Why was the nurse who has Ebola allowed to travel?

At the time she boarded the plane on October 13, the hospital worker was monitoring herself for fever and other symptoms of Ebola, but did not fall into any of the risk categories that required restriction of movement based on CDC’s movement and monitoring guidelines. Therefore, there was no known reason at that time for her to be restricted from boarding the airplane.

CDC is not easily accessible with long hold times. How can I get into contact with them regarding my questions about Ebola?

There are two primary ways to get your Ebola questions answered by CDC:

- www.cdc.gov/Ebola
- CDC-INFO: 800-CDC-INFO, or (800) 232-4636
  - CDC-INFO is the CDC’s national contact center. It is your single source for accurate, timely, consistent, and science-based information on a wide variety of disease prevention and health promotion topics. Representatives are available to answer your questions in English and Spanish.

  In response to the overwhelming demand, the agency expanded CDC-INFO’s hours from 8:00 AM – 8:00 PM to 8:00 AM – 11:00 PM on October 15, 2014. Starting October 17, 2014, CDC-INFO was further expanded to 24/7 coverage. We did have unacceptably long wait times initially, but as of October 17, wait times have dropped to between 2 and 6 minutes.

Given that a healthcare worker with Ebola traveled by air, is it safe to fly in the United States?

Yes. Airline travelers in the United States are extremely unlikely to be infected with Ebola virus. CDC believes that there is minimal risk to passengers on the same plane as the infected healthcare worker. However, as a precaution, CDC is working with the airline to contact passengers who travelled on two flights the healthcare worker was on.

- Ebola can be spread by an infected person only when that person is sick with fever and other symptoms.
- Ebola is not as infectious as the flu or the common cold.
- How easily the infection is spread from one person to another is directly related to the level of virus in the body.
  - On day one of illness when a person develops a fever, the level of virus in the body is low, but not zero.
As a person gets sicker with Ebola and the symptoms become more intense, the virus level increases in the body and fluids from the person’s body becomes more infectious.

**How long does Ebola virus live on surfaces and how does it spread? How is it killed?**

**Ebola on surfaces**

Ebola virus is killed with hospital-grade disinfectants (such as household bleach). Ebola virus on dry surfaces, such as doorknobs and countertops, can survive for several hours; however, virus in body fluids (such as blood) can survive up to several days at room temperature.

**Ebola virus spread**

There are several ways the virus can be spread to others. These include:

- direct contact with the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person who is sick with Ebola
- contact with objects (like needles and syringes) that have been contaminated with the blood or body fluids of an infected person or with infected animals
  - The virus in the blood and body fluids can enter another person’s body through broken skin or unprotected mucous membranes in, for example, the eyes, nose, or mouth.

**Ebola disinfection**

Use a U.S. Environmental Protection Agency (EPA)-registered hospital disinfectant with a label claim for a non-enveloped virus (e.g., norovirus, rotavirus, adenovirus, poliovirus) to disinfect environmental surfaces in rooms of patients with suspected or confirmed Ebola virus infection.

- Although there are no products with specific label claims against the Ebola virus, enveloped viruses such as Ebola virus are susceptible to a broad range of hospital disinfectants (such as bleach) used to disinfect hard, non-porous surfaces.
- As a precaution, selection of a disinfectant product with a higher potency than what is normally required for an enveloped virus is being recommended at this time.
- EPA-registered hospital disinfectants with label claims against non-enveloped viruses (e.g., norovirus, rotavirus, adenovirus, poliovirus) are broadly antiviral and capable of inactivating both enveloped and non-enveloped viruses.

**Which flights (day and times) did the healthcare worker who tested positive for Ebola fly on?**

At approximately 1:00 a.m. (Mountain Time) on Oct. 15, Frontier was notified by CDC that a customer traveling on Frontier Airlines flight 1143 Cleveland to Dallas/Fort Worth on Oct. 13 had since tested positive for Ebola. The flight landed in Dallas/Fort Worth at 8:16 p.m. (Central Time), Oct. 15 and remained overnight at the airport having completed its flying for the day. At that point the aircraft received a thorough cleaning per normal procedures consistent with CDC guidelines prior to returning to service the next day. The plane was also disinfected again in Cleveland.
• Frontier responded immediately upon notification from CDC by removing the aircraft from service and is working closely with CDC to identify and contact customers who may have traveled on flight 1143.

• Based on additional information obtained during interviews of close contacts to the second healthcare worker from Texas Presbyterian Hospital who tested positive for Ebola, CDC is expanding its outreach to airline passengers now to include those who flew from Dallas Fort Worth to Cleveland on Frontier flight 1142 on Oct. 10.

For more information, please see http://www.cdc.gov/media/releases/2014/s1015-airline-notification.html.


What are you doing to monitor the Frontier passengers on the two flights?

CDC believes that there is minimal risk to passengers on the same plane as the nurse, based on previous experience involving sick passengers with Ebola or another similar virus, what we know about how the virus is spread, and the health status of the nurse. However, out of an abundance of caution, CDC is working together with state health departments and Frontier Airlines to contact all passengers and crew traveling on Frontier Airline flight 1142 from Oct. 10 and flight 1143 from Oct. 13. As of Oct. 17, all of the travelers on flight 1143 arriving in Dallas on Oct. 13 and most of the travelers on flight 1142 in Cleveland on Oct. 10 have been contacted.