



Michael R. Pence
Governor

Jerome M. Adams, MD, MPH
State Health Commissioner

Date: November 7, 2014

To: School Administrators
School Nurses

From: Jerome M. Adams, MD, MPH
State Health Commissioner

Joan Duwve, MD, MPH
Chief Medical Consultant

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State Epidemiologist

Re: Ebola Virus Disease Resources and Information for Schools

Information about the Ebola virus disease (EVD) outbreak in West Africa and concerns regarding its potential impact in the United States have been topics of conversation for many individuals in communities across the country. EVD is a very serious viral disease in humans, and is the cause of ongoing outbreaks in Guinea, Liberia, and Sierra Leone. Although there have been four cases of EVD recently identified in the United States, there have been **NO** cases of EVD diagnosed in Indiana, and **the general risk of acquiring Ebola in Indiana continues to be extremely low.**

As we continue to monitor the changing EVD situation, it is important for Indiana schools to be prepared to respond to questions related to EVD. Schools play an important role in maintaining the health and well-being of students. School staff, especially the health services program staff, fulfill a critical role in monitoring the health status of students and staff members, as well as the dissemination of accurate, science-based information. It is hoped that the following information and resources will be helpful as you are communicating with your students, staff, and community.

The Indiana State Department of Health (ISDH) is in frequent communication with the Centers for Disease Control and Prevention (CDC), local health departments, hospitals and other health partners across the state to ensure that Indiana is prepared to address a range of infectious diseases, including EVD. In an effort to address public health concerns, and those that you and your families may have, the ISDH has information and resources to share.

Ebola Facts:

- EVD is a rare and serious disease caused by a viral infection
- Ebola viruses are found in several African countries. Ebola virus was first discovered in 1976 near the Ebola River in Africa



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- The 2014 Ebola outbreak in West Africa (currently affecting Guinea, Liberia, and Sierra Leone) is the largest in history

Transmission of Ebola:

- Ebola is spread through direct contact (through broken skin or through your eyes, nose, or mouth) with
 - Blood and body fluids (like urine, feces, saliva, vomit, sweat, and semen) of a person who is sick with Ebola
 - Objects (like needles) that have been contaminated with the blood or body fluids of a person sick with Ebola
 - The body of someone who has died from Ebola
- Ebola is **NOT** spread through the air, by water or food or by casual contact
- People with Ebola can **ONLY** spread the Ebola virus when they have symptoms
- There is **NO** known risk of transmission if someone does not have symptoms

Symptoms of Ebola:

- Symptoms of Ebola can include:
 - Fever
 - Weakness
 - Headache
 - Muscle pain
 - Vomiting
 - Abdominal pain
- Symptoms of Ebola may appear anywhere from two to twenty-one days following exposure to body fluids of a person infected with the virus, but often appear between eight and ten days following exposure

Monitoring of Travelers:

The CDC, the Department of Homeland Security's Customs and Border Protection, ministries of health, and their partners, have been working with airlines and airports, both in the United States and in the affected countries since the beginning of August to address the health, safety and security of American citizens, and to prevent the spread of Ebola. Exit screenings (temperature check, traveler interview and assessment) are conducted at airports in the affected countries (Guinea, Liberia, and Sierra Leone) on all travelers to identify sick travelers or travelers exposed to Ebola and to delay them from boarding an airplane until it is safe for them to travel.

Additional monitoring protocols have recently been put in place and include the following:

- The routing of all passengers traveling from Guinea, Liberia, and Sierra Leone through one of five designated international U.S. airport ports of entry
- Expanded active screening by the Customs and Border Protection to screen passengers arriving into the U.S. from locations other than the five designated U.S. airports (e.g. Canada, Europe, Mexico, etc.)
- Revised CDC guidance to include "active post-arrival monitoring" of travelers by public health authorities for those arriving in the U.S. after traveling from Guinea, Liberia and Sierra Leone
- Expanded ISDH guidance, above and beyond the recommendations of the CDC, to provide "direct active monitoring" of all identified returning travelers by local and state department of health authorities. This monitoring means that public health officials conduct active

monitoring for 21 days from the date of entering the country by directly observing the person being monitored and performing twice daily fever and symptom checks.

School Guidance:

Given the extensive safeguards, screening and monitoring in place at departure points from the three at-risk countries, the likelihood is **extremely low** that any student or staff member identified during screening at airports and borders across the nation or during monitoring in Indiana, would be at risk. However, if the ISDH or local health department learns of a returning traveler who is a student or staff member, out of an abundance of caution, the ISDH will make an evaluation and determination, based on discussions with the school, parents, and local health department, as to the safety of the traveler being permitted to attend school or school related activities for the 21 day period of incubation while they are undergoing observation and monitoring by their health care provider and public health authorities. This decision will be made on a case-by-case basis, and be based on the science of the disease and the safety of the student/staff member and the school community. Communicating this information with staff or parents who may be planning travel to Guinea, Liberia, and Sierra Leone in the near future may be beneficial as they are making their travel plans.

Schools should monitor the illness and absence rate of their staff and student population. If schools are aware that a staff member or student is ill **and** the school has been informed that this staff member or student has recently traveled to, or been exposed to an ill traveler from the impacted countries of Guinea, Liberia, or Sierra Leone, schools should call their local health department immediately for guidance. If the ill staff member or student has not traveled to one of these countries in the past 21 days, schools should continue to follow their normal school policies and procedures for dealing with ill persons.

If schools or parents have questions at anytime regarding the Ebola virus, the ISDH has opened an Ebola Call Center which is open and staffed 24 hours a day, seven days a week. The Ebola Call Center number is (877) 826-0011. For the hearing impaired, a call line is open Monday – Friday, 8:15 am to 4:45 pm and the number is (888) 561-0044.

Please remember that other communicable diseases are spread through schools and that this is an excellent time to remind school staff and students regarding good health practices such as covering their cough, frequent hand washing, staying home if they are ill, and receiving a flu shot.

Resources and Information:

Additional resources and information on Ebola virus disease can be found at:

- ISDH Ebola webpage: <http://www.in.gov/isdh/26447.htm>
- CDC: http://www.cdc.gov/vhf/ebola/index.html?s_cid=cdc_homepage_feature_001
- American Academy of Pediatrics: [“Ebola: What Parents Need to Know”](#)
- American Academy of Pediatrics: [“How to Discuss Ebola with Your Children”](#)
- SAMHSA Flyer: [“Talking With Children: Tips for Caregivers, Parents, and Teachers During Infectious Disease Outbreaks”](#)
- American School Counselor Association: [“Helping Kids During Crisis”](#)

Thank you for the invaluable role you play in maintaining the health of our communities.