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October 21, 2014

To: All professionals in the EMS System for Metropolitan Oklahoma City and Tulsa

From: Jeffrey M. Goodloe, MD, NRP, FACEP  
Medical Director, Medical Control Board

Re: Ebola Virus Disease – Update from October 12, 2014

Today brings encouraging news. Many of the community-based and initial healthcare-based contacts of the index Ebola patient in Dallas have passed the 21-day self-monitoring period completely symptom-free and are now deemed of no more risk for Ebola than you or I. Of our particular note, our colleagues in Dallas Fire Rescue that transported the patient to the hospital are among those 21+ day symptom free. We wish them continued health as they continue their Fire/EMS careers.

Also, today brings updated guidance from the Centers for Disease Control (CDC) regarding personal protective equipment (PPE) for healthcare workers to prevent transmission of Ebola virus disease. A media summary of the guidelines can be found at:

<http://www.cdc.gov/media/releases/2014/fs1020-ebola-personal-protective-equipment.html>

The new guidelines themselves can be accessed through the CDC at:

<http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html>

So where do we as an EMS system go from here? We continue to be just as committed to your health as an EMS professional as we are to our patients' health. We are continuing to focus upon our three key missions for EMS related to Ebola virus disease:

1. Identify patients we believe have heightened risk for Ebola infection through careful screening queries at EMSA/AMR dispatch consoles and rapidly communicating any concerning situations to all professionals responding to that incident.



1. Utilize appropriate PPE practices. Already today, two of our colleagues in EMSA/AMR are in Miami, Florida participating in a national PPE exercise being conducted to establish the best practices and procedures possible for EMS. Upon their return before week's end, we will discuss in detail their findings and work expeditiously to share those findings throughout our EMS system. We believe continuing the present practices and implementing additional new practices in those situations of confirmed Ebola virus disease and/or advanced stages of Ebola virus disease will continue to provide you important and reliable protection. I am confident in our EMS system and its leaders that we will continue to implement all necessary precautions as rapidly as possible.
2. Work with local emergency departments, the state health department, and in any subsequently confirmed cases the CDC, to limit the forward spread of Ebola. While there have been no confirmed cases, or even particularly high risk cases, for Ebola in the areas of Oklahoma that we serve, we have already worked diligently to achieve this goal through productive and ongoing communication with our local, state, and federal partners.

As I've continued to indicate in these particular memos, the prior ones dated October 2, 2014 and October 12, 2014, there are many communications regarding Ebola, some developed by medical professionals and some reported by lay press. I want to be very responsible and diligent in providing you the resources I believe have been appropriately confirmed by the best available medical experts on Ebola. I and the entirety of your medical oversight support continue to work daily (and often nightly) with your organization leaders to monitor this and any related situations that may impact your safety and the safety of our communities. I promise you ongoing transparency in what our decisions are based upon and sharing key resources like those highlighted above. Additional communication from me will come as conditions and changes warrant. Stay safe and remain proud of the calm, professional, reliable actions our EMS system has collectively taken during these challenging prior weeks.

My direct contact information is email at [jeffrey-goodloe@ouhsc.edu](mailto:jeffrey-goodloe@ouhsc.edu) and cell at 918-704-3164.

