



Frequently Asked Questions About **Ebola**

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Important things to remember:

- There are no confirmed cases of Ebola in Washington State.
- An outbreak of Ebola virus disease is very unlikely to occur in Washington because we have good infection control practices in our hospitals and a well-trained public health staff.
- Someone who has Ebola must have symptoms before they can spread the disease to others.

What is Ebola?

Ebola is a serious disease caused by a virus that can lead to high fevers and in some cases diarrhea, vomiting and severe bleeding. Ebola virus infection has a death rate of 50-90 percent.

Is there an Ebola epidemic in the United States?

No. There is not an Ebola epidemic in the United States, and there have been no confirmed cases of Ebola in Washington State. Several hospitals nationwide are treating Ebola patients who have come here from countries experiencing Ebola outbreaks; and several healthcare workers who were treating them have been infected.

What is my risk of getting Ebola?

- It is extremely unlikely that you will get Ebola if you have not had close contact with an infected person. Ebola does not spread as easily as many other infections; it requires direct contact with the blood or other bodily fluids of a person who is sick.
- The virus is spread through direct contact (through broken skin or unprotected mucous membranes in, for example, the eyes, nose or mouth) with the blood or body fluids (vomit, urine, feces, sweat, semen) of a person who is sick with Ebola, or with objects like needles that have been contaminated with the virus, or with infected animals.
- Ebola is not spread through casual contact.
- Ebola is not spread through water, or food grown in the United States.
- There is no strong evidence Ebola is transmitted through the air.

What are the symptoms of Ebola?

- Sudden onset of fever, intense weakness, muscle pain, headache and sore throat are typical signs and symptoms. This is followed by vomiting, diarrhea, rash, impaired kidney and liver function, and in some cases, both internal and external bleeding.
- Most often it takes 8 to 10 days after infection to show symptoms of Ebola. However, symptoms can occur as early as 2 days and as late as 21 days after infection. Patients become contagious once they begin to show symptoms. They are not contagious during the incubation period.
- Lab tests have to be done to confirm Ebola. Our state's Public Health Laboratories are certified to perform this test. Any positive results of this preliminary test would be sent to the federal Centers for Disease Control and Prevention for confirmation.

Can I get Ebola from sick people coughing or sneezing on me?

Although we believe it is possible for someone to get sick if a person infected with Ebola virus sneezes or coughs droplets onto them, there is no evidence of this having happened. Ebola does not cause coughing and sneezing; the person who is sneezed or coughed on would have to be quite close (within three feet) and the person who is sneezed or coughed on would have to breathe in the droplets. Most importantly, the sick person would have to be showing symptoms of Ebola at the time.

Can I get Ebola from touching an infected surface?

Ebola virus on dried surfaces (such as doorknobs and countertops) can survive for several hours. However, virus in body fluids such as blood can survive up to several days at room temperature. Ebola is killed with powerful disinfectants such as bleach. Ultraviolet light and drying can also kill the virus.

Can I get Ebola from someone who visited Africa recently?

You do not have to worry about Ebola infection from contact with people who have been to West Africa and are not ill. Just because someone has been to West Africa or in an Ebola-affected area does not mean they are at risk for Ebola infection. Not all areas of West Africa are affected by the Ebola outbreak, and not all people from West Africa are at risk for Ebola.

Africa is the second-largest continent in the world and contains many countries – 54 to be exact. Just because someone has visited or is from Africa does not mean they have Ebola. It is important to remember that people with Ebola aren't contagious unless they are exhibiting symptoms. Travelers at airports in Ebola-affected countries are screened before departure, and if they are sick or have been exposed to Ebola they cannot board an airplane until it is safe for them to travel. Travelers are also being screened again at the U.S. airports that are the main points of entry from those countries. People who are ill or who have been exposed to Ebola receive medical care or monitoring by public health authorities, if necessary.

Where can I find information on travel safety?

