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Congress of the United States
House of Representatives
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October 17, 2014

The Honorable Daniel R. Levinson
Inspector General
U.S. Department of Health and Human Services
330 Independence Avenue, SW
Washington, DC 20201

Dear Inspector General Levinson:

Within the last month, Ebola has spread from Western Africa to American soil with Thomas Eric Duncan's lying to airport security and becoming America's first Ebola patient and death. Now we have two new American Ebola patients— both of whom were nurses for Mr. Duncan — fighting for their lives after contracting this disease. While this crisis is far from over, the Centers for Disease Control (CDC) response to date has raised serious questions and concerns that in the interest of protecting the health of Americans, necessitate an investigation by your office.

Specifically, I would like your office to investigate and determine:

1. What are the CDC protocols and procedures for health care providers and hospitals when treating a patient with a suspected case of Ebola and a confirmed case of Ebola?
 - a. How have those protocols and procedures evolved or changed since prior to Thomas Duncan's diagnoses; during Thomas Duncan's hospitalization; when the first nurse, Nina Pham, was diagnosed; and after the second nurse, Amber Vinson, was diagnosed?
 - b. Per CDC Director Dr. Thomas Frieden on October 14th, the CDC has now created a new "Ebola response team." What services will those response teams provide that were not previously provided to healthcare providers and hospitals? Why were those services not provided to the health care providers and hospitals at the first diagnosis of Ebola in the United States?
 - c. Once there is a confirmed Ebola diagnosis, what authority does the CDC have to require and ensure that hospitals and healthcare providers strictly follow those protocols? Several nurses have voiced concern that proper protocols were not followed during Mr. Duncan's care. If this is accurate, why did the CDC not intervene to ensure their health was fully protected?
 - d. How are these protocols referenced above different from the World Health Organization protocols or other protocols being used by humanitarian workers in Western Africa? According to at least one humanitarian organization, the CDC protocols are actually weaker than protocols being utilized in Africa.

2. According to Dr. Frieden's testimony before the U.S. House Energy and Commerce Committee on October 16, 2014, only health care providers who treated Ebola patients without wearing proper attire were placed on controlled movement restrictions prior to October 15, 2014. Given Ebola's significant threat to the public's health, why did the CDC not place **all persons** directly exposed to a patient with Ebola on controlled movement restrictions prior to October 15, 2014? How will the CDC or other officials be able to confirm that persons on controlled movement restrictions are in fact complying with those restrictions?
3. Once an individual is diagnosed with Ebola, what protocols and procedures exist within the CDC, or any other federal agency, to inform and coordinate with state and local officials?

I thank you for your prompt attention to this formal request for an investigation by your office into these issues. I am also requesting a formal response by your office, no later than November 3, 2014, with information on when you anticipate this investigation to commence, the estimated duration of the investigation, and the date when a final report will be available.

Sincerely,

A handwritten signature in blue ink that reads "Sam Johnson". The signature is written in a cursive, flowing style.

Sam Johnson
Member of Congress