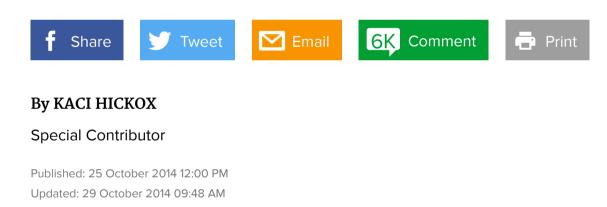




Ebola

?

Her story: UTA grad isolated at New Jersey hospital in Ebola quarantine



(Editor's note: Kaci Hickox, a nurse with degrees from the University of Texas at Arlington and the Johns Hopkins University, has been caring for Ebola patients while on assignment with Doctors Without Borders in Sierra Leone. Upon her return to the U.S. on Friday, she was placed in quarantine at a New Jersey hospital. She has tested negative in a preliminary test for Ebola, but the hospital says she will remain under mandatory quarantine for 21 days and will be monitored by public health officials. Dr. Seema Yasmin, a Dallas Morning News staff writer, worked with Hickox as a disease detective with the Centers for Disease Control and Prevention. With Yasmin's help, Hickox wrote this first-person piece exclusively for the News.)

I am a nurse who has just returned to the U.S. after working with Doctors Without Borders in Sierra Leone - an Ebola-affected country. I have been quarantined in New Jersey. This is not a situation I would wish on anyone, and I am scared for those who will follow me.

I am scared about how health care workers will be treated at airports when they declare that they have been fighting Ebola in West Africa. I am scared that, like me, they will arrive and see a frenzy of disorganization, fear and, most frightening, quarantine.

I arrived at the Newark Liberty International Airport around 1 p.m. on Friday, after a grueling twoday journey from Sierra Leone. I walked up to the immigration official at the airport and was greeted with a big smile and a "hello."

I told him that I have traveled from Sierra Leone and he replied, a little less enthusiastically: "No problem. They are probably going to ask you a few questions."

He put on gloves and a mask and called someone. Then he escorted me to the quarantine office a few yards away. I was told to sit down. Everyone that came out of the offices was hurrying from

room to room in white protective coveralls, gloves, masks, and a disposable face shield.

One after another, people asked me questions. Some introduced themselves, some didn't. One man who must have been an immigration officer because he was wearing a weapon belt that I could see protruding from his white coveralls barked questions at me as if I was a criminal.

Two other officials asked about my work in Sierra Leone. One of them was from the Centers for Disease Control and Prevention. They scribbled notes in the margins of their form, a form that appeared to be inadequate for the many details they are collecting.

I was tired, hungry and confused, but I tried to remain calm. My temperature was taken using a forehead scanner and it read a temperature of 98. I was feeling physically healthy but emotionally exhausted.

Three hours passed. No one seemed to be in charge. No one would tell me what was going on or what would happen to me.

I called my family to let them know that I was OK. I was hungry and thirsty and asked for something to eat and drink. I was given a granola bar and some water. I wondered what I had done wrong.

Four hours after I landed at the airport, an official approached me with a forehead scanner. My cheeks were flushed, I was upset at being held with no explanation. The scanner recorded my temperature as 101.

The female officer looked smug. "You have a fever now," she said.

I explained that an oral thermometer would be more accurate and that the forehead scanner was recording an elevated temperature because I was flushed and upset.

I was left alone in the room for another three hours. At around 7 p.m., I was told that I must go to a local hospital. I asked for the name and address of the facility. I realized that information was only shared with me if I asked.

Eight police cars escorted me to the University Hospital in Newark. Sirens blared, lights flashed. Again, I wondered what I had done wrong.

I had spent a month watching children die, alone. I had witnessed human tragedy unfold before my eyes. I had tried to help when much of the world has looked on and done nothing.

At the hospital, I was escorted to a tent that sat outside of the building. The infectious disease and emergency department doctors took my temperature and other vitals and looked puzzled. "Your temperature is 98.6," they said. "You don't have a fever but we were told you had a fever."

After my temperature was recorded as 98.6 on the oral thermometer, the doctor decided to see what the forehead scanner records. It read 101. The doctor felts my neck and looked at the temperature again. "There's no way you have a fever," he said. "Your face is just flushed."

My blood was taken and tested for Ebola. It came back negative.

I sat alone in the isolation tent and thought of many colleagues who will return home to America and face the same ordeal. Will they be made to feel like criminals and prisoners?

I recalled my last night at the Ebola management center in Sierra Leone. I was called in at midnight because a 10-year-old girl was having seizures. I coaxed crushed tablets of Tylenol and an anti-seizure medicine into her mouth as her body jolted in the bed.

