ANNEX 12 Skin Biopsy on Fatal Cases for Diagnosis of Ebola

Ebola virus can be detected in fatal cases from a skin specimen using an immunohistochemistry test developed by the Centers for Disease Control and Prevention (CDC) Infectious Diseases Pathology Activity. The skin specimen is fixed in formalin which kills the virus. The specimen is no longer infectious once it is placed in formalin and the outside of the vial has been decontaminated. This vial can be shipped by mail or hand carried to the lab without risk. Results are available within a week after the specimen arrives at the CDC.

CDC provides Skin Biopsy Kits for the collection of skin samples in formalin. If these are available in your area, follow the simple instructions that are provided in the kit. An example of the instructions is on the following pages.

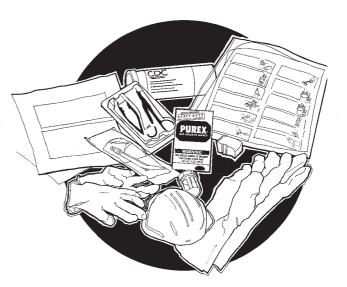
If a kit is not available, the biopsy can still be collected and sent for diagnosis to:

Dr. Sherif Zaki Centers for Disease Control and Prevention Infectious Diseases Pathology G-32 1600 Clifton Road, NE Atlanta, GA 30329-4018



Viral Haemorrhagic Fever

Skin Biopsy Kit For Surveillance



Check the list of equipment and make sure everything is in place before beginning.

Kit Equipment List:

- 1. Instruction sheet
- 2. Selection criteria and surveillance forms
- 3. (1) box powdered bleach
- 4. (4) pairs latex gloves
- 5. (2) pairs heavy-duty gloves
- 6. (2) masks
- 7. (1) biopsy tool
- 8. (1) tweezers and scissors set
- 9. (1) vial with formalin
- 10. (1) piece hand soap
- 11. (1) mailing tube
- 12. (1) set mailing labels

Other items needed:

- 1. 1 or 2 buckets for disinfectant and handwashing
- 2. Gowns or plastic aprons
- 3. 10 litres water

Shipping Instructions:

Be sure to fill out the forms with the name of the patient on each page. Number the vial and put the number on the form. This is very important especially if you have more than one specimen to send. Use a pencil to write on the lid of the vial.

The formalin fixed specimen is not infectious. The vial can be sent by normal mail, carried on a plane or delivered to the U.S. Embassy **without risk** to the carrier.

Put the forms and the vial containing the specimen into the mailing tube. Close the lid tightly and seal with tape if available. Put the label on the tube and send it to CDC either by the U.S. Embassy or by the post. It can be mailed in your country or if someone carries it to the U.S., it can be placed in any U.S. Mailbox.

Please remember to put stamps on the package.

INSTRUCTION FOR USING THE SKIN BIOPSY KIT

IMPORTANT: For security, all of the equipment used in the biopsy is for one use only and must not be reused.



Haemorrhagic Fever Surveillance Form

Name and location of Health Centre:

Vial Number:

Name of physician or nurse:

Contact address (*Important: to receive results, give a very specific contact address*):

Telephone /Facsimile number:

Patient data Name: Age: Sex: □ Male Address:	Hospital Number:		
Profession or occup Date of first sympton Date of death: If patient was not ho			
Are any other family members ill? If yes, relationship:			

Symptoms of family member:

If the patient was hospitalized, use the table on the back to mark the symptoms which you observed and any other important observations.

Clinical Signs and Symptoms Form

Name of Patient:	
Symptoms (Check each one present)	Date of appearance:
Fever	
🗆 Diarrhoea	
□ Extreme weakness after rehydration	
🗆 Nausea	
□ Vomiting	
□ Sore throat	
🗆 Headache	
Loss of appetite	
Muscle pain	
🗆 Joint pain	
□ Hiccups	
🗆 Cough	
Conjunctivitis (red eye)	
Chest pain	
□ Rapid respiration	
Recent loss of hearing	
Burning sensations of the skin	
Bleeding, specify below:	Date of appearance:
Black or bloody vomit	
Black or bloody stool	
□ Mouth	
🗆 Urine	
□ Skin or puncture site	
Other bleeding: specify	
□ Other observations	Date of appearance:

Selection criteria for testing of suspected Ebola haemorrhagic fever (EHF)

Patient's last name, first name:

When to take a skin biopsy for testing:

The patient	had the following symptoms within two weeks preceding death:	
	Fever and	
	Diarrhoea and	
	One of the following signs:	
	 Headache Intense weakness after rehydration Muscle pains Joint pain Back pain 	
	Treatment was given with antibiotics and antimalarials for a minimum of three days.	
The patient	failed to respond to treatment and died	
Or		
Died with at least 3 of the following symptoms and no definitive diagnosis:		
	Sore throat or difficulty in swallowing Red eyes Skin eruptions	
	Hiccups Burning sensation of the skin Bleeding: nose, mouth, urine, stools (black or bloody), or vomit (black or bloody) Rapid respiration	
The diagnosis of haemorrhagic fever is possible and even probable if the patient is bleeding.		
If the patient reports another similar death in the family recently, the diagnosis of EHF is even more likely. Measures should be taken to put the family and contacts under surveillance.		
Tak	e a skin biopsy, following the instructions given in this annex.	

The biopsy is not infectious once in formalin.

Send it to CDC for testing at the address on the back of this form.

Dr. Sherif Zaki

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