



Ebola: U.S. Provider Protocol and National Response Update

As the Ebola outbreak in West Africa continues, the threat of additional cases appearing in the United States persists. To date, there have been four confirmed cases in the United States; one patient has died, two have recovered, and a fourth is currently in isolation and receiving treatment in New York City. The Washington, D.C. office has been closely monitoring the spread of Ebola and the federal government's response both in the United States and abroad. While these situations continue to rapidly evolve, we understand that accurate and up-to-date information is critical for ensuring clients can make appropriate business and compliance decisions. A brief update on the current status of the U.S. response is below. While the primary focus of federal guidance has been to prepare hospitals, the military and transportation officers, other entities may be interested in the latest direction, information and data.

U.S. Provider Protocol and National Response Capability Improvements

The Centers for Disease Control and Prevention (CDC) has compiled all of the latest guidance, protocols and announcements for health care workers and facilities on a [single website](#). A vast array of additional information is available at the broader [CDC Ebola website](#). On Oct. 20, the CDC issued new guidelines for protective personal equipment (PPE) to be used by providers when treating Ebola patients. The new protocols, if followed, will prevent the exposure of any skin and requires supervised removal of the equipment. CDC also recommends the use of respirators and antiviral wipes to clean off used PPE.

The CDC also announced on a call this week that the federal government is working to identify up to 20 hospitals around the country that will serve as designated Ebola referral centers. The CDC is focusing these efforts on hospitals in the five cities with airports where all travelers from West Africa are now being directed (see below). The CDC simultaneously announced that the agency has expanded domestic training teams (known as "FAST teams") and four have been deployed to work with hospitals near the same five cities that have self-identified as willing to take potential Ebola patients.

The Pentagon has also [announced](#) that a 30-person expeditionary medical support team is being established to assist medical professionals in the United States treating Ebola patients. Defense Secretary Chuck Hagel instructed the chief of U.S. Northern Command to prepare and train the team of “20 critical care nurses, five doctors trained in infectious disease and five trainers in infectious disease protocols.”

States are also taking additional steps to supplement the federal response. For example, New York, New Jersey and Illinois have announced mandatory quarantines for certain health care workers returning from West Africa. Florida Governor Rick Scott has redirected \$7 million in Federal funds to purchase additional PPE, and Louisiana Governor Bobby Jindal has ordered enhanced state monitoring of travelers from West Africa.

Travel Restrictions and Traveler Monitoring

On Oct. 21, the Department of Homeland Security (DHS) [announced](#) that all travelers from Ebola-affected countries in West Africa will be received exclusively at one of five U.S. airports - New York’s JFK, Newark, Dulles, Atlanta and Chicago – and subject to enhanced screening. Public health authorities will also begin “active post-arrival monitoring” on Monday, Oct. 27, of travelers whose travel originates in Liberia, Sierra Leone or Guinea. According to the CDC, “active post-arrival monitoring” means that travelers without symptoms consistent with Ebola will receive daily follow-up from state and local health departments for 21 days following the date of their departure from West Africa. The six states where approximately 70 percent of incoming travelers are headed – New York, Pennsylvania, Maryland, Virginia, New Jersey and Georgia – have already taken steps to plan and implement active post-arrival monitoring. Active post-arrival monitoring will begin in all remaining states shortly thereafter. On Monday, Oct. 27, the CDC released [updated guidance](#) on how public health officials should monitor people at various levels of potential risk for infection based on the degree of their exposure to the virus, either in the United States or abroad.

Federal Government Leads

On Oct. 17, President Obama named Ron Klain, former chief of staff to Vice President Joe Biden, as the new “Ebola Czar.” On Oct. 23, the now-former Coordinator for Health Information Technology Karen DeSalvo was named as the new Acting Assistant Secretary for Health, a position that oversees the Surgeon General’s office and plays a significant role with respect to global health and disaster response.

Vaccine Production and Treatment Advances

With respect to vaccines, the World Health Organization (WHO) [reportedly](#) plans to begin human testing of vaccines on 20,000 health care workers and others in the Ebola-stricken countries as early as January. Researchers at the National Institute of Allergy and Infectious Diseases are also [conducting](#) the early phase trial to evaluate one vaccine, called VSV-ZEBOV. The private sector is also making efforts to spur the development of vaccines and treatments. For example, Johnson & Johnson announced that it will commit up to \$200 million to accelerate and expand the production of an Ebola vaccine and Facebook CEO Mark Zuckerberg and his wife have donated \$25 million to the CDC Foundation to help fight Ebola.

The International Situation

The federal government maintains that the first line of defense against an Ebola outbreak in the United States is stopping the spread of the disease in Africa. To date, more than 10,000 cases of Ebola have been reported in West Africa. Projections from the WHO suggest that the death toll from Ebola could reach 90,000 by the end of November. To address the crisis outside of U.S. borders, Congress has appropriated nearly \$1 billion to fund Department of Defense operations and the President has authorized the

dispatching of troops to the affected areas to help contain the spread in the region. At the same time, USAID and other agencies are actively seeking applicants to partner with them for the production of specific materials and to meet other needs.

This *GT Alert* was prepared by **Nancy E. Taylor** and **Danielle F. White**. Questions about this information can be directed to:

- > [Nancy E. Taylor](#) | +1 202 331 3133 | taylor@gtlaw.com
- > [Danielle F. White](#) | +1 202.331.3140 | whiteda@gtlaw.com
- > Or your [Greenberg Traurig](#) attorney

Albany +1 518.689.1400	Denver +1 303.572.6500	New York +1 212.801.9200	Shanghai +86 (21) 6391.6633
Amsterdam +31 (0) 20 301 7300	Fort Lauderdale +1 954.765.0500	Northern Virginia +1 703.749.1300	Silicon Valley +1 650.328.8500
Atlanta +1 678.553.2100	Houston +1 713.374.3500	Orange County +1 949.732.6500	Tallahassee +1 850.222.6891
Austin +1 512.320.7200	Las Vegas +1 702.792.3773	Orlando +1 407.420.1000	Tampa +1 813.318.5700
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Boston +1 617.310.6000	Los Angeles +1 310.586.7700	Phoenix +1 602.445.8000	Warsaw~ +48 22 690 6100
Chicago +1 312.456.8400	Mexico City+ +52 (1) 55 5029 0000	Sacramento +1 916.442.1111	Washington, D.C. +1 202.331.3100
Dallas +1 214.665.3600	Miami +1 305.579.0500	San Francisco +1 415.655.1300	Westchester County +1 914.286.2900
Delaware +1 302.661.7000	New Jersey +1 973.360.7900	Seoul∞ +82 (0) 2 369 1000	West Palm Beach +1 561.650.7900

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