

TRANSPORT OF PATIENTS WITH SUSPECTED EBOLA VIRUS DISEASE (EVD)

I. The Centers for Disease Control and Prevention (CDC) and the Chicago Department of Public Health (CDPH) have issued specific guidance for screening, care and transport of patients who present with Suspect Ebola Viral Disease (EVD) symptoms.

II. Patients who are considered “high risk” for Ebola **MUST MEET THE FOLLOWING CRITERIA:**

A. Patient who has traveled from a country with widespread Ebola transmission, as noted by the CDC, IDPH and/or CDPH

AND

B. Display one (1) of the following symptoms:

- Fever
- Abdominal Pain
- Diarrhea
- Vomiting
- Unusual Bleeding (i.e. eyes, nose, gums)
- Muscle Pain (Myalgia)
- Headache
- Feeling weak and/or tired

III. Any patient who meets BOTH of the ABOVE CRITERIA for a suspect EVD will be transported to a SPECIALIZED INFECTION CONTROL HOSPITAL

IV. The M.A.R.C Division will communicate to the field via the MDT and/or by email to the EMS Field Chiefs, ADCPs, and Dispatch to determine which Ebola Receiving Center the patient will be transported to.

V. EMS Crews will DIRECTLY CONTACT the Base Station of the Ebola Receiving Center. The EMS crew will relay the positive criteria and pertinent patient findings/information.

VI. Any invasive procedure (i.e. glucometer, IV start, advanced airway) will be discussed with the Base Station of the Ebola Receiving Center PRIOR TO IMPLEMENTATION.

VII. EMS Crews who are in contact with a suspected EVD patient shall wear the appropriate Personal Protective Equipment (PPE), as defined by CDC guidelines.

VIII. Patients who do NOT meet the defined “high risk” criteria may be transported to the closest appropriate hospital. Base station contact in this case should be made as per usual protocol.

- IX. EMS Crews may contact a Base Station of an Ebola Receiving Center for any questions relating to potential “high risk” patients or transport decisions.

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