

Evaluating an Ill Person for a Special Pathogen in Washington: Guide for Clinicians



HEALTHCARE FACILITY

Ill person presents to a Washington healthcare facility

REMINDER: STAFF WITH ANY PATIENT CONTACT SHOULD PUT ON ENHANCED PPE AS SOON AS THERE IS CONCERN FOR A SPECIAL PATHOGEN
Screening questions for a special pathogen or viral hemorrhagic fever (VHF): Ebola, Marburg, Lassa, Crimean-Congo Hemorrhagic Fever, etc.
Within the incubation period of a special pathogen (varies per pathogen, often within the last 21 days), has the patient ...
1. Had contact with anyone with a suspected or confirmed infection of a special pathogen (or contact with any objects contaminated by their body fluids)?
2. Had recent travel to an area with an active outbreak of a disease caused by a special pathogen, or where special pathogens are endemic?
3. Reported working in a laboratory that handles special pathogens?

Patient answers YES to one or more screening questions

Patient answers NO to all screening questions

Is patient experiencing fever (≥100.4°F/38.0°C) without use of antipyretics, and any of the following symptoms?

- Severe headache
- Muscle and/or joint pain
- Weakness/ fatigue
- Cough/difficulty breathing
- Sore throat
- Loss of appetite
- GI symptoms: abdominal pain, diarrhea, and/or vomiting
- Chest pain
- Encephalitis
- Acute hearing loss
- Unexplained bleeding or bruising, including bleeding outside a normal menstrual cycle
- Red eyes, skin rash, and hiccups
- Any concerning constellation of other clinical findings

The patient answers NO to all screening questions: Provide routine evaluation and care.
If concern remains, consult the patient's Local Health Jurisdiction (LHJ) or Tribal Health Jurisdiction.

YES If the patient meets risk + symptom criteria above, suspect potential VHF and IMMEDIATELY:

- Have all staff don enhanced PPE (if not done already): Adhere to STRICT infection prevention and control (IPC) procedures to prevent transmission, including wearing enhanced PPE.
- ISOLATE patient at a healthcare facility in a single room with private bathroom/covered bedside commode.
- Use only essential healthcare workers trained in special pathogen PPE donning/doffing and infection prevention procedures. Keep a log of all people entering and exiting the patient's room.
- INFORM: Notify facility's IPC program, and either the LHJ or Washington State Department of Health.

NO If the patient is NOT exhibiting signs & symptoms compatible with a special pathogen, continue with routine evaluation and care.

If concern remains, contact the Local Health Jurisdiction of the patient (or the LHJ based on the location of the healthcare facility).
If unable to reach the LHJ, contact the Washington Department of Health at: 206-418-5500 (24/7)

CONSULT PUBLIC HEALTH

Contact your Local or Tribal Health Jurisdiction or WA DOH for Immediate Notification, Guidance, & Testing

Reminder: Suspected cases of special pathogens are IMMEDIATELY notifiable to Local & State Public Health Jurisdictions in Washington.

Public Health will ask questions about:

- ❑ Basic patient information, including DOB, home address, and contact information
- ❑ Dates of travel
- ❑ Mode(s) of travel (plane, bus, other shared commercial travel)
- ❑ Onset and progression of symptoms (note dates/times)
- ❑ Activities that could have led to exposure to a special pathogen (varies per pathogen, see risk assessment questions on the right)
- ❑ Any close contacts (travel companions, family, friends) that have spent time with the patient, especially AFTER symptom onset
- ❑ Any close contacts that are currently symptomatic
- ❑ Patient access/ability to quarantine or isolate safely if needed
- ❑ Any medical, EMS, or other facility staff who have had contact with the patient, with or without PPE
- ❑ Additional questions specific to protecting public health or conducting an outbreak investigation

Exposure risk assessment questions: Preceding illness onset, did the patient ...

