry of visitors into the patient's room.
 - **Avoid aerosol-generating procedures:** If performing these procedures, PPE should include respiratory protection (N95 or higher filtering face piece respirator) and the procedure should be performed in an airborne infection isolation room.
 - **Implement environmental infection control measures:** [Ebola infection control protocols](#) should be observed. Diligent environmental cleaning and disinfection and safe handling of potentially contaminated materials is of paramount importance. Blood, sweat, vomit, feces, urine and other body secretions represent potentially infectious materials.
- Further information for health care professionals from the CDC can be found at <http://www.cdc.gov/vhf/ebola/hcp/index.html>.

FOR TRAVELERS

- CDC has issued warnings involving travel to Guinea, Liberia, Sierra Leone, and the Democratic Republic of the Congo (DRC).
- Wash hands frequently – especially before touching eyes, mouth or face.
- Upon returning to the U.S., those who traveled to affected regions should monitor their health and body temperature for 21 days.
- Call in advance to tell the doctor about recent travel and symptoms before going to the office or emergency room. Advance notice will help the doctor provide care and protect other people who may be in the office.

If you get symptoms of Ebola, it is important to stay away from other people and to call your doctor right away.



NORTH GEORGIA HEALTH DISTRICT 1-2