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Department of Health and Hospitals Office of Public Health

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Louisiana Nurse Aide Registry,

The 2014 Ebola epidemic is the largest in history, affecting many countries in West Africa.

CDC confirmed on September 30, 2014, through laboratory tests, the first case of Ebola to be diagnosed in the United States in a person who had traveled to Dallas, Texas from West Africa. The patient did not have symptoms when leaving West Africa, but developed symptoms approximately five days after arriving in the United States.

The person sought medical care at Texas Health Presbyterian Hospital of Dallas after developing symptoms consistent with Ebola. Based on the person's travel history and symptoms, CDC recommended testing for Ebola. The medical facility isolated the patient and sent specimens for testing at CDC and at a Texas lab participating in CDC's Laboratory Response Network. CDC and the Texas Health Department reported the laboratory test results to the medical center to inform the patient. Local public health officials have begun identifying close contacts of the person for further daily monitoring for 21 days after exposure.

The ill person did not exhibit symptoms of Ebola during the flights from West Africa and CDC does not recommend that people on the same commercial airline flights undergo monitoring, as Ebola is only contagious if the person is experiencing active symptoms. The person reported developing symptoms several days after the return flight.

The State of Louisiana and the CDC recognizes that even a single case of Ebola diagnosed in the United States raises concerns. Knowing the possibility exists, medical and public health professionals across the country have been preparing to respond. CDC and public health officials in Texas are taking precautions to identify people who have had close personal contact with the ill person and health care professionals have been reminded to use meticulous infection control at all times.

We know how to stop Ebola's further spread: thorough case finding, isolation of ill people, contacting people exposed to the ill person, and further isolation of contacts if they develop symptoms.

There have been no cases in Louisiana, but the possibility exists that a ill returned traveler could present to the healthcare system in Louisiana. The CDC has recently released guidance for clinicians in the U.S. who may come in contact with an ill person from the affected area. This guidance can be accessed at:

Evaluating returned travelers:

http://www.cdc.gov/vhf/ebola/pdf/ebola-algorithm.pdf

Checklist for patients being evaluated for Ebola Virus Disease (EVD) in the U.S.: http://www.cdc.gov/vhf/ebola/pdf/checklist-patients-evaluated-us-evd.pdf

Ebola Virus Disease information for Clinicians in U.S. Healthcare settings: http://www.cdc.gov/vhf/ebola/hcp/clinician-information-us-healthcare-settings.html

Guidance for Safe Handling of Human Remains of Ebola Patients in U. S. Hospitals and Mortuaries:

http://www.cdc.gov/vhf/ebola/hcp/guidance-safe-handling-human-remains-ebola-patients-us-hospitals-mortuaries.html

Please see the CDC webpage at http://www.cdc.gov/vhf/ebola/index.html for more information or contact Dr. Frank Welch at frank.welch@la.gov.

To discuss a possible exposure, request laboratory testing, or report a suspected case, contact the Office of Public Health immediately at 504-568-8313 or after hours 800-256-2748.

Early recognition is critical for controlling the spread of Ebola Virus Disease. An informed and prepared medical society in Louisiana is needed. We appreciate your assistance.