- ❑ Work in a healthcare facility (in any capacity) in an area with an active outbreak of a special pathogen, or where these pathogens are endemic?
- ❑ Have contact with the body fluids of a person who has symptoms of illness from a special pathogen – Including urine, saliva, sweat, vomit, breast milk, amniotic fluid, or semen?
- ❑ Visit a healthcare facility or traditional healer (as a visitor or patient) while in an area with an active outbreak of a special pathogen, or where these pathogens are endemic?
- ❑ Attend or participate in funeral rituals, including the preparation of bodies for funeral/burial?
- ❑ Have contact with wild or domestic animals: bats, pigs, rodents, camels, or other livestock or wild animals in an area with an active outbreak of a special pathogen, or where these pathogens are endemic?
- ❑ Handle or consume raw meat or other products harvested from animals originating from an area with an active outbreak of a special pathogen, or where these pathogens are endemic?
- ❑ Receive a tick bite in an area with an active outbreak of a special pathogen, or where these pathogens are endemic?
- ❑ Consume raw date palm sap originating from an area with an active outbreak of a special pathogen, or where these pathogens are endemic?
- ❑ Work or spend time in a mine/cave in an area with an active outbreak of a special pathogen, or where these pathogens are endemic?

As a resource for State, Tribal, Local, or Territorial public health departments, CDC is available 24/7 for consultation: 770-488-7100

TESTING

Decision is made to test for a special pathogen WITH THE APPROVAL OF YOUR LHJ AND WA DOH

- Test for other causes of illness † • Continue to isolate patient until test results available • Determine need for transfer to treatment facility

NOTE: If healthcare facility staff are unable to safely collect specimens AND/OR if facility is unable to isolate the patient while results are pending, IMMEDIATELY contact the Local Health Jurisdiction or WA DOH to discuss options.

- Decisions about testing for special pathogens will be coordinated by the LHJ and WA DOH, in partnership with CDC.
- For many special pathogens, testing is only available at CDC or other limited locations; results could take 48-72 hours or longer.

† Malaria is the leading cause of travel-related hospitalization and death. Perform malaria testing in any patient with a febrile illness who recently returned from a malaria-endemic country, even if they took malaria prophylaxis.

- Use lab equipment with closed tube systems where the specimen container remains capped during testing.
- Do not use tube transport systems.
- Centrifuges should have sealed buckets or sealed rotors that are loaded in a biosafety cabinet. After centrifugation, open the sealed buckets or rotors inside a biosafety cabinet or enclosed hood.

Decision is made NOT to test for a special pathogen

Follow-up consultation with public health (LHJ or WA DOH) is recommended to review the patient's clinical status, laboratory test results, and to discuss discontinuation of special pathogen-specific infection prevention & control measures such as patient isolation & enhanced PPE.

† Guidance and other resources:
WA Local Health Jurisdictions: <https://doh.wa.gov/about-us/washingtons-public-health-system/washington-state-local-health-jurisdictions>
WA DOH Ebola and Marburg resources: <https://doh.wa.gov/emergencies/be-prepared-be-safe/diseases/ebola-virus-disease-and-marburg-virus-disease>
WA DOH Lab Test Menu (Search for your pathogen of concern): <https://doh.wa.gov/public-health-provider-resources/public-health-laboratories/lab-test-menu>
CDC Guidance for Routine Diagnostic Testing for Patients with Suspected VHFs: <https://www.cdc.gov/viral-hemorrhagic-fevers/php/laboratories/guidance-on-performing-routine-diagnostic-testing-for-patients-with-suspected-vhfs-or-other.html>
CDC Diagnoses for Consideration in a Returning Traveler with Fever: <https://archive.cdc.gov/#/details?url=https://www.cdc.gov/vhf/abroad/diagnosis-considered-returning-traveler.html>
CDC Viral Hemorrhagic Fevers: <https://www.cdc.gov/vhf/index.html>
CDC Infection Prevention Guidance: <https://www.cdc.gov/viral-hemorrhagic-fevers/hcp/infection-control/index.html>
NETEC Viral Hemorrhagic Fever Readiness Assessments: <https://netec.org/readiness-assessments/>
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