## Zika in the ED: How Emergency Care Staff Can Take Action

Clinician Outreach and Communication Activity (COCA) Call November 1, 2016



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## **Objectives**

At the conclusion of this session, the participant will be able to:

- Outline the importance of screening protocols for Zika.
- □ Review nursing assessment and clinical interventions as it relates to Zika.
- Describe the process for reporting Zika cases.
- □ Discuss patient education and discharge teaching for any people who may be at risk for, exposed to, or diagnosed with Zika.

### **TODAY'S MODERATOR**



#### Satish Krishna Pillai, MD, MPH

Commander, United States Public Health Service
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### **TODAY'S PRESENTER**



#### Jon Mark Hirshon, MD, PhD, MPH

Professor, Department of Emergency Medicine and Department of Epidemiology and Public Health University of Maryland School of Medicine American College of Emergency Physicians

## **TODAY'S PRESTENTER**



#### Monica Escalante Kolbuk, MSN, RN, CEN

Senior Associate
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## Zika Update: What Emergency Care Providers Need to Know



Presented by:

Jon Mark Hirshon, MD, PhD, MPH November 1, 2016



## **Mosquito-Borne Viruses**

- West Nile Virus
- Dengue
- Zika Virus
- Chikungunya
- Yellow Fever
- St. Louis Encephalitis

- Jamestown Canyon
   Virus
- Western Equine Encephalitis
- Eastern Equine Encephalitis
- La Crosse Encephalitis

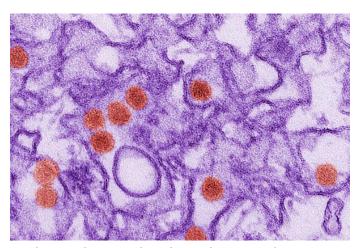
And many others...



## **Terms**

- Arboviruses:
  - ARthropod-BOrne virus
- Arthropods
  - E.g. mosquitos, ticks, sandflies
- Flaviviridae (family)
  - Flavivirus (genus)
    - Single stranded RNA viruses

#### **Zika Virus**



http://www.cdc.gov/media/images/dpk/2016/dpk-zika/zika-virus-American College of microscope-1000px.jpg

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## **Arboviruses**

- Transmitted by arthropods
- Can have rare person-to-person transmission
  - Blood borne
    - Transfusion, sharing needles
  - Organ transplantation
  - Breast feeding
  - Intrauterine
  - Sexual transmission

#### Aedes aegypti



http://phil.cdc.gov/phil/details\_linked.asp?pid=9261



## **Major Arbovirus Viral Families**

- Family <u>Bunyaviridae</u>
  - Rift Valley, Crimean—Congo hemorrhagic
- Family Flaviviridae
  - Dengue, West Nile, Zika, Yellow Fever
- Family Reoviridge
  - Equine encephalosis
- Family <u>Togaviridae</u>
  - Chikungunya, Western equine encephalitis



## Zika Virus

Virus genus	Flavivirus
Transmission	Mosquito-borne: <i>Aedes aegypti, Aedes albopictus</i>
Amplifying host	Humans/primates
<b>Global Distribution</b>	Tropical
<b>U.S. Continental Distribution</b>	Florida (currently)
Vaccine	None available
Treatment	Symptomatic



## Who is at risk?

- Travelers to parts of
  - Central and South America
  - Oceania/Pacific Islands
  - Check the CDC for the most up to date information
    - https://www.cdc.gov/zika/geo/active-countries.html
- In the United States:
  - Puerto Rico
  - Localized areas around Miami, Florida
- Partners of patients with Zika



## **Clinical Disease**

- Most individuals with Zika are <u>asymptomatic</u>
- If symptomatic, typical complaints include:
  - Maculopapular rash
    - Typically pruritic
  - Fever (usually  $< 38.5^{\circ}$ C)
  - Arthralgia/myalgia
  - Conjunctivitis- nonpurulent
  - Conjunctival hyperemia
  - Headache/retro-orbital pain
  - Peri-articular edema



## **Serious Complications**

Can cause Guillain- Barre (rare)

- Pregnant women infected with Zika
  - Serious congenital malformations (e.g.: microcephaly)
  - Pregnancy complications (e.g.: miscarriage)



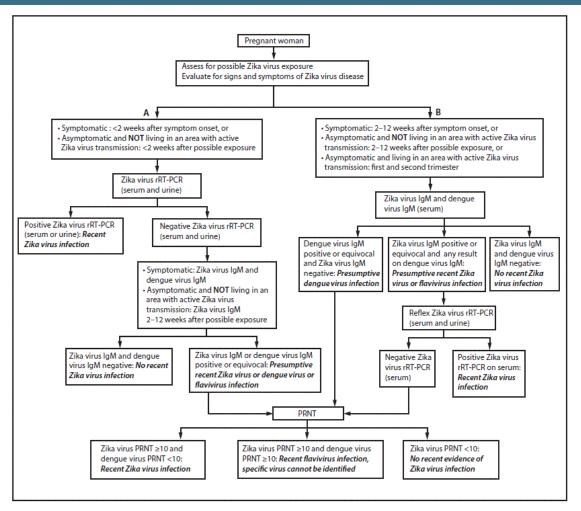
## Diagnosis

- Diagnosis based upon travel history and symptoms
- Testing for Zika
  - CDC and several state/local health departments are testing for Zika virus
  - No currently available approved commercial test
    - RT-PCR assay and MAC-ELISA available
      - FDA has authorized the use of this test under an Emergency Use Authorization (EUA)

