

Public Health Management of Suspected EVD Cases

Pursuant to K.S.A. 65-118 and K.A.R. 28-1-2, Ebola virus is considered a “...disease unusual in incidence or behavior...” [as delineated in K.A.R. 28-1-2(a)(52)] and suspected cases of Ebola virus disease must be reported to KDHE by telephone within four (4) hours (Epidemiology Hotline: 877-427-7317). The KDHE-BEPHI will work with the local health department to immediately initiate case and contact investigations so public health measures to prevent potential transmission of Ebola virus can be implemented.

As noted above, KDHE-BEPHI has a detailed Disease Investigation Guideline (DIG) for viral hemorrhagic fever that should be utilized by KDHE and local health department staff (www.kdheks.gov/epi/Investigation_Guidelines/VHF_Disease_Investigation_Guideline.pdf).

Persons with suspected EVD shall be managed as described in the “Management of Persons Potentially Exposed to Ebola Virus and Suspected EVD Cases” section of this document. There are no specific Kansas regulations related to isolation of persons with EVD or quarantine of persons exposed to Ebola virus. Therefore, the provisions of K.A.R. 28-1-5, which specifies that the secretary of Kansas Department of Health and Environment or the local health officer shall order and enforce isolation and quarantine based on current medical knowledge of the particular infectious agent, apply. Statutory authority is provided in K.S.A. 65-101, 65-119, 65-128, and 65-202.

Persons in Kansas who have potential exposures to Ebola virus from a patient with EVD in Kansas or elsewhere in the United States shall be managed in a similar manner as those persons potentially exposed to Ebola virus in other countries; however, contact investigations and associated risk assessments shall be the responsibility of KDHE or the local health department.