EBOLA VIRUS DISEASE (EVD) PATIENT RISK ASSESSMENT
Advice for NSW in the event that patient presents to Emergency Departments

1. Does the patient:
   Report having a fever or history of fever in the past 24 hours? AND
   - Report returning from a country where there is a current EVD outbreak within 21 days of illness onset (see EVD Outbreak Country List)
   - OR Report having had contact with a known or highly suspected case of EVD within 21 days of illness onset

   YES
   NO STAFF MEMBER TO HAVE CLINICAL CONTACT UNLESS WEARING EVD PPE* (See PPE box)
   PROVIDE PATIENT WITH A SURGICAL MASK (Provide a vomit bag if vomiting)
   ESCORT TO FACILITY’S DESIGNATED ISOLATION ROOM FOR ASSESSMENT* (Single room with door closed, with own bathroom and negative pressure if available)
   URGENT DISCUSSION WITH LOCAL ID PHYSICIAN (OR WESTMEAD HOSPITAL ID PHYSICIAN) AND PHU

   NO
   EVD test not indicated

   EVD highly unlikely
   Transmission based precautions based on clinical condition

2. Has the patient:
   - Come into contact with body fluids (blood, urine, faeces, tissues, laboratory specimens) from an individual or animal known or strongly suspected to have EVD?
   - Participated in a funeral which involved direct contact with the deceased body?
   - Presented with vomiting OR diarrhea OR bruising OR bleeding?
   - Been assessed by ID physician and/or PHU as having increased possibility of EVD

   YES TO ANY
   EVD test indicated

   INCREASED POSSIBILITY OF EVD
   - EVD INFECTION CONTROL / PPE* (see PPE Box)
   - Notify your immediate manager of the situation
   - URGENT DISCUSSION WITH ID PHYSICIAN, PHU, LOCAL LAB, WH/CHW (ID + ICU), CIDMLS-ICPMR LAB, CDB, STATE & LOCAL HSFCU, AMBULANCE CONTROLLER
   - Discussion to determine need for transfer of patient to WH/CHW; retrieval team; specimen referral to CIDMLS for EVD testing; other testing.

   NO
   EVD test not indicated

   NO KNOWN EXPOSURE
   - Standard plus Contact and Droplet Precautions or as advised by ICP/ID physician
   - Laboratory precautions and procedures as advised by clinical microbiologist

   ASsess/Treat for alternative diagnoses
   Travel related (e.g. malaria) & other infections

   Alternative diagnosis & patient improving
   Patient not improving & no alternate diagnosis

   PUBLIC HEALTH ACTION
   Twice daily temperature monitoring and PHU follow up in accordance with NSW Ebola Virus Disease Public Health Surveillance and Monitoring Plan

   Last updated 18 Jan 2016 – Health Protection NSW – NSW HEALTH HA4/7/029. *Small facilities that are very unlikely to see possible cases refer to APPENDIX 8 – PPE of NSW Contingency Plan for VHF. For updates and other publications visit http://www.health.nsw.gov.au/infectious/alerts/Pages/EVD.aspx

WESTMEAD HOSPITAL (WH) and the CHILDREN’S HOSPITAL WESTMEAD (CHW) are the designated hospitals for the management of EVD Patients

NSW Public Health Units (PHU) 1300 066 055 (24 hours)
Westmead Hospital (WH) (02) 9845 6609; ask for ID physician
Children’s Hospital Westmead (CHW) (02) 9845 0000; ask for ID physician
CIDMLS-ICPMR Laboratory (02) 9845 6255; AH: Call WH – Ask for Clinical Micro on-call

EVD OUTBREAK COUNTRY LIST
WHO outbreaks at 15 Jan 2016:
Sierra Leone
Check WHO for recent updates:
http://www.who.int/csr/don/en/

EVD INFECTION CONTROL / PPE*

ENSURE THAT STAFF ARE:
- Rigorously and repeatedly trained
- Donning & doffing PPE in designated area outside of the patient’s room
- Not exposing any skin when wearing PPE
- Monitored by a trained PPE observer for donning & doffing compliance; observer must not touch PPE.

Recommended PPE includes:
- Surgical gloves
- Hand hygiene
- Disposable, fluid-repellent long sleeve gown
- Disposable face mask, surgical hood to cover head and neck, and P2/N95 mask
- Disposable PAPR hood
- Disposable fluid-repellent below-knee boot covers
- Double gloves (with long cuffs)
- Waterproof apron (if vomiting/diarrhoea)

NOTE WELL:
- Restrict entry to essential staff and keep a list of staff with patient contact
- Avoid aerosolising procedures
- Wear visibly contaminated PPE using a hospital-grade disinfectant wipe before removing (do not spray disinfectant)
- Consult the NSW VHF Plan and EVD equipment list for more information

Transmission based precautions based on clinical condition

Standard plus Contact and Droplet Precautions or as advised by ICP/ID physician/clinical microbiologist