

# THIS IS AN OFFICIAL NH DHHS HEALTH ALERT

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Health.Alert@nh.gov  
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NH-HAN 20141205



## Ebola Virus Disease (EVD) Preparation in New Hampshire Update #3

### Key Points and Recommendations

1. Be aware that the Centers for Disease Control and Prevention (CDC) released a new 3-tiered hospital preparedness framework:  
<http://www.cdc.gov/vhf/ebola/hcp/us-hospital-preparedness.html>
2. A preliminary list of 35 hospitals in the United States identified as Ebola Treatment Centers was released. The initial list of Ebola Treatment Centers is based upon locations with the highest percentage of returning travelers.
3. All acute care New Hampshire hospitals have worked to prepare for an Ebola patient and are able to identify, isolate and inform DPHS of a suspect EVD patient.
4. The New Hampshire Division of Public Health Services (NH DPHS) will be offering Ebola virus testing at our public health laboratories (PHL) starting Friday December 5, 2014. The instruction for specimen collection, packaging, and transport remains the same (see attached **NH Public Health Laboratories Ebola Specimen Testing Checklist**). Any testing for EVD needs to be performed in consultation with NH DPHS.
5. The NH DPHS will continue to hold "Ebola Chat" question and answer conference calls on Thursday, December 11<sup>th</sup>, and Thursday, December 18<sup>th</sup> from 12:00-12:30 pm (Conference call: 1-866-304-8625, participant code: 1098761099). Future calls in 2015 will be determined at a later date.

### Background

The Ebola Virus Disease (EVD) epidemic continues in the West African countries of Sierra Leone, Liberia, Guinea, and Mali. There is evidence that the epidemic is declining in Liberia, but case incidence continues to slowly rise in Guinea and the outbreak shows no signs of slowing in Sierra Leone. The CDC in conjunction with state and local public health officials continue to successfully screen and monitor any returning travelers to the U.S. from one of these four West African countries currently affected by the epidemic.

### Healthcare Preparedness

On Tuesday December 2, 2014, the CDC released a new 3-tiered framework for hospital preparedness categorizing hospitals as either Frontline Healthcare Facilities, Ebola Assessment Hospitals, or Ebola Treatment Centers (ETCs). Further information about these designations can be found on the CDC website link below. ETCs should have the capability to care for an Ebola patient for the duration of their illness. Additional information can be found at the following links:

<http://www.cdc.gov/vhf/ebola/hcp/us-hospital-preparedness.html>  
<http://www.cdc.gov/vhf/ebola/hcp/current-treatment-centers.html>

All New Hampshire hospitals may not specifically identify into one of the three tiers, but we will continue to work with hospitals to assure preparedness and readiness to manage an Ebola patient based upon on their resources. While confident that all hospitals will continue to “think Ebola” we recognize the risk of an Ebola patient spontaneously presenting to a New Hampshire hospital remains very low.

No New Hampshire hospitals have been identified as an ETC to date. The designation of an ETC requires a collaborative decision with hospital leadership and state public health officials and is based upon many factors including: readiness of the hospital to serve in that capacity, adequate infrastructure and resources, and a completed assessment by a CDC Rapid Ebola Preparedness (REP) team. While Dartmouth-Hitchcock Medical Center (DHMC) has volunteered to serve as a referral center for Ebola patients in New Hampshire, a designation of ETC has not been determined as readiness and assessment are ongoing. The NH DPHS continues to work with DHMC and all hospitals to identify and obtain necessary resources. As part of our continued preparedness efforts, we will evaluate referral options for full disease course treatment as the progress on this national hospital strategy continues.

### Laboratory Testing

Beginning Friday December 5, 2014, the NH Public Health Laboratories (PHL) will be offering testing for Ebola virus disease. This is a real-time PCR assay developed by the Department of Defense and distributed to LRN Labs around the country by the CDC. It is the same assay used at the Massachusetts Public Health Laboratory, and offering testing in New Hampshire should decrease turn-around-time. NH DPHS still recommends that all hospitals have staff prepared and trained to draw blood and package specimens for Ebola testing in accordance with CDC guidelines. Any testing for Ebola needs to be performed in conjunction with NH DPHS and DPHS will arrange for a contracted courier to pick up the correctly packaged blood specimens for transport directly to the NH PHL. Updated FAQs about specimen collection, packaging, and transport can be found on the NH DPHS website at:

<http://www.dhhs.nh.gov/dphs/cdcs/ebola/documents/ebola-lab-faq.pdf>

### Additional Information

If you have questions about the state’s Ebola preparedness, or to report a suspect case of Ebola virus disease, please call 603-271-4496 (after hours 603-271-5300).

For any questions regarding the contents of this message, please contact NH DHHS, DPHS, Bureau of Infectious Disease Control at 603-271-4496 (after hours 1-800-852-3345 ext.5300).