It was the hardest night of my life. I watched a young girl die in a tent, away from her family.

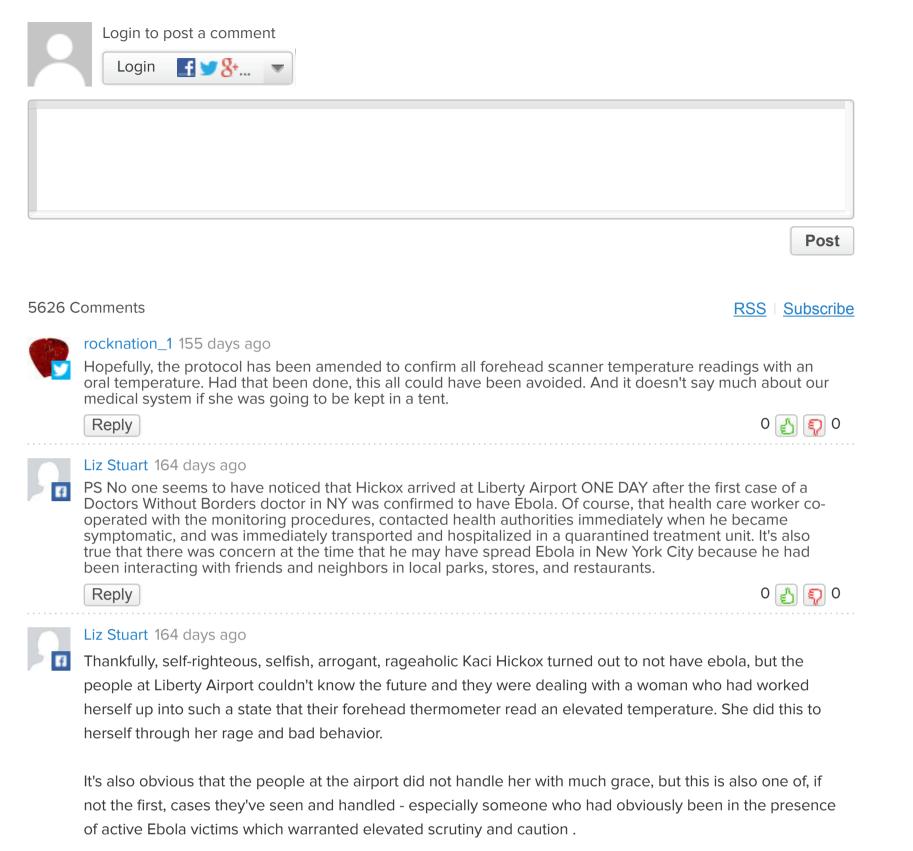
With few resources and no treatment for Ebola, we tried to offer our patients dignity and humanity in the face of their immense suffering.

The epidemic continues to ravage West Africa. Recently, the World Health Organization announced that as many as 15,000 people have died from Ebola. We need more health care workers to help fight the epidemic in West Africa. The U.S. must treat returning health care workers with dignity and humanity.



Comments

To post a comment, log into your chosen social network and then add your comment below. Your comments are subject to our **Terms of Service** and the privacy policy and terms of service of your social network. If you do not want to comment with a social network, please consider writing a **letter to the editor**.



Sadly, the compassionless Kaci's reaction was to become outraged, and when transported home to Maine on Sunday (after arriving in Newark on Friday afternoon), she refused to comply with the self-monitoring and quarantine. As a nurse, she knows this is the standard protocol, but she refused to comply. It's absolutely true that government officials over-reacted, but instead of working with them to correct the protocol, Hickox chose to have a temper-tantrum like a spoiled, self-entitled brat. She had an opportunity to use her knowledge and experience to improve the procedures for future health-care workers traveling to the US

from Ebola ravaged countries. She failed. She's an embarrassment to her profession, an embarrassment to decent Americans, and an embarrassment to Doctors Without Borders.

Reply <u>1 reply</u>





Thomas Anderson 139 days ago

Doctors Without Borders has stood by her and is proud of her.

She complied fully with self monitoring and active direct monitoring. There was no legal binding quarantine in Maine.

Reply

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Heidi Mover 232 days ago

I think Kaci was trying to make two points in her article.

The first was the inconsistency in the way she was treated at Newark. Officials were unprepared and/or unaware of the correct procedures, protective gear and appropriate equipment required as she was shuttled from one setting to the other over the course of her initial arrival. I don't think she was questioning the need for caution regarding her arrival, only that it became such a circus of incompetency. The second point was that as a potential carrier of the disease she was treated more as a prisoner; the actual Ebola patients with whom she worked were treated with dignity and compassion by their caregivers despite the actual risk.

