

Frequently Asked Questions

How Should We Treat Patients with Possible Ebola Infection in the Office Setting?

MSNJ urges physicians to be prepared, even for the unexpected. Before your office is faced with a potential Ebola patient or someone with another dangerous infectious disease, you should review the CDC's [Ebola Preparedness Considerations for Outpatient/Ambulatory Care Settings](#) and take steps to prepare your office and your staff.

Over the Phone:

Your first line of protection is your **telephone**.

- Ask each patient who calls your office for an appointment if s/he has **symptoms of a febrile illness** (fever, cough, nausea, vomiting, diarrhea, etc.)
- If a patient reports having a fever, next ask about the **patient's travel within the last 30 days**, in accordance with [CDC guidelines](#) for the evaluation of returned travelers.
- If the patient's [travel history](#) includes **West Africa** (Guinea, Liberia and Sierra Leone), **within the past 21 days**, the patient is in an [Ebola risk group](#) and s/he is potentially infected. The local emergency department (ED) is the proper place for evaluation.
 - **Tip:** Give the patient specific dates, when evaluating travel history.
- Immediately **contact your local ED** about the patient and determine how the ED wants the patient to travel to and enter the facility. If the patient is self-transporting, ask where s/he should park.
- **Give the patient specific instructions** on how to get to and enter the ED. It is important that the patient not mingle with other waiting patients.
- Alternatively, you may also **advise the patient to call 911**. NJ 911 dispatchers, first responders, and the NJ State Police have all been trained in Ebola screening and handling of potentially infected individuals.

Reminder: Flu season is upon us. More of your patients are likely to contract the flu than Ebola. **Remind your patients how important it is to get their flu vaccination this season.**

In the Office:

If a febrile patient has already presented in your office, ask staff to obtain a travel and exposure history.

If you feel the patient might have Ebola:

- Immediately **isolate the patient**.
- **Contact your local ED** for instructions on transferring the patient to the facility **OR call 911** to arrange for transport of the patient to an equipped facility.

While waiting for patient transfer:

- Have the patient **put on a mask**, if s/he has a cough with expectoration.
- Have the patient **perform hand hygiene** with an alcohol-based product.
- For clinically stable patients, have all staff in contact with the patient **wear a face shield and surgical face mask, impermeable gown, and 2 pairs of gloves**.
- For patients exhibiting obvious bleeding, vomiting or copious diarrhea, **follow the [CDC guidelines on personal protective equipment](#)** (PPE).
- Assess the patient's **travel, disease, and exposure history**.
- **Make a list** including contact information of everyone in the office (staff, patients, etc.) for further assessment by the local health department.
- Immediately **notify your [local health department](#)**.
 - If unavailable, report the case to the New Jersey Department of Health at:
(609) 826-5964, Monday through Friday 8:00AM – 5:00PM or
(609) 392-2020 on weekends, evenings and holidays.

Resources:

- CDC Poster on [How Ebola is Spread](#)
- CDC Guidance on [Ebola Associated Waste Management](#)
- CDC Interim Guidance for [Environmental Infection Control in Hospitals](#) for Ebola Virus
- CDC [Infection Prevention and Control Recommendations](#) for Hospitalized Patients
- Governor Christie Activates [Statewide Ebola Preparedness Plan](#)
- [NJ DoH Ebola FAQ](#)
- [NJ DoH Ebola page](#)
- Additional resources available on the MSNJ website at: www.msnj.org/ebola

***Disclaimer:** This guidance document was adapted with permission from the Texas Medical Association. Ebola resources and guidance are constantly changing. Stay up to date by visiting the [CDC](#) and [NJ DoH](#) websites.*