



For Immediate Release
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Texas Reports Positive Test for Ebola in One Additional Healthcare Worker

A second healthcare worker at Texas Presbyterian Hospital who provided care for the index patient has tested positive for Ebola according to preliminary tests performed overnight by the Texas Department of State Health Services' laboratory.

The patient was isolated after an initial report of a fever and remains so now. Confirmation testing at the Centers for Disease Control and Prevention's laboratory is being done. The health care worker was being monitored for fever and symptoms.

The hospital and patient were notified of positive result. In addition, CDC has interviewed the patient to identify any contacts or potential exposures in the community.

As we have said before, because of our ongoing investigation, it is not unexpected that there would be additional exposures.

An additional health care worker testing positive for Ebola is a serious concern, and the CDC has already taken active steps to minimize the risk to health care workers and the patient.

Yesterday, CDC [announced](#) a series of actions related to hospital preparedness for Ebola treatment, both in Dallas, and in hospitals around the country.

They include:

- Sending an additional team to Dallas, including experts who successfully controlled outbreaks of Ebola in Africa in the past two decades, including in health-care settings. Team members have worked with Doctors Without Borders on infection control protocols and trained others in Africa to follow those protocols. This expertise is being directly shared with the hospital. In addition, two infection control nurses from Emory University hospital who have experience treating Ebola patients without infecting health-care workers are joining the response at the Dallas hospital to provide peer-to-peer training and support. This combination of training will help hospital staff across a range of care and management experiences.



- Making immediate and specific improvements to processes and procedures at the Dallas hospital to reduce risk to health care personnel. Care for a patient with Ebola requires meticulous attention to detail, and refining these steps makes it safer and easier.
- Having a site manager in place and at the Dallas hospital 24/7 as long as Ebola patients are receiving care, to oversee the putting on and taking off of PPE and the care given in the isolation unit.
- Establishing a dedicated CDC response team that could be on the ground within a few hours at any hospital with a confirmed patient with Ebola. The CDC Response Team would provide in-person, expert support and training on infection control, healthcare safety, medical treatment, contact tracing, waste and decontamination, public education and other issues. The CDC Response Team would help ensure that clinicians, and state and local public health practitioners, consistently follow strict standards of protocol to ensure safety of the patient and healthcare workers.
- Providing more opportunities for U.S. healthcare providers to receive additional training and to get their questions answered from CDC experts. On Tuesday, CDC held a partner conference call where more than 5600 clinicians from across the country joined. Later this week, CDC will host a call with the American Nurses Association to discuss how to better prepare frontline nurses for Ebola; and another call with the American Hospital Association. Next week, CDC will host a live event in New York City with the Partnership for Quality Care and the Greater New York Hospital Association/1199SEIU Healthcare Education Project to educate frontline healthcare workers on Ebola; the event will be streamed live to hospitals across the country

While this is troubling news for the patient, the patient's family and colleagues and the greater Dallas community, the CDC and the Texas Department of State Health Services remain confident that wider spread in the community can be prevented with proper public health measures including ongoing contact tracing, health monitoring among those known to have been in contact with the index patient and immediate isolations if symptoms develop.

Ebola is spread through direct contact with bodily fluids of a sick person or exposure to objects such as needles that have been contaminated. The illness has an average 8-10 day incubation period (although it could be from 2 to 21 days) so CDC recommends monitoring exposed people for symptoms a complete 21 days. People are not contagious during the incubation period, meaning before symptoms such as fever develop.

CDC tests results will be shared when confirmatory tests are done, following appropriate patient notification.

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