**Emergency Physicians** 

 For updated information, visit the CDC website: http://www.cdc.gov/zika/hc-providers/testing-for-zikavirus.html

## Updated Interim CDC Guidance For Testing Pregnant Women



## Complicated testing algorithm

 Test cross-reactivity with other Flaviviruses

#### **Bottom line:**

- Check CDC website for updated guidance
- Communicate with:
  - Hospital's infection control specialists
  - Local health department



### **Treatment**

- Treatment is symptomatic and supportive
  - Rest
  - Fluids
  - Acetaminophen
    - Not aspirin or other non-steroidal anti-inflammatory dugs (NSAIDs)

## What to tell a concerned patient

- Zika is generally asymptomatic or a mild disease
- Individuals are at risk if
  - Travelled to an area with Zika transmission
  - Have sex with someone who has been infected with Zika
    - Someone who has travelled to an endemic area
- Patients should take measures to prevent transmission



## What to tell a pregnant patient

- If a patient is pregnant and may have Zika, they can contact: http://mothertobaby.org/
  - Call: 1-866-626-6847 (both English and Spanish)





## **Prevention Measures: Travelers**

- If traveling to an endemic area
  - Wear pants and long sleeved shirts
  - Use approved mosquito repellants
  - Stay in places with screening/air-conditioning
- Pregnant women should avoid travel to Zika endemic areas



## **Preventive Measures: Sexual Partners**

- For patients at risk for sexual transmission
  - Abstain from sex or use a barrier method
    - At least 8 weeks after illness onset if a female partner is likely to have Zika
    - At least 6 months after illness onset if a male partner is likely to have Zika



## Conclusion

"Zika is not contagious in the way that Ebola is, nor is it as lethal (fever, rash, joint pain) but it appears to strike in an especially cruel way – depressing brain growth in babies born to infected mothers. And like so many other pathogens that preceded it, the Zika virus has seemingly whirled out of nowhere, reinforcing how difficult it is to predict confidently which ones will go rogue."



# Monica Escalante Kolbuk, MSN, RN, CEN Senior Associate Institute for Quality, Safety and Injury Prevention



## What is screening?

- A strategy to identify unrecognized disease
- Occurs in various settings
- Enables early detection of disease
- Allows early response for intervention



## Importance of Zika Screening

- Helps to identify exposed persons earlier
- Enables early intervention and treatment
- Reduces the possibility of further disease transmission
- Allows for public health surveillance



## Who Should be Screened for Zika Virus?



## **Screening for Zika Virus**

- Chief complaint
- Exposure history
  - Have you had any recent travel?
  - Has anyone close to you recently travelled?
- Understand areas that are impacted
  - https://www.cdc.gov/zika/geo/index.html
- Updated Interim Pregnancy Guidance Testing Algorithm
  - http://www.cdc.gov/zika/pdfs/testing\_algorithm.pdf





#### Triage Tips:

Identify exposure history and at-risk patients

Has the patient recently traveled to or lived in an area where Zika virus



Visit CDC Zika Geographic Distribution online for updates.

- Identify Zika signs and symptoms
- Isolate patient and determine necessary personal protective equipment (PPE)
- Inform hospital infection control and other staff at risk of exposure



## ZIKA VIRUS

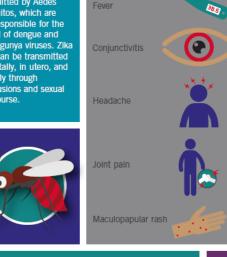
#### What Emergency Nurses Need to Know

symptoms?

What are the signs and

#### What is Zika?

A mosquito-borne viral disease that is transmitted by Aedes mosquitos, which are also responsible for the spread of dengue and chikungunya viruses. Zika virus can be transmitted perinatally, in utero, and possibly through transfusions and sexual intercourse.



#### How is it treated?

- There is no specific antiviral treatment available
- Treatment is generally supportive. Recommendations include:



Analgesics and antipyretics



. To reduce the risk of hemorrhage, avoid aspirin and other non-steroidal anti-inflammatory drugs (NSAIDS) until dengue virus can be ruled out as the infectious agent

The illness is usually mild with symptoms lasting several days to a week. Severe disease is uncommon. There is currently no vaccine available, but Zika is preventable.

