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35 U.S. hospitals designated as Ebola treatment centers

CDC trains and assesses Ebola hospital readiness in collaborative effort

An increasing number of U.S. hospitals are now equipped to treat patients with Ebola, giving nationwide health system Ebola readiness efforts a boost. According to the Centers for Disease Control and Prevention (CDC), state health officials have identified and designated 35 hospitals with Ebola treatment centers, with more expected in the coming weeks.

Hospitals with Ebola treatment centers have been designated by state health officials to serve as treatment facilities for Ebola patients based on a collaborative decision with local health authorities and the hospital administration.

Ebola treatment centers are staffed, equipped and have been assessed to have current capabilities, training and resources to provide the complex treatment necessary to care for a person with Ebola while minimizing risk to health care workers.

“We continue our efforts to strengthen domestic preparedness and hospital readiness. I am pleased to announce that 35 hospitals have been designated by state health officials as Ebola treatment centers that are prepared, trained, and ready to provide care for a patient with Ebola,” said Health and Human Services Secretary Sylvia Burwell.

More than 80% of returning travelers from Ebola-stricken countries live within 200 miles of an Ebola treatment center. During their active monitoring, state or local public health authorities communicate every day with potentially exposed individuals to check for symptoms and fever for the 21 day incubation period of the Ebola virus.

“As long as Ebola is spreading in West Africa, we must prepare for the possibility of additional cases in the United States,” said CDC Director Tom Frieden, M.D., M.P.H. “We are implementing and constantly strengthening multiple levels of protection, including increasing the number of hospitals that have the training and capabilities to manage the complex care of an Ebola patient. These hospitals have worked hard to rigorously assess their capabilities and train their staff.”
The additional facilities supplement the three national bio containment facilities at Emory University Hospital, Nebraska Medical Center, and the National Institutes of Health (NIH), which will continue to play a major role in our overall national treatment strategy, particularly for patients who are medically evacuated from overseas. Facilities will continue to be added in the next several weeks to further broaden geographic reach.

CDC also released guidance for states and hospitals to use as they identify and designate an Ebola treatment center. The guidance covers the range of capabilities hospitals need in order to provide comprehensive care for patients with Ebola. HHS, through the CDC and the Office of the Assistant Secretary of Preparedness and Response (ASPR), also provided technical assistance to health departments and hospitals.

Each hospital with an Ebola treatment center has been assessed on-site by a CDC Rapid Ebola Preparedness (REP) team. The CDC REP team is staffed with experts in all aspects of caring for a patient with Ebola, including staff training, infection control, personal protective equipment (PPE) use, and details such as handling and management of the trash from the patient’s room. As of December 1st, CDC has conducted REP team assessments in over 50 hospitals in 15 states and Washington, D.C.

Because of the active monitoring program of returning travelers from countries where Ebola is present, federal health officials have a clear sense of where travelers from affected countries in West Africa are going and where Ebola treatment centers are most likely to be needed. The priority areas are jurisdictions served by the five international airports screening returning travelers for Ebola, cities with high proportion of returning travelers from West Africa, and cities with large populations of individuals from West Africa.

The 35 hospitals with Ebola treatment centers to date are:

- Kaiser Oakland Medical Center; Oakland, California
- Kaiser South Sacramento Medical Center; Sacramento, California
- University of California Davis Medical Center; Sacramento, California
- University of California San Francisco Medical Center; San Francisco, California
- Emory University Hospital; Atlanta, Georgia
- Ann & Robert H. Lurie Children’s Hospital of Chicago; Chicago, Illinois
- Northwestern Memorial Hospital; Chicago, Illinois
- Rush University Medical Center; Chicago, Illinois
- University of Chicago Medical Center; Chicago, Illinois
- Johns Hopkins Hospital; Baltimore, Maryland
- University of Maryland Medical Center; Baltimore, Maryland
- National Institutes of Health Clinical Center; Bethesda, Maryland
- Allina Health’s Unity Hospital; Fridley, Minnesota
- Children’s Hospitals and Clinics of Minnesota; St. Paul, Minnesota
- Mayo Clinic Hospital; Minneapolis, Minnesota
- University of Minnesota Medical Center, West Bank Campus, Minneapolis; Rochester, Minnesota
Active Monitoring program

CDC has worked with state and local health officials to implement an active monitoring program for travelers returning from affected countries in West Africa. Each traveler, on entry to the U.S., is provided with a CARE (Check and Report Ebola) kit including a thermometer, temperature log, contact information with the State health department, and wallet card with important information. Since inception of the program, more than 3,000 travelers have been monitored more than 30,000 times by state or local health departments to check daily for fever or other symptoms. In each case since implementation of the program, travelers who have experienced fever or other Ebola compatible symptoms have been connected with the health department through this process and safely transported to a facility that was ready to care for them using appropriate infection control.

Assessment hospitals -- careful bridge to hospitals with Ebola treatment centers

In addition to designated hospitals to treat Ebola patients, CDC has been working with state and local public health officials to identify Ebola assessment hospitals. Assessment hospitals are hospitals identified by state health officials, in collaboration with local health authorities and the hospital administration, as the point of referral for those individuals being actively monitored and who develop
symptoms compatible with Ebola such as fever.

These hospitals have the capability to: evaluate and care for someone who is having the first symptoms of Ebola for up to 96 hours; initiate and coordinate testing for Ebola and for other diseases alternative diagnoses; and either rule out Ebola or transfer the individual to an Ebola treatment center, as needed.

An assessment hospital would only care for a patient who might have Ebola during the time before a confirmed diagnosis is made until it then transfers the patient to an Ebola treatment center.

While no states had such plans in September, 15 states that have the majority of the travelers now have plans in place to evaluate persons under investigation and for providing care for up to 96 hours while testing can be arranged. CDC also released guidance for states and hospitals to use as they identify Ebola assessment hospitals.

**Keeping Americans safe**

The designated hospitals add to U.S. Ebola readiness efforts. However, all health care workers at hospitals and other health care facilities should be trained and able to recognize symptoms, safely isolate a potential Ebola patient, and contact public health authorities for guidance on next steps for safely managing the patient. Since July, HHS, with leadership from CDC, has conducted and continue to conduct extensive outreach to the health care community, including hospitals, clinicians, healthcare unions, and medical and nursing provider associations.

CDC has educated nearly 150,000 healthcare workers via webinars, and trained more than 525,000 via online clinical resources, to assure that healthcare workers are trained and able to recognize and safely isolate a potential Ebola patient in the unlikely event that such a patient presents unexpectedly. CDC continues to conduct infection control training.

In addition, CDC Ebola Response Teams (CERT), made up of experts in epidemiology, infection control, laboratory, and communications stand ready to deploy to any hospital in the United States with probable Ebola cases.

CDC is now supporting 42 state and local laboratories throughout the county to perform rapid Ebola testing. Four months ago only CDC and the US Armed Forces laboratory could test for Ebola. These additional laboratories capable of diagnosing Ebola cut the time needed to rule out a person for Ebola or confirm a case and speed the patient’s transport and treatment in a specialized Ebola treatment center.

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