

**From:** [London, Sarah](#)  
**To:** [Mishaan, Jessica](#)  
**Subject:** FW: Your request  
**Date:** Thursday, November 13, 2014 6:00:38 PM  
**Attachments:** [PRA Wcax Ebola Redacted.pdf](#)

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-----Original Message-----

From: London, Sarah  
Sent: Thursday, November 13, 2014 3:54 PM  
To: 'Midura, Kyle'  
Subject: Your request

Kyle,

Attached please find records of the Governor's Office in response to your public record act request dated October 29, 2014. I am now aware that the Health Department has a significant volume of records as well (approx. 450 pages), and you should contact their General Counsel, David Englander at [David.Englander@state.vt.us](mailto:David.Englander@state.vt.us) to arrange receipt. Those records may involve a charge due to volume.

We have withheld and redacted the following types of information on the following grounds: certain "personal information" including identifying information and information related to "medical or psychological facts" pursuant to 1 VSA 317(c)(7); certain security-related information pursuant to 1 VSA 317(c)(25); attorney-client communications pursuant to 1 VSA 317(c)(3); and executive privileged communications involving the Governor and/or members of his senior staff pursuant to 1 VSA 317(c)(1) and (4).

We have tried to reveal as much information as possible about which agencies were involved and the nature of their involvement in this matter, while trying to respect privacy interests related to this individual's health and mental health. We have sought to implement the Vermont Supreme Court's balancing test for the release of "personal" information, in which the public interest in disclosure is weighed against the potential harm to the individual. Using the Supreme Court test, we have withheld or redacted information that would reveal "intimate details of a person's life, including any information that might subject the person to embarrassment, harassment, disgrace, or loss of employment or friends." *Trombley v. Bellows Falls Union High School District No. 27*, 160 Vt. 101, 110 (1993).

Feel free to call me with any questions. If you feel information has been withheld in error, you may appeal to the Governor's Chief of Staff, Liz Miller at [Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us)

Sincerely,  
Sarah

Sarah London  
Counsel to the Governor  
802-828-3333  
[sarah.london@state.vt.us](mailto:sarah.london@state.vt.us)

## London, Sarah

---

**From:** Miller, Elizabeth  
**Sent:** Monday, October 27, 2014 11:08 AM  
**To:** London, Sarah  
**Subject:** Fwd: Health protocols for Ebola monitoring in Vermont- summary and update

more detail

Elizabeth H. Miller  
[REDACTED] cell  
[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

Begin forwarded message:

**From:** "Allen, Susan" <[Susan.Allen@state.vt.us](mailto:Susan.Allen@state.vt.us)>  
**Date:** October 27, 2014 at 11:04:39 AM EDT  
**To:** "Miller, Elizabeth" <[Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us)>  
**Subject:** FW: Health protocols for Ebola monitoring in Vermont- summary and update

Is this what you wanted?

---

**From:** Dolan, Tracy  
**Sent:** Friday, October 24, 2014 2:10 PM  
**To:** Louras, Chris  
**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond  
**Subject:** RE: Health protocols for Ebola monitoring in Vermont- summary and update

Good afternoon Mayor Louras,

Answers to you questions are below. We are also suggesting a call with local officials in Rutland and local law enforcement this afternoon at 4pm (details at end of message)

While our answers below do not name the particular individual of concern (we are using this process to establish a protocol that we might use in other similar situations) please know that we are very much aware of the particulars of this case and that we believe this guidance will serve the situation in Rutland well.

1. Who specifically are the healthcare team members in the Rutland area that are prepared to provide "active post-arrival monitoring" on a daily basis?

Joanne Calvi, the district director for the VDH Rutland District Office and a public health nurse, is the lead for this contact and has briefed other staff members. They are available in Rutland at any time that the traveler arrives. We will provide contact information to you and your local authorities for all relevant staff this afternoon both on our call and electronically.

2. When and where specifically will the healthcare team members make initial contact w/ [REDACTED] to advise that daily monitoring is required?

VDH Rutland District office staff will make contact with the traveler immediately upon arrival in Rutland. We are in contact with CDC screening at JFK, Vermont Homeland Security and VIC, and local officials. If we are aware of the method of arrival in Vermont, the traveler will be met at his destination. If that arrival is in Burlington, our Health staff here in Burlington will meet him first. If possible, first contact will be made by telephone to ask about fever or symptoms then to be followed by face to face contact as per CDC recommendations.

In the case of a traveler that has attempted to or has in fact provided medical care or otherwise been in close contact with someone that has Ebola, we will ask first for the traveler to participate in voluntary quarantine for 21 days from the time they left the affected countries or had close contact with an Ebola patient. If the traveler refuses to enter voluntary quarantine, they will be served with a public health order to be quarantined for the same time period. In either case, twice daily face-to-face contact will be made by VDH local staff to monitor for fever and symptoms. Based on our knowledge of the specific traveler from Rutland we have discussed, we anticipate that we will be asking the traveler to enter voluntary quarantine. If the traveler refuses to comply, an emergency order will be on hand and ready to deliver to the traveler (more below).

3. If the healthcare team members fail to make initial contact w/ [REDACTED] and he makes contact with local officials, do those local officials have the legal authority to advise [REDACTED] that daily monitoring is required?

We would ask local officials to notify us as soon as they become aware of the traveler if he arrives unannounced. Local VDH staff will be available at any time to make this contact with the traveler.

4. Where will [REDACTED] reside as he is undergoing daily monitoring?

If the traveler has a residence, he/she will be quarantined in that location. During quarantine, the traveler will not be permitted to leave the residence. Food and other necessities will be provided, either by AHS or an associated agency.

5. If [REDACTED] as he asserts, where will the daily monitoring occur and what would be the DoH plan to keep contact if [REDACTED]?

If the traveler does not have a residence, AHS economic services will be contacted to find a location for him/her for the quarantine period. They are currently actively searching for a location for the current individual as a contingency plan and we are attempting to secure a location by COB today.

6. If [REDACTED] complies with daily monitoring, has no movement restrictions, but subsequently approaches the press (as he has done in Rutland before) to provide details of his travels as already publicly posted on Facebook, who specifically will fill role as PIO?

We would request that VDH and the Rutland local officials share a Joint Information System and coordinate messaging. Nancy Erickson, the director of communications for VDH will be the lead for us.

7. If he is asked to voluntarily quarantine, where specifically will the voluntary quarantine take place?

Whether voluntary or not, quarantine will be spent at the traveler's residence. If the traveler does not have a residence, as indicated above, AHS will assign them a location for the quarantine period.

8. If he is deemed non-compliant for daily monitoring, and the Commissioner exercises the authority to involuntarily quarantine, where specifically will the involuntary quarantine take place, who specifically will place [REDACTED] into that location, and what security measures will be established to enforce the quarantine?

If a traveler has indicated that they do not intend to comply or at any point fails to comply with the voluntary quarantine, VDH will work with law enforcement to deliver the health order and enforce it. VDH will request that the local Sheriff or law enforcement personnel provide 24/7 posting of an officer to the traveler's residence or in the case of homelessness, to the location that we have provided for him/her to be quarantined.

VDH would suggest a conference call/meeting this afternoon at 1600 with Rutland elected officials, Rutland PD, Rutland Sheriff and any other necessary local partners. If this is acceptable, the following conference line is available: [REDACTED] room [REDACTED]. We ask that Rutland-based VDH staff can either host the meeting locally or travel to city offices.

Sincerely,

Tracy Dolan

Acting Commissioner of Health  
Vermont Department of Health  
108 Cherry Street, Burlington, VT 05402-0070  
[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)  
tel: [REDACTED]  
fax: 802-951-1275

**From:** Christopher Louras [<mailto:mayorlouras@gmail.com>]

**Sent:** Friday, October 24, 2014 8:07 AM

**To:** Dolan, Tracy

**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond

**Subject:** Re: Health protocols for Ebola monitoring in Vermont- summary and update

Thank you. Standing by.

Chris

On Fri, Oct 24, 2014 at 7:53 AM, Dolan, Tracy <[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)> wrote:

We have been working on many of these same questions specific to Rutland's situation since yesterday. I will send answers later today once we've worked out a few more details with our local partners in Rutland.

Sent from my iPhone



On Oct 24, 2014, at 6:32 AM, "Christopher Louras" <[mayorlouras@gmail.com](mailto:mayorlouras@gmail.com)> wrote:

All,

If the City of Rutland defers to the State of Vermont / CDC and presupposes that [REDACTED] poses no risk exposure, thus accepting the health protocols for Ebola monitoring in Vermont (as established by the Commissioner of Health), and also understanding that the DoH "look(s) forward to assisting local officials with any concerns," we would ask the following questions:

Who specifically are the healthcare team members in the Rutland area that are prepared to provide "active post-arrival monitoring" on a daily basis?

When and where specifically will the healthcare team members make initial contact w/ [REDACTED] to advise that daily monitoring is required?

If the healthcare team members fail to make initial contact w/ [REDACTED] and he makes contact with local officials, do those local officials have the legal authority to advise [REDACTED] that daily monitoring is required?

Where will [REDACTED] reside as he is undergoing daily monitoring?

If [REDACTED] as he asserts, where will the daily monitoring occur and what would be the DoH plan to keep contact if [REDACTED]?

If he is asked to voluntarily quarantine, where specifically will the voluntary quarantine take place?

If he is deemed non-compliant for daily monitoring, and the Commissioner exercises the authority to involuntarily quarantine, where specifically will the involuntary quarantine take place, who specifically will place [REDACTED] into that

location, and what security measures will be established to enforce the quarantine?

Thanks in advance for assisting with our concerns.

Chris

On Thu, Oct 23, 2014 at 1:47 PM, Dolan, Tracy <[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)> wrote:

I just wanted to provide a brief summary/update on our plans for Ebola-related monitoring, quarantine and possible emergency health orders.

- The Department of Health has an emergency health order for Ebola quarantine finalized in the event we need to utilize it.
- We now have teams that are prepared to provide 'active post-arrival monitoring' on a daily basis for passengers arriving in Vermont with a recent travel history to the affected region.
- Depending on the risk of exposure, we can include quarantine as part of that health monitoring. For example, if a traveler arrives in Vermont who was working with patients in West Africa but for some reason was not held at one of the major airports and was cleared to fly into Vermont, we have the option of requesting that either they comply with daily health monitoring OR that they comply with quarantine (depending on risk of exposure).
- If a traveler does not comply with daily health monitoring or quarantine (where that is required), we will immediately contact the local Sheriff to deliver an emergency health order which would then authorize mandatory quarantine for up to 21 days.
- While CDC guidance indicated that active post arrival monitoring will begin on Monday, October 27<sup>th</sup> or later, the Vermont Department of Health can and will begin this monitoring at any time once we have relevant information.
- Over the next two weeks, our sources from CDC may not be able to provide this information in a timely manner so any assistance you can provide in the meantime with arrival information or contact information for a recent traveler to Guinea, Sierra Leone or Liberia, would be greatly appreciated. Therefore, due to this delay, if you have

information about a specific traveler who is arriving into Vermont and can provide us with the arrival date and the address/contact information of the traveler, we can put our process in place immediately.

We look forward to assisting local officials with any concerns that they may have potential public health risks to their communities.

Sincerely,

Tracy Dolan  
Acting Commissioner of Health  
Vermont Department of Health  
108 Cherry Street, Burlington, VT 05402-0070  
[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)  
tel: [REDACTED]  
fax: 802-951-1275

## Spaulding, Jeb

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**From:** Miller, Elizabeth  
**Sent:** Saturday, October 25, 2014 9:54 AM  
**To:** Spaulding, Jeb  
**Subject:** Fwd: Mission accomplished??

Sent from my iPhone

Begin forwarded message:

**From:** "Allen, Susan" <[Susan.Allen@state.vt.us](mailto:Susan.Allen@state.vt.us)>  
**Date:** October 24, 2014 at 6:06:16 PM EDT  
**To:** "Rogan, Bob" <[Bob.Rogan@mail.house.gov](mailto:Bob.Rogan@mail.house.gov)>  
**Cc:** "Miller, Elizabeth" <[Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us)>  
**Subject:** Re: Mission accomplished??

Great. [REDACTED]

Sent from my iPhone

On Oct 24, 2014, at 5:55 PM, "Rogan, Bob" <[Bob.Rogan@mail.house.gov](mailto:Bob.Rogan@mail.house.gov)> wrote:

Fyi

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Sent using BlackBerry

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**From:** Marcus, Robert [[mailto:Robert\\_N\\_Marcus@who.eop.gov](mailto:Robert_N_Marcus@who.eop.gov)]  
**Sent:** Friday, October 24, 2014 05:51 PM  
**To:** Rogan, Bob  
**Subject:**

<http://newyork.cbslocal.com/2014/10/24/new-york-new-jersey-set-up-mandatory-quarantine-requirement-amid-ebola-threat/>

Robert N. Marcus  
Special Assistant to the President  
White House Office of Legislative Affairs  
[rmarcus@who.eop.gov](mailto:rmarcus@who.eop.gov)  
[REDACTED]

## Spaulding, Jeb

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**From:** Dolan, Tracy  
**Sent:** Thursday, October 23, 2014 1:47 PM  
**To:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth  
**Cc:** Louras, Chris; Rogan, Bob; Miller, Elizabeth; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond  
**Subject:** Health protocols for Ebola monitoring in Vermont- summary and update

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We look forward to assisting local officials with any concerns that they may have potential public health risks to their communities.

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Tracy Dolan  
Acting Commissioner of Health  
Vermont Department of Health  
108 Cherry Street, Burlington, VT 05402-0070  
[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)  
tel: [REDACTED]  
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## Spaulding, Jeb

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**Sent:** Friday, October 24, 2014 8:07 AM  
**To:** Dolan, Tracy  
**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond  
**Subject:** Re: Health protocols for Ebola monitoring in Vermont- summary and update

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All,

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Where will [REDACTED] reside as he is undergoing daily monitoring?

If [REDACTED] as he asserts, where will the daily monitoring occur and what would be the DoH plan to keep contact if [REDACTED]?

If [REDACTED] complies with daily monitoring, has no movement restrictions, but subsequently approaches the press (as he has done in Rutland before) to provide details of his travels as already publicly posted on Facebook, who specifically will fill role as PIO?

If he is asked to voluntarily quarantine, where specifically will the voluntary quarantine take place?

If he is deemed non-compliant for daily monitoring, and the Commissioner exercises the authority to involuntarily quarantine, where specifically will the involuntary quarantine take place, who specifically will place [REDACTED] into that location, and what security measures will be established to enforce the quarantine?

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Chris

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Sincerely,

Tracy Dolan  
Acting Commissioner of Health  
Vermont Department of Health  
108 Cherry Street, Burlington, VT 05402-0070  
[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)  
tel: [REDACTED]  
fax: 802-951-1275



**Spaulding, Jeb**

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**From:** Dolan, Tracy  
**Sent:** Monday, October 27, 2014 8:45 AM  
**To:** Tom Huebner  
**Cc:** Spaulding, Jeb; Bell, Chris; Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klamm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob  
**Subject:** Re: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

Thanks. We are considering this in our preparation and communication plans this morning.

Sent from my iPhone

On Oct 27, 2014, at 8:35 AM, "Tom Huebner" <[thuebner@rrmc.org](mailto:thuebner@rrmc.org)> wrote:

## **N.Y. / REGION**

# ***The Flu, TB and Now Ebola: A Rare Legal Remedy Returns***

**By BENJAMIN WEISER and J. DAVID GOODMAN** OCT. 26, 2014

Photo

<image001.jpg>

Passengers passing through U.S. Customs at Newark Liberty International Airport on Sunday. Credit Robert Stolarik for The New York Times

It was nearly 100 years ago that an influenza pandemic led to sweeping quarantines in American cities, and it was more than two decades ago that patients in New York were forced into isolation after an outbreak of tuberculosis.

In modern America, public health actions of such gravity are remarkably rare. So the decisions by New York and New Jersey on Friday to quarantine some travelers returning from the Ebola zone in West Africa have taken public officials into unfamiliar legal and medical territory.

From public health advocates and civil liberties lawyers has come sharp criticism, and the first person to be detained under the new protocol, a nurse who was quarantined in New Jersey upon returning

from Sierra Leone, lashed out on Sunday at Gov. Chris Christie as her lawyer said he would mount a legal challenge to her confinement.

