Status of Ohio Hospitals Re: Ebola Treatment

October 19, 2022

Recent events both here in Ohio and across the world make clear that the State of Ohio and all Ohio healthcare partners must sustain and evolve our efforts to prepare for and respond to highly infectious diseases that produce severe disease in humans. Ohio’s hospitals devote staff and resources to ensure they are prepared as soon as a potential patient presents to their facility. All hospitals in Ohio have the ability to identify and isolate a patient presenting with an infectious disease. During the entire coronavirus pandemic, hospitals have demonstrated their increased ability to rapidly deploy and maintain screening protocols for both employees and patients.

In recent years, CDC/ASPR strategy has focused on strengthening regional infrastructures through federally designated Regional Ebola and Other Special Pathogens Treatment Centers (RESPTC*), including the recent announcement of an additional center in the Midwest. If laboratory testing confirms Ebola or another special pathogen, Ohio would look to CDC/ASPR for guidance on which RESPTC facility would receive the patient for treatment. EMS transport companies have been identified in the event ODH is required to coordinate transport of a patient with Ebola or other special pathogen to the most appropriate level of care or an airport. Coordination of care for patients for duration of their illness will be determined by the hospitals, state and local public health officials, and CDC/ASPR experts.

The tiered response within Ohio is comprised of seven (7) Ebola Assessment Hospitals (EAHs) and front-line hospitals. The seven (7) funded EAHs remain ready to safely receive and isolate the patient. The following are current EAHs in Ohio: Mercy Health St. Rita’s, The Ohio State University Wexner Medical Center, Nationwide Children’s, Good Samaritan Hospital, The Christ Hospital, University Cincinnati Medical Center, and Cincinnati Children’s Hospital Medical Center. These assessment hospitals are prepared to immediately evaluate the patient, coordinate testing, and provide care for up to 96 hours.

We believe our frontline hospitals and Ebola Assessment Hospitals are well-positioned to manage patients until our federal partners direct transfer to an Ebola Treatment Center based on clinical need. The CDC/ASPR recognizes that the highest level of Ebola care, a Regional Ebola and Other Special Pathogens Treatment Centers (RESPTC*), requires significant capital and human resource investment and has shifted funding to a more regional approach and while MetroHealth in Cleveland is no longer serving as an Ebola Treatment Center, the CDC/ASPR has added RESPTC facilities in the Midwest.

Facilities with individuals suspected to have Ebola, or another special pathogen, will inform hospital infection preventionists and the local health department. These facilities are equipped to provide care for at least 12-24 hours while assessment and evaluation is completed and optimal patient placement to one of the seven EAHs is determined.

Ohio’s strategy for response is managed through the Administration for Strategic Preparedness and Response (ASPR-previously known as the Office of the Assistant Secretary of Preparedness and Response).