It is understood that containing this deadly disease at the entry points into the U.S. may straddle the line between public health and martial law. However given the circumstances and that Kaci was cooperating in every way she should have been provided with basic information regarding what was being done as well as basic physical requirements as food/ drink as her detainment became more lengthy. This would not have incurred any extra time, money or resources for the Newark officials and could have eased a difficult situation whereas omitting these simple actions made it infinitely worse for Kaci. I hope she will now be allowed to enjoy her homecoming and settle in. Kudos and thank you for your service, Kaci.



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AngelaEdwards 233 days ago

P.S. Why if she was just a nurse, was Kaci Hickox "called in at midnight" to the bedside of a seizing, dying child? Why not a doctor? And if she was so necessary to the effort that she gets "called in at midnight" how is it that she was able to come home at all?







Sherry Osinga 231 days ago

Are you a nurse? Nurses are on call too. She was called to comfort a dying pt. Dr. Bruce Beutler

has more important things to do. I'm sure there was a Dr. there to order the meds she probably needed. How special of you to think Dr Beutler would be @ the bedside of every dying pt. We have a pandemic here.

Reply

<u>1 reply</u>



Ann Dash 234 days ago

Reply

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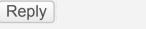
Hickox has some nerve calling the female policewoman "smug." That describes her own attitude to a "T." She thinks she is above all this and is out to prove it. What a disgrace to the nursing profession and to Doctors Without Borders.



Darren Dupre 230 days ago

The only disgrace is the complete and total lack of regard to the scientific method and our decades of observational data on the Ebola outbreak. Her current specific circumstances mean *she* *is* *not* *a* *risk*.

You want to attack the messenger but the reality is that you are uneducated on science and appear to hold science in contempt.



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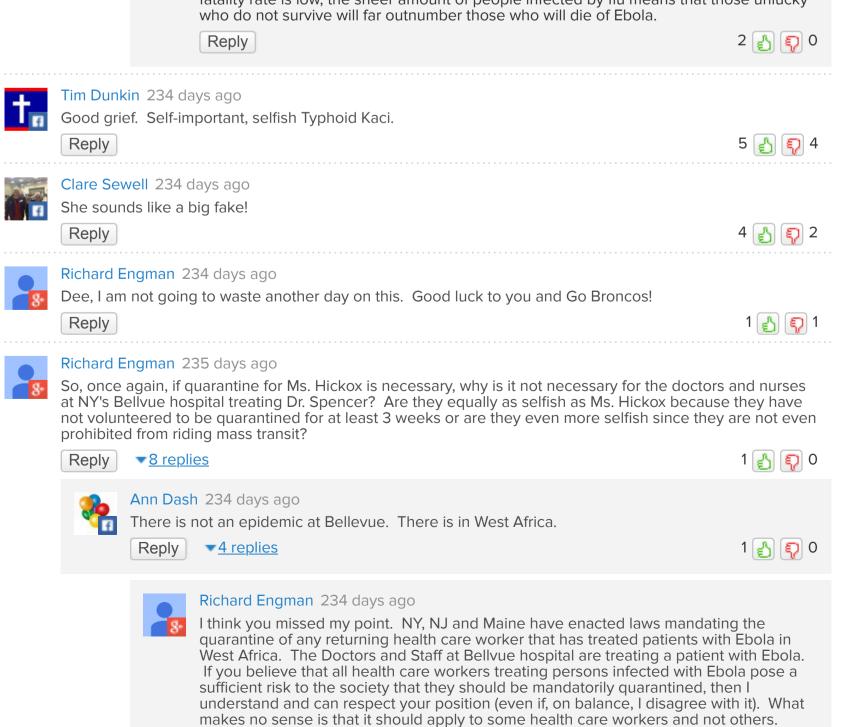
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Cyndi Rowley Braun 234 days ago

Why level 4 suits with respirators that are for airborne diseases if ebola isn't airborne? Please answe me that one? This is what one doctor says.