#### Can Zika be transmitted to me by an infected patient?

- Zika virus is primarily transmitted through the bite of an infected Aedes mosquito
- It is unlikely that you will contract the Zika virus while caring for an infected patient
- There have been reports of transmissibility through infected blood and sexual transmission. Therefore, to reduce the risk of transmission:
  - Use standard precautions to reduce the risk of blood and bodily fluid exposures



 Follow your institution's infection control policies for appropriate personal protective equipment







#### What should I tell my patients?

- Always give your patients the most up-to-date information from reputable sources
- If your patient has recently returned from a Zika-affected country. instruct him or her to watch for signs and symptoms of Zika for two (2) weeks and seek medical care if symptoms appear
- Educate patients infected with Zika to protect themselves from further mosquito exposure, especially during the first few days of illness to prevent other mosquitoes from becoming infected. This helps reduce the risk of local transmission.
- Instruct your patients to take precautions to avoid getting bitten by mosauitoes
- Inform pregnant patients to follow the CDC travel advisory and consider postponing travel to Zika-affected countries





#### **Triage Tips:**

Identify exposure history and at-risk patients

• Has the patient recently traveled to or lived in an area where Zika virus



Visit CDC Zika Geographic Distribution online for updates.

- Identify Zika signs and symptoms
- Isolate patient and determine necessary personal protective equipment (PPE)
- Inform hospital infection control and other staff at risk of exposure

#### **Fast Facts:**

- Zika virus was first identified in Uganda in 1947
- · Zika virus is transmitted by the same type of mosquito that carries dengue, yellow fever, and chikungunya
- Mosquitoes that spread Zika virus bite mostly during the daytime
- Onset of symptoms occur

2 to 7 days after being bitten

• 1 in 5 people with Zika virus will become symptomatic



 There may be a link between the Zika virus and a birth defect. microcephaly





www.cdc.gov/zika/

www.who.int/mediacentre/factsheets/zika/en/

February 3, 2016



## **Nursing Assessment**

### Identify exposure history

- Primary screening
- Travel history

## Identify signs and symptoms

- Fever
- Rash
- Joint pain
- Conjunctivitis
- Muscle pain
- Headache





## **Nursing Assessment-Infection Control**

#### Isolate

- Standard precautions
  - Body fluids, including blood, vaginal secretions, and semen, have been implicated in transmission of Zika virus.
- Occupational exposure that requires evaluation includes:
  - Percutaneous exposure
  - Exposure of non-intact skin or mucous membranes to any of the following: blood, body fluids, secretions, and excretions.
- Inform
- Further evaluation and management



## **Clinical Interventions**

- Supportive care for symptoms
- Patient education & bereavement support
- Blood testing
- Ultrasound
- Zika Pregnancy Hotline 770-488-7100





## **Reporting of Zika Cases**

- Zika virus disease is a nationally notifiable condition
- Laboratory testing will not be completed in the emergency department
- Contact, state, local, or territorial health departments to facilitate diagnosis



## Patient Education and Discharge Teaching

- Target education
- Up-to-date information from reputable sources
- Use CDC Zika Communication Toolkits and Resources
- Follow-up with OBGYN



## Patient Education and Discharge Teaching Continued

- What to expect after testing
- Caution about mosquito exposure
- Abstaining from sexual intercourse or use of condoms
- Pregnancy planning
- Referral to maternal fetal medicine specialists
- Questions about possible infection/diagnosis refer to Mother To Baby 1-866-626-6847





## Conclusion

- Treat immediate symptoms
- Provide psychosocial support
- Ensure appropriate patient education, discharge information, and referrals are provided
- Visit the CDC website for updates and information



## References

- Emergency Nurses Association (2016). ENA Zika Virus Infographic: What Emergency Nurses Need to Know. Retrieved from: <a href="https://www.ena.org/practice-">https://www.ena.org/practice-</a> research/Practice/Infectious/Documents/Zika.pdf
- U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (2016). Zika Virus: For Healthcare Providers. Retrieved from: <a href="https://www.cdc.gov/zika/hc-providers/index.html">https://www.cdc.gov/zika/hc-providers/index.html</a>
- U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (2016). Zika Virus: Clinical Evaluation and Disease. Retrieved from: <a href="https://www.cdc.gov/zika/hc-providers/preparing-for-zika/clinicalevaluationdisease.html">https://www.cdc.gov/zika/hc-providers/preparing-for-zika/clinicalevaluationdisease.html</a>
- U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (2016). Zika Virus: Testing for Zika Virus. Retrieved from: <a href="https://www.cdc.gov/zika/hc-providers/testing-for-zikavirus.html">https://www.cdc.gov/zika/hc-providers/testing-for-zikavirus.html</a>
- U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (2016). Zika Virus: US Zika Pregnancy Registry. Retrieved from: <a href="https://www.cdc.gov/zika/hc-providers/registry.html">https://www.cdc.gov/zika/hc-providers/registry.html</a>
- U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (2016). Zika Virus: Reporting, Data Collection, and Findings. Retrieved from: <a href="https://www.cdc.gov/zika/hc-providers/reporting-collection-findings.html">https://www.cdc.gov/zika/hc-providers/reporting-collection-findings.html</a>
- U.S. Department of Health and Human Services. (2014). Health Screening. Retrieved from <a href="http://www.nlm.nih.gov/medlineplus/healthscreening.html">http://www.nlm.nih.gov/medlineplus/healthscreening.html</a>



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