



October 16, 2014

Dear DCMS member,

It is understandable that when a disease as horrific as Ebola is diagnosed in our community, we may fear for our health and the health of our families and staff. But we cannot forget that as physicians, we are grounded in and committed to science and not myth.

As physicians, we routinely treat patients with infectious and communicable diseases. Many are much more contagious and potentially more deadly than Ebola. Influenza will kill more than 50,000 Americans this year alone. We treat these patients without a thought. It is imperative that we continue to care for our patients in a professional manner.

DCMS and the Texas Medical Association have prepared [an informational flyer](#) for you to use in educating your patients and staff. I hope you find it helpful.

Obviously, primary care physicians commonly see patients with fever and GI symptoms that could be similar to presenting symptoms of Ebola in its early stages. The best way to evaluate a patient who presents to your office with these symptoms and differentiate Ebola from other much more common causes is outlined in the CDC's [Checklist for Patients Being Evaluated for Ebola Virus Disease in the United States](#). It helps you combine the patient's symptoms and risk of exposure to determine the next best steps.

For instance, for patients with fever you should do the following quick screen, "In the past 3 weeks have you traveled to Africa, had contact with a known Ebola patient, or been on a list being monitored by the health department for possible Ebola?" If this screen is positive for any of these, put the patient in a private room and call the health department at 214-819-2004.

It has come to our attention that some Dallas physicians have considered instituting practices that are not supported by scientific fact and/or might have turned away patients just because they work at Texas Health Dallas, live in certain neighborhoods, or are of certain nationalities.

Lack of understanding, misinformation and myth are a nidus for irrational behavior. While we obviously don't have all of the answers, there are many excellent resources available to further your knowledge of Ebola so that you can act as you normally do, with scientifically-based facts. For instance, the DCMS website has added a [fact-based page](#), which is an excellent place to begin. The TMA has also created an [Ebola resource webpage](#), as [has the AMA](#).

Nobody can tell you how to run your practice. But it is important to remember that we are the role models for our community when it comes to health-related issues. Our actions and practices will be noted by the public, and if we act in a manner or institute practices that are without scientific basis, the community will follow. This will spread unwarranted fear and may place some in danger.

I am tremendously proud of how Dallas physicians have responded to this emergency. The eyes of our city, our state, and the entire nation are upon us. "Fact, Not Fear" is a very well-named campaign that we are joining with WFAA-TV and media outlets around the country. As physicians – as men and women educated in science and trained to respond calmly in times of potential disaster – that must continue to be our rallying cry.

Sincerely,

Todd A. Pollock, MD
President, Dallas County Medical Society