Mr. Christie on Sunday defended his policy, and Florida and Illinois have ordered similar restrictions. In Connecticut, nine people who may have been exposed to Ebola have been confined to their homes under an order signed by Gov. Dannel P. Malloy on Oct. 7.

But on Sunday night, barely two days after his joint announcement with Mr. Christie, Gov. Andrew M. Cuomo of New York announced his state would not go as far as New Jersey has.

The nurse, Kaci Hickox, gave a critical interview to CNN on Sunday. Later, in an email to The New York Times, she wrote, "My human rights have been violated, and we must react in order to ensure that other health care workers do not endure such injustice."

Donna E. Lieberman, the executive director of the New York Civil Liberties Union, said the most restrictive protocols are far too broad.

"The current order is sweeping in individuals who are asymptomatic and who may never develop symptoms," Ms. Lieberman said. "I think there is a serious question as to whether the governor has the authority to impose the broad quarantine that he has imposed," she added.

The quarantine by New Jersey of medical workers returning from Ebola-afflicted areas of West Africa is virtually without precedent in the modern history of the nation, public health and legal experts said on Sunday.

"This is, I think, pushing the envelope quite a bit and is highly counterproductive," Lawrence O. Gostin, a professor of global health law at Georgetown University, said. "I can't think of a situation where any jurisdiction in the United States in modern times has simply quarantined a whole class of people."

In a new era of mass travel and global pandemics, public health officials have seen the utility of quarantines to rein in outbreaks that appear to be spiraling out of control. But the approach, experts said, is an extreme one.

"It doesn't seem like we're to that stage yet," Steven D. Gravelly said, a lawyer who helped Virginia rewrite its laws on quarantine to make it easier for the state to respond quickly to disease outbreaks. Instead, he said, "there's so much anxiety right now, that's become the problem."

Government officials, he added, need to explain "why are you doing this, what do you hope to accomplish. Because otherwise people read into it things that are not there."

The power to impose quarantines derives from the general police power granted to states in the Constitution. But over the last century, state and federal authorities have moved away from broadly quarantining categories of people, said Mr. Gostin, adding that one would have to reach back to the influenza pandemic of 1918 to begin to find the sort of blanket approach being employed in response to Ebola in New Jersey.

General quarantines, seen as having only limited effectiveness even when employed against the flu a century ago, fell out of favor as antibiotics and other treatments were developed to more directly address the contagious without affecting those who might have been exposed but display no sickness.

At the height of the AIDS epidemic, quarantines were supported in some quarters, but no such measures were ever adopted. Similarly, there were no quarantines in the United States during recent pandemics of H1N1 or SARS.

The last time patients in New York City were forced into isolation came with the outbreak of multidrug-resistant tuberculosis in the early 1990s, said Wendy E. Parmet, professor of health policy and law at Northeastern University School of Law. In those cases, officials targeted those recalcitrant patients who refused to take their medications, she said, rather than every person who tested positive, and even that practice faced court challenges. The approach resulted in the less restrictive “directly observed therapy,” in which patients were forced to take medications in front of officials, she said.

“I’m very troubled by what we’re seeing and not seeing,” Ms. Parmet said of the current isolation efforts. “Coming down hard makes good press but it doesn’t make good public health,” she said.

Ms. Parmet added: “Treating nurses like criminals is not the way to go.”

While Mr. Cuomo provided the first details of New York’s plans, New Jersey has provided little information about how it plans to carry out its quarantine process.

“I’m very worried about it,” Mr. Gostin said. “We used to think that we had balanced public health and civil liberties, but I think in this case we have forgotten that balance. And I’m one who thinks that we should always privilege public health. I’m not a civil libertarian.”

Udi Ofer, the head of the American Civil Liberties Union in New Jersey, said the policy of quarantining health care workers like Ms. Hickox raised serious concerns “about the state abusing its powers” and could spread the very fear that the order appeared aimed at counteracting.

"By forcibly detaining people, we are also frightening the public and may deter genuinely sick people who fear quarantine from seeking the treatments they deserve," Mr. Ofer said in an email.

The Centers for Disease Control and Prevention, which formulates and advises on policies such as infection control, does not have regulatory authority over domestic health emergencies. That falls to the states. However, the policy announced on Friday relates to international movement, a realm that legal experts say is solidly within the bounds of federal authority

"If the feds thought the quarantine imposed by the three states interferes with federal authority over international or interstate movement, they could challenge what the states have done," David Paul Fidler said, a law professor at Indiana University and an expert on quarantine.

And the virus has presented at least one unusual challenge for law enforcement agencies, senior American officials said on Sunday. They described how agencies had urgently investigated a man who wrote a bizarre post on social media that he was going to try and contract Ebola in Africa and then return to the United States.

According to senior American officials, the man traveled to the West African country of Guinea in the past month in the hopes of working alongside humanitarian assistance organizations treating patients. The organizations quickly determined that the man had no medical expertise and was acting strangely, and they turned him away

Even though his Facebook post indicated that he was mentally unstable, mentioning a time machine at one point, a multi-agency investigation was launched that involved the F.B.I., Customs and Border Protection, and the Centers for Disease Control and Prevention.

In Guinea, C.D.C. officials interviewed the man and took his temperature several times, and determined that he showed no signs of the virus. The C.D.C. had no legal ability to hold the man and he is not in the custody of American or Guinean authorities there, American officials said Sunday.

By Sunday night, officials said they do not believe they can stop him from returning to the United States, but said federal authorities would be closely monitoring him when he arrived, likely in the next several days.

"It's not that we were trying to prevent him from returning, we were just ensuring that he didn't pose a health risk to other travelers," said a senior American official. "When we determined that he didn't pose a risk we had no issue with him flying home."

## Spaulding, Jeb

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**From:** Tom Huebner <[thuebner@rrmc.org](mailto:thuebner@rrmc.org)>  
**Sent:** Monday, October 27, 2014 10:59 AM  
**To:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Tom Huebner; Dolan, Tracy; Spaulding, Jeb; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klammm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob; Woodruff, Mary; Kelso, Patsy  
**Subject:** FW: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

fyi

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**From:** Nicholas Sherman [<mailto:Nick@ksepartners.com>]  
**Sent:** Monday, October 27, 2014 9:58 AM  
**To:** Tom Huebner  
**Subject:** Re: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

Just a heads up. We learned that WCAX is sending Kyle Midura, one of their top reporters to Rutland today. Not sure if its related but its somewhat unusual from him to get sent down there as Chittenden County and Montpelier are normally his range of coverage,

Nick

Nick Sherman  
KSE Partners, LLP  
26 State Street, Suite 8  
Montpelier VT, 05602  
  
[nick@ksepartners.com](mailto:nick@ksepartners.com)

---

**From:** Thomas Huebner <[Thuebner@rrmc.org](mailto:Thuebner@rrmc.org)>  
**Date:** Monday, October 27, 2014 at 8:37 AM  
**To:** Nicholas Sherman <[Nick@ksepartners.com](mailto:Nick@ksepartners.com)>  
**Subject:** FW: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

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**From:** Tom Huebner  
**Sent:** Monday, October 27, 2014 8:36 AM  
**To:** 'Spaulding, Jeb'; Bell, Chris  
**Cc:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Dolan, Tracy; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klammm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob  
**Subject:** RE: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

# *The Flu, TB and Now Ebola: A Rare Legal Remedy Returns*

By BENJAMIN WEISER and J. DAVID GOODMAN OCT. 26, 2014

Photo



Passengers passing through U.S. Customs at Newark Liberty International Airport on Sunday. Credit Robert Stolarik for The New York Times

It was nearly 100 years ago that an influenza pandemic led to sweeping quarantines in American cities, and it was more than two decades ago that patients in New York were forced into isolation after an outbreak of tuberculosis.

In modern America, public health actions of such gravity are remarkably rare. So the decisions by New York and New Jersey on Friday to quarantine some travelers returning from the Ebola zone in West Africa have taken public officials into unfamiliar legal and medical territory.

From public health advocates and civil liberties lawyers has come sharp criticism, and the first person to be detained under the new protocol, a nurse who was quarantined in New Jersey upon returning from Sierra Leone, lashed out on Sunday at Gov. Chris Christie as her lawyer said he would mount a legal challenge to her confinement.

Mr. Christie on Sunday defended his policy, and Florida and Illinois have ordered similar restrictions. In Connecticut, nine people who may have been exposed to Ebola have been confined to their homes under an order signed by Gov. Dannel P. Malloy on Oct. 7.

But on Sunday night, barely two days after his joint announcement with Mr. Christie, Gov. Andrew M. Cuomo of New York announced his state would not go as far as New Jersey has.

The nurse, Kaci Hickox, gave a critical interview to CNN on Sunday. Later, in an email to The New York Times, she wrote, "My human rights have been violated, and we must react in order to ensure that other health care workers do not endure such injustice."

Donna E. Lieberman, the executive director of the New York Civil Liberties Union, said the most restrictive protocols are far too broad.

"The current order is sweeping in individuals who are asymptomatic and who may never develop symptoms," Ms. Lieberman said. "I think there is a serious question as to whether the governor has the authority to impose the broad quarantine that he has imposed," she added.

The quarantine by New Jersey of medical workers returning from Ebola-afflicted areas of West Africa is virtually without precedent in the modern history of the nation, public health and legal experts said on Sunday.

"This is, I think, pushing the envelope quite a bit and is highly counterproductive," Lawrence O. Gostin, a professor of global health law at Georgetown University, said. "I can't think of a situation where any jurisdiction in the United States in modern times has simply quarantined a whole class of people."

In a new era of mass travel and global pandemics, public health officials have seen the utility of quarantines to rein in outbreaks that appear to be spiraling out of control. But the approach, experts said, is an extreme one.

"It doesn't seem like we're to that stage yet," Steven D. Gravelly said, a lawyer who helped Virginia rewrite its laws on quarantine to make it easier for the state to respond quickly to disease outbreaks. Instead, he said, "there's so much anxiety right now, that's become the problem."

Government officials, he added, need to explain "why are you doing this, what do you hope to accomplish. Because otherwise people read into it things that are not there."

The power to impose quarantines derives from the general police power granted to states in the Constitution. But over the last century, state and federal authorities have moved away from broadly quarantining categories of people, said Mr. Gostin, adding that one would have to reach back to the influenza pandemic of 1918 to begin to find the sort of blanket approach being employed in response to Ebola in New Jersey.

General quarantines, seen as having only limited effectiveness even when employed against the flu a century ago, fell out of favor as antibiotics and other treatments were developed to more directly address the contagious without affecting those who might have been exposed but display no sickness.

At the height of the AIDS epidemic, quarantines were supported in some quarters, but no such measures were ever adopted. Similarly, there were no quarantines in the United States during recent pandemics of H1N1 or SARS.

The last time patients in New York City were forced into isolation came with the outbreak of multidrug-resistant tuberculosis in the early 1990s, said Wendy E. Parmet, professor of health policy and law at Northeastern University School of Law. In those cases, officials targeted those recalcitrant patients who refused to take their medications, she said, rather than every person who tested positive, and even that practice faced court challenges. The approach resulted in the less restrictive “directly observed therapy,” in which patients were forced to take medications in front of officials, she said.

“I’m very troubled by what we’re seeing and not seeing,” Ms. Parmet said of the current isolation efforts. “Coming down hard makes good press but it doesn’t make good public health,” she said.

Ms. Parmet added: “Treating nurses like criminals is not the way to go.”

While Mr. Cuomo provided the first details of New York’s plans, New Jersey has provided little information about how it plans to carry out its quarantine process.

“I’m very worried about it,” Mr. Gostin said. “We used to think that we had balanced public health and civil liberties, but I think in this case we have forgotten that balance. And I’m one who thinks that we should always privilege public health. I’m not a civil libertarian.”

Udi Ofer, the head of the American Civil Liberties Union in New Jersey, said the policy of quarantining health care workers like Ms. Hickox raised serious concerns “about the state abusing its powers” and could spread the very fear that the order appeared aimed at counteracting.

“By forcibly detaining people, we are also frightening the public and may deter genuinely sick people who fear quarantine from seeking the treatments they deserve,” Mr. Ofer said in an email.

The Centers for Disease Control and Prevention, which formulates and advises on policies such as infection control, does not have regulatory authority over domestic health emergencies. That falls to the states. However, the policy announced on Friday relates to international movement, a realm that legal experts say is solidly within the bounds of federal authority

“If the feds thought the quarantine imposed by the three states interferes with federal authority over international or interstate movement, they could challenge what the states have done,” David Paul Fidler said, a law professor at Indiana University and an expert on quarantine.



And the virus has presented at least one unusual challenge for law enforcement agencies, senior American officials said on Sunday. They described how agencies had urgently investigated a man who wrote a bizarre post on social media that he was going to try and contract Ebola in Africa and then return to the United States.

According to senior American officials, the man traveled to the West African country of Guinea in the past month in the hopes of working alongside humanitarian assistance organizations treating patients. The organizations quickly determined that the man had no medical expertise and was acting strangely, and they turned him away.

Even though his Facebook post indicated that he was mentally unstable, mentioning a time machine at one point, a multi-agency investigation was launched that involved the F.B.I., Customs and Border Protection, and the Centers for Disease Control and Prevention.

In Guinea, C.D.C. officials interviewed the man and took his temperature several times, and determined that he showed no signs of the virus. The C.D.C. had no legal ability to hold the man and he is not in the custody of American or Guinean authorities there, American officials said Sunday.

By Sunday night, officials said they do not believe they can stop him from returning to the United States, but said federal authorities would be closely monitoring him when he arrived, likely in the next several days.

"It's not that we were trying to prevent him from returning, we were just ensuring that he didn't pose a health risk to other travelers," said a senior American official. "When we determined that he didn't pose a risk we had no issue with him flying home."

## London, Sarah

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**From:** Allen, Susan  
**Sent:** Tuesday, October 28, 2014 6:02 PM  
**To:** Green, Geoff; Carrier, Janis; Trombley, Shana; Kunin, Lisa; Mishaan, Jessica; London, Sarah; Johnson, Harriet; Spaulding, Susan  
**Subject:** I thought this went out to all of us. It's from the health dept.:

### **Media Contact:**

Vermont Department of Health  
Communication Office  
802-863-7281

BURLINGTON – The Vermont Department of Health has requested a Vermonter who has just returned from West Africa to enter voluntary quarantine and active monitoring for fever or symptoms of Ebola for 21 days. This individual agreed, and began quarantine on Oct. 27.

This person does not have an elevated temperature, has no signs or symptoms of illness and is not a health risk to anyone at this time. A person infected with Ebola cannot pass the infection on to others until he or she has symptoms – and then only through direct contact with bodily fluids. Ebola is not an airborne virus.

Public health and law enforcement officials from Vermont met this individual at JFK International Airport on Oct. 27, and provided transport back to Vermont.

Federal officials assessed this person before allowing travel back to the U.S. and concluded there was not a health risk to the traveling public. The reason for the Vermont Health Department to request quarantine in this circumstance is that the individual was in the West African countries of Guinea and Sierra Leone with the stated intention of personally investigating the Ebola epidemic in those countries, and while he has represented himself in public statements as a physician, he is not licensed as a doctor or health professional in Vermont. He was not traveling or affiliated with any governmental, public health, medical or aid organization.

"We do not know whether this person had exposure to the virus while in West Africa," said acting Health Commissioner Tracy Dolan. "Because we can't determine this – and combined with what we know about this person's unsupervised travel, intent to help as a medical doctor, and his statements – we are taking the precaution of quarantine while we actively monitor temperature and symptoms for 21 days."

Twenty-one days is the longest it can take from the time a person is infected with Ebola until that person has symptoms of Ebola. Any individual returning to Vermont from the affected countries will be actively monitored during that time and, depending on individual circumstances, active monitoring may include voluntary or mandatory quarantine.

This action is being taken both to protect others and ensure this person receives early and high quality care in the unlikely event that illness develops. Throughout the 21 days of quarantine, this individual will receive twice-daily health checks, plus food, shelter and other comforts. Local public health officials will be monitoring and in contact with this individual throughout quarantine.

To protect privacy and security, neither this person's identity nor the location of quarantine will be released by the state.

### **Quarantine and Active Monitoring**

Quarantine is a well established, although rarely used, public health action that separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick. If a person is under quarantine, it means that he or she must stay in their home or at an alternate location deemed appropriate by the Health Department.