To change your contact information in the NH Health Alert Network, contact Denise Krol at 603-271-4596 or email [Denise.Krol@dhhs.state.nh.us](mailto:Denise.Krol@dhhs.state.nh.us)

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From: Benjamin Chan, MD – State Epidemiologist

Originating Agency: NH Department of Health and Human Services, Division of Public Health Services

**Attachment:** NH Public Health Laboratories Ebola Specimen Testing Checklist

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**State of New Hampshire**

Ebola Specimen Testing Checklist for Submitting Hospitals, NH B IDC, NH PHL

Note- Many of the agency activities below will be occurring in parallel.

(Submitter) Hospital Staff Checklist

	Completed By	Date, Time	
1			Call NH B IDC at 271-4496 or after hours at 271-5300 to consult on Ebola testing.
2			Provide NH B IDC with Hospital Name, Address, Hospital Contact Name, Hospital Contact Phone Number, Hospital laboratory fax number and Physician Contact phone number.
3			Collect Specimens according to recommendations, draw two purple top (EDTA) plastic tubes of whole blood ( $\geq 4\text{mL}$ each). Place each blood tube in a separate biohazard bag. Store specimens at 4°C until transport to lab.
4			Complete the NH PHL Specimen requisition form. Request “Ebola PCR” in “Other Test” section. <a href="http://www.dhhs.nh.gov/dphs/lab/documents/labrequisition.pdf">http://www.dhhs.nh.gov/dphs/lab/documents/labrequisition.pdf</a>
5			Package specimens for transport by courier for category A infectious substances, following CDC guidance: <a href="http://www.cdc.gov/vhf/ebola/hcp/interim-guidance-specimen-collection-submission-patients-suspected-infection-ebola.html">http://www.cdc.gov/vhf/ebola/hcp/interim-guidance-specimen-collection-submission-patients-suspected-infection-ebola.html</a> . Note- packaging of Category A specimen must be completed only by certified packaging and shipping staff. Package blood tubes in separate biohazard bags. Securely attach laboratory requisition to OUTSIDE of box.
6			Give packaged sample and requisition to courier when they arrive.

**NHBIDC Checklist**

	<b>Completed By</b>	<b>Date, Time</b>	
1			PHN and MD on call decide if testing is warranted and consult with a CDC Medical Epidemiologist via the CDC EOC at 770-488-7100. Upon calling the EOC, ask the CDC Duty Officer for a “Medical Epi consult for Ebola testing”. If testing is authorized, a CDC case number will be generated.
2			<p>Following testing authorization, PHN contacts NH PHL 271-4661 or PHL Scientist on call if after hours/weekend/holiday to arrange transport.</p> <p>Provide the following information:</p> <p>CDC Case Number_____</p> <p>CDC Medical Epi email address_____</p> <p>NH BIDC contact email address_____</p> <p>Hospital Physician Contact phone number_____</p> <p>Hospital Laboratory Fax Number_____</p> <p>Hospital Street Address_____</p>

### NH PHL Pre-Testing Checklist

	Completed By	Date, Time	
1			<p>NH PHL Staff obtains the following information from PHN:</p> <p>Hospital Laboratory Contact Info and Hospital address:_____</p> <p>CDC case number:_____</p> <p>CDC Medical Epi contact email:_____</p> <p>Originating facility physician contact phone number:_____</p>
2			<p>NH PHL contacts hospital lab to verify that sample has been collected and is ready for courier pick up. Obtain hospital address, contact person, phone number. Assure the laboratory has properly packaged the sample. Document who you spoke to, time and date. If after hours, scientist calls courier to arrange specimen transport. Scientist calls lab director or manager to inform of situation, assist with meeting courier, etc. Scientist calls 2<sup>nd</sup> scientist to assist with sample processing.</p>
3			<p style="text-align: center;">NH PHL contacts STAT Courier to transport specimen from hospital to NH PHL</p> <p style="text-align: center;">Stat Courier is available 24/7/365. Provide STAT Courier with the name of facility for pickup and delivery, street addresses, town, state and phone number, contact person.</p> <p style="text-align: center;">Obtain courier ETA.</p>
4			<p>Send email with the CDC case number to the CDC LRN notifying them that a CDC Epi-authorized Ebola specimen from NH is being tested at NH PHL.</p>

### NH PHL Testing Checklist

	<b>Completed By</b>	<b>Date, Time</b>	
1			Receive and test tube 1 by LRN DoD PCR. If PCR negative, specimen does not need to be sent to CDC unless an alternative diagnosis requires additional testing for other agents.
2			Consult CDC LRN/EOC to review positive or indeterminate results. If results are negative, an email to the CDC LRN is sufficient. Provide the CDC case number.
3			Phone lab manager with test results
4			Phone NH BIDC with test results: 603-271-4496 (after hours 603-271-5300, ask to page PH nurse on call).
5			If necessary, prepare the CDC DASH and VSPB forms; package and ship tube 2 directly to CDC. Include case number.
6			If NH PHL result is negative, finalize in LIMS. Fax NH PHL Lab Report to submitter (hospital) and BIDC (271-0545)
7			Negative samples will be destroyed after it has been determined that no further testing is necessary.
8			Positive or Indeterminate samples will be destroyed following completion of testing at CDC. Notification and submission of APHIS/ CDC form 4 must be completed
9			If sent to CDC, send final CDC report to submitting hospital, BIDC.