Ebola Preparedness Considerations for Outpatient/Ambulatory Care Settings

1. DETECT

Identify Patients with Ebola

- Review and inform healthcare personnel of signs and symptoms of Ebola and risk of exposure.
- Review Ebola Screening Criteria (symptoms + travel history within 21 days of symptom onset) for use during patient triage/registration (phone and in-person).

Post Screening Criteria in Appropriate Triage/Registration and Patient Care Areas

- Fill-in and post Ebola Screening Criteria in triage/registration (phone & in-person) and care areas.
- For phone screening, consider an algorithm for patient transportation to, and notification of, destination Emergency Department (ED) and transport agency (EMS or other).
- Train triage/registration staff on procedures when identifying a patient in your facility (put on appropriate PPE, isolate patient, etc.).
- Conduct spot checks of triage/registration staff to determine if they are incorporating screening procedures (following standard, contact, and droplet infection control guidelines) for patients.

Maintain Awareness of Infection Control Guidelines and Ebola Updates

- Maintain awareness of reported Ebola case locations, travel restrictions and public health advisories, and update your triage guidelines accordingly.
- Review and update, as necessary, your outpatient healthcare facility infection control protocols/procedures.
- Review and update, as necessary, procedures for isolation of patient until transportation to ED.

2. PROTECT

Maintain and Use Personal Protective Equipment (PPE)

- Identify CDC recommended PPE.
- Ensure facility has adequate PPE supplies.
- Keep PPE and instructions for putting on/ removing PPE in triage/registration and patient care areas.
- Conduct drills where staff members practice putting on/removing PPE to ensure that they are familiar with the correct sequence.
- Encourage healthcare personnel to observe each other when putting on/ removing PPE. At minimum, ensure that PPE removal is supervised by a monitor to check for cross-contamination.
- Remind staff of the importance of proper hand hygiene to reduce or eliminate infectious disease transmission.

Remain Aware of Environmental Policies and Procedures

- Establish a room that can safely isolate a patient.
- Develop procedures to limit exposure of persons to the patient’s temporary isolation room.
- Review environmental cleaning procedures and provide staff with education/refresher training for disinfection, including clean-up of spills.
- Review plans for special handling of contaminated linens, supplies, and equipment.

Ensure Readiness to Report to Health Officials

- Designate point(s) of contact within your facility who are responsible for communicating with state and local public health officials.
- Ensure staff is familiar with your facility’s point(s) of contact for reporting a patient with state and local public health officials.

3. RESPOND

- Ensure all parties, including healthcare personnel, patient, and visitors, perform hand hygiene.
- Put on appropriate PPE, make appropriate notification, and limit exposure to people in vicinity (e.g. apply mask to patient who will tolerate).
- Safely isolate and provide care for the patient until the patient can be transported to the appropriate ED.
- Notify local and public health officials about the patient, and carefully document and provide them information about known exposures (family, contacts, etc.).
- Arrange patient’s transport to ED (private transport or ambulance). Ensure information is shared appropriately.

Ebola Guidance and Information

- CDC’s Ebola website
- Clinician and healthcare workers
- Hospitals and Healthcare Settings
- Health Alert Network
- Clinician Outreach & Communication Activity
- National Institute for Occupational Safety & Health
- Occupational Safety & Health Administration

Outpatient/Ambulatory Care Facility Preparedness:

- Ebola Virus Disease Information for Clinicians in U.S. Healthcare Settings
- Safe Management of Patients with Ebola Virus Disease in US Hospitals
- Infection Prevention and Control Recommendations for Hospitalized Patients with Known or Person under investigation (PUI) for Ebola Hemorrhagic Fever in U.S. Hospitals.
- Interim Guidance for Environmental Infection Control in Hospitals for Ebola Virus
- Removing Personal Protective Equipment (PPE)
- National Guidance for Healthcare System Preparedness’ Capabilities
- Interim Guidance for Emergency Medical Services Systems and 9-1-1 PSAPs.

Check CDC’s Ebola website regularly for the most current information.

State and local health departments with questions should contact the CDC Emergency Operations Center (770-488-7100 or EOCReport@cdc.gov).
About this Document

The U.S. Department of Health and Human Services’ (DHHS’) Centers for Disease Control and Prevention (CDC) and Office of the Assistant Secretary for Preparedness and Response (ASPR), in addition to other federal, state, and local partners, aim to:

1. Raise awareness of Ebola, and
2. Encourage every U.S.-based outpatient/ambulatory care settings to prepare for encountering patients with possible Ebola and other infectious diseases.

Now is the time to prepare, as it is possible that individuals exposed to Ebola in West Africa may travel to the U.S., exhibit symptoms, and present to outpatient/ambulatory care settings.

This document is intended to provide considerations to enhance outpatient/ambulatory care settings’ collective preparedness and response.

Outpatient/ambulatory care facilities should ensure their healthcare personnel can 1) detect a patient meeting the CDC criteria for a patient for Ebola, 2) protect their healthcare personnel so they can safely care for the patient, and 3) respond in a coordinated fashion.

Many of the signs and symptoms of Ebola are non-specific and similar to those of many common infectious diseases. Transmission of Ebola can be prevented with appropriate infection control measures.

Definitions

Outpatient/ambulatory care facilities: referred to in this document as including, but not limited to, facilities providing care for patients who do not remain overnight (e.g. community health centers, urgent care centers, retail clinics, hospital-based outpatient clinics, non-hospital based clinics and physician offices, ambulatory surgical centers, public health clinics, imaging centers, oncology clinics, ambulatory behavioral health and substance abuse clinics, physical therapy, and rehabilitation centers).

Healthcare Personnel: referred to in this document as including, but not limited to, paid and unpaid persons (e.g. physicians, nurses, administrative staff, clerical, housekeeping, and volunteers) working in outpatient/ambulatory care settings who have the potential risk of exposure to a patient with Ebola and/or infectious materials (e.g. bodily substances, contaminated medical supplies and equipment, contaminated environmental surfaces).

Patient: demonstrates the symptoms and travel history outlined in the Ebola Screening Criteria.

The document does not set forth mandatory requirements or establish national standards.
Each facility is different and should adapt these considerations, as appropriate.