Active monitoring means that health officials stay in daily contact – by phone or other technology and/or visit for the entire 21 days following a person's last possible date of exposure to Ebola virus.

If a traveler begins to show symptoms, the Health Department will take immediate action to implement protocols to transport the patient to a designated facility such as Fletcher Allen Health Care. The Health Department has been working closely with health care providers and hospitals to prepare in the event a symptomatic individual requires treatment.

### **About Ebola**

Ebola is a dangerous viral disease that is epidemic in Liberia, Guinea and Sierra Leone, where public health and health care infrastructure has been insufficient to control its spread.

Ebola is only spread through direct contact with the blood or bodily fluids of a person who is sick or has died from Ebola. Health care workers or people caring for patients with Ebola or the dead are most at risk of contracting the disease.

Ebola is NOT spread by casual contact. It is not spread through the air, water or food produced in the U.S. Ebola does not spread easily from person to person like the flu, measles or active tuberculosis.

Visit [healthvermont.gov](http://healthvermont.gov) for up-to-date news, alerts and health information.

Follow us on [Twitter](#)

Join us on [Facebook](#)

**Allen, Susan**

---

**From:** Weinstein, David (Sanders) <David\_Weinstein@sanders.senate.gov>  
**Sent:** Tuesday, October 28, 2014 11:00 AM  
**To:** Allen, Susan  
**Subject:** RE: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

Any update? Just had a presser, and no-one mentioned it...

---

**From:** Allen, Susan [mailto:Susan.Allen@state.vt.us]  
**Sent:** Monday, October 27, 2014 11:09 AM  
**To:** Weinstein, David (Sanders)  
**Subject:** FW: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

See highlights at the bottom. Sue

**N.Y. / REGION**

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By **BENJAMIN WEISER** and **J. DAVID GOODMAN** OCT. 26, 2014  
Photo



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**Allen, Susan**

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**From:** Tracy, John (Leahy) <John\_Tracy@leahy.senate.gov>  
**Sent:** Monday, October 27, 2014 4:55 PM  
**To:** Allen, Susan  
**Subject:** RE: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

Thanks.

---

**From:** Allen, Susan [mailto:Susan.Allen@state.vt.us]  
**Sent:** Monday, October 27, 2014 4:53 PM  
**To:** Tracy, John (Leahy)  
**Subject:** Re: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

Smoothly. Arrival in Rutland around [REDACTED] I'll keep you posted.

Sent from my iPhone

On Oct 27, 2014, at 4:24 PM, "Tracy, John (Leahy)" <John\_Tracy@leahy.senate.gov> wrote:

How did the arrival go?

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**From:** Allen, Susan [mailto:Susan.Allen@state.vt.us]  
**Sent:** Monday, October 27, 2014 11:10 AM  
**To:** Tracy, John (Leahy)  
**Subject:** Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

See highlights at the bottom. Sue

## **N.Y. / REGION**

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**By BENJAMIN WEISER and J. DAVID GOODMAN** OCT. 26, 2014

Photo

<image001.jpg>

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## Allen, Susan

---

**From:** Tom Huebner <thuebner@rrmc.org>  
**Sent:** Monday, October 27, 2014 10:59 AM  
**To:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Tom Huebner; Dolan, Tracy; Spaulding, Jeb; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klammm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob; Woodruff, Mary; Kelso, Patsy  
**Subject:** FW: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

fyi

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**Sent:** Monday, October 27, 2014 9:58 AM  
**To:** Tom Huebner  
**Subject:** Re: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

Just a heads up. We learned that WCAX is sending Kyle Midura, one of their top reporters to Rutland today. Not sure if its related but its somewhat unusual from him to get sent down there as Chittenden County and Montpelier are normally his range of coverage,

Nick

Nick Sherman  
KSE Partners, LLP  
26 State Street, Suite 8  
Montpelier VT, 05602  
  
[nick@ksepartners.com](mailto:nick@ksepartners.com)

---

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**Subject:** FW: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

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**Sent:** Monday, October 27, 2014 8:36 AM  
**To:** 'Spaulding, Jeb'; Bell, Chris  
**Cc:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Dolan, Tracy; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klammm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob  
**Subject:** RE: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

# *The Flu, TB and Now Ebola: A Rare Legal Remedy Returns*

By BENJAMIN WEISER and J. DAVID GOODMAN OCT. 26, 2014

Photo



Passengers passing through U.S. Customs at Newark Liberty International Airport on Sunday. Credit Robert Stolarik for The New York Times

It was nearly 100 years ago that an influenza pandemic led to sweeping quarantines in American cities, and it was more than two decades ago that patients in New York were forced into isolation after an outbreak of tuberculosis.

In modern America, public health actions of such gravity are remarkably rare. So the decisions by New York and New Jersey on Friday to quarantine some travelers returning from the Ebola zone in West Africa have taken public officials into unfamiliar legal and medical territory.

From public health advocates and civil liberties lawyers has come sharp criticism, and the first person to be detained under the new protocol, a nurse who was quarantined in New Jersey upon returning from Sierra Leone, lashed out on

Sunday at Gov. Chris Christie as her lawyer said he would mount a legal challenge to her confinement.

Mr. Christie on Sunday defended his policy, and Florida and Illinois have ordered similar restrictions. In Connecticut, nine people who may have been exposed to Ebola have been confined to their homes under an order signed by Gov. Dannel P. Malloy on Oct. 7.

But on Sunday night, barely two days after his joint announcement with Mr. Christie, Gov. Andrew M. Cuomo of New York announced his state would not go as far as New Jersey has.

The nurse, Kaci Hickox, gave a critical interview to CNN on Sunday. Later, in an email to The New York Times, she wrote, "My human rights have been violated, and we must react in order to ensure that other health care workers do not endure such injustice."

Donna E. Lieberman, the executive director of the New York Civil Liberties Union, said the most restrictive protocols are far too broad.

"The current order is sweeping in individuals who are asymptomatic and who may never develop symptoms," Ms. Lieberman said. "I think there is a serious question as to whether the governor has the authority to impose the broad quarantine that he has imposed," she added.

The quarantine by New Jersey of medical workers returning from Ebola-afflicted areas of West Africa is virtually without precedent in the modern history of the nation, public health and legal experts said on Sunday.

"This is, I think, pushing the envelope quite a bit and is highly counterproductive," Lawrence O. Gostin, a professor of global health law at Georgetown University, said. "I can't think of a situation where any jurisdiction in the United States in modern times has simply quarantined a whole class of people."

In a new era of mass travel and global pandemics, public health officials have seen the utility of quarantines to rein in outbreaks that appear to be spiraling out of control. But the approach, experts said, is an extreme one.

"It doesn't seem like we're to that stage yet," Steven D. Gravelly said, a lawyer who helped Virginia rewrite its laws on quarantine to make it easier for the state to respond quickly to disease outbreaks. Instead, he said, "there's so much anxiety right now, that's become the problem."

Government officials, he added, need to explain "why are you doing this, what do you hope to accomplish. Because otherwise people read into it things that are not there."

The power to impose quarantines derives from the general police power granted to states in the Constitution. But over the last century, state and federal authorities have moved away from broadly quarantining categories of people, said Mr. Gostin, adding that one would have to reach back to the influenza pandemic of 1918 to



begin to find the sort of blanket approach being employed in response to Ebola in New Jersey.

General quarantines, seen as having only limited effectiveness even when employed against the flu a century ago, fell out of favor as antibiotics and other treatments were developed to more directly address the contagious without affecting those who might have been exposed but display no sickness.

At the height of the AIDS epidemic, quarantines were supported in some quarters, but no such measures were ever adopted. Similarly, there were no quarantines in the United States during recent pandemics of H1N1 or SARS.

The last time patients in New York City were forced into isolation came with the outbreak of multidrug-resistant tuberculosis in the early 1990s, said Wendy E. Parmet, professor of health policy and law at Northeastern University School of Law. In those cases, officials targeted those recalcitrant patients who refused to take their medications, she said, rather than every person who tested positive, and even that practice faced court challenges. The approach resulted in the less restrictive “directly observed therapy,” in which patients were forced to take medications in front of officials, she said.

“I’m very troubled by what we’re seeing and not seeing,” Ms. Parmet said of the current isolation efforts. “Coming down hard makes good press but it doesn’t make good public health,” she said.

Ms. Parmet added: “Treating nurses like criminals is not the way to go.”

While Mr. Cuomo provided the first details of New York’s plans, New Jersey has provided little information about how it plans to carry out its quarantine process.

“I’m very worried about it,” Mr. Gostin said. “We used to think that we had balanced public health and civil liberties, but I think in this case we have forgotten that balance. And I’m one who thinks that we should always privilege public health. I’m not a civil libertarian.”

Udi Ofer, the head of the American Civil Liberties Union in New Jersey, said the policy of quarantining health care workers like Ms. Hickox raised serious concerns “about the state abusing its powers” and could spread the very fear that the order appeared aimed at counteracting.

“By forcibly detaining people, we are also frightening the public and may deter genuinely sick people who fear quarantine from seeking the treatments they deserve,” Mr. Ofer said in an email.

The Centers for Disease Control and Prevention, which formulates and advises on policies such as infection control, does not have regulatory authority over domestic health emergencies. That falls to the states. However, the policy announced on Friday relates to international movement, a realm that legal experts say is solidly within the bounds of federal authority

“If the feds thought the quarantine imposed by the three states interferes with federal authority over international or interstate movement, they could challenge

what the states have done," David Paul Fidler said, a law professor at Indiana University and an expert on quarantine.

And the virus has presented at least one unusual challenge for law enforcement agencies, senior American officials said on Sunday. They described how agencies had urgently investigated a man who wrote a bizarre post on social media that he was going to try and contract Ebola in Africa and then return to the United States.

According to senior American officials, the man traveled to the West African country of Guinea in the past month in the hopes of working alongside humanitarian assistance organizations treating patients. The organizations quickly determined that the man had no medical expertise and was acting strangely, and they turned him away.

Even though his Facebook post indicated that he was mentally unstable, mentioning a time machine at one point, a multi-agency investigation was launched that involved the F.B.I., Customs and Border Protection, and the Centers for Disease Control and Prevention.

In Guinea, C.D.C. officials interviewed the man and took his temperature several times, and determined that he showed no signs of the virus. The C.D.C. had no legal ability to hold the man and he is not in the custody of American or Guinean authorities there, American officials said Sunday.

By Sunday night, officials said they do not believe they can stop him from returning to the United States, but said federal authorities would be closely monitoring him when he arrived, likely in the next several days.

"It's not that we were trying to prevent him from returning, we were just ensuring that he didn't pose a health risk to other travelers," said a senior American official. "When we determined that he didn't pose a risk we had no issue with him flying home."

**Allen, Susan**

---

**From:** Dolan, Tracy  
**Sent:** Monday, October 27, 2014 8:45 AM  
**To:** Tom Huebner  
**Cc:** Spaulding, Jeb; Bell, Chris; Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klamm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob  
**Subject:** Re: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

Thanks. We are considering this in our preparation and communication plans this morning.

Sent from my iPhone

On Oct 27, 2014, at 8:35 AM, "Tom Huebner" <[thuebner@rrmc.org](mailto:thuebner@rrmc.org)> wrote:

## N.Y. / REGION

# ***The Flu, TB and Now Ebola: A Rare Legal Remedy Returns***

**By BENJAMIN WEISER and J. DAVID GOODMAN** OCT. 26, 2014

Photo

<image001.jpg>

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Mr. Christie on Sunday defended his policy, and Florida and Illinois have ordered similar restrictions. In Connecticut, nine people who may have been exposed to Ebola have been confined to their homes under an order signed by Gov. Dannel P. Malloy on Oct. 7.

But on Sunday night, barely two days after his joint announcement with Mr. Christie, Gov. Andrew M. Cuomo of New York announced his state would not go as far as New Jersey has.

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In a new era of mass travel and global pandemics, public health officials have seen the utility of quarantines to rein in outbreaks that appear to be spiraling out of control. But the approach, experts said, is an extreme one.

"It doesn't seem like we're to that stage yet," Steven D. Gravelly said, a lawyer who helped Virginia rewrite its laws on quarantine to make it easier for the state to respond quickly to disease outbreaks. Instead, he said, "there's so much anxiety right now, that's become the problem."

Government officials, he added, need to explain “why are you doing this, what do you hope to accomplish. Because otherwise people read into it things that are not there.”

The power to impose quarantines derives from the general police power granted to states in the Constitution. But over the last century, state and federal authorities have moved away from broadly quarantining categories of people, said Mr. Gostin, adding that one would have to reach back to the influenza pandemic of 1918 to begin to find the sort of blanket approach being employed in response to Ebola in New Jersey.

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The last time patients in New York City were forced into isolation came with the outbreak of multidrug-resistant tuberculosis in the early 1990s, said Wendy E. Parmet, professor of health policy and law at Northeastern University School of Law. In those cases, officials targeted those recalcitrant patients who refused to take their medications, she said, rather than every person who tested positive, and even that practice faced court challenges. The approach resulted in the less restrictive “directly observed therapy,” in which patients were forced to take medications in front of officials, she said.

“I’m very troubled by what we’re seeing and not seeing,” Ms. Parmet said of the current isolation efforts. “Coming down hard makes good press but it doesn’t make good public health,” she said.

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“I’m very worried about it,” Mr. Gostin said. “We used to think that we had balanced public health and civil liberties, but I think in this case we have forgotten that balance. And I’m one who thinks that we should always privilege public health. I’m not a civil libertarian.”

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and could spread the very fear that the order appeared aimed at counteracting.

"By forcibly detaining people, we are also frightening the public and may deter genuinely sick people who fear quarantine from seeking the treatments they deserve," Mr. Ofer said in an email.

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"If the feds thought the quarantine imposed by the three states interferes with federal authority over international or interstate movement, they could challenge what the states have done," David Paul Fidler said, a law professor at Indiana University and an expert on quarantine.

And the virus has presented at least one unusual challenge for law enforcement agencies, senior American officials said on Sunday. They described how agencies had urgently investigated a man who wrote a bizarre post on social media that he was going to try and contract Ebola in Africa and then return to the United States.

According to senior American officials, the man traveled to the West African country of Guinea in the past month in the hopes of working alongside humanitarian assistance organizations treating patients. The organizations quickly determined that the man had no medical expertise and was acting strangely, and they turned him away.

Even though his Facebook post indicated that he was mentally unstable, mentioning a time machine at one point, a multi-agency investigation was launched that involved the F.B.I., Customs and Border Protection, and the Centers for Disease Control and Prevention.

In Guinea, C.D.C. officials interviewed the man and took his temperature several times, and determined that he showed no signs of the virus. The C.D.C. had no legal ability to hold the man and he is not in the custody of American or Guinean authorities there, American officials said Sunday.

By Sunday night, officials said they do not believe they can stop him from returning to the United States, but said federal authorities would be closely monitoring him when he arrived, likely in the next several days.

"It's not that we were trying to prevent him from returning, we were just ensuring that he didn't pose a health risk to other travelers," said a senior American official. "When we determined that he didn't pose a risk we had no issue with him flying home."

**Mishaan, Jessica**

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**From:** Miller, Elizabeth  
**Sent:** Sunday, October 26, 2014 11:14 PM  
**To:** Spaulding, Jeb; Allen, Susan; GPS  
**Subject:** NYTimes: Under Pressure, Cuomo Says Ebola Quarantines Will Allow Home Isolation

Cuomo office noted protocols not finalized and signed as of this afternoon. Tonight, change after pressure, fyi.

<http://www.nytimes.com/2014/10/27/nyregion/ebola-quarantine.html?smid=nytcore-iphone-share&smprod=nytcore-iphone>

Facing fierce resistance from the White House and medical experts, Gov. Andrew M. Cuomo said that people quarantined in New York who do not show symptoms of the disease would be allowed to remain at home.

Sent from my iPhone

**Mishaan, Jessica**

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**From:** Allen, Susan  
**Sent:** Thursday, October 23, 2014 3:26 PM  
**To:** Miller, Elizabeth  
**Subject:** FW: Joint Press Opportunity

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**From:** Jill Mazza Olson [mailto:[Jill@vahhs.org](mailto:Jill@vahhs.org)]  
**Sent:** Thursday, October 23, 2014 3:16 PM  
**To:** Allen, Susan  
**Subject:** Joint Press Opportunity

Hi Sue,

Wanted to chat about doing a joint press release or other press announcement re: Ebola. As you probably know, VDH has just sent to hospitals an invite to a call on Friday and a letter that finalizes a really important piece of the plan: suspected cases will be routed to FAHC or Dartmouth, using their transport services. This is an excellent step.