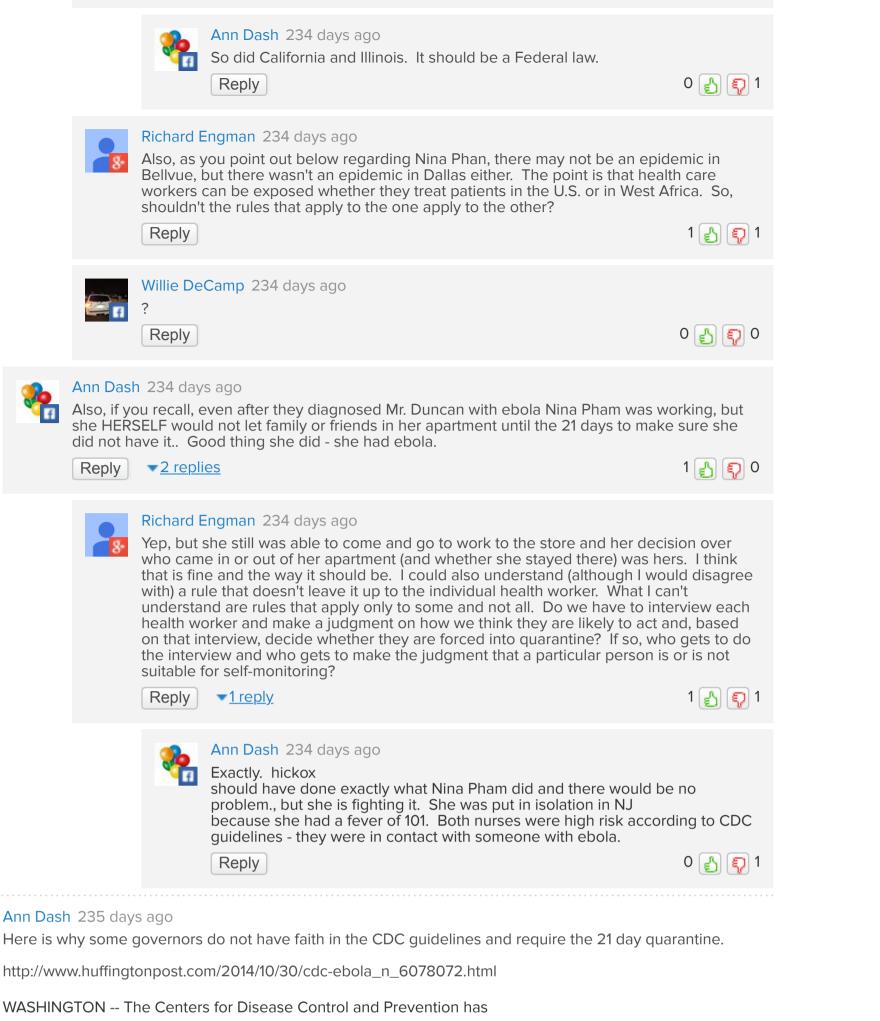
Reply	▼ <u>5 replies</u>	0 🚯 🜍 0
-share and a	pocketpuppy1970 234 days ago Because if the saliva or such fluids were coughed up one nearby could breathe it in a Ebola. Look it up. This happened with a monkey strain in Reston. VA back in 1989. Reply	nd get 1 🚯 😱 0
*	Ann Dash 234 days ago It is the "droplets" from a sneeze or a cough that land on someone else's skin or they the hand of an infected person who has sneezed and whose saliva is on their hand. The of the fluid no matter how minute it is. That is why ebola can live on surfaces. That's how cameraman got it. Reply	germs are in
	AngelaEdwards 233 days ago I've been asking this SAME THING myself. Reply	0 🛃 😱 1
	AngelaEdwards 233 days ago And negative pressure hospital rooms. If Ebola is "so hard to catch" why do they need pressure rooms? Reply <u>1 reply</u>	d negative 0 🛃 😱 1
	Darren Dupre 230 days ago Bio isolation protocols do not mean the virus is easy to transmit. Ebola is related to transmit, but if it does transmit, it carries a very high fatality rate if promption and expert care is not given (and there are currently supply chain issues with experimental drugs currently being used).	treatment

Influenza is far easier to transmit and while the fatality rate is not high in the modern age, its easy communicability means far more people are exposed and even though the fatality rate is low, the sheer amount of people infected by flu means that those unlucky









quietly removed some Ebola information from its website. The changes

follow claims from news outlets and conservative blogs

that the agency hasn't been forthcoming about how the virus spreads,

but it was not clear on Thursday afternoon whether the removal was related to the reports.

The New York Post reported Tuesday

that the agency "admitted" Ebola can be contracted through casual

contact with a doorknob, seemingly contrary to the CDC's insistence that

Ebola is only transmissible through direct contact with bodily fluids

from a person sick with the disease. The Post cited a page on the CDC's

website that said Ebola spreads through droplets that can travel short

distances when a sick person coughs or sneezes.

Meryl Nass, an internal medicine physician in Ellsworth, Maine, first highlighted the page on her own blog over the weekend."....