- Updated Ebola information for travelers is available on the CDC's Traveler's Health site at <http://wwwnc.cdc.gov/travel/diseases/ebola>

Are my children safe in school?

- Students in schools are safe from Ebola unless they've had direct contact with someone who is sick with Ebola. There are no confirmed cases of Ebola in Washington State. To help get information out to teachers, students and parents, the Department of Health is working with the Office of the Superintendent for Public Instruction, the Department of Early Learning, and other organizations.

Can I get Ebola if I'm visiting someone in the hospital?

- Only a few hospitals in the United States are currently treating Ebola patients.
- Although, handling Ebola patients has been a challenge for a few facilities early on, hospitals have learned a lot and are putting that knowledge to use to improve already strong infection control systems. Procedures already in place in hospitals to prevent infection include having staff routinely wearing gloves, gowns, masks and other protective gear when caring for patients so that they don't come in contact with blood or other bodily fluids. However, because Ebola is highly infectious during the time Ebola patients are hospitalized, hospitals are working hard to strengthen their infection controls and to train staff.

Can my pets catch Ebola and can I get sick from an animal with Ebola?

- There is no evidence that pets become sick with Ebola from routine contact with people who are infected with the virus.
- There is no evidence that pets can transmit Ebola to humans through routine contact.
- We do suggest that, in the rare instance that a pet is determined to be potentially exposed, the pet in consultation with the State Public Health Veterinarian and Local Public Health.
- A potentially exposed pet should be evaluated by a veterinarian and should have limited contact with people for a minimum of three weeks from the time of potential exposure to the virus.
- CDC is working with the American Veterinary Medical Association and the U.S. Department of Agriculture to develop more specific guidance for pet owners and veterinarians.

What does it mean when we say exposed contacts are being monitored?

- People being monitored for the Ebola virus have been asked to stay indoors and away from others. They have also been asked to not take public transportation, and trained professionals from their local health offices are taking their temperatures and checking for symptoms twice daily.

What can we expect to happen with Ebola in the near future?

- Ebola will remain a threat as long as the outbreak continues in West Africa. It will take time to control the outbreak in West Africa.
- Healthcare, public health and governments at all levels will continue to increase efforts to prevent the spread of Ebola in the United States.

Are we ready to handle Ebola patients in Washington?

- Washington public health, our healthcare system and its partners have a long-standing and well-established disease monitoring and tracking system in place that looks for many diseases, including Ebola.
- Our local and state health officers have reached out to medical professionals and hospital administrators with reminders of the need to look for symptoms that could indicate Ebola virus disease, and then to ask about travel to affected countries or potential exposure.
- Our Public Health Laboratory is among 13 state labs nationwide that are qualified to conduct initial testing for Ebola. Our lab and staff serve as the testing resource for states in the northwest region. Specimens testing positive would go to CDC for confirmation.
- If there's a suspected Ebola case in Washington, we have public health staff trained and ready to identify contacts of patients, monitor contacts, and isolate ill contacts to stop the chain of transmission.
- We have strong infection control procedures in place in healthcare facilities. They are learning from the experiences of the first hospitals that handled Ebola patients in our country, and using those lessons to further strengthen procedures and training.

Are wastewater treatment facility workers at risk from water that comes from a hospital treating someone with Ebola virus disease?

First of all, there are no confirmed cases of Ebola in Washington State. Ebola is not a water-borne disease. According to the Centers for Disease Control and Prevention (CDC), there is no evidence to suggest that Ebola can spread through sources of water. The CDC, with technical assistance from the EPA, is working on interim guidance for wastewater workers to address concerns about potential Ebola exposure and personal protective equipment needs. When available, updated guidance will be posted on the CDC's website at: <http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/whats-new.html>. No wastewater facility workers in the United States have been infected with the virus to date.

Where can I get more information about Ebola?

- Please visit our [agency Ebola webpage](#) or the [CDC webpages on Ebola](#). You can also email any questions to us at prepare@doh.wa.gov