Anyway, we'd like to do a press release about it, thought it might be something good to do with you. Let me know!

**Jill Mazza Olson, MPA, FACHE**  
Vice President of Policy and Legislative Affairs  
Vermont Association of Hospitals and Health Systems  
(802) 223-3461 x104  
[REDACTED] (cell)



**Mishaan, Jessica**

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**From:** Miller, Elizabeth  
**Sent:** Friday, October 31, 2014 9:36 AM  
**To:** Bell, Chris  
**Subject:** Re: Call this afternoon

3 pm would be perfect if possible or later

Sent from my iPhone

On Oct 31, 2014, at 9:28 AM, Bell, Chris <[Chris.Bell@state.vt.us](mailto:Chris.Bell@state.vt.us)> wrote:

Liz,

Tracy asked me to set up a meeting for several of us this afternoon to talk about contingencies. Your schedule is probably the most tight. Do you have a 30 minute window for a meeting sometime after 1pm today? I can then send invitations to all necessary.

Thanks,

CB

Chris Bell  
Director  
Office of Public Health Preparedness,  
Emergency Medical Services, and Injury Prevention  
Vermont Department of Health

(802) 863-7223 Office  
(802) 863-7483 Fax

Email: [Chris.Bell@state.vt.us](mailto:Chris.Bell@state.vt.us)

**Mishaan, Jessica**

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**From:** Courtney Burke <Courtney.Burke@exec.ny.gov>  
**Sent:** Monday, October 27, 2014 3:32 PM  
**To:** Miller, Elizabeth  
**Subject:** RE: Vermont traveler from Guinea

Thank you for great coordination and reaching out. Hopefully we won't have to talk again.  
Courtney

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**From:** Miller, Elizabeth [mailto:Elizabeth.Miller@state.vt.us]  
**Sent:** Monday, October 27, 2014 3:21 PM  
**To:** Courtney Burke  
**Subject:** RE: Vermont traveler from Guinea

Thanks for the help/assistance; appreciate it. Liz

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**From:** Courtney Burke [mailto:Courtney.Burke@exec.ny.gov]  
**Sent:** Monday, October 27, 2014 3:20 PM  
**To:** Miller, Elizabeth  
**Subject:** RE: Vermont traveler from Guinea

Passenger on way to VT with VT authorities

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**From:** Miller, Elizabeth [mailto:Elizabeth.Miller@state.vt.us]  
**Sent:** Monday, October 27, 2014 12:06 PM  
**To:** Courtney Burke  
**Subject:** Vermont traveler from Guinea

I believe our Health Operations Team lead Chris Bell has left you a message. We could use assistance in obtaining some sort of process – whether a transport order to the border or other temporary order – that would allow our Health Operations Team to transport him to Vermont in the event he refuses a ride voluntarily. I understand that our state epidemiologist made that request to NY state health and was told no authority existed; NYC health declined to issue any order stating that their own monitoring protocol would dictate (we also spoke with the feds, as noted). The individuals contacted were as follows:

Bradley Tompkins, Infectious Disease Epidemiologist for VDH contacted NYS: Andie Newman, Veterinary Epidemiologist and NYC: Joel Achelsberg, medical epidemiologist in communicable diseases and CDC: Mark Lobato, Medical Officer with Division of Global Migration and Quarantine. All of these asks were made today and yesterday.

Without NY to VT border help, we will have no means to bring him out of New York safely to his home state in the event he is not willing to cooperate.

We have an admittedly very unusual situation here that would not apply to pretty much any other traveler situation we'd face.

[REDACTED]

[REDACTED] Vermont has protocols in place for active voluntary monitoring and, if needed, involuntary quarantine. While we would very much hope to work with this individual simply to monitor as allowed under the protocol, we cannot expect he will comply.

We are willing to take the unusual step to safely transport him back to Vermont, where he says he wishes to go, but unless we receive some assistance for transport from NY we will not be able to do so if he declines. In that case, this individual will be out on his own in New York, without assistance or monitoring. While he has stated the intention of taking public transportation back to Vermont, we have no way of knowing whether he will follow up on that, and we may lose an opportunity to help him and to conduct the monitoring for up to three weeks that would appear to be prudent here. We are willing to help make this situation more predictable and safe for him and for the public but need some help.

He is scheduled to arrive at [REDACTED] at JFK. Could you contact me or Chris at your earliest chance...thanks again for helping us work through this difficult issue.

[See final highlighted paragraphs]

## N.Y. / REGION

# *The Flu, TB and Now Ebola: A Rare Legal Remedy Returns*

By BENJAMIN WEISER and J. DAVID GOODMAN OCT. 26, 2014

Photo



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Elizabeth H. Miller

cell

[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

\*\*\*\*\*

WE WORK FOR THE PEOPLE  
Performance \* Integrity \* Pride

**Mishaan, Jessica**

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**From:** Bell, Chris  
**Sent:** Monday, October 27, 2014 3:15 PM  
**To:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Tom Huebner; Dolan, Tracy; Spaulding, Jeb; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klammer, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob; Woodruff, Mary; Kelso, Patsy  
**Subject:** RE: Health protocol for travelers - update

Good afternoon,

I just received word that the team is on the way back with [REDACTED]

We will have a briefing at 1600. I will send an invite.

Thanks,

CB

Chris Bell  
Director  
Office of Public Health Preparedness,  
Emergency Medical Services, and Injury Prevention  
Vermont Department of Health

(802) 863-7223 Office  
(802) 863-7483 Fax  
[REDACTED]

Email: Chris.Bell@state.vt.us

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**From:** Bell, Chris  
**Sent:** Monday, October 27, 2014 10:30 AM  
**To:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Tom Huebner; Dolan, Tracy; Spaulding, Jeb; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klammer, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob; Woodruff, Mary; Kelso, Patsy  
**Subject:** Re: Health protocol for travelers - update

Apologies,

Schedule change for this call. This will be at 1115. I will send an outlook invite shortly.

Thanks,

CB

Chris Bell  
Director  
Office of Public Health Preparedness,  
Emergency Medical Services, and  
Injury Prevention

Vermont Department of Health

Office: (802) 863-7223

Cell: [REDACTED]

On Oct 27, 2014, at 10:21, "Bell, Chris" <[Chris.Bell@state.vt.us](mailto:Chris.Bell@state.vt.us)> wrote:

Good morning,

We'd like to offer to have a brief call this morning at 1130 to update on the current status of this issue. Please call [REDACTED] room [REDACTED]

Thanks,

CB

Chris Bell

Director

Office of Public Health Preparedness,

Emergency Medical Services, and

Injury Prevention

Vermont Department of Health

Office: (802) 863-7223

Cell: [REDACTED]



**Mishaan, Jessica**

---

**From:** Marcoux, Roger  
**Sent:** Monday, October 27, 2014 3:14 PM  
**To:** Miller, Elizabeth  
**Cc:** Flynn, Joe; Dolan, Tracy; Manning, Michael; Hopkins, Richmond; Baker, James; Rogan, Bob; Flynn, Keith; Louras, Chris; Chen, Harry; Allen, Susan; Spaulding, Jeb; Covell, David; Mary Nemeth; Benard, Stephen; Bell, Chris; Scott, Phil  
**Subject:** RE: Person of Interest - Update Sunday 1100

Hello all,

I have just heard from Sheriff Benard who reports that the team is on the way back and they have the gentleman with them.

Roger

---

**From:** Marcoux, Roger  
**Sent:** Monday, October 27, 2014 7:34 AM  
**To:** Miller, Elizabeth  
**Cc:** Flynn, Joe; Dolan, Tracy; Manning, Michael; Hopkins, Richmond; Baker, James; Rogan, Bob; Flynn, Keith; Louras, Chris; Chen, Harry; Allen, Susan; Spaulding, Jeb; Covell, David; Mary Nemeth; Benard, Stephen; Bell, Chris; Scott, Phil  
**Subject:** Re: Person of Interest - Update Sunday 1100

Ok, they are on the road at this time

Sent from my iPhone

On Oct 27, 2014, at 7:15 AM, "Marcoux, Roger" <[Roger.Marcoux@state.vt.us](mailto:Roger.Marcoux@state.vt.us)> wrote:

Sheriff Benard has advised of a delay while the team awaits an updated order.....

Sent from my iPhone

On Oct 27, 2014, at 7:08 AM, "Marcoux, Roger" <[Roger.Marcoux@state.vt.us](mailto:Roger.Marcoux@state.vt.us)> wrote:

Team is on the way.

Sent from my iPhone

On Oct 26, 2014, at 6:43 PM, "Miller, Elizabeth" <[Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us)> wrote:

I have updated the NY executive office, port authority, homeland security and health officials with the current information known to Vermont and have requested further coordination with NY in the event he lands at JFK and otherwise clears the health screenings. I have been assured that they are taking this matter very seriously and are fully aware of the situation and willing to work with us.

I have informed NY that Chris Bell, our Health Operations Center incident commander, and Lt. Manning of VT Homeland Security, will serve as Vermont's main Points of Contact for that coordination. They will be in touch with their counterparts to discuss the situation further, with the goal of ensuring that this traveler has a safe, certain path for transport if he lands and otherwise clears screening, for his own sake and for the public. They are also working to complete the logistics of voluntary, monitored quarantine, or if necessary involuntary, in the event it must occur in Vermont. I know they will be in touch with many of you directly as they execute.

We will continue to monitor progress here, of course. Vermont Department of Health will serve as public information officers in this matter should it become necessary, and will coordinate through Sue Allen to ensure that any public safety or other contacts are looped in as needed.

Thanks to everyone for your work on this matter and your attention to the many issues it presents. Much appreciated.

Liz

Elizabeth H. Miller  
[REDACTED] cell  
[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

On Oct 26, 2014, at 2:42 PM, "Miller, Elizabeth"  
<[Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us)> wrote:

I spoke and emailed today with Alexander Cochran, Special Counsel to Gov. Cuomo. The information on travel status for this individual was shared with Courtney Burke, health care advisor to Gov. Cuomo, Jerome Hauer, commissioner of NY Homeland Security, and David Garten, exec dir of the NY Port Authority. I made clear that our Vermont agencies had already reached out, and I have received acknowledgment from Comm. Hauer that NY teams are looped in and on top of it.

Liz

Elizabeth H. Miller  
[REDACTED] cell  
[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

**Mishaan, Jessica**

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**From:** Miller, Elizabeth  
**Sent:** Monday, October 27, 2014 12:09 PM  
**To:** 'Courtney Burke'  
**Subject:** RE: Vermont traveler from Guinea

Thank you...

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**From:** Courtney Burke [mailto:Courtney.Burke@exec.ny.gov]  
**Sent:** Monday, October 27, 2014 12:07 PM  
**To:** Miller, Elizabeth  
**Subject:** Re: Vermont traveler from Guinea

We spoke. He is sending me your order.  
C

---

**From:** Miller, Elizabeth [mailto:Elizabeth.Miller@state.vt.us]  
**Sent:** Monday, October 27, 2014 12:05 PM  
**To:** Courtney Burke  
**Subject:** Vermont traveler from Guinea

I believe our Health Operations Team lead Chris Bell has left you a message. We could use assistance in obtaining some sort of process – whether a transport order to the border or other temporary order – that would allow our Health Operations Team to transport him to Vermont in the event he refuses a ride voluntarily. I understand that our state epidemiologist made that request to NY state health and was told no authority existed; NYC health declined to issue any order stating that their own monitoring protocol would dictate (we also spoke with the feds, as noted). The individuals contacted were as follows:

Bradley Tompkins, Infectious Disease Epidemiologist for VDH contacted NYS: Andie Newman, Veterinary Epidemiologist and NYC: Joel Achelsberg, medical epidemiologist in communicable diseases and CDC: Mark Lobato, Medical Officer with Division of Global Migration and Quarantine. All of these asks were made today and yesterday.

Without NY to VT border help, we will have no means to bring him out of New York safely to his home state in the event he is not willing to cooperate.

We have an admittedly very unusual situation here that would not apply to pretty much any other traveler situation we'd face.

[REDACTED] Vermont has protocols in place for active voluntary monitoring and, if needed, involuntary quarantine. While we would very much hope to work with this individual simply to monitor as allowed under the protocol, we cannot expect he will comply.

We are willing to take the unusual step to safely transport him back to Vermont, where he says he wishes to go, but unless we receive some assistance for transport from NY we will not be able to do so if he declines. In that case, this individual will be out on his own in New York, without assistance or monitoring. While he has stated the intention of taking public transportation back to Vermont, we have no way of knowing whether he will follow up on that, and we may lose an opportunity to help him and to conduct the monitoring for up to three weeks that would appear to be prudent here. We are willing to help make this situation more predictable and safe for him and for the public but need some help.

He is scheduled to arrive at [REDACTED] at JFK. Could you contact me or Chris at your earliest chance...thanks again for helping us work through this difficult issue.

[See final highlighted paragraphs]

## N.Y. / REGION

# *The Flu, TB and Now Ebola: A Rare Legal Remedy Returns*

By BENJAMIN WEISER and J. DAVID GOODMAN OCT. 26, 2014

Photo



Passengers passing through U.S. Customs at Newark Liberty International Airport on Sunday. Credit Robert Stolarik for The New York Times

It was nearly 100 years ago that an influenza pandemic led to sweeping quarantines in American cities, and it was more than two decades ago that patients in New York were forced into isolation after an outbreak of tuberculosis.

In modern America, public health actions of such gravity are remarkably rare. So the decisions by New York and New Jersey on Friday to quarantine some travelers returning from the Ebola zone in West Africa have taken public officials into unfamiliar legal and medical territory.

From public health advocates and civil liberties lawyers has come sharp criticism, and the first person to be detained under the new protocol, a nurse who was quarantined in New Jersey upon returning from Sierra Leone, lashed out on Sunday at Gov. Chris Christie as her lawyer said he would mount a legal challenge to her confinement.

Mr. Christie on Sunday defended his policy, and Florida and Illinois have ordered similar restrictions. In Connecticut, nine people who may have been exposed to Ebola have been confined to their homes under an order signed by Gov. Dannel P. Malloy on Oct. 7.

But on Sunday night, barely two days after his joint announcement with Mr. Christie, Gov. Andrew M. Cuomo of New York announced his state would not go as far as New Jersey has.

The nurse, Kaci Hickox, gave a critical interview to CNN on Sunday. Later, in an email to The New York Times, she wrote, "My human rights have been violated, and we must react in order to ensure that other health care workers do not endure such injustice. ♦"

Donna E. Lieberman, the executive director of the New York Civil Liberties Union, said the most restrictive protocols are far too broad.

"The current order is sweeping in individuals who are asymptomatic and who may never develop symptoms, ♦ Ms. Lieberman said. "I think there is a serious question as to whether the governor has the authority to impose the broad quarantine that he has imposed, ♦ she added.

The quarantine by New Jersey of medical workers returning from Ebola-afflicted areas of West Africa is virtually without precedent in the modern history of the nation, public health and legal experts said on Sunday.

"This is, I think, pushing the envelope quite a bit and is highly counterproductive, ♦ Lawrence O. Gostin, a professor of global health law at Georgetown University, said. "I can't think of a situation where any jurisdiction in the United States in modern times has simply quarantined a whole class of people. ♦"

In a new era of mass travel and global pandemics, public health officials have seen the utility of quarantines to rein in outbreaks that appear to be spiraling out of control. But the approach, experts said, is an extreme one.

"It doesn't seem like we're to that stage yet, ♦ Steven D. Gravelly said, a lawyer who helped Virginia rewrite its laws on quarantine to make it easier for the state to respond quickly to disease outbreaks. Instead, he said, "there's so much anxiety right now, that's become the problem. ♦"

Government officials, he added, need to explain "why are you doing this, what do you hope to accomplish. Because otherwise people read into it things that are not there. ♦"

The power to impose quarantines derives from the general police power granted to states in the Constitution. But over the last century, state and federal authorities have moved away from broadly quarantining categories of people, said Mr. Gostin, adding that one would have to reach back to the influenza pandemic of 1918 to begin to find the sort of blanket approach being employed in response to Ebola in New Jersey.

