



**Tarrant County  
Public Health**

## Message from Tarrant County Public Health Director

Dear Tarrant County Residents -

In light of the recent Ebola situation in Dallas, Tarrant County Public Health wants to assure you that our community in Tarrant County is safe. In recent developments over the weekend, you may have heard that approximately 48 *"Contacts"* have finished their 21-day monitoring period for symptoms and have come off the watch list. We celebrate this fact and hope that the remaining *"Contacts"* finish their monitoring period in the same way and remain symptom free. As an assuring reminder, many of these contacts are now going to start coming off their watch list over the next several days.

We also want you to know that Tarrant County Public Health is closely monitoring all *"Contacts"* in Tarrant County to check for symptoms. We have not had a *"Case"* of Ebola in Tarrant County.

Please see the attached one page guidance document we created. It explains some of the commonly used terms and gives some brief background on how Ebola spreads.

If you have further questions, feel free to call the Tarrant County Ebola Information hotline at 817-248-6299.

Sincerely,

A handwritten signature in cursive script that reads "Veerinder Taneja".

Veerinder (Vinny) Taneja  
Director  
Tarrant County Public Health



## Tarrant County Public Health Guidance Regarding Ebola

The Ebola epidemic in Africa is likely to continue for months and the recent “Case” in Dallas that had traveled from Liberia illustrates the need for vigilance. This guidance document is intended for general distribution to the public.

### Background

Ebola is a viral disease endemic to parts of Africa where sporadic outbreaks have occurred since it was first described in 1976. Symptoms of the disease include fever, severe headache, sore throat, malaise (not feeling well), muscle pain, vomiting, rash, diarrhea, stomach pain, unexplained bleeding or bruising.

Ebola is spread from a symptomatic Ebola “Case” to others via direct contact with broken skin or mucous membranes such as the eyes, nose, or mouth via:

- blood or body fluids (including but not limited to urine, saliva, sweat, feces, vomit, breast milk, and semen) of a person who is sick with Ebola (a “Case”); or
- objects (like needles and syringes) that have been contaminated with the virus.

Upon onset of symptoms the person (a “Case”) is infectious and the infectiousness increases as the disease progresses. It is not an airborne disease. Use of standard, contact, and droplet precautions is considered effective in preventing transmission and should be used for patients suspected of having the Ebola virus disease.

The following diagram illustrates how this disease is transmitted.

*(RED)* A person who is sick and has been diagnosed and **Lab Confirmed** to have Ebola, is called a “Case”.

*(YELLOW)* A person who came in close proximity with a symptomatic Ebola “Case” is called a “Contact”. This person, **without symptoms**, is not infectious. Public Health monitors “Contacts” for symptoms of Ebola so that they may be given health care quickly and prevents further exposure of other individuals.

*(GREEN)* A person, who lives with a “Contact” and has not exposed to an Ebola “Case” is considered a “No Risk Person” for transmission. This “No Risk Person” is often referred to as *contact-of-a-“Contact”*. Since this person has not been exposed to Ebola, s/he cannot pass the disease to someone else. From a Public Health perspective, this individual may conduct normal daily activities.



Example:

A person who lives with a “Contact” without symptoms has not been exposed to Ebola and therefore cannot transmit the disease. This individual is considered a “No Risk Person” often referred to as *contact-of-a-“Contact”*.