

Ebola Guide for 911 Dispatch and Call Centers

QUICK FACTS

- Ebola virus disease (EVD) is transmitted by direct contact with blood and body fluids of someone who has symptoms of disease, including fever, headache, body aches, abdominal pain, vomiting, and diarrhea.
- The infection can be spread **only** by someone who has symptoms.
- Those infected may start showing symptoms ranging from 2 to 21 days from when they were infected. The average time for symptoms to begin is 8-10 days.
- EVD is NOT transmitted by food, water, or airborne routes.
- Individuals **MUST** have a history of travel to Guinea, Liberia, or Sierra Leone (no other countries) within the past 21 days OR **MUST** have a history of direct contact with an Ebola patient AND have symptoms to warrant further investigation

RESPONDING TO GENERAL NON-EMERGENCY CALLER INQUIRIES

If a caller has general, non-emergency questions related to Ebola that you cannot answer using the information provided here, you may direct them to the Indiana State Department of Health Public Call Center at: **1-877-826-0011 or 1-888-561-0044 for the hearing impaired**. Additional information is available at www.CDC.gov and www.StateHealth.in.gov

MEDIA BASED INQUIRIES

If you do not have a standing protocol for handling Ebola related media inquiries within your jurisdiction, then direct them to:

Amy Reel
Director, Office of Public Affairs
Indiana State Department of Health
317.233.7315
areel@isdh.in.gov

PLEASE NOTE:

The topic of Ebola is a highly sensitive and emotionally charged topic. The mere mention of Ebola on an open source, public safety communications system has the potential to create wide spread concern among the public and the media. **If it becomes necessary to communicate information related to a potential or suspect case, non-specific terminology or private modes of communication should be utilized**

All HIPPA and other patient confidentiality rules and regulations apply to this situation as they would in any other. The same precautions to protect confidential information you would take in dealing with any other patient should be exercised in this situation.



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When a caller is specifically concerned about Ebola:

If after providing a caller the facts about EVD provided above and the caller remains concerned about being personally infected or know someone at risk of being infected, then you may ask the following triage questions to determine whether the caller's concerns are valid:

1. Has the person traveled to Guinea, Liberia, or Sierra Leone in the past 21 days?
2. Has the person had contact with anyone currently being treated for EVD?
 - a. If the answer is Yes to either question 1 **or** 2, continue to question 3
 - b. If the answer is No to both questions 1 **and** 2, STOP - you may assure the caller that they or the individual in question is not at risk for having been infected
3. Does the person have a fever?
4. Does the person have other symptoms like headache, body aches, abdominal pain, vomiting, or diarrhea?
 - a. If the answer is No to questions 3 **and** 4, STOP - you should inform the caller or the individual in question is not at risk for EVD
 - b. **If the answer is Yes to question 3 or 4; OR if after going through the above questions you are unable to rule out any risk to the individual:**
 - **Notify supervisor immediately (if available)**
 - **Confidentially dispatch EMS for potential transport of a possible Ebola patient**
 - **Notify the local health department at:**
 - **Notify the Indiana State Department of Health at: 317-233-7125 (M-F 8:15AM-4:45PM) or 317-233-1325 after hours & weekends**
 - **Notify the receiving healthcare facility once destination has been determined of possible Ebola transport for immediate isolation**

If based on a caller's answers to the questions above and assess the individual is not at risk for EVD and yet they are still concerned about the disease, you may direct them to the ISDH Call Center number provided above.



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When a caller complains of symptoms common to Ebola, but does not identify it as a concern:

It is likely, especially during flu season, 911 Dispatch and Call Centers may experience a high volume of calls related to citizens experiencing symptoms of illness similar to those infected by Ebola. While it is extremely unlikely the caller has been exposed to Ebola, the 911 operator may still question the caller in an effort to rule it out. While doing so, however, it is important not to create concern for the caller that Ebola is a likely cause of their symptoms if they have not already expressed it. In this instance, the following variations of the triage questions may be used.

1. Has the person travelled out of state in the last 21 days? If yes, where did the caller travel to?
2. Has the person been notified by a public health authority that they may have been exposed to a contagious disease?
 - a. If the caller answers that they have traveled to Guinea, Liberia, or Sierra Leone to question 1 **or** answer yes to question 2, continue to question 3
 - b. If the caller has not traveled to Guinea, Liberia, or Sierra Leone **and** they answer no to question 2, STOP - the caller or the individual in question is not at risk for having been infected with Ebola, normal flu like symptom protocols should be followed
3. Does the person have a fever?
4. Does the person have other symptoms like headache, body aches, abdominal pain, vomiting, or diarrhea?
 - a. If the answer is No to questions 3 **and** 4, STOP - the caller or the individual in question is not at risk for having been infected, determine chief complaint and proceed normally
 - b. **If the answer is Yes to questions 3 or 4 follow**
 - **Notify supervisor immediately (if available)**
 - **Confidentially dispatch EMS for potential transport of a possible Ebola patient**
 - **Notify the local health department at:**
 - **Notify the Indiana State Department of Health at: 317-233-7125 (M-F 8:15AM-4:45PM) or 317-233-1325 after hours & weekends**
 - **Notify the receiving healthcare facility once destination has been determined of possible Ebola transport for immediate isolation**