General quarantines, seen as having only limited effectiveness even when employed against the flu a century ago, fell out of favor as antibiotics and other treatments were

developed to more directly address the contagious without affecting those who might have been exposed but display no sickness.

At the height of the AIDS epidemic, quarantines were supported in some quarters, but no such measures were ever adopted. Similarly, there were no quarantines in the United States during recent pandemics of H1N1 or SARS.

The last time patients in New York City were forced into isolation came with the outbreak of multidrug-resistant tuberculosis in the early 1990s, said Wendy E. Parmet, professor of health policy and law at Northeastern University School of Law. In those cases, officials targeted those recalcitrant patients who refused to take their medications, she said, rather than every person who tested positive, and even that practice faced court challenges. The approach resulted in the less restrictive “directly observed therapy,” in which patients were forced to take medications in front of officials, she said.

“I’m very troubled by what we’re seeing and not seeing,” Ms. Parmet said of the current isolation efforts. “Coming down hard makes good press but it doesn’t make good public health,” she said.

Ms. Parmet added: “Treating nurses like criminals is not the way to go.”

While Mr. Cuomo provided the first details of New York’s plans, New Jersey has provided little information about how it plans to carry out its quarantine process.

“I’m very worried about it,” Mr. Gostin said. “We used to think that we had balanced public health and civil liberties, but I think in this case we have forgotten that balance. And I’m one who thinks that we should always privilege public health. I’m not a civil libertarian.”

Udi Ofer, the head of the American Civil Liberties Union in New Jersey, said the policy of quarantining health care workers like Ms. Hickox raised serious concerns “about the state abusing its powers” and could spread the very fear that the order appeared aimed at counteracting.

“By forcibly detaining people, we are also frightening the public and may deter genuinely sick people who fear quarantine from seeking the treatments they deserve,” Mr. Ofer said in an email.

The Centers for Disease Control and Prevention, which formulates and advises on policies such as infection control, does not have regulatory authority over domestic health emergencies. That falls to the states. However, the policy announced on Friday relates to international movement, a realm that legal experts say is solidly within the bounds of federal authority.

“If the feds thought the quarantine imposed by the three states interferes with federal authority over international or interstate movement, they could challenge what the states have done,” David Paul Fidler said, a law professor at Indiana University and an expert on quarantine.

And the virus has presented at least one unusual challenge for law enforcement agencies, senior American officials said on Sunday. They described how agencies had urgently investigated a man who wrote a bizarre post on social media that he was going to try and contract Ebola in Africa and then return to the United States.

According to senior American officials, the man traveled to the West African country of Guinea in the past month in the hopes of working alongside humanitarian assistance

organizations treating patients. The organizations quickly determined that the man had no medical expertise and was acting strangely, and they turned him away

Even though his Facebook post indicated that he was mentally unstable, mentioning a time machine at one point, a multi-agency investigation was launched that involved the F.B.I., Customs and Border Protection, and the Centers for Disease Control and Prevention.

In Guinea, C.D.C. officials interviewed the man and took his temperature several times, and determined that he showed no signs of the virus. The C.D.C. had no legal ability to hold the man and he is not in the custody of American or Guinean authorities there, American officials said Sunday.

By Sunday night, officials said they do not believe they can stop him from returning to the United States, but said federal authorities would be closely monitoring him when he arrived, likely in the next several days.

"It's not that we were trying to prevent him from returning, we were just ensuring that he didn't pose a health risk to other travelers," said a senior American official. "When we determined that he didn't pose a risk, we had no issue with him flying home."

Elizabeth H. Miller

cell

[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

\*\*\*\*\*

WE WORK FOR THE PEOPLE  
Performance \* Integrity \* Pride

**Mishaan, Jessica**

---

**From:** Bell, Chris  
**Sent:** Monday, October 27, 2014 11:39 AM  
**To:** Miller, Elizabeth  
**Subject:** FW: Vermont traveler inquiry

Liz,

Here is what I sent her this morning.

Thanks,

CB

Chris Bell  
Director  
Office of Public Health Preparedness,  
Emergency Medical Services, and Injury Prevention  
Vermont Department of Health

(802) 863-7223 Office

(802) 863-7483 Fax

Email: Chris.Bell@state.vt.us

---

**From:** Bell, Chris  
**Sent:** Monday, October 27, 2014 10:55 AM  
**To:** Courtney.Burke@exec.ny.gov  
**Subject:** Vermont traveler inquiry

Ms. Burke,

Elizabeth Miller in the Vermont executive office copied me on emails to you over the last few days. If you have an opportunity, could you call my cell to discuss the traveler that will be arriving at [REDACTED] at JFK and is ultimately bound for Vermont? I have a number of briefings today, but am free between now and 1115 or from 1145-12 and again from 1245-130.

[REDACTED]

Thanks,

CB

Chris Bell  
Director  
Office of Public Health Preparedness,  
Emergency Medical Services, and Injury Prevention  
Vermont Department of Health

(802) 863-7223 Office

(802) 863-7483 Fax

[REDACTED] Cell

Email: Chris.Bell@state.vt.us



## Mishaan, Jessica

---

**From:** Tom Huebner <thuebner@rrmc.org>  
**Sent:** Monday, October 27, 2014 10:59 AM  
**To:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Tom Huebner; Dolan, Tracy; Spaulding, Jeb; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klammm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob; Woodruff, Mary; Kelso, Patsy  
**Subject:** FW: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section  
**Attachments:** image001.jpg

fyi

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**From:** Nicholas Sherman [mailto:[Nick@ksepartners.com](mailto:Nick@ksepartners.com)]  
**Sent:** Monday, October 27, 2014 9:58 AM  
**To:** Tom Huebner  
**Subject:** Re: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

Just a heads up. We learned that WCAX is sending Kyle Midura, one of their top reporters to Rutland today. Not sure if its related but its somewhat unusual from him to get sent down there as Chittenden County and Montpelier are normally his range of coverage,

Nick

Nick Sherman  
KSE Partners, LLP  
26 State Street, Suite 8  
Montpelier VT, 05602  
  
[nick@ksepartners.com](mailto:nick@ksepartners.com)

---

**From:** Thomas Huebner <[Thuebner@rrmc.org](mailto:Thuebner@rrmc.org)>  
**Date:** Monday, October 27, 2014 at 8:37 AM  
**To:** Nicholas Sherman <[Nick@ksepartners.com](mailto:Nick@ksepartners.com)>  
**Subject:** FW: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

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**From:** Tom Huebner  
**Sent:** Monday, October 27, 2014 8:36 AM  
**To:** 'Spaulding, Jeb'; Bell, Chris  
**Cc:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Dolan, Tracy; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klammm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob  
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N.Y. / REGION

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From public health advocates and civil liberties lawyers has come sharp criticism, and the first person to be detained under the new protocol, a nurse who was quarantined in New Jersey upon returning from Sierra Leone, lashed out on

Sunday at Gov. Chris Christie as her lawyer said he would mount a legal challenge to her confinement.

Mr. Christie on Sunday defended his policy, and Florida and Illinois have ordered similar restrictions. In Connecticut, nine people who may have been exposed to Ebola have been confined to their homes under an order signed by Gov. Dannel P. Malloy on Oct. 7.

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In a new era of mass travel and global pandemics, public health officials have seen the utility of quarantines to rein in outbreaks that appear to be spiraling out of control. But the approach, experts said, is an extreme one.

"It doesn't seem like we're to that stage yet," Steven D. Gravelly said, a lawyer who helped Virginia rewrite its laws on quarantine to make it easier for the state to respond quickly to disease outbreaks. Instead, he said, "there's so much anxiety right now, that's become the problem."

Government officials, he added, need to explain "why are you doing this, what do you hope to accomplish. Because otherwise people read into it things that are not there."

The power to impose quarantines derives from the general police power granted to states in the Constitution. But over the last century, state and federal authorities have moved away from broadly quarantining categories of people, said Mr. Gostin, adding that one would have to reach back to the influenza pandemic of 1918 to

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"I'm very troubled by what we're seeing and not seeing," Ms. Parmet said of the current isolation efforts. "Coming down hard makes good press but it doesn't make good public health," she said.

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Udi Ofer, the head of the American Civil Liberties Union in New Jersey, said the policy of quarantining health care workers like Ms. Hickox raised serious concerns "about the state abusing its powers" and could spread the very fear that the order appeared aimed at counteracting.

"By forcibly detaining people, we are also frightening the public and may deter genuinely sick people who fear quarantine from seeking the treatments they deserve," Mr. Ofer said in an email.

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According to senior American officials, the man traveled to the West African country of Guinea in the past month in the hopes of working alongside humanitarian assistance organizations treating patients. The organizations quickly determined that the man had no medical expertise and was acting strangely, and they turned him away.

Even though his Facebook post indicated that he was mentally unstable, mentioning a time machine at one point, a multi-agency investigation was launched that involved the F.B.I., Customs and Border Protection, and the Centers for Disease Control and Prevention.

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"It's not that we were trying to prevent him from returning, we were just ensuring that he didn't pose a health risk to other travelers," said a senior American official. "When we determined that he didn't pose a risk we had no issue with him flying home."

**Mishaan, Jessica**

---

**From:** Bell, Chris  
**Sent:** Monday, October 27, 2014 10:31 AM  
**To:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Tom Huebner; Dolan, Tracy; Spaulding, Jeb; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klammer, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob; Woodruff, Mary; Kelso, Patsy  
**Subject:** Re: Health protocol for travelers - update

Apologies,

Schedule change for this call. This will be at 1115. I will send an outlook invite shortly.

Thanks,

CB

Chris Bell  
Director  
Office of Public Health Preparedness,  
Emergency Medical Services, and  
Injury Prevention  
Vermont Department of Health  
Office: (802) 863-7223  
Cell: [REDACTED]

On Oct 27, 2014, at 10:21, "Bell, Chris" <[Chris.Bell@state.vt.us](mailto:Chris.Bell@state.vt.us)> wrote:

Good morning,

We'd like to offer to have a brief call this morning at 1130 to update on the current status of this issue. Please call [REDACTED] room [REDACTED]

Thanks,

CB

Chris Bell  
Director  
Office of Public Health Preparedness,  
Emergency Medical Services, and  
Injury Prevention  
Vermont Department of Health  
Office: (802) 863-7223  
Cell: [REDACTED]

**Mishaan, Jessica**

---

**From:** Bell, Chris  
**Sent:** Monday, October 27, 2014 10:21 AM  
**To:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Tom Huebner; Dolan, Tracy; Spaulding, Jeb; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klamm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob; Woodruff, Mary; Kelso, Patsy  
**Subject:** Re: Health protocol for travelers - update

Good morning,

We'd like to offer to have a brief call this morning at 1130 to update on the current status of this issue. Please call [REDACTED] room [REDACTED]

Thanks,

CB

Chris Bell  
Director  
Office of Public Health Preparedness,  
Emergency Medical Services, and  
Injury Prevention  
Vermont Department of Health  
Office: (802) 863-7223  
Cell: [REDACTED]

**Mishaan, Jessica**

---

**From:** Manning, Michael  
**Sent:** Monday, October 27, 2014 9:42 AM  
**To:** Bell, Chris; Miller, Elizabeth  
**Subject:** RE: JFK

All,

I just got off the phone with our EM/HS counterparts in New York and have been on the phone with the Port Authority Police. PAPD is having a meeting with the Airport Manager and health officials to discuss.

Mike

Please note *new* e-mail address: [michael.manning@state.vt.us](mailto:michael.manning@state.vt.us)

*Lieutenant Michael J. Manning  
Chief - Homeland Security  
Division of Emergency Management & Homeland Security  
Vermont State Police  
103 South Main Street  
Waterbury, VT 05676*

*Phone: 802.241.5095  
Cell: [REDACTED]  
Fax: 802.241.5615*

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## Mishaan, Jessica

---

**From:** Bambury, John <jbambury@panynj.gov>  
**Sent:** Monday, October 27, 2014 9:00 AM  
**To:** Foye, Patrick; Selden, John; Miller, Elizabeth; 'Courtney.Burke@exec.ny.gov'; Bell, Chris; Manning, Michael  
**Cc:** 'jerome.hauer@dhses.ny.gov'; 'Alexander.Cochran@exec.ny.gov'; 'Patrick.Hooker@exec.ny.gov'; Spaulding, Jeb; 'Callan.Smith@exec.ny.gov'; 'dgarten@mtahq.org'; 'mary.kavaney@exec.ny.gov'; 'Sandi.Toll@exec.ny.gov'; 'howard.zucker@health.ny.gov'; 'Sue.kelly@health.ny.gov'; 'Sally.Dreslin@exec.ny.gov'; Moran, Michael (Aviation); Roland, John  
**Subject:** RE: Heads up - Person of Interest attempting to traveling from Guinea to JFK

I just spoke with Lt. Mike Manning of the Vermont State Police. He informs me that Sherriff Steve Bernard is driving from Vermont to JFK. The Sherriff has an Involuntary Confinement Order for [REDACTED]. It is there hope that [REDACTED] will voluntarily come to Vermont with them. If he does not, the Vermont order is not enforceable in NY. The Sheriff will request assistance in having a New York Order served on [REDACTED]. I am contacting the Sheriff and will provide a PAPD escort for him. I will work with Mike Moran and John Seldon coordinating with NYS and NYC Health.

John H. Bambury  
Port Authority of NY/NJ Police Department  
Inspector  
Commanding Officer  
John F. Kennedy International Airport  
South Service Road, Bldg. 269  
Jamaica, NY 11430  
(O) (718) 244-4304  
(C) [REDACTED]  
**THE PORT AUTHORITY OF NY & NJ**

---

**From:** Foye, Patrick  
**Sent:** Monday, October 27, 2014 8:43 AM  
**To:** Selden, John; 'Elizabeth.Miller@state.vt.us'; 'Courtney.Burke@exec.ny.gov'; 'Chris.Bell@state.vt.us'; 'Michael.Manning@state.vt.us'  
**Cc:** 'jerome.hauer@dhses.ny.gov'; 'Alexander.Cochran@exec.ny.gov'; 'Patrick.Hooker@exec.ny.gov'; 'Jeb.Spaulding@state.vt.us'; 'Callan.Smith@exec.ny.gov'; 'dgarten@mtahq.org'; 'mary.kavaney@exec.ny.gov'; 'Sandi.Toll@exec.ny.gov'; 'howard.zucker@health.ny.gov'; 'Sue.kelly@health.ny.gov'; 'Sally.Dreslin@exec.ny.gov'; Moran, Michael (Aviation); Bambury, John; Roland, John  
**Subject:** Re: Heads up - Person of Interest attempting to traveling from Guinea to JFK

Inspector please keep group posted on status  
John thanks

---

**From:** Selden, John  
**Sent:** Monday, October 27, 2014 08:40 AM  
**To:** Foye, Patrick; 'Elizabeth.Miller@state.vt.us' <Elizabeth.Miller@state.vt.us>; 'Courtney.Burke@exec.ny.gov' <Courtney.Burke@exec.ny.gov>; 'Chris.Bell@state.vt.us' <Chris.Bell@state.vt.us>; 'Michael.Manning@state.vt.us' <Michael.Manning@state.vt.us>  
**Cc:** 'jerome.hauer@dhses.ny.gov' <jerome.hauer@dhses.ny.gov>; 'Alexander.Cochran@exec.ny.gov' <Alexander.Cochran@exec.ny.gov>; 'Patrick.Hooker@exec.ny.gov' <Patrick.Hooker@exec.ny.gov>;

'Jeb.Spaulding@state.vt.us' <Jeb.Spaulding@state.vt.us>; 'Callan.Smith@exec.ny.gov' <Callan.Smith@exec.ny.gov>; 'dgarten@mtahq.org' <dgarten@mtahq.org>; 'mary.kavaney@exec.ny.gov' <mary.kavaney@exec.ny.gov>; 'Sandi.Toll@exec.ny.gov' <Sandi.Toll@exec.ny.gov>; 'howard.zucker@health.ny.gov' <howard.zucker@health.ny.gov>; 'Sue.kelly@health.ny.gov' <Sue.kelly@health.ny.gov>; 'Sally.Dreslin@exec.ny.gov' <Sally.Dreslin@exec.ny.gov>; Moran, Michael (Aviation); Bambury, John; Roland, John

**Subject:** RE: Heads up - Person of Interest attempting to traveling from Guinea to JFK

Pat, per the Federal Air Marshal Service and PAPD, [REDACTED] is onboard [REDACTED] and will arrive JFK [REDACTED] John

**From:** Roland, John

**Sent:** Monday, October 27, 2014 8:30 AM

**To:** Bambury, John; Selden, John

**Subject:** Fw: Heads up - Person of Interest attempting to traveling from Guinea to JFK

Confirmation from FAM regarding [REDACTED]

Sent from my BlackBerry 10 smartphone on the Verizon Wireless 4G LTE network.

