

Emergency Departments

EBOLA / VIRAL HEMORRHAGIC FEVER¹ (VHF) INITIAL CLINICAL ASSESSMENT AND MANAGEMENT FLOW MAP

A. In the past 21 days has the patient been in a country where there is widespread transmission of Ebola² or a country where VHF is endemic³ AND does the patient report having a fever or other symptoms consistent with Ebola⁴?

OR

B. In the past 21 days has the patient cared for, come into contact with body fluids, or handled clinical specimens from an individual known or strongly suspected to have Ebola AND does the patient report having a fever or other symptoms consistent with Ebola⁴?



NO to A & B
If symptomatic,
evaluate for other
Illness

Primary Practitioner to:

<u>Complete</u> "Ebola Virus Disease (EVD) Assessment Form"

Notify Regional

Medical Health Officer
(MHO)

Notify Infectious

Disease (ID) physician

on call⁵

Staff to notify: Senior Leader on call



YES to A or B

- 1. <u>Minimize contact with patient</u>: Do not take vital signs or complete further assessment, <u>do not</u> draw blood (phlebotomy, finger prick) for diagnostic testing.
- 2. Have patient put on a surgical or procedure face mask.
- 3. Immediately prepare a private room with bathroom or designated commode (Remove all mobile carts & equipment before bringing patient in).
- 4. Ensure Droplet/Contact precaution signage and PPE supplies are in place STAT.
- 5. Walk patient to assigned room and keep them there until further notice.
- 6. Do not start routine IV, do not draw blood (phlebotomy, finger prick) for diagnostic testing, or do any aerosol generating treatments.
- 7. Exit room and perform hand hygiene.
- 8. Complete a risk assessment to determine what level of PPE is required.
- If risk level is high, follow steps outlined in PPE Donning for High Risk Encounter and PPE Doffing for High Risk Encounter. A Trained Observer must be available to assist.
- 10. If a facility transfer to either Regina General Hospital or St. Paul's Hospital in Saskatoon is required, discuss move with Infection Control/Senior Leadership to plan a route with least amount of contact to others. Inform Ambulance Dispatch and receiving facility staff ASAP.
- **1. Viral hemorrhagic fever (VHF):** Includes Ebola virus disease, Marburg virus disease and Lassa fever for the purposes of this document
- **2.** Widespread transmission of Ebola virus disease is occurring in Guinea, Liberia and Sierra Leone. For up-to-date information see WHO outbreak news at http://www.who.int/csr/don/archive/disease/ebola/en/
- 3. VHF endemic countries:
 - **Ebola virus disease:** Western, Central and Eastern Africa; outbreaks have occurred in Guinea, Liberia, Nigeria and Sierra Leone, Democratic Republic of Congo, Sudan, Uganda, Gabon, Republic of Congo, Cote d'Ivoire.
 - *Marburg virus disease:* Central and Eastern Africa; outbreaks have occurred in Angola, Democratic Republic of Congo, Republic of Congo, Kenya, Uganda, Zimbabwe.
 - Lassa fever: Western and Central Africa, in particular Guinea, Liberia, Nigeria and Sierra Leone.
- **4. Other signs and symptoms of VHF include**: headache, joint and muscle aches, abdominal pain, weakness, diarrhea, vomiting, lack of appetite, rash, red eyes, hiccoughs, cough, chest pain, difficulty breathing, difficulty swallowing, bleeding inside or outside the body
- 5. Infectious Disease Physician on call: request ID consult as per usual referral patterns through:

Regina General Hospital switchboard (306) 766-4444 OR Royal University Hospital switchboard (306) 655-1000