



Clinical Update

For Telephone Triage Nurses

February 2016

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Internet Resources

United States Centers for Disease Control and Prevention (CDC):
<http://www.cdc.gov/zika/>

Photos of Zika rash:
DermNetNZ
<http://www.dermnetnz.org/visual/zika.html>

[World Health Organization \(WHO\)](#)

[European Centre for Disease Prevention and Control \(ECDC\)](#)

Zika Virus -- Preparing Your Call Center for Patient Questions

Last year call centers across the nation quickly responded to the challenges posed by the Ebola outbreak in Africa. Triage nurses screened for Ebola exposure and reassured many worried callers.

The outbreak of the Zika virus may pose new challenges for call center nurses in 2016. Thankfully, unlike Ebola, Zika usually causes only mild illness. However, Zika virus may cause microcephaly (small head) in babies born to women who get this infection while they are pregnant.

As of February 10, 2016, there were 52 cases of travel-related Zika in the United States. These people became infected while visiting an outbreak area. This number is expected to climb in the next few months as more travelers return from spring and summer foreign trips. Be prepared to address Zika-related calls in 2016. Most callers will only need reassurance and the most up-to-date travel information.

Frequently Asked Questions

Remember to use patient friendly language. Avoid medical jargon. Triage nurses should focus on what callers **need to know** and what **action** callers need to take. Here are examples of plain language responses to frequently asked questions.

What is Zika?

- Zika is a virus that spreads from person to person through mosquito bites.
- Most people who are infected do not get sick or only have mild symptoms.
- The virus is named after the Zika forest in Uganda where it was discovered in 1947.

Where is Zika occurring?

- Before 2015, Zika outbreaks occurred in Africa, Asia and the Pacific Islands. Last year Zika spread to many countries in Latin and South America.
- The CDC has a website for travelers to find out where outbreaks are happening. See <http://www.cdc.gov/zika/geo/>.

What are the symptoms?

Most people do not even know when they get this. Only one out of five people have symptoms. Symptoms usually last about 2-7 days. Common symptoms of the Zika are:

- **Eye redness:** The whites of the eyes may become pink or red. There is no pus or discharge.
- **Fever:** Fever is usually low-grade (less than 101.5° F or 38.6° C).
- **Joint pain** or aching
- Widespread pink-red **rash** (small flat spots or bumps)

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How is Zika spread?

- The main way the virus is spread to others is through mosquito bites.
- A mosquito bites a person who already has Zika. The mosquito then bites other people and infects them.
- It can also spread from a pregnant mother to her unborn baby or to the baby during birth.
- A man with Zika can spread the virus during sex. This is rare.

Can Zika cause any serious health problems?

Almost all people with Zika get better without any special treatment. Most people do not get very sick and do not need to go to the hospital.

- However, if a woman gets infected with the Zika virus while pregnant, it may harm the baby. A pregnant woman who has Zika can pass the virus to her unborn child.
- Experts believe Zika may cause a very bad birth defect called microcephaly. This means the baby's head and brain are much smaller than normal. More studies are being done to learn more about how Zika affects unborn babies.
- Rarely, people with Zika have also developed a serious illness called Guillain-Barre syndrome. It affects the nervous system and makes the person's muscles very weak. Even though it is very rare, it can be very serious and can sometimes cause death.

How is Zika treated?

- Currently there are no special medicines to treat Zika.
- Most people can treat their symptoms at home.
- Rest and drink plenty of fluids.
- Use acetaminophen (Tylenol) if needed to treat fever and body aches.

Can Zika be prevented?

- There is no vaccine to prevent Zika.
- The best way to not get Zika is to avoid mosquito bites.
- Pregnant women should delay travel to a Zika outbreak area if possible.

When should a person call his or her doctor?

- Pregnant and recently traveled to a place with a Zika outbreak.
- Fever, eye redness, achy joints, or a rash after traveling to a place with a Zika outbreak.
- Planning a trip to a place with a Zika outbreak and trying to get pregnant.

What are the best resources? Health experts are learning more about Zika every day. We anticipate recommendations for prevention, screening and testing will be revised on an ongoing basis. Check the CDC and World Health Organization websites for updates.

References

CDC. Update: Interim Guidelines for Health Care Providers Caring for Pregnant Women and Women Reproductive Age with Possible Zika Virus Exposure — United States, 2016 *Weekly* / February 12, 2016 / 65(05);122–127. <http://www.cdc.gov/mmwr/volumes/65/wr/mm6505e2.htm>

U.S. Food and Drug Administration. Insect Repellent Use and Safety in Children. Accessed 2/14/2016 at: <http://www.fda.gov/Drugs/EmergencyPreparedness/ucm085277.htm>

Rodriguez SD, et al. The Efficacy of Some Commercially Available Insect Repellents for *Aedes aegypti* (Diptera: Culicidae) and *Aedes albopictus* (Diptera: Culicidae). *J. Insect Sci.* (2015) 15(1): 140.

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Mosquito Bite Prevention Checklist for Travelers



- **Avoid going outdoors when possible, even during the day. Mosquitos that spread Zika bite day and night.**



- Wear long pants and long sleeve shirts when outdoors. Loose clothing is best.
- Tuck your pants into your socks.
- Wear shoes and socks (mosquitoes like to bite your feet).
- Wear a hat. If the mosquitoes are really bad, wear a hat with mosquito net.



- Use insect repellents. Follow the package directions carefully. The directions should tell you how long it lasts and when you need to put more on again.
- Do not put it on skin covered by clothes.
- Do not spray it on your face. Put it on your hands and then rub it on your face. (Reason: To keep it out of your eyes, nose and mouth).
- Repellents that work very well and are safe are those made with DEET and picaridin. Look for these names in the active ingredients. It is safe to use these types if you are pregnant or breastfeeding.
- DEET comes in different strengths. The higher the strength, the longer it lasts. The AAP recommends for children, 10 to 30 % DEET should be used. Repellents should not be used on children less than 2 months old.
- If you want to use a natural product, Cutter Lemon Eucalyptus (contains p-menthane-3, 8-diol) is a good choice. It is a natural plant-based repellent. It has been shown to work well. It should not be used in children less than age 3 years.



- Treat your clothing and gear with the insect repellent permethrin.
- Follow the package instructions. Do not put this repellent on your skin.



- Doors and windows should be closed or screened to keep mosquitoes out.
- Use mosquito nets if you sleep outdoors.

Do Natural Insect Repellents Work?

Some people are reluctant to use chemical insect repellents like DEET. A recent study compared some available “natural” (DEET-free) products and those containing DEET. The DEET products provided good protection. The non-DEET products provided less protection or almost no protection at all. Only one DEET-free product, Cutter Lemon Eucalyptus, provided similar protection as DEET. (Rodriguez et al., 2015).