**From:** Link, Matthew T. <Matthew.T.Link@ole.tsa.dhs.gov>

**Sent:** Monday, October 27, 2014 08:08

**To:** Roland, John

**Cc:** Valdes, John; EDDY, GREGORY L

**Subject:** RE: Heads up - Person of Interest attempting to traveling from Guinea to JFK

John.... FYI the TECS manifest does confirm that he is on board [REDACTED]

### Matthew Link

Asst. Federal Security Director – Law Enforcement

Federal Air Marshal Service

JFK Airport, NY

[REDACTED] – Cell

(718) 917-3946 – Office

---

**From:** Foye, Patrick

**Sent:** Sunday, October 26, 2014 6:38 PM

**To:** 'Elizabeth.Miller@state.vt.us'; 'Courtney.Burke@exec.ny.gov'; 'Chris.Bell@state.vt.us'; 'Michael.Manning@state.vt.us'

**Cc:** 'jerome.hauer@dhses.ny.gov'; 'Alexander.Cochran@exec.ny.gov'; 'Patrick.Hooker@exec.ny.gov';

'Jeb.Spaulding@state.vt.us'; 'Callan.Smith@exec.ny.gov'; 'dgarten@mtahq.org'; 'mary.kavaney@exec.ny.gov';

'Sandi.Toll@exec.ny.gov'; 'howard.zucker@health.ny.gov'; 'Sue.kelly@health.ny.gov'; 'Sally.Dreslin@exec.ny.gov'; Moran,

Michael (Aviation); Selden, John; Bambury, John

**Subject:** Re: Heads up - Person of Interest attempting to traveling from Guinea to JFK

Elizabeth we are taking this as seriously as you are. CDC, CBP, PAPD and USSS have been notified.

I've cc'd my colleagues, Mike Moran, General Manager of JFK, and John Selden, Deputy General Manager of JFK, and ask them to let this group know when they learn whether this person is bound for JFK.

I've also cc'd Inspector Bambury who leads the PAPD presence at JFK.

Pat

**From:** Miller, Elizabeth [mailto:Elizabeth.Miller@state.vt.us]

**Sent:** Sunday, October 26, 2014 06:32 PM

**To:** Courtney Burke <Courtney.Burke@exec.ny.gov>; Bell, Chris <Chris.Bell@state.vt.us>; Manning, Michael <Michael.Manning@state.vt.us>

**Cc:** Foye, Patrick; Jerome Hauer (dhss.ny.gov) <jerome.hauer@dhss.ny.gov>; Alexander Cochran <Alexander.Cochran@exec.ny.gov>; Patrick Hooker <Patrick.Hooker@exec.ny.gov>; Spaulding, Jeb <Jeb.Spaulding@state.vt.us>; Callan Smith <Callan.Smith@exec.ny.gov>; dgarten@mtahq.org <dgarten@mtahq.org>; Mary Kavaney <Mary.Kavaney@exec.ny.gov>; Sandi Toll <Sandi.Toll@exec.ny.gov>; Howard Zucker (health.ny.gov) <howard.zucker@health.ny.gov>; Sue Kelly (health.ny.gov) <sue.kelly@health.ny.gov>; Sally Dreslin <Sally.Dreslin@exec.ny.gov>

**Subject:** Re: Heads up - Person of Interest attempting to traveling from Guinea to JFK

Thank you very much. Understood.

In the event it is needed, here is information regarding Vermont's response to this incident and our requests for coordination should [REDACTED] arrive in NY:

State of Vermont activated our Health Operations Center last week to help coordinate any needed statewide response to this virus, including to [REDACTED] case.

Chris Bell is the Incident Commander and senior member of the Department of Health handling this situation. He is copied here on the To: line for ease.

Lt. Michael Manning is our lead state Homeland Security member, also copied on the To: line above.

Either of them could provide appropriate officials with additional information about this traveler if needed; it is our understanding that he intends to return to Vermont after arriving at JFK. [REDACTED]

[REDACTED] That presents some additional challenges in this situation, as you can appreciate.

We understand that [REDACTED] cleared CDC and State Dept screening in Guinea.

We understand that [REDACTED] is en route to [REDACTED] at this time. He is scheduled to depart [REDACTED] JFK, departing at [REDACTED] eastern time and arriving at [REDACTED] eastern [REDACTED]

We understand that [REDACTED] has stated that he plans to take Amtrak from NYC to Rutland VT. There is one train on that route per day, [REDACTED] from NYC. Therefore it is likely that absent another plan for travel [REDACTED] would not depart NYC to Vermont until [REDACTED]

We of course will not know whether he is en route to JFK until after [REDACTED]

We understand that airport screening will definitely occur at JFK, [REDACTED]

Based upon Vermont's understanding of [REDACTED] history, posts, and [REDACTED] Vt Dept of Health believes quarantine is warranted.

Vermont would seek voluntary, monitored quarantine from this traveler, and has already prepared a written order for involuntary quarantine in the event it is needed.

Vermont Department of Health (Chris Bell) and Homeland Security (Lt. Manning) would like to further coordinate with NY regarding arrival and transfer tomorrow.

In the event that [REDACTED] clears all such screening and is not otherwise subject to quarantine in NY, we would like to work with NY to help ensure his safe and prompt transport back to Vermont, for his sake as well as for the assurance of public safety in light of the uncertain circumstances.

Vermont may choose to send a team to NY for that purpose, or may otherwise arrange with NY officials to accomplish a transport and transfer. Chris Bell and Lt. Manning will be reaching out to their contacts to discuss options.

Obviously, jurisdictional issues have to be addressed, by for example providing NY with the Vermont order and asking for NY assistance

to issue an order enforceable in New York during transport to allow both jurisdictions to ensure [REDACTED] is given an opportunity for safe transport back to Vermont with provision for appropriate voluntary, monitored quarantine, or involuntary if necessary.

We very much understand that this is an evolving situation and that NY/NJ are working hard to put proper procedures in place to account for the myriad different circumstances you are facing. We appreciate your willingness to work with us to help ensure [REDACTED] arrival in NY and transport back to Vermont is safe for him and for the public at large, in the event he arrives, is not symptomatic, and is not subject to being held for other reasons.

I will expect that Chris Bell and Lt. Manning will take over as primary Points of Contact with NY officials. Thank you again for your help today - very much appreciated.

Elizabeth H. Miller  
[REDACTED] cell  
[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

On Oct 26, 2014, at 5:25 PM, "Courtney Burke" <[Courtney.Burke@exec.ny.gov](mailto:Courtney.Burke@exec.ny.gov)> wrote:

Ok - just keep us posted of any developments. Tnx.

---

**From:** Foye, Patrick [<mailto:pfove@panynj.gov>]  
**Sent:** Sunday, October 26, 2014 5:21 PM  
**To:** Courtney Burke; Jerome Hauer ([dhsec.ny.gov](mailto:dhsec.ny.gov)); 'Elizabeth.Miller@state.vt.us'  
**Cc:** Alexander Cochran; Patrick Hooker; 'Jeb.Spaulding@state.vt.us'; Callan Smith; 'dgarten@mtahq.org'; Mary Kavaney; Sandi Toll; Howard Zucker ([health.ny.gov](mailto:health.ny.gov)); Sue Kelly ([health.ny.gov](mailto:health.ny.gov)); Sally Dreslin  
**Subject:** Re: Heads up - Person of Interest attempting to traveling from Guinea to JFK

Courtney this is under control. [REDACTED]

---

**From:** Courtney Burke [<mailto:Courtney.Burke@exec.ny.gov>]  
**Sent:** Sunday, October 26, 2014 05:02 PM  
**To:** Jerome Hauer ([dhsec.ny.gov](mailto:dhsec.ny.gov)) <[jerome.hauer@dhsec.ny.gov](mailto:jerome.hauer@dhsec.ny.gov)>; Elizabeth.Miller@state.vt.us

<[Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us)>; Foye, Patrick

**Cc:** Alexander Cochran <[Alexander.Cochran@exec.ny.gov](mailto:Alexander.Cochran@exec.ny.gov)>; Patrick Hooker

<[Patrick.Hooker@exec.ny.gov](mailto:Patrick.Hooker@exec.ny.gov)>; [Jeb.Spaulding@state.vt.us](mailto:Jeb.Spaulding@state.vt.us) <[Jeb.Spaulding@state.vt.us](mailto:Jeb.Spaulding@state.vt.us)>; Callan Smith

<[Callan.Smith@exec.ny.gov](mailto:Callan.Smith@exec.ny.gov)>; [DGARTEN@mtahq.org](mailto:DGARTEN@mtahq.org) <[DGARTEN@mtahq.org](mailto:DGARTEN@mtahq.org)>; Mary Kavaney

<[Mary.Kavaney@exec.ny.gov](mailto:Mary.Kavaney@exec.ny.gov)>; Sandi Toll <[Sandi.Toll@exec.ny.gov](mailto:Sandi.Toll@exec.ny.gov)>; Howard Zucker ([health.ny.gov](mailto:health.ny.gov))

<[howard.zucker@health.ny.gov](mailto:howard.zucker@health.ny.gov)>; Sue Kelly ([health.ny.gov](mailto:health.ny.gov)) <[sue.kelly@health.ny.gov](mailto:sue.kelly@health.ny.gov)>; Sally Dreslin

<[Sally.Dreslin@exec.ny.gov](mailto:Sally.Dreslin@exec.ny.gov)>

**Subject:** RE: Heads up - Person of Interest attempting to traveling from Guinea to JFK

I spoke with Elizabeth Miller. We agreed to keep each other informed of any developments. Bottom line is that we need to be absolutely on top of this and ready to respond accordingly should this person arrive at JFK. DOH staff will be on-site tomorrow, although I understand [REDACTED]

If anything new transpires, my cell is [REDACTED]

Courtney

Courtney Burke

Deputy Secretary for Health

New York State, Executive Chamber

State Capitol

Albany, New York 12224

(518)- 408-2500

\*\*\*\*\*

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**From:** Hauer, Jerome (DHSES) [<mailto:Jerome.Hauer@dhses.ny.gov>]

**Sent:** Sunday, October 26, 2014 3:46 PM

**To:** Courtney Burke; [Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us); Pat Foye

**Cc:** Alexander Cochran; Patrick Hooker; [Jeb.Spaulding@state.vt.us](mailto:Jeb.Spaulding@state.vt.us); Callan Smith; [DGARTEN@mtahq.org](mailto:DGARTEN@mtahq.org)

**Subject:** RE: Heads up - Person of Interest attempting to traveling from Guinea to JFK

I don't think he's going anywhere. [REDACTED]

Jerome M. Hauer, Ph.D, MHS

Commissioner

Division of Homeland Security and Emergency Services

State of New York

Office-Albany-518-242-5000

-NYC-212-867-7060

-24/7-518-292-2200

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**From:** Courtney Burke [<mailto:Courtney.Burke@exec.ny.gov>]

**Sent:** Sunday, October 26, 2014 3:36 PM

**To:** [Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us)

**Cc:** Cochran, Alexander (CHAMBER); Hauer, Jerome (DHSES); Hooker, Patrick (CHAMBER); [Jeb.Spaulding@state.vt.us](mailto:Jeb.Spaulding@state.vt.us); Smith, Callan (CHAMBER); [DGARTEN@mtahq.org](mailto:DGARTEN@mtahq.org)  
**Subject:** Re: Heads up - Person of Interest attempting to traveling from Guinea to JFK

I will call. I'm just stuck on other calls finalizing protocols, scenarios, etc.

---

**From:** Miller, Elizabeth [<mailto:Elizabeth.Miller@state.vt.us>]  
**Sent:** Sunday, October 26, 2014 03:30 PM  
**To:** Courtney Burke  
**Cc:** Alexander Cochran; Jerome Hauer ([dhSES.ny.gov](mailto:dhSES.ny.gov)); Patrick Hooker; Spaulding, Jeb <[Jeb.Spaulding@state.vt.us](mailto:Jeb.Spaulding@state.vt.us)>; Callan Smith; [DGARTEN@mtahq.org](mailto:DGARTEN@mtahq.org) <[DGARTEN@mtahq.org](mailto:DGARTEN@mtahq.org)>  
**Subject:** Re: Heads up - Person of Interest attempting to traveling from Guinea to JFK

The State of Vermont team is having a 5 PM update call on this situation. The question most of interest to our agencies and departments is whether New York would plan to institute a quarantine in the event [REDACTED] lands at JFK. Please give me a call to discuss, Courtney, if you are able. Thank you. Liz Miller  
[REDACTED]

Sent from my iPhone

On Oct 26, 2014, at 2:40 PM, Courtney Burke <[Courtney.Burke@exec.ny.gov](mailto:Courtney.Burke@exec.ny.gov)> wrote:

Elizabeth,  
I'm on other calls now, but will call you when I can to discuss.  
Courtney

---

**From:** Miller, Elizabeth [<mailto:Elizabeth.Miller@state.vt.us>]  
**Sent:** Sunday, October 26, 2014 02:37 PM  
**To:** Alexander Cochran  
**Cc:** Courtney Burke; Jerome Hauer ([dhSES.ny.gov](mailto:dhSES.ny.gov)); Patrick Hooker; Spaulding, Jeb <[Jeb.Spaulding@state.vt.us](mailto:Jeb.Spaulding@state.vt.us)>; Callan Smith; David P. Garten <[DGARTEN@mtahq.org](mailto:DGARTEN@mtahq.org)>  
**Subject:** Re: Heads up - Person of Interest attempting to traveling from Guinea to JFK

Thanks all - I will ensure our team here knows of the exec office contact. Appreciate it. Please be in touch for any further information you need, particularly if the details of [REDACTED] situation are not already known to the agencies directly. I suspect that they are. We are very interested in ensuring a solid plan is in place for his possible arrival, and helping in any way we can.

Elizabeth H. Miller  
Chief of Staff, Governor Peter Shumlin  
[REDACTED] cell  
[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

On Oct 26, 2014, at 2:32 PM, "Alexander Cochran"  
<[Alexander.Cochran@exec.ny.gov](mailto:Alexander.Cochran@exec.ny.gov)> wrote:

Courtney/Jerry/Pat

Pls see below from our friends in Vermont Gov's office re:  
person who may be coming our way and pass on to  
whoever needs to know.

Elizabeth: beside the gov's healthcare advisor I've also  
included our commish of homeland security and our exec  
dir of the Port Authority.

