



DIVISION OF PUBLIC HEALTH

1 WEST WILSON STREET
P O BOX 2659
MADISON WI 53701-2659

Scott Walker
Governor

Kitty Rhoades
Secretary

State of Wisconsin

Department of Health Services

608-266-1251
FAX: 608-267-2832

dhs.wisconsin.gov

TO: Directors, Local Health Departments, Tribal Health Agencies, Wisconsin Hospitals and Infection Preventionists

FROM: James Kazmierczak, DVM, MS, State Public Health Veterinarian, Bureau of Communicable Diseases, Division of Public Health

RE: WSLH is now approved to test for Ebola Virus

DATE: November 24, 2014

The Wisconsin State Laboratory of Hygiene is now approved to perform the RT-PCR assay to detect Ebola Virus (EV). This is welcome news because in-state testing will reduce turnaround time for results by minimizing the amount of time the specimen spends in transit.

However, basic guidance regarding testing of patients for possible Ebola virus disease has not changed:

- A. All laboratory tests for EV infection must be approved by both the Wisconsin Division of Public Health and the CDC. Testing for EV will only be considered in a person who has both consistent clinical symptoms and risk factors as follows:
 - 1) Clinical criteria, which include fever of greater than 100.4° F or 38.0° C, or other compatible symptoms such as severe headache, muscle pain, vomiting, diarrhea, abdominal pain, or unexplained hemorrhage
AND
 - 2) Epidemiologic risk factors sustained within 21 days before the onset of symptoms, such as contact with blood or other body fluids of a patient known to have or suspected to have EVD; travel to an area where EV transmission is active (currently Liberia, Sierra Leone, Guinea, and Mali); participation in funeral rituals, or direct handling of bats or nonhuman primates from disease-endemic areas.
- B. The healthcare facility should collect 2 whole blood specimens using 4mL **PLASTIC** EDTA tubes. Do NOT submit specimens in glass containers or in heparinized tubes. Specimens should be immediately stored and refrigerated or transported at 2-8°C on cold-packs.
- C. Specimens must be packaged for transport as a Suspect Category A Infectious Substance. Each Category 2 hospital should have staff trained and certified in packaging these agents. Details can be found at www.cdc.gov/vhf/ebola/hcp/packaging-diagram.html .
- D. Specimens must be accompanied by the following forms (just send 1 set of forms):
 - **CDC submission form CDC 50.34** www.cdc.gov/laboratory/specimen-submission/pdf/form-50-34.pdf (NOTE: This form needs to be filled out on-line. Once form is completed, click the printer icon on the PDF toolbar at the top. A barcode will be automatically generated on the form. You can then save the form and print it off to accompany the specimens.)

- MORE -

- **CDC Viral Special Pathogens Branch submission form**
www.cdc.gov/ncezid/dhcpp/vspb/pdf/specimen-submission.pdf
- **WSLH requisition form CDD-A**
- **Chain of custody form** that will be provided by the Wisconsin State Patrol.

After consultation with DPH and approval of testing is granted:

- A. Let the DPH epidemiologist know when the specimen would be ready for shipment at your facility.
- B. DPH will contact Wisconsin State Patrol staff who have agreed to transport properly packaged specimens to the WSLH in Madison. Note that the State Patrol will not transport improperly packaged specimens.
- C. When the trooper arrives to pick up the specimen, there will be a chain of custody form to sign when the handoff occurs.

Once the testing is completed, results will be transmitted immediately to the submitting laboratory, DPH, and CDC. Any positive result will be reported as presumptive positive and will be confirmed at the CDC. However, a positive result from the WSLH is actionable and the patient should be considered to be a true case while the CDC test is pending. A negative result will be reported as negative, with no confirmatory test performed at CDC.

It is important to understand that virus may not be detectable early in the course of the illness. For this reason, if a negative result is obtained on a specimen that was collected < 3 days after onset of symptoms, a later specimen would be needed to completely rule out Ebola virus infection.

Technical questions about the Ebola virus RT-PCR assay can be directed to the WSLH at 608-263-3280. Questions regarding patient triage and qualifications for being tested should go to the DPH, Bureau of Communicable Diseases at 608-267-9003.