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Deborah Tobis 235 days ago

One point to ponder... people in Africa who have been exposed to the body fluids or to a victim of Ebola were also asked to self quarantine; they did exactly what Ms. Hickox is doing, they did not do as recommended. This is the primary reason that Ebola victims continue to grow in number. Presently, according to the CDC, the case total is 13676; it appears that this count has doubled in a 2 week period. Ms. Hickox is setting a poor example for the health care profession and its continued efforts to prevent further spread of this dreaded disease.





Ann Dash 235 days ago

What I don't think is being emphasized is something I recently read - that "quarantine" (remain at home) is recommended when someone has been exposed to a serious infectious disease to ensure one is not infected - while "isolation" is when the person actually HAS the disease and is kept away from everyone.

Reply

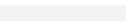


AngelaEdwards 235 days ago

The government just spent \$324,750,000 on Hazmat suits. What do they need THOSE for, if we're all "going to be just fine"??

http://www.infowars.com/government-agencies-scramble-to-purchase-hazmat-suits/

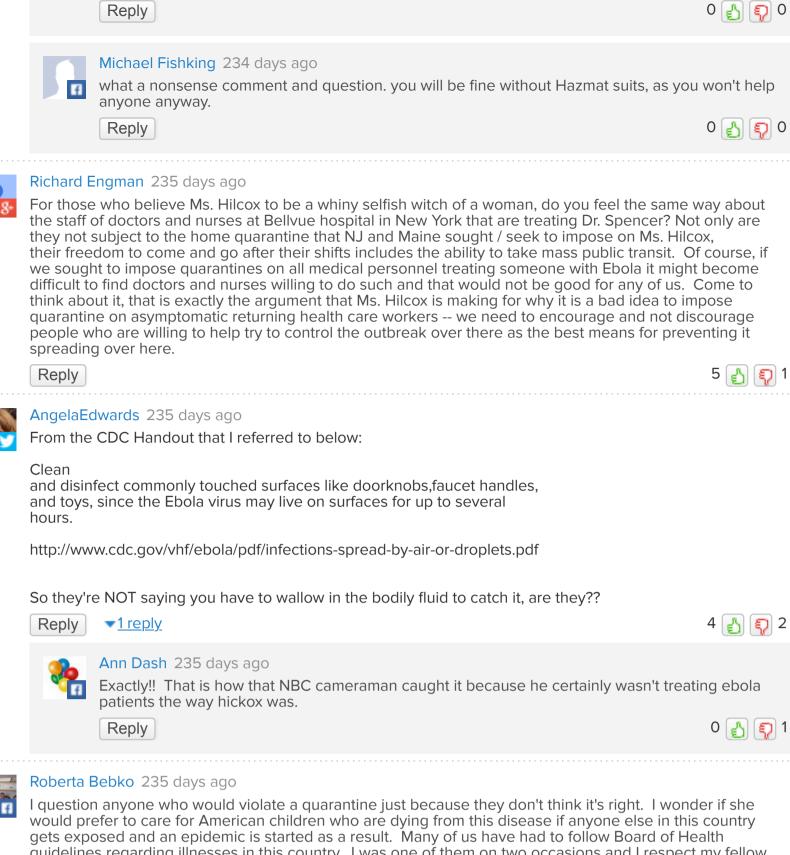








They might have bought them just to calm everybody down.



gets exposed and an epidemic is started as a result. Many of us have had to follow Board of Health guidelines regarding illnesses in this country. I was one of them on two occasions and I respect my fellow citizens enough to follow the directions of this agency because I do not want to be the cause of anyone else's illness. I would think that a Health Care Professional would do the same if simply to show others that these type of decisions are made for a reason...to protect others from the spread of disease.

Reply <u>2 replies</u>



Richard Engman 235 days ago

That's the point she IS following public health guidelines, just not ones that were enacted by gubernatorial fiat based not on the guidance of infectious disease experts but in reaction to public and political outcry. The commentary on this board that she violated CDC guidelines is just plan wrong. For example, the most often repeated allegation is that she should not be trusted or believed because her travel to the US on a commercial airline establishes her as someone that will not follow CDC guidelines prohibiting such travel by persons that are in the high risk category for exposure to Ebola (see numerous posts by Dee Foster). However, health care workers treating patients while wearing appropriate personal protective equipment are expressly excluded from the "high risk" category and expressly included in the "some risk" category, the guidelines for which call for active monitoring but do not ban travel or require quarantine for persons that are asymptomatic.



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Anonymous 235 days ago

Richard,

I have gotten the general impression that you believe that we should not quarantine the nurse because of her heroic actions in Africa. I believe the two should be separated`= that she is heroic, but that should not exempt her from being confined to her home.. I know she is low-risk, but she isn't no-risk. Because of the high fatality rate of this disease, staying at home for 3 weeks does not seem unreasonable, especially since they were doing everything they could to make sure she remained comfortable.