A

Alexander Cochran  
Special Counsel  
Governor Cuomo  
2024347100

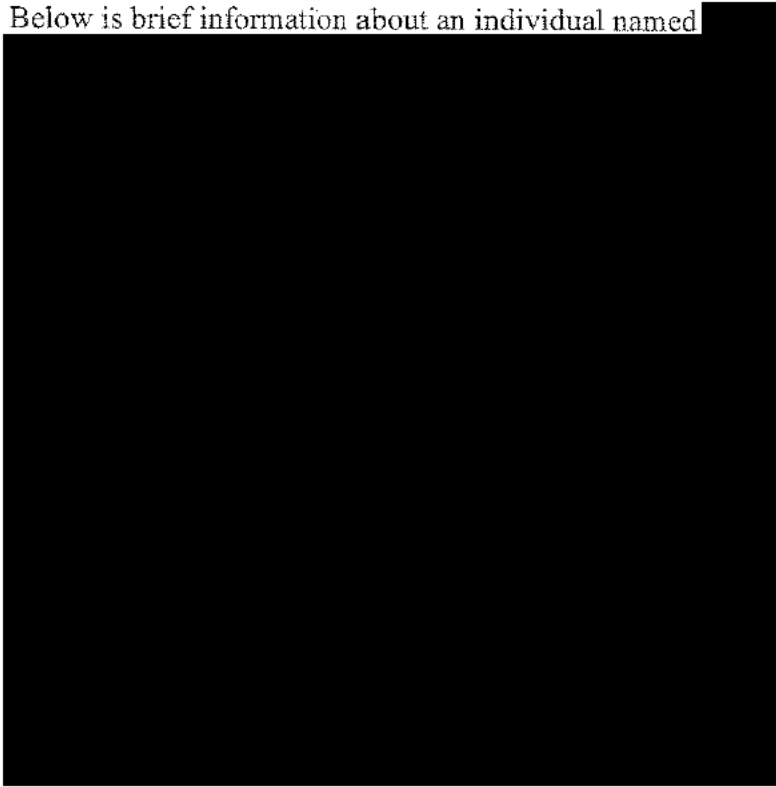
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**From:** Miller, Elizabeth  
**Sent:** Sunday, October 26, 2014 2:13 PM  
**To:** Alexander Cochran  
**Cc:** Spaulding, Jeb  
**Subject:** Heads up - Person of Interest attempting to traveling from Guinea to JFK

Alexander:

Thanks for returning my call. Thank you also for passing  
on the below information to Courtney Burke at the  
Executive Office and getting us in touch with one  
another. I am copying our Secretary of Administration Jeb  
Spaulding who has been involved with coordinating all  
Vermont state resources on this matter.

Below is brief information about an individual named





CBP Assistant Port Director Jim McMillan has been notified and a request for CBP CAT to trace/track flights and boardings has been made. Vermont Health, Public Safety, Homeland Security, and local officials are all aware of the situation and I am told that they have informed NYS Public Safety, NYS Homeland Security and NYS Emergency Management.

I am confident that our respective state teams, and the federal government, are aware of this situation and planning well to handle it in the event of [REDACTED] arrival, but I thought it prudent to alert the Executive Office of the situation to ensure coordination among your state agencies and with Vermont officials. We have quite a bit more information to share relevant to this situation. I would appreciate a call from Courtney to provide additional information and any contacts that may be needed to best prepare in the event [REDACTED] makes it to JFK.

Thanks very much.

Elizabeth H. Miller  
Chief of Staff, Governor Peter Shumlin  
[REDACTED] cell  
[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

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PERMANENTLY DELETE THIS E-MAIL (ALONG WITH ANY ATTACHMENTS), AND DESTROY ANY  
PRINTOUTS.

**Mishaan, Jessica**

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**From:** Dolan, Tracy  
**Sent:** Monday, October 27, 2014 8:45 AM  
**To:** Tom Huebner  
**Cc:** Spaulding, Jeb; Bell, Chris; Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Kamm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob  
**Subject:** Re: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section  
  
**Follow Up Flag:** Flag for follow up  
**Flag Status:** Flagged

Thanks. We are considering this in our preparation and communication plans this morning.

Sent from my iPhone

On Oct 27, 2014, at 8:35 AM, "Tom Huebner" <[thuebner@rrmc.org](mailto:thuebner@rrmc.org)> wrote:

## N.Y. / REGION

# *The Flu, TB and Now Ebola: A Rare Legal Remedy Returns*

By BENJAMIN WEISER and J. DAVID GOODMAN OCT. 26, 2014

Photo

<image001.jpg>

Passengers passing through U.S. Customs at Newark Liberty International Airport on Sunday. Credit Robert Stolarik for The New York Times

It was nearly 100 years ago that an influenza pandemic led to sweeping quarantines in American cities, and it was more than two decades ago that patients in New York were forced into isolation after an outbreak of tuberculosis.

In modern America, public health actions of such gravity are remarkably rare. So the decisions by New York and New Jersey on Friday to quarantine some travelers returning from the Ebola zone in West Africa have taken public officials into unfamiliar legal and medical territory.

From public health advocates and civil liberties lawyers has come sharp criticism, and the first person to be detained under the new protocol, a nurse who was quarantined in New Jersey upon returning from Sierra Leone, lashed out on Sunday at Gov. Chris Christie as her lawyer said he would mount a legal challenge to her confinement.

Mr. Christie on Sunday defended his policy, and Florida and Illinois have ordered similar restrictions. In Connecticut, nine people who may have been exposed to Ebola have been confined to their homes under an order signed by Gov. Dannel P. Malloy on Oct. 7.

But on Sunday night, barely two days after his joint announcement with Mr. Christie, Gov. Andrew M. Cuomo of New York announced his state would not go as far as New Jersey has.

The nurse, Kaci Hickox, gave a critical interview to CNN on Sunday. Later, in an email to The New York Times, she wrote, "My human rights have been violated, and we must react in order to ensure that other health care workers do not endure such injustice."

Donna E. Lieberman, the executive director of the New York Civil Liberties Union, said the most restrictive protocols are far too broad.

"The current order is sweeping in individuals who are asymptomatic and who may never develop symptoms," Ms. Lieberman said. "I think there is a serious question as to whether the governor has the authority to impose the broad quarantine that he has imposed," she added.

The quarantine by New Jersey of medical workers returning from Ebola-afflicted areas of West Africa is virtually without precedent in the modern history of the nation, public health and legal experts said on Sunday.

"This is, I think, pushing the envelope quite a bit and is highly counterproductive," Lawrence O. Gostin, a professor of global health law at Georgetown University, said. "I can't think of a situation where any jurisdiction in the United States in modern times has simply quarantined a whole class of people."

In a new era of mass travel and global pandemics, public health officials have seen the utility of quarantines to rein in outbreaks that appear to be spiraling out of control. But the approach, experts said, is an extreme one.

"It doesn't seem like we're to that stage yet," Steven D. Gravelly said, a lawyer who helped Virginia rewrite its laws on quarantine to make it easier for the state to respond quickly to disease outbreaks. Instead, he said, "there's so much anxiety right now, that's become the problem."

Government officials, he added, need to explain "why are you doing this, what do you hope to accomplish. Because otherwise people read into it things that are not there."

The power to impose quarantines derives from the general police power granted to states in the Constitution. But over the last century, state and federal authorities have moved away from broadly quarantining categories of people, said Mr. Gostin, adding that one would have to reach back to the influenza pandemic of 1918 to begin to find the sort of blanket approach being employed in response to Ebola in New Jersey.

General quarantines, seen as having only limited effectiveness even when employed against the flu a century ago, fell out of favor as antibiotics and other treatments were developed to more directly address the contagious without affecting those who might have been exposed but display no sickness.

At the height of the AIDS epidemic, quarantines were supported in some quarters, but no such measures were ever adopted. Similarly, there were no quarantines in the United States during recent pandemics of H1N1 or SARS.

The last time patients in New York City were forced into isolation came with the outbreak of multidrug-resistant tuberculosis in the early 1990s, said Wendy E. Parmet, professor of health policy and law at Northeastern University School of Law. In those cases, officials targeted those recalcitrant patients who refused to take their medications, she said, rather than every person who tested positive, and even that practice faced court challenges. The approach resulted in the less restrictive "directly observed therapy," in which patients were forced to take medications in front of officials, she said.

"I'm very troubled by what we're seeing and not seeing," Ms. Parmet said of the current isolation efforts. "Coming down hard makes good press but it doesn't make good public health," she said.

Ms. Parmet added: "Treating nurses like criminals is not the way to go."

While Mr. Cuomo provided the first details of New York's plans, New Jersey has provided little information about how it plans to carry out its quarantine process.

"I'm very worried about it," Mr. Gostin said. "We used to think that we had balanced public health and civil liberties, but I think in this case we have forgotten that balance. And I'm one who thinks that we should always privilege public health. I'm not a civil libertarian."

Udi Ofer, the head of the American Civil Liberties Union in New Jersey, said the policy of quarantining health care workers like Ms. Hickox raised serious concerns "about the state abusing its powers"

and could spread the very fear that the order appeared aimed at counteracting.

"By forcibly detaining people, we are also frightening the public and may deter genuinely sick people who fear quarantine from seeking the treatments they deserve," Mr. Ofer said in an email.

The Centers for Disease Control and Prevention, which formulates and advises on policies such as infection control, does not have regulatory authority over domestic health emergencies. That falls to the states. However, the policy announced on Friday relates to international movement, a realm that legal experts say is solidly within the bounds of federal authority.

"If the feds thought the quarantine imposed by the three states interferes with federal authority over international or interstate movement, they could challenge what the states have done," David Paul Fidler said, a law professor at Indiana University and an expert on quarantine.

And the virus has presented at least one unusual challenge for law enforcement agencies, senior American officials said on Sunday. They described how agencies had urgently investigated a man who wrote a bizarre post on social media that he was going to try and contract Ebola in Africa and then return to the United States.

According to senior American officials, the man traveled to the West African country of Guinea in the past month in the hopes of working alongside humanitarian assistance organizations treating patients. The organizations quickly determined that the man had no medical expertise and was acting strangely, and they turned him away.

Even though his Facebook post indicated that he was mentally unstable, mentioning a time machine at one point, a multi-agency investigation was launched that involved the F.B.I., Customs and Border Protection, and the Centers for Disease Control and Prevention.

In Guinea, C.D.C. officials interviewed the man and took his temperature several times, and determined that he showed no signs of the virus. The C.D.C. had no legal ability to hold the man and he is not in the custody of American or Guinean authorities there, American officials said Sunday.

By Sunday night, officials said they do not believe they can stop him from returning to the United States, but said federal authorities would be closely monitoring him when he arrived, likely in the next several days.

"It's not that we were trying to prevent him from returning, we were just ensuring that he didn't pose a health risk to other travelers," said a senior American official. "When we determined that he didn't pose a risk we had no issue with him flying home."

Mishaan, Jessica

---

**From:** Tom Huebner <thuebner@rrmc.org>  
**Sent:** Monday, October 27, 2014 8:36 AM  
**To:** Spaulding, Jeb; Bell, Chris  
**Cc:** Manning, Michael; Miller, Elizabeth; Flynn, Joe; Louras, Chris; Dolan, Tracy; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond; Calvi, Joanne; Benard, Stephen; Klamm, Lynne; Marcoux, Roger; Geno, Kevin; Henry, Dixie; Costantino, Bob  
**Subject:** RE: Health protocol for travelers - update- Our situation was referred to in the attached New York Times article. Likely they will follow story here. See highlighted section

N.Y. / REGION

## ***The Flu, TB and Now Ebola: A Rare Legal Remedy Returns***

By BENJAMIN WEISER and J. DAVID GOODMAN OCT. 26, 2014  
Photo



Passengers passing through U.S. Customs at Newark Liberty International Airport on Sunday. Credit Robert Stolarik for The New York Times

It was nearly 100 years ago that an influenza pandemic led to sweeping quarantines in American cities, and it was more than two decades ago that patients in New York were forced into isolation after an outbreak of tuberculosis.

In modern America, public health actions of such gravity are remarkably rare. So the decisions by New York and New Jersey on Friday to quarantine some travelers returning from the Ebola zone in West Africa have taken public officials into unfamiliar legal and medical territory.

From public health advocates and civil liberties lawyers has come sharp criticism, and the first person to be detained under the new protocol, a nurse who was quarantined in New Jersey upon returning from Sierra Leone, lashed out on Sunday at Gov. Chris Christie as her lawyer said he would mount a legal challenge to her confinement.

Mr. Christie on Sunday defended his policy, and Florida and Illinois have ordered similar restrictions. In Connecticut, nine people who may have been exposed to Ebola have been confined to their homes under an order signed by Gov. Dannel P. Malloy on Oct. 7.

But on Sunday night, barely two days after his joint announcement with Mr. Christie, Gov. Andrew M. Cuomo of New York announced his state would not go as far as New Jersey has.

The nurse, Kaci Hickox, gave a critical interview to CNN on Sunday. Later, in an email to The New York Times, she wrote, "My human rights have been violated, and we must react in order to ensure that other health care workers do not endure such injustice."

Donna E. Lieberman, the executive director of the New York Civil Liberties Union, said the most restrictive protocols are far too broad.

"The current order is sweeping in individuals who are asymptomatic and who may never develop symptoms," Ms. Lieberman said. "I think there is a serious question as to whether the governor has the authority to impose the broad quarantine that he has imposed," she added.

The quarantine by New Jersey of medical workers returning from Ebola-afflicted areas of West Africa is virtually without precedent in the modern history of the nation, public health and legal experts said on Sunday.

"This is, I think, pushing the envelope quite a bit and is highly counterproductive," Lawrence O. Gostin, a professor of global health law at Georgetown University, said. "I can't think of a situation where any jurisdiction in the United States in modern times has simply quarantined a whole class of people."

In a new era of mass travel and global pandemics, public health officials have seen the utility of quarantines to rein in outbreaks that appear to be spiraling out of control. But the approach, experts said, is an extreme one.

"It doesn't seem like we're to that stage yet," Steven D. Gravelly said, a lawyer who helped Virginia rewrite its laws on quarantine to make it easier for the state to respond quickly to disease outbreaks. Instead, he said, "there's so much anxiety right now, that's become the problem."

Government officials, he added, need to explain "why are you doing this, what do you hope to accomplish. Because otherwise people read into it things that are not there."

The power to impose quarantines derives from the general police power granted to states in the Constitution. But over the last century, state and federal authorities have moved away from broadly quarantining categories of people, said Mr. Gostin, adding that one would have to reach back to the influenza pandemic of 1918 to begin to find the sort of blanket approach being employed in response to Ebola in New Jersey.

General quarantines, seen as having only limited effectiveness even when employed against the flu a century ago, fell out of favor as antibiotics and other treatments were developed to more directly address the contagious without affecting those who might have been exposed but display no sickness.



At the height of the AIDS epidemic, quarantines were supported in some quarters, but no such measures were ever adopted. Similarly, there were no quarantines in the United States during recent pandemics of H1N1 or SARS.

The last time patients in New York City were forced into isolation came with the outbreak of multidrug-resistant tuberculosis in the early 1990s, said Wendy E. Parmet, professor of health policy and law at Northeastern University School of Law. In those cases, officials targeted those recalcitrant patients who refused to take their medications, she said, rather than every person who tested positive, and even that practice faced court challenges. The approach resulted in the less restrictive “directly observed therapy,” in which patients were forced to take medications in front of officials, she said.

“I’m very troubled by what we’re seeing and not seeing,” Ms. Parmet said of the current isolation efforts. “Coming down hard makes good press but it doesn’t make good public health,” she said.

Ms. Parmet added: “Treating nurses like criminals is not the way to go.”

While Mr. Cuomo provided the first details of New York’s plans, New Jersey has provided little information about how it plans to carry out its quarantine process.

“I’m very worried about it,” Mr. Gostin said. “We used to think that we had balanced public health and civil liberties, but I think in this case we have forgotten that balance. And I’m one who thinks that we should always privilege public health. I’m not a civil libertarian.”

Udi Ofer, the head of the American Civil Liberties Union in New Jersey, said the policy of quarantining health care workers like Ms. Hickox raised serious concerns “about the state abusing its powers” and could spread the very fear that the order appeared aimed at counteracting.

“By forcibly detaining people, we are also frightening the public and may deter genuinely sick people who fear quarantine from seeking the treatments they deserve,” Mr. Ofer said in an email.

The Centers for Disease Control and Prevention, which formulates and advises on policies such as infection control, does not have regulatory authority over domestic health emergencies. That falls to the states. However, the policy announced on Friday relates to international movement, a realm that legal experts say is solidly within the bounds of federal authority.

“If the feds thought the quarantine imposed by the three states interferes with federal authority over international or interstate movement, they could challenge what the states have done,” David Paul Fidler said, a law professor at Indiana University and an expert on quarantine.

And the virus has presented at least one unusual challenge for law enforcement agencies, senior American officials said on Sunday. They described how agencies had urgently investigated a man who wrote a bizarre post on social media that he was going to try and contract Ebola in Africa and then return to the United States.

According to senior American officials, the man traveled to the West African country of Guinea in the past month in the hopes of working alongside humanitarian assistance organizations treating patients. The organizations quickly determined that the man had no medical expertise and was acting strangely, and they turned him away.

Even though his Facebook post indicated that he was mentally unstable, mentioning a time machine at one point, a multi-agency investigation was launched that involved the F.B.I., Customs and Border Protection, and the Centers for Disease Control and Prevention.

