Ebola Drill for Emergency Departments

The Acting Commissioner of Health, NYSDOH, is asking all hospitals to conduct a drill of emergency departments (ED) procedures to quickly detect and isolate a patient with suspect Ebola. This is to be done without the knowledge of ED staff. A mock patient should present to the ED with the following scenario. (Note: a different scenario can be used as long as it involves a case clinically compatible with Ebola, the time frame relative to disease exposure is accurate (i.e. the person became ill within 21 days of exposure), and the exposure leading to disease is compatible with Ebola (i.e. contact with an ill person, contact with a health care setting, or involvement in funeral rites). It is suggested that the hospital infection control department be involved with the drill, with other offices involved as appropriate. The results of the drill should be evaluated by the hospital. Results should be transmitted to HANYS or GNYHA. HANYS and GNYHA will provide a summary, without hospital specific information, to NYSDOH.

Overall Goal: To evaluate emergency department (ED) performance on triage and isolation of suspect Ebola patients and educate ED staff on what is needed to prepare for an Ebola patient.

Goals of the Drill:

- 1. Recognition of a patient of concern for Ebola by reception or triage staff
 - a. Ask about symptoms
 - b. Ask about travel history
 - c. Alert others about the need for isolation as quickly as possible
- 2. Appropriate isolation of the patient in private room with a door and its own bathroom.
- 3. Appropriate personal protective equipment available to ED staff consistent with CDC guidelines.

Scenario:

ED: Hello, why are you here today?

Pt.: (chief complaint): "I am here because I feel very sick and I have a fever." (A friend drove me to the ED, I left my wallet/purse at home).

2. ED: What are your symptoms and how long have you had them?

Pt: I have fever, headache, and body aches. I am also very tired and I have been sick for about two days.

(If asked: Temp = 102 orally, started 2 days ago, thrown up once, no blood, took Tylenol, diffuse abdominal cramps, no pain, no regular meds, no diarrhea now, no past surgeries)

<u>Critical question 1</u>: Is travel history asked? Yes No.

If yes, did travel history include asking about travel within the last 21 days specifically? Yes No.

Describe details of interview.

(If asked: I work for an engineering company and was there in a consulting capacity. I was in Monrovia. I went to the hospital with diarrhea while I was there. The hospital was crowded with many ill appearing people. (The diarrhea got better.) I was in Monrovia for 5 days and returned 4 days ago (2 days before getting sick).

Record time it takes from appearance of the patient in the ED to being asked about travel using the table below. Record time spent in waiting room if applicable.

<u>Critical question 2:</u> With this history is the patient moved directly to an isolation room in a manner consistent with CDC guidelines? Yes No

Describe details. If patient not moved to isolation room, indicate where the patient went (waiting room, other).

Record the time it takes from when the travel history and medical history is obtained to being placed in an appropriate isolation room using the table below.

<u>Critical question 3:</u> Once in isolation, did health care personnel don PPE that was consistent with CDC guidelines? Describe PPE.

Suggested data format

Critical question 1	
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Is travel history asked?	Yes No
If yes, did travel history include asking about	Yes No
travel within the last 21 days specifically?	
Describe	
Time from arrival to being questioned about	Time in minutes
travel	
Time spent in the waiting room (if applicable)	Time in minutes
Critical question 2	
With this history is the patient moved directly to	Yes No
an isolation room in a manner consistent with	
CDC guidelines?	
Describe	
Time from being questioned about travel to being	Time in minutes
placed in an appropriate isolation room	
Critical question 3	
Once in isolation, did health care personnel don	Yes No
PPE that is consistent with CDC guidelines?	
Describe PPE	