Reply



AngelaEdwards 235 days ago

Now the CDC quietly posted a poster saying that droplets on a doorknob or something else people will touch can infect for UP TO A WHOLE DAY after the affected person sneezes:

http://nypost.com/2014/10/29/cdc-admits-droplets-from-a-sneeze-could-spread-ebola/

NOW do you think it's smart that this woman, who in the article above describes HAVING HER FINGERS IN THE MOUTH OF A DYING CHILD, should be going out and about in the public?



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AngelaEdwards 235 days ago

Here you go. Straight from the CDC themselves:

Droplet spread happens when germs traveling inside droplets that are coughed or sneezed from a sick person enter the eyes, nose, or mouth of another person. Droplets travel short distances, less than 3 feet (1 meter) from one person to another. A person might also get infected by touching a surface or object that has germs on it and then touching their mouth or nose. Droplet spread diseases include: plague, Ebola.

http://www.cdc.gov/vhf/ebola/pdf/infections-spread-by-air-or-droplets.pdf

Reply <a>6 replies





Barb Lightner 235 days ago

Thanks for posting the CDC link. I trust that you read it and understand the difference between airborne and droplets. Of course body fluids that spray out within a person sneezes can contain the virus. But that is quite a difference than an airborne contagion.

This is nothing new. Search for Ebola and droplet on the CDC website and you will find hundreds of articles on this topic.

Don't confuse airborne and droplet or you will spread ignorance virtually.

Reply	▼ <u>1 reply</u>
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AngelaEdwards 235 days ago

I'm NOT confusing the two. However, it is SPELLED OUT THAT GERMS ON A DOORKNOB from someone who has the plague or Ebola CAN INFECT someone else. You're talking to ME about "reading it" when it's obvious you didn't read it, yourself!!



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Barb Lightner 235 days ago

The US should quarantine people who lack reading comprehension and spread their ignorance on these comment boards. It seems to me that is more destructive and contagious than Ebola.

You would definitely have a place in an Ignorance Quarantine test, Ms Edwards.







F

AngelaEdwards 235 days ago

Nice try. Did you see THIS in that poster:

"A person might also get infected by touching a surface or object that has germs on it and then touching their mouth or nose. Droplet spread diseases include: plague, Ebola."

http://www.cdc.gov/vhf/ebola/pdf/infections-spread-by-air-or-droplets.pdf

Doesn't sound to ME like a person has to wallow in bodily fluids to catch it, which is what the "you can't get it very easily, if at all" crowd are preaching.



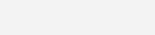


AngelaEdwards 235 days ago From that SAME CDC Handout:

Clean and disinfect commonly touched surfaces like doorknobs, faucet handles, and toys, since the Ebola virus may live on surfaces for up to several hours.

http://www.cdc.gov/vhf/ebola/pdf/infections-spread-by-air-ordroplets.pdf

So they're NOT saying you have to wallow in the bodily fluid to catch it, are they??



Michael Fishking 234 days ago

Reply

I agree with you Ms. Angela Edwards has passed that Ignorance test with flying color. Let her continue to show her ignorance...





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Richard Engman 235 days ago

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Absolutely not. I think anyone so callous as to treat and comfort a dying child should be forced into isolation for at least 3 weeks whether or not that person was wearing protective gear at the time and whether or not that person is at all symptomatic. The goal here should be to make it as cumbersome and difficult as possible for anyone thinking of helping someone with Ebola. That way, we won't have to be concerned about the flood of selfish health care workers returning from their so-called volunteer missions and the disease can just spread unchecked. Oh wait, maybe making it harder for folks willing to help to get control of the outbreak over there isn't the best way to prevent a crisis over here. Maybe, the best protection over here would be to encourage and support those folks that are willing to go over there. Candidly, what worries me is not a few easily identified returning health care workers, but rather an epidemic that continues to grow and spin out of control to where it will become impossible to identify at risk individuals (because there are too many) at border crossings or otherwise

Reply

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2BrianJohnson 230 days ago

Angela (big sigh) your research on the CDC website is correct. The final conclusions you are drawing is where you become misguided. In order to transmit any viral disease there has to be enough virus in your body to transmit! In other words, the virus has to enter your body, hijack your cellular machinery and start to make more copies of itself. This process takes time and the length of time is different based on how the virus accomplishes this feat.