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By Sunday night, officials said they do not believe they can stop him from returning to the United States, but said federal authorities would be closely monitoring him when he arrived, likely in the next several days.

"It's not that we were trying to prevent him from returning, we were just ensuring that he didn't pose a health risk to other travelers," said a senior American official. "When we determined that he didn't pose a risk we had no issue with him flying home."

**Mishaan, Jessica**

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**From:** Miller, Elizabeth  
**Sent:** Sunday, October 26, 2014 6:44 PM  
**To:** Marcoux, Roger  
**Cc:** Flynn, Joe; Dolan, Tracy; Manning, Michael; Hopkins, Richmond; Baker, James; Rogan, Bob; Flynn, Keith; Louras, Chris; Chen, Harry; Allen, Susan; Spaulding, Jeb; Covell, David; Mary Nemeth; Benard, Stephen; Bell, Chris  
**Subject:** Re: Person of Interest - Update Sunday 1100

I have updated the NY executive office, port authority, homeland security and health officials with the current information known to Vermont and have requested further coordination with NY in the event he lands at JFK and otherwise clears the health screenings. I have been assured that they are taking this matter very seriously and are fully aware of the situation and willing to work with us.

I have informed NY that Chris Bell, our Health Operations Center incident commander, and Lt. Manning of VT Homeland Security, will serve as Vermont's main Points of Contact for that coordination. They will be in touch with their counterparts to discuss the situation further, with the goal of ensuring that this traveler has a safe, certain path for transport if he lands and otherwise clears screening, for his own sake and for the public. They are also working to complete the logistics of voluntary, monitored quarantine, or if necessary involuntary, in the event it must occur in Vermont. I know they will be in touch with many of you directly as they execute.

We will continue to monitor progress here, of course. Vermont Department of Health will serve as public information officers in this matter should it become necessary, and will coordinate through Sue Allen to ensure that any public safety or other contacts are looped in as needed.

Thanks to everyone for your work on this matter and your attention to the many issues it presents. Much appreciated.

Liz

Elizabeth H. Miller  
[REDACTED] cell  
[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

On Oct 26, 2014, at 2:42 PM, "Miller, Elizabeth" <[Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us)> wrote:

I spoke and emailed today with Alexander Cochran, Special Counsel to Gov. Cuomo. The information on travel status for this individual was shared with Courtney Burke, health care advisor to Gov. Cuomo, Jerome Hauer, commissioner of NY Homeland Security, and David Garten, exec dir of the NY Port Authority. I made clear that our Vermont agencies had already reached out, and I have received acknowledgment from Comm. Hauer that NY teams are looped in and on top of it.

Liz

Elizabeth H. Miller  
[REDACTED] cell  
[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

## Mishaan, Jessica

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**From:** Henry, Dixie  
**Sent:** Sunday, October 26, 2014 3:47 PM  
**To:** Flynn, Keith  
**Cc:** Miller, Elizabeth; Flynn, Joe; Bell, Chris; Tracy Dolan; Manning, Michael; Allen, Susan; Spaulding, Jeb  
**Subject:** Re: 5 p.m. Conference Call re: Person of Interest

Will call in at 5.

> On Oct 26, 2014, at 3:37 PM, Flynn, Keith <Keith.Flynn@state.vt.us> wrote:

>

> Got it

>

> Sent from my iPhone

> Keith Flynn

>

>> On Oct 26, 2014, at 3:36 PM, Miller, Elizabeth <Elizabeth.Miller@state.vt.us> wrote:

>>

>> All: Jeb has requested that we hold a conference call at 5 p.m. today between state team members to share information and plan. I have included the state team known to me; please cc anyone else on your state team who you want on this call. We can loop in locals/fed/NY as needed thereafter.

>>

>>

>>

>> Jeb will host. Will send a calendar invite momentarily.

>>

>> Elizabeth H. Miller

>> [REDACTED] cell

>> elizabeth.miller@state.vt.us

**Mishaan, Jessica**

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**From:** Miller, Elizabeth  
**Sent:** Sunday, October 26, 2014 3:37 PM  
**To:** Flynn, Keith; Flynn, Joe; Bell, Chris; Tracy Dolan; Manning, Michael; Henry, Dixie; Allen, Susan  
**Cc:** Spaulding, Jeb  
**Subject:** 5 p.m. Conference Call re: Person of Interest

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[REDACTED]

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Elizabeth H. Miller  
[REDACTED] cell  
elizabeth.miller@state.vt.us

**Mishaan, Jessica**

---

**From:** Dolan, Tracy  
**Sent:** Thursday, October 23, 2014 1:47 PM  
**To:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth  
**Cc:** Louras, Chris; Rogan, Bob; Miller, Elizabeth; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond  
**Subject:** Health protocols for Ebola monitoring in Vermont- summary and update

I just wanted to provide a brief summary/update on our plans for Ebola-related monitoring, quarantine and possible emergency health orders.

- The Department of Health has an emergency health order for Ebola quarantine finalized in the event we need to utilize it.
- We now have teams that are prepared to provide 'active post-arrival monitoring' on a daily basis for passengers arriving in Vermont with a recent travel history to the affected region.
- Depending on the risk of exposure, we can include quarantine as part of that health monitoring. For example, if a traveler arrives in Vermont who was working with patients in West Africa but for some reason was not held at one of the major airports and was cleared to fly into Vermont, we have the option of requesting that either they comply with daily health monitoring OR that they comply with quarantine (depending on risk of exposure).
- If a traveler does not comply with daily health monitoring or quarantine (where that is required), we will immediately contact the local Sheriff to deliver an emergency health order which would then authorize mandatory quarantine for up to 21 days.
- While CDC guidance indicated that active post arrival monitoring will begin on Monday, October 27<sup>th</sup> or later, the Vermont Department of Health can and will begin this monitoring at any time once we have relevant information.
- Over the next two weeks, our sources from CDC may not be able to provide this information in a timely manner so any assistance you can provide in the meantime with arrival information or contact information for a recent traveler to Guinea, Sierra Leone or Liberia, would be greatly appreciated. Therefore, due to this delay, if you have information about a specific traveler who is arriving into Vermont and can provide us with the arrival date and the address/contact information of the traveler, we can put our process in place immediately.

We look forward to assisting local officials with any concerns that they may have potential public health risks to their communities.

Sincerely,

Tracy Dolan  
Acting Commissioner of Health  
Vermont Department of Health  
108 Cherry Street, Burlington, VT 05402-0070  
[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)  
tel: [REDACTED]  
fax: 802-951-1275

**Mishaan, Jessica**

---

**From:** Christopher Louras <mayorlouras@gmail.com>  
**Sent:** Friday, October 24, 2014 6:33 AM  
**To:** Dolan, Tracy  
**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond  
**Subject:** Re: Health protocols for Ebola monitoring in Vermont- summary and update

All,

If the City of Rutland defers to the State of Vermont / CDC and presupposes that [REDACTED] poses no risk exposure, thus accepting the health protocols for Ebola monitoring in Vermont (as established by the Commissioner of Health), and also understanding that the DoH "look(s) forward to assisting local officials with any concerns," we would ask the following questions:

Who specifically are the healthcare team members in the Rutland area that are prepared to provide "active post-arrival monitoring" on a daily basis?

When and where specifically will the healthcare team members make initial contact w/ [REDACTED] to advise that daily monitoring is required?

If the healthcare team members fail to make initial contact w/ [REDACTED] and he makes contact with local officials, do those local officials have the legal authority to advise [REDACTED] that daily monitoring is required?

Where will [REDACTED] reside as he is undergoing daily monitoring?

If [REDACTED] as he asserts, where will the daily monitoring occur and what would be the DoH plan to keep contact if [REDACTED]?

If [REDACTED] complies with daily monitoring, has no movement restrictions, but subsequently approaches the press (as he has done in Rutland before) to provide details of his travels as already publicly posted on Facebook, who specifically will fill role as PIO?

If he is asked to voluntarily quarantine, where specifically will the voluntary quarantine take place?

If he is deemed non-compliant for daily monitoring, and the Commissioner exercises the authority to involuntarily quarantine, where specifically will the involuntary quarantine take place, who specifically will place [REDACTED] into that location, and what security measures will be established to enforce the quarantine?

Thanks in advance for assisting with our concerns.

Chris

On Thu, Oct 23, 2014 at 1:47 PM, Dolan, Tracy <[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)> wrote:

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fax: 802-951-1275

**Mishaan, Jessica**

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**From:** Dolan, Tracy  
**Sent:** Friday, October 24, 2014 7:53 AM  
**To:** Louras, Chris  
**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond  
**Subject:** Re: Health protocols for Ebola monitoring in Vermont- summary and update

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Sent from my iPhone

On Oct 24, 2014, at 6:32 AM, "Christopher Louras" <[mayorlouras@gmail.com](mailto:mayorlouras@gmail.com)> wrote:

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fax: 802-951-1275

**Mishaan, Jessica**

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**From:** Christopher Louras <mayorlouras@gmail.com>  
**Sent:** Friday, October 24, 2014 8:07 AM  
**To:** Dolan, Tracy  
**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond  
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tel: [REDACTED]  
fax: 802-951-1275

**Mishaan, Jessica**

---

**From:** Allen, Susan  
**Sent:** Friday, October 24, 2014 8:15 AM  
**To:** Louras, Chris  
**Cc:** Miller, Elizabeth  
**Subject:** RE: Health protocols for Ebola monitoring in Vermont- summary and update

Chris, I just wanted to assure you that Liz and I (and Jeb and a host of others on the 5<sup>th</sup> Floor) are staying on top of this. We spent much of yesterday working on it, in part with Bob Rogan who has been great, although we kept it offline. Please feel free to call me – or anyone else here – at any time.

Sue

**From:** Christopher Louras [mailto:mayorlouras@gmail.com]  
**Sent:** Friday, October 24, 2014 8:07 AM  
**To:** Dolan, Tracy  
**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond  
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All,

If the City of Rutland defers to the State of Vermont / CDC and presupposes that [REDACTED] poses no risk exposure, thus accepting the health protocols for Ebola monitoring in Vermont (as established by the Commissioner of Health), and also understanding that the DoH "look(s) forward to assisting local officials with any concerns," we would ask the following questions:

Who specifically are the healthcare team members in the Rutland area that are prepared to provide "active post-arrival monitoring" on a daily basis?

When and where specifically will the healthcare team members make initial contact w/ [REDACTED] to advise that daily monitoring is required?



If the healthcare team members fail to make initial contact w/ [REDACTED] and he makes contact with local officials, do those local officials have the legal authority to advise [REDACTED] that daily monitoring is required?

Where will [REDACTED] reside as he is undergoing daily monitoring?

If [REDACTED] as he asserts, where will the daily monitoring occur and what would be the DoH plan to keep contact if [REDACTED]?

If [REDACTED] complies with daily monitoring, has no movement restrictions, but subsequently approaches the press (as he has done in Rutland before) to provide details of his travels as already publicly posted on Facebook, who specifically will fill role as PIO?

If he is asked to voluntarily quarantine, where specifically will the voluntary quarantine take place?

If he is deemed non-compliant for daily monitoring, and the Commissioner exercises the authority to involuntarily quarantine, where specifically will the involuntary quarantine take place, who specifically will place [REDACTED] into that location, and what security measures will be established to enforce the quarantine?

Thanks in advance for assisting with our concerns.

Chris

On Thu, Oct 23, 2014 at 1:47 PM, Dolan, Tracy <[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)> wrote:

I just wanted to provide a brief summary/update on our plans for Ebola-related monitoring, quarantine and possible emergency health orders.

- The Department of Health has an emergency health order for Ebola quarantine finalized in the event we need to utilize it.
- We now have teams that are prepared to provide 'active post-arrival monitoring' on a daily basis for passengers arriving in Vermont with a recent travel history to the affected region.
- Depending on the risk of exposure, we can include quarantine as part of that health monitoring. For example, if a traveler arrives in Vermont who was working with patients in West Africa but for some reason was not held at one of the major airports and was cleared to fly into Vermont, we have the option of requesting that either they comply with daily health monitoring OR that they comply with quarantine (depending on risk of exposure).
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We look forward to assisting local officials with any concerns that they may have potential public health risks to their communities.

Sincerely,

Tracy Dolan  
 Acting Commissioner of Health  
 Vermont Department of Health  
 108 Cherry Street, Burlington, VT 05402-0070  
[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)  
 tel: [REDACTED]  
 fax: 802-951-1275

**Mishaan, Jessica**

---

**From:** Dolan, Tracy  
**Sent:** Friday, October 24, 2014 2:10 PM  
**To:** Louras, Chris  
**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond  
**Subject:** RE: Health protocols for Ebola monitoring in Vermont- summary and update

Good afternoon Mayor Louras,

Answers to your questions are below. We are also suggesting a call with local officials in Rutland and local law enforcement this afternoon at 4pm (details at end of message) While our answers below do not name the particular individual of concern (we are using this process to establish a protocol that we might use in other similar situations) please know that we are very much aware of the particulars of this case and that we believe this guidance will serve the situation in Rutland well.

1. Who specifically are the healthcare team members in the Rutland area that are prepared to provide "active post-arrival monitoring" on a daily basis?

Joanne Calvi, the district director for the VDH Rutland District Office and a public health nurse, is the lead for this contact and has briefed other staff members. They are available in Rutland at any time that the traveler arrives. We will provide contact information to you and your local authorities for all relevant staff this afternoon both on our call and electronically.

2. When and where specifically will the healthcare team members make initial contact w/ [REDACTED] to advise that daily monitoring is required?

VDH Rutland District office staff will make contact with the traveler immediately upon arrival in Rutland. We are in contact with CDC screening at JFK, Vermont Homeland Security and VIC, and local officials. If we are aware of the method of arrival in Vermont, the traveler will be met at his destination. If that arrival is in Burlington, our Health staff here in Burlington will meet him first. If possible, first contact will be made by telephone to ask about fever or symptoms then to be followed by face to face contact as per CDC recommendations.

In the case of a traveler that has attempted to or has in fact provided medical care or otherwise been in close contact with someone that has Ebola, we will ask first for the traveler to participate in voluntary quarantine for 21 days from the time they left the affected countries or had close contact with an Ebola patient. If the traveler refuses to enter voluntary quarantine, they will be served with a public health order to be quarantined for the same time period. In either case, twice daily face-to-face contact will be made by VDH local staff to monitor for fever and symptoms. Based on our knowledge of the specific traveler from Rutland we have discussed, we anticipate that we will be asking the traveler to enter voluntary quarantine. If the traveler refuses to comply, an emergency order will be on hand and ready to deliver to the traveler (more below).

3. If the healthcare team members fail to make initial contact w/ [REDACTED] and he makes contact with local officials, do those local officials have the legal authority to advise [REDACTED] that daily monitoring is required?

We would ask local officials to notify us as soon as they become aware of the traveler if he arrives unannounced. Local VDH staff will be available at any time to make this contact with the traveler.

4. Where will [REDACTED] reside as he is undergoing daily monitoring?

If the traveler has a residence, he/she will be quarantined in that location. During quarantine, the traveler will not be permitted to leave the residence. Food and other necessities will be provided, either by AHS or an associated agency.

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If the traveler does not have a residence, AHS economic services will be contacted to find a location for him/her for the quarantine period. They are currently actively searching for a location for the current individual as a contingency plan and we are attempting to secure a location by COB today.

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We would request that VDH and the Rutland local officials share a Joint Information System and coordinate messaging. Nancy Erickson, the director of communications for VDH will be the lead for us.

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Whether voluntary or not, quarantine will be spent at the traveler's residence. If the traveler does not have a residence, as indicated above, AHS will assign them a location for the quarantine period.

8. If he is deemed non-compliant for daily monitoring, and the Commissioner exercises the authority to involuntarily quarantine, where specifically will the involuntary quarantine take place, who specifically will place [REDACTED] into that location, and what security measures will be established to enforce the quarantine?

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VDH would suggest a conference call/meeting this afternoon at 1600 with Rutland elected officials, Rutland PD, Rutland Sheriff and any other necessary local partners. If this is acceptable, the following conference line is available: [REDACTED] room [REDACTED]. We ask that Rutland-based VDH staff can either host the meeting locally or travel to city offices.

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[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)  
tel: [REDACTED]  
fax: 802-951-1275

**From:** Christopher Louras [<mailto:mayorlouras@gmail.com>]

**Sent:** