

South Carolina Ebola Preparedness Statewide Conference Call
November 13, 2014, 3:00 pm – 4:00 pm
DHEC Mills-Jarrett Building

I. ANNOUNCEMENTS:

Phyllis Beasley, Office of Public Health Preparedness, opened the call by reiterating the following:

- All recent and current Ebola guidance is posted on the DHEC website which is www.scdhec.gov.
- If you have specific questions for the next conference call, please send them to ebola@dhec.sc.gov.
- For health care entities who need assistance with screening by DHEC, please contact your local Regional Epidemiology office at one of the following:
 - o Lowcountry Region – 843-441-1091
 - o Midlands Region – 888-801-1046
 - o Pee Dee Region – 843-915-8845
 - o Upstate – 866-298-4442

II. UPDATES:

CDC - Dr. Olabisi Badmus, Medical Consultant, Division of Acute Disease Epidemiology:

- **National Update in the U.S**
 - o Ebola patient who was being treated in New York at Bellevue hospital has now fully recovered and was release from the hospital Tuesday Nov 11th. The U.S is currently Ebola-free.
- **South Carolina**
 - o There are no cases of Ebola in S.C, and to clarify statements that have been made by the press, there have been no patients tested for Ebola in S.C.
 - o We are currently monitoring **seven** international travelers. This number is subject to change daily based on the number of travelers entering the state, leaving the state, or completing the 21 day monitoring period.
- We have received additional questions regarding our active monitoring process in the state of S.C. To provide a recap of the monitoring process which was discussed during the call on Oct 30th
 - o Travelers from the affected countries undergo exit screening prior to their departure from West Africa. An additional entry screening is completed when the travelers arrive in one of 5 designated U.S airports. The travelers undergo a temperature and symptom screening as well as a risk assessment receiving Care Kits that include contact information to the health dept, a thermometer with information about Ebola and the symptoms and instructions to self-monitor for 21 days.
 - o SC receives notification from the CDC about travelers arriving from the affected countries with S.C as the final destination. We receive information from the

screening completed at the airport and follow-up with the travelers complete a separate risk assessment. DHEC checks-in daily with the travelers throughout the duration of the 21-days from their dates of departure with either active or direct active monitoring depending on the identified risk factors. Travelers are also instructed to contact DHEC immediately if any symptoms develop.

Guidance Updates

- CDC has released Guidance for Screening and Caring for Pregnant Women with Ebola in US Hospitals and a video discussing respiratory protection for healthcare providers when caring for Ebola patients in U.S hospitals. Both of these resources are available on the DHEC and CDC website.
- The updated guidance for schools and childcare providers was released from DHEC through the health preparedness network on Nov 6th. If you are a school health nurse or administrator and have not received the updated guidance it is available through the DHEC website under the HPN school list serve archive.
- On Nov 12, DHEC guidance for dental professionals is now available on the DHEC website. To briefly highlight some important points from this guidance:
 - Dental professionals should be aware that the risk is extremely low for the exposure of Ebola in the dental care setting. Nonetheless, all health care providers should have access and be trained to appropriately use PPE that is indicated for their work setting.
 - The recommended PPE for health care workers in the ambulatory care settings, including dental professionals, when encountering a patient who is ill with limited symptoms and considered to have risks for Ebola should at minimum include: impervious gowns, face shield and mask, with two pairs of gloves.
 - It is advised to take medical and travel history from any patients with symptoms such as fever, headaches, muscle pain, GI symptoms, or unexplained bleeding or bruising. If the person does have a travel history to Liberia, Sierra Leone and Guinea, notify DHEC, and consider delaying any routine dental care for the patient until 21 days have elapsed from the date of departure from the country.

If a patient who reports any of these symptoms does not have a travel history in the last 21 days, the patient should be cared for according to the routine management for ill dental patients.

III. Update from SC Hospital Association – Dr. Rick Foster, Senior VP for Quality and Patient Safety

- Continue having weekly calls with the four regional treatment centers. The regional treatment centers have put in place strong, diverse leadership teams and are actively training staff.
- Developed protocol that addresses how to active system.
- Working with DHEC on lab testing capability at each regional treatment center.

- Proud of fact not a lot of other states have gone to our system in SC for treating patients.
- Working with DHEC on level of monitoring by DHEC staff, also populations being monitored such as military.
- The system was activated on a mock-up of patient being actively monitored who developed fever and gastrointestinal problems. Lesson learned was there has to be communication between all parties.
- Working on process for obstetrics, pregnant patients and pediatrics that might be being monitored. Should make regional treatment centers aware as soon as possible so they can be prepared.
- Dr. Foster reminded everyone although we are very focused on Ebola, don't lose sight we are at the time of flu season. Flu vaccine should be available.

IV. ADDITIONAL UPDATES SINCE LAST CONFERENCE CALL

DHEC EMS – Robert Wronski, Director, Division of EMS and Trauma

DHEC staff, in conjunction with the EMS Advisory Council and State Medical Control Director have developed an EMS Ebola Protocol for distribution. Agencies are not required to adopt this protocol; it was developed as a guideline for those that may be still developing their own or in need of a protocol to utilize.

The protocol is a Field Protocol meaning it does not address PPE, response codes, etc. It addresses immediate actions to be taken if a PUI is being responded to. Of utmost importance to note, if a patient is unstable either hemodynamically or with an AMS (altered mental status), they should be treated as other local protocols dictate and immediately transported to the closest appropriate facility.

Per Dr. Foster: Each of the regional treatment centers are working on policies and procedures related to decisions on whether to resuscitate a patient w/ multi-organ failure due to Ebola or other highly infectious disease that goes into cardiac arrest. The development of these policies will continue to be an agenda topic for our weekly calls w/ these regional centers and DHEC staff.

V. DHEC- Associate General Counsel – Susan Lake

Question referred from previous week's call:

Can a funeral director transport a deceased Ebola patient across state lines?

Under South Carolina law, a funeral director can transport a deceased Ebola patient across state lines. S.C. Code Section 44-29-20 states:

"Prior to transportation of human remains known to be infected by any dangerous, contagious, or infectious disease into, through, or out of this State or any city, town, or county within this State, the hospital, health or medical clinic, physician, medical facility, person, or other entity in possession of the human remains shall inform any funeral director, ambulance driver, or any other person or entity who is to transport the remains

that the remains are infected by a dangerous, contagious, or infectious disease.

In the event that human remains as described above are not to be moved immediately but are to be operated on for purposes of autopsy or otherwise handled, any doctor, technician, or other person charged with the responsibility of handling the remains known to be infected by any dangerous, contagious, or infectious disease must be informed that the remains are so infected.

For the purpose of enforcing this section, the Department of Health and Environmental Control (department) shall make and distribute, at intervals considered necessary by the department, to all hospitals, health or medical clinics, other medical facilities, persons, or other entities who may normally be in possession of human remains a list declaring what diseases are regarded as dangerous, contagious, or infectious and shall classify these diseases and shall designate the diseases as are of so dangerous a character that transportation of human remains infected by them is forbidden except under conditions as prescribed by the department which it considers proper for the transportation of those remains. "

DHEC has declared Ebola to be a dangerous, contagious and infectious disease and human remains infected with Ebola should be transported only in accordance with applicable CDC guidance.

The person sending or transporting the remains should inform the person or entity receiving the body that it is infected and should also determine if any laws in the receiving state apply to the transport.

Please note DHEC does not provide legal advice to any person or entity other than DHEC. Legal questions or requests for legal advice from persons or entities outside of DHEC must be addressed to the attorney for that individual or entity.

VI. **QUESTIONS FROM AUDIENCE:**

1. Question from a call regarding a community forum this evening at The Regional Medical Center in Orangeburg and is there anything to pass on to the community?

Dr. Foster:

- We have put in place the four regional treatment centers,
- Ebola exposure requires direct contact with body fluids,
- Importance of flu – we are at greater risk of exposure to this than Ebola

Dr. Badmus:

- It would be beneficial to let people know that there have been no confirmed cases or people tested for Ebola in SC. DHEC is monitoring international travelers from Liberia, Guinea, and Sierra Leone and there are currently not a large number. The DHEC website is a great resource with additional information available and to get general questions answered.

2. Are there more international travelers in other states?
Yes, there are certainly more international travelers being monitored in other states. I don't know the specific numbers for other states, however, states with the five airports doing the entry screening and with a significantly larger population of people who are from the affected countries or who are frequent international travelers, would be expected to have a larger number of people being monitored within those states.
3. From an outpatient center in Hilton Head – do we call the Regional public health office or the epidemiology office?
Reiterated the four regional treatment centers are MUSC, Palmetto Health, Greenville Hospital System and Spartanburg Regional Hospital and the telephone numbers for the four epidemiology offices. The caller was told they are in the Lowcountry region.
4. Call from Richland School District I – There are isolation procedures in the school setting, what about unlicensed personnel? Do they wear PPE in the isolation room?
Per Dr. Badmus – If you have an appointed staff member who is not a licensed professional or nurse, they would not need PPE if they are not in close contact or providing care for the ill person. They should maintain a safe distance from the ill person, direct them to a separate room for isolation, contact 911 and DHEC. Nurses or licensed staff in close contact or caring for the ill student or staff member should have the appropriate PPE.
Follow-up comments for same person: It's important to remember that if you have sick children or faculty, Ebola should not be the first illness that is thought to be the cause. If you have a child or faculty member who has traveled from one of the affected regions, they will undergo monitoring by DHEC and have been instructed that if they become ill to contact DHEC. Schools encountering anyone sick with a travel history needs to isolate the individual keeping them separated in another room and away from other people and call DHEC and 911. If you have additional questions for specific situations that we did not address, please send your questions to Ebola@dhec.sc.gov.
5. Dr. Foster let everyone know we are working on identifying resources for training and hopefully will have more information next week.

CLOSING COMMENTS:

The following reminders were provided by Phyllis Beasley:

- If you are a healthcare provider and have Ebola questions, call your Regional Epidemiology office. The phone numbers are:
 - o Lowcountry Region – 843-441-1091
 - o Midlands Region – 888-801-1046
 - o Pee Dee Region – 843-915-8845
 - o Upstate – 866-298-4442
- If you have questions that were not addressed during this conference call, send them to ebola@dhec.sc.gov.
- For general information about Ebola, go to DHEC's website which is: www.scdhec.gov and click on the box "DHEC Guidance – Facts about Ebola."

11/17/14 - DM