If as you say Kaci contracted Ebola from "HAVING HER FINGERS IN THE MOUTH OF A DYING CHILD" (a plausible mode of transmission if there was a failure in the protective equipment or a mistake in the taking off the equipment) she would not have any virus to share until the virus has had time to replicate in her body. During the time the virus is replicating, she would become sick with the signs of an immune system response like fever, body aches, and malaise. At the time of onset of illness, as any responsible Health Care Worker whether in West Africa or here in the US, they would immediately guarantine themselves and go to the appropriate healthcare facility in a calm and coordinated manner as to not expose others and submit to isolation, testing and treatment.

Fortunately with Ebola the onset of symptoms starts BEFORE someone has enough virus to share and becomes contagious. I think that is the critical piece of information you are missing. Kaci would FIRST have to become sick before she could pass on Ebola to anyone. As Kaci has said herself over and over again if she becomes ill with symptoms she will immediately quarantine herself and report to the appropriate medical facility for isolation, testing and treatment.

Reply

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Patricia Mallet 235 days ago

oops, I now owe an apology to all the people here to whom I said that I felt they were really wrong to be appalled by this nurse. I didn't agree with them at all after reading the article above, but the new developments have proven me wrong, what this nurse is doing is confusing people about ebola when every one was already confused enough, wrong move... So, sorry everyone.



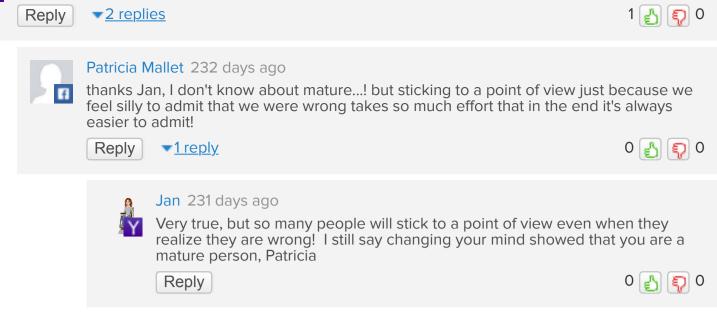
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3 replies



Jan 235 days ago

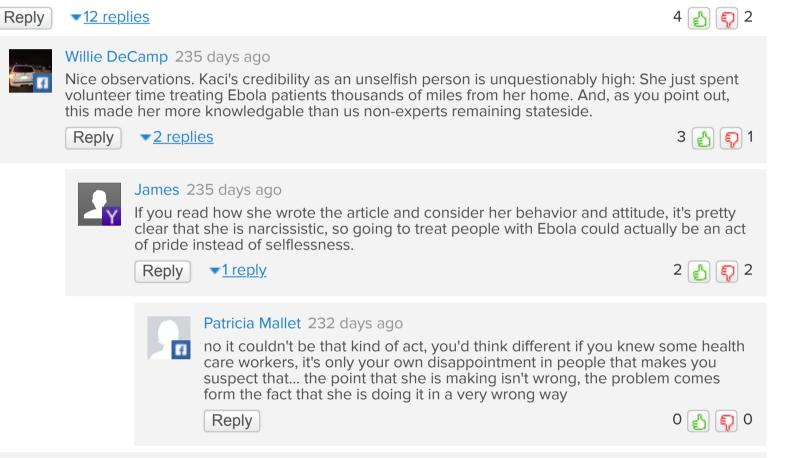
Bravo! It takes a mature person to admit that they may have been wrong before. Thanks for saying this.



Richard Engman 235 days ago

It's the selfish charge that seems to me to be most misplaced. The concern seems to be that Ms. Hicox has little concern for the health and safety of others and is unwilling to suffer any personal restrictions to avoid endangering others. If that is true, then I agree it is selfish. However, I think there is another (and in my view more likely) explanation for her actions. She knows that she is asymptomatic and therefore she KNOWS (as opposed to all of our speculation) that she currently poses no threat to anyone and,therefore does not believe that the state should be able to involuntarily take her liberty for three weeks in order to avoid a non-existent risk.

More generally, I think the concern is that health workers might lie about whether they have become symptomatic and therefore need to be quarantined whether or not they have any symptoms because they cannot be trusted to avoid contact when and if they become symptomatic. OK, people lie. But, who is being selfish? Is it the person who is willing to be prudent, avoid unnecessary contact, actively monitor their temperature and for other symptoms but who refuses to be quarantined at a point when, because of that active monitoring, they know they are not a risk to the public or is it all of us for demanding that all persons who have risked their lives treating others and who present no symptoms nevertheless be quarantined because it's theoretically possible that they might lie?



Willie DeCamp 235 days ago

PS Although I understand Ms. Hickox's quarantine to be unjustified, I wonder if in her situation I might voluntarily honor the quarantine--as my contribution to abating the public hysteria. Ms. Hickox has no contagious disease, but the public in a sense does--the disease of hysteria. Perhaps acquiescence on her part would be more curative than litigation.



Richard Engman 235 days ago

I agree, except that I think her broader rationale is that this actually isn't about her. Rather, I think she believes we need to encourage rather than discourage those who might be willing to go to West Africa to volunteer their medical knowledge and training. After all, the best way to ensure that we are protected over here is to do what we can to help get the outbreak over there under control. With that in mind, I think Ms. Hicox is concerned that less folks will be willing to do so if it requires not only a willingness to risk one's own health and safety to help others, but also a willingness to be prevented from returning home or, if you are able to return to the States, to being forced into a medically unnecessary isolation because others are worried you might lie about your lack of symptoms.



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to the second	Willie DeCamp	235 days ago
f	Good point.	
	Reply	





Ann Dash 235 days ago

No, her broad rationale is FAME and money when she sues the people whom she thinks took away her freedom. If she were humble, she would have done what Nina Pham did - VOLUNTARILY tell remain at her apartment and not let anyone in, not even to walk her dog. She wasn't within 3 feet of ANYONE and that was BEFORE she was diagnosed with ebol. Nina Pham is an example the Doctors Without Borders should be championing - not this idiot whose arrogant attitude makes her disliked by many - even in her own profession.







Michael Fishking 234 days ago

Most people in her profession support her. You are actually an idiot and ignorant fear-monger.





Michael Fishking 234 days ago



I believe the point she is trying to make is that epidemiology, the science that studies the patterns, causes, and effects of disease should determine when quarantine is necessary. Fear, over reaction and politics should not fly in the face of reason.

It is interesting tome that one commenter called her a whinny witch because many of these comments sound like they came from the 1700's during the witch hunts.



From the article:

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"I recalled my last night at the Ebola management center in Sierra Leone. I was called in at midnight because a 10-year-old girl was having seizures. I coaxed crushed tablets of Tylenol and an anti-seizure medicine into her mouth as her body jolted in the bed.\

It was the hardest night of my life. I watched a young girl die in a tent, away from her family."

SIX DAYS AGO she had her fingers in the mouth of a child who DIED of Ebola. Six DAYS ago!! Dr. Bowling Ball in New York got Ebola on the eighth day, I think and he doesn't know "how he contracted it". So you're false sense of security is misguided.

Reply <a><u>3 replies</u>



Willie DeCamp 235 days ago

Hi, Angela. I replied to you concerning the aspect we were discussing--the 12% who are without fever-- about about 170 comments south of here. :)

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	Reply	1 🛃 😱 0
T	Michael Fishking 234 days ago Your quote proves that Kaci is a hero. She comforted a dying child. She clear the danger to herself by touching (with protection of course) an Ebola patie know clearly based on science and facts that she cannot pass the virus to h or the public. I don't think I should count on you to understand that. Relax we will be fine. Reply •1reply	nt. She also
	Dawn Isaacs 232 days ago	
	Hello People: I think the main issue is the 21 day incubation period realize that we do not become obviously sick in one minuteMa tired, slightly chilly or warm, a bit of a head ache, and 24 hours lat realize that we are sick. In view of the tragic epidemic in Africa ar infection of the 2 RNs who were wearing protective gear, it seems to stay home the 21 days. I would suggest that we (the US) comp people for their lost salary during that period. In future weeks or more might be known about the spread of Ebola, but for now, 21 of considered the incubation period. I took care of several critically patients all ventilated requiring suctioning blood work and IVs	ybe a little ter or so we nd the s reasonable ensate months, days is ill AIDs

patients, all ventilated, requiring suctioning, blood work and IVs. None of the staff in my unit became infected even though we only wore long sleeve cotton gowns, gloves, and routine hospital masks. Until we understand how the Texas nurses became infected, we should "err" on the side of caution. It is a major shame that our government was not more prepared to deal with this very difficult issue. As an experienced nurse Ms Hickox should, however, try to understand the unchartered waters officials find themselves and their need to try to protect US citizens and residents. In closing, I appreciate this dialogue and hope it can continue with respect. Dawn RN, MSN, NP Reply

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F	Cynthia Rice 236 days ago Hero BS, she works for the CDC and angry thy have not come to her defense. Reply <u>1 reply</u>	0 🛃 🜍 3
	Michael Fishking 234 days ago Cynthia Rice: While my other more direct post is awaiting moderation just you are B.S. Reply	let you know 0 🛃 😱 0
F	Michael Fishking 234 days ago Komo: Right on! Reply	1 🛃 🌍 0

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