Ebola

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

By KACI HICKOX
Special Contributor
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(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 two-day 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 felt 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.
Comment
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.

5626 Comments

rocknation_1 155 days ago

Hopefully, the protocol has been amended to confirm all forehead scanner temperature readings with an oral temperature. Had that been done, this all could have been avoided. And it doesn't say much about our medical system if she was going to be kept in a tent.

Liz Stuart 164 days ago

PS No one seems to have noticed that Hickox arrived at Liberty Airport ONE DAY after the first case of a Doctors Without Borders doctor in NY was confirmed to have Ebola. Of course, that health care worker cooperated with the monitoring procedures, contacted health authorities immediately when he became symptomatic, and was immediately transported and hospitalized in a quarantined treatment unit. It's also true that there was concern at the time that he may have spread Ebola in New York City because he had been interacting with friends and neighbors in local parks, stores, and restaurants.

Liz Stuart 164 days ago

Thankfully, self-righteous, selfish, arrogant, rageaholic Kaci Hickox turned out to not have ebola, but the people at Liberty Airport couldn't know the future and they were dealing with a woman who had worked herself up into such a state that their forehead thermometer read an elevated temperature. She did this to herself through her rage and bad behavior.

It's also obvious that the people at the airport did not handle her with much grace, but this is also one of, if not the first, cases they've seen and handled - especially someone who had obviously been in the presence of active Ebola victims which warranted elevated scrutiny and caution.

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.

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.

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.

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 earth that she gets "called in at midnight" how is it that she was able to come home at all?

AngelaEdwards 233 days ago

Are you a nurse? Nurses are on call too. She was called to comfort a dying pt. Dr. Bruce Beutler
prohibited from riding mass transit? At NY's Bellevue hospital treating Dr. Spencer? Are they equally as selfish as Ms. Hickox because they have

So, once again, if quarantine for Ms. Hickox is necessary, why is it not necessary for the doctors and nurses at NY's Bellevue hospital treating Dr. Spencer? Are they equally as selfish as Ms. Hickox because they have not volunteered to be quarantined for at least 3 weeks or are they even more selfish since they are not even prohibited from riding mass transit?

There is not an epidemic at Bellevue. There is in West Africa.

Good grief. Self-important Hickox has some nerve calling the female policewoman "smug." That describes her own attitude to a "T."

Who do you think is above all this and is out to prove it. What a disgrace to the nursing profession and to Doctors Without Borders.

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.

Ebola. Look it up. This happened with a monkey strain in Reston, VA back in 1989.

It is the "droplets" from a sneeze or a cough that land on someone else's skin or they touch the hand of an infected person who has sneezed and whose saliva is on their hand. The germs are in the fluid no matter how minute it is. That is why ebola can live on surfaces. That's how the NBC cameraman got it.

And negative pressure hospital rooms. If Ebola is "so hard to catch" why do they need negative pressure rooms?

I think you missed my point. NY, NJ and Maine have enacted laws mandating the quarantine of any returning health care worker that has treated patients with Ebola in West Africa. The Doctors and Staff at Bellevue hospital are treating a patient with Ebola. If you believe that all health care workers treating persons infected with Ebola pose a sufficient risk to the society that they should be mandatorily quarantined, then I understand and can respect your position (even if, on balance, I disagree with it). What makes no sense is that it should apply to some health care workers and not others.

There is not an epidemic at Bellevue. There is in West Africa.

Good grief. Self-important, selfish Typhoid Kaci.
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”?

Angela Edwards

The spread of this dreaded disease.

orts to prevent further

to prevent further

One point to ponder...

Deborah Tobis

The New York Post reported Tuesday

the interview and who gets to make the judgment that a particular person is or is not

Are we required to interview each health worker and make a judgment on how we think they are likely to act and, based on that interview, decide whether they are forced into quarantine? If so, who gets to do the interview and who gets to make the judgment that a particular person or is or is not suitable for self-monitoring?

Ann Dash

Here is why some governors do not have faith in the CDC guidelines and require the 21 day quarantine.

http://www.huffingtonpost.com/2014/10/30/cdc-ebola_n_6078072.html

WASHINGTON -- The Centers for Disease Control and Prevention has 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."

Ann Dash


Willie DeCamp

They might have bought them just to calm everybody down.
what a nonsense comment and question. you will be fine without Hazmat suits, as you won’t help anyone anyway.

For those who believe Ms. Hilcox to be a whiny selfish witch of a woman, do you feel the same way about the staff of doctors and nurses at Bellevue hospital in New York that are treating Dr. Spencer? Not only are they not subject to the home quarantine that NJ and Maine sought / seek to impose on Ms. Hilcox, their freedom to come and go after their shifts includes the ability to take mass public transit. Of course, if we sought to impose quarantines on all medical personnel treating someone with Ebola it might become difficult to find doctors and nurses willing to do such and that would not be good for any of us. Come to think about it, that is exactly the argument that Ms. Hilcox is making for why it is a bad idea to impose quarantine on asymptomatic returning health care workers – we need to encourage and not discourage people who are willing to help try to control the outbreak over there as the best means for preventing it spreading over here.

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From the CDC Handout that I referred to below:

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


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

That's the point she IS following public health guidelines, just not ones that were enacted by political fiat based not on the guidance of infectious disease experts but in reaction to public political outcry. The commentary on this board that she violated CDC guidelines is just plain 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.

I question anyone who would violate a quarantine just because they don’t think it’s right. I wonder if she was doing everything they could to make sure she remained comfortable. I would think that a Health Care Professional would do the same if simply to show others that they can be trusted to care for American children who are dying from this disease if anyone else in this country gets exposed and an epidemic is started as a result. Many of us have had to follow Board of Health decisions are made for a reason...to protect others from the spread of disease.

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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:


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

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 can infect the virus. But that is quite a difference than an airborne contagion.

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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.
because it's theoretically possible that they might lie? Who have risked their lives treating others and who present no symptoms nevertheless be quarantined under active monitoring, they know they are not a risk to the public or is it all of us for demanding that all persons who are asymptomatic 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, she might voluntarily honor the quarantine--as my contribution to abating the public hysteria. Ms. Hicox has more knowledgeable than us non-experts remaining stateside.

More generally, I think the concern is that health workers might lie about whether they have become symptomatic and therefore need to be quarantined because others are worried you might lie about your lack of symptoms. 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 nonexistent risk.

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This woman and the NY md, are going to make the vast majority of US taxpayers wishes MANDTORY as to a quarantine of people coming from infected countries. Both have shown that we can not trust them to do the right thing and put the health and safety of the American public in front of their selfishness. Thank you both.

Oops, big baby Kaci works for CDC and she’s mad ‘cause they have not come to her rescue. http://weaselzi-pers.us/203600

Your immaturity is showing Mikey. No wonder you and Kaci make a good couple. Your nonsense is reflective of you.

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.

All of you who have too much fear for nothing. I respected this nurse as a great hero. None of you ever stepped out of your own home country to know better. I was moved by her article explaining her own experience. Shame to all of you who stupid enough to even post your ignorant messages...

Well said!

Perhaps acquiescence on her part would strengthen public hysteria, not cure it.

They are not going to be embarrassed at all. That is not the point she is making. With Ebola there is no virus to spread until it has had enough time to replicate. And with Ebola your symptoms of illness begins before you have virus to spread and be contagious. Kaci as she has said over and over again will immediately self quarantine at first symptoms of illness, notify health officials and report in an orderly and coordinated manner to the appropriate health care facility for isolation, testing and treatment.

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

Well said!

"Hero"? What an insult to *true heros*! Traci is nothing more than an immature bully who is su

Jerry Shoto 236 days ago

2BrianJohnson 230 days ago

AngelaEdwards 236 days ago

Mike DeCamp 235 days ago

Gonesi onesi 236 days ago

Komo Kama 236 days ago

Barb Lightner 235 days ago

Ann Dash 235 days ago

Gonesi onesi 236 days ago

Cynthia Rice 236 days ago

Dam Maddam 236 days ago

Jerry Shoto 236 days ago

AngelaEdwards 236 days ago

Willie DeCamp 235 days ago
Your quote proves that Kaci is a hero. She comforted a dying child. She clearly knows the danger to herself by touching (with protection of course) an Ebola patient. She also know clearly based on science and facts that she cannot pass the virus to her love ones or the public. I don’t think I should count on you to understand that. Relax... we will be fine.

Hello People: I think the main issue is the 21 day incubation period. Please realize that we do not become obviously sick in one minute.....Maybe a little tired, slightly chily or warm, a bit of a head ache, and 24 hours later or so we realize that we are sick. In view of the tragic epidemic in Africa and the infection of the 2 RNs who were wearing protective gear, it seems reasonable to stay home the 21 days. I would suggest that we (the US) compensate people for their lost salary during that period. In future weeks or months, more might be known about the spread of Ebola, but for now, 21 days is considered the incubation period. I took care of several critically 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

Hero BS, she works for the CDC and angry thy have not come to her defense.