

Ebola virus

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With the recent announcement of the first confirmed case of Ebola virus (EVD) diagnosed in the United States, it is reason for Infection Preventionists (IPs) to pause and consider the implications. Many IPs could be wondering what if a confirmed or suspected case showed up in their Emergency Department. Would she be ready? Reviewing the facts and creating an evidence based plan is the first step. We know that EVD is a severe, infectious, often-fatal disease in humans and non-human primates (monkeys, gorillas and chimpanzees) caused by infection with the Ebola virus. The infection is transmitted by direct contact with the blood, body fluids and/or tissues of infected animals or people.

According to the CDC, patients with EVD generally have an abrupt onset of symptoms typically 8-10 days after exposure. Symptoms may appear up to 21 days after exposure. Initial signs and symptoms are nonspecific, but may include fever,

chills, muscle pain, and malaise. Yet, the most common signs and symptoms are fever, anorexia and asthenia/weakness. Patients may develop a diffuse erythematous maculopapular rash by day 5 to 7 (usually involving the face, neck, trunk, and arms) that can desquamate.

The CDC offers a table of Infection Prevention and Control recommendations for hospitalized patients with known or suspected Ebola Hemorrhagic Fever in U.S. Hospitals that include:¹

- Patient placement in isolation for Standard, Contact and Droplet precautions.
- Gowns, gloves, eye protection and face mask for personal protective equipment (PPE)
- Dedicated equipment or preferably disposable equipment if possible
- Limited use of needles and sharps and extreme care with disposal
- Avoid aerosol generating procedures, but if necessary, please refer to the CDC recommendations
- Hand hygiene – when hands are visibly soiled

after exposure to blood or body fluids, soap and water should be used. For routine decontamination alcohol based hand rub is preferred. Although there are no known alcohol based hand rubs tested specifically against Ebola, it is important to note that the Ebola virus is an enveloped virus. Enveloped viruses in general are easily killed or inactivated by alcohol.

- Environmental Infection control with attention to ensuring that Environmental Service staff wear adequate PPE and also attention to the cleaning products used. Limited laboratory studies under favorable conditions indicate that Ebola virus can remain viable on solid surfaces, with concentrations falling slowly over several days. As a precaution, selection of a disinfectant product with a higher potency than what is normally required for an enveloped virus is being recommended at this time. EPA-registered hospital disinfectants with label claims against non-enveloped viruses (e.g., norovirus, rotavirus, adenovirus, poliovirus) are broadly antiviral and capable of inactivating both enveloped and non-enveloped viruses.²
- Develop policies for monitoring and managing potentially exposed healthcare personnel per CDC recommendations.
- Families and visitors must also be monitored, managed and educated.

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THAT'S a FACT!

Studies have proven that using an alcohol based hand sanitizer as an infection control strategy in a hospital setting reduces infection rates by 36%

Source: Use of alcohol hand sanitizer as an infection control strategy in an acute care facility. Hilburn J, et al Am J. Infect Control 2003; 31:109-16

Product Feature

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Description	Order Number	Case Pack	Uses Dispenser
PURELL® Advanced Green Certified Instant Hand Sanitizer			
LTX™ 1200 mL Refill	1903-02	2	1920-04
LTX 700 mL Refill	1303-03	3	1320-04
ADX™ 1200 mL Refill	8803-03	3	8820-06
ADX 700 mL Refill	8703-04	4	8720-06
12 fl oz Pump Bottle	3691-12	12	5704-06-BLU
PURELL Advanced Green Certified Instant Hand Sanitizer Foam			
LTX 1200 mL Refill	1904-02	2	1920-04
LTX 700 mL Refill	1304-03	3	1320-04
ADX 1200 mL Refill	8804-03	3	8820-06
ADX 700 mL Refill	8704-04	4	8720-06
535 mL Pump Bottle	5791-04	4	5704-06-BLU

Description	Order Number	Case Pack	Uses Dispenser
PURELL® Advanced Skin Nourishing Instant Hand Sanitizer Foam			
LTX 1200 mL Refill	1906-02	2	1920-04
LTX 700 mL Refill	1306-03	3	1320-04
ADX 1200 mL Refill	8806-03	3	8820-06
ADX 1250 mL Refill	8706-04	4	8720-06
535 mL Pump Bottle	5798-04	4	5704-06-BLU
PURELL Advanced Instant Hand Sanitizer Foam			
LTX 1200 mL Refill	1905-02	2	1920-04
LTX 700 mL Refill	1305-03	3	1320-04
ADX 1200 mL Refill	8805-03	3	8820-06
ADX 700 mL Refill	8705-04	4	8720-06
535 mL Pump Bottle	5792-04	4	5704-06-BLU

CDC recognizes that even a single case of Ebola diagnosed in the United States raises concerns. "Ebola can be scary. But there's all the difference in the world between the U.S. and parts of Africa

where Ebola is spreading. The United States has a strong health care system and public health professionals who will make sure this case does not threaten our communities," said CDC Director,

Dr. Tom Frieden, M.D., M.P.H. "While it is not impossible that there could be additional cases associated with this patient in the coming weeks, I have no doubt that we will contain this."

References from *Ebola virus*

^{1,2} The Center for Disease Control and Prevention. Interim Guidance for Environmental Infection Control in Hospitals for Ebola Virus. Accessed October 1, 2014 from: <http://www.cdc.gov/vhf/ebola/hcp/environmental-infection-control-in-hospitals.html>

A Look Ahead

next month's issue

Critically Evaluating a Research Article:
Practical Tips to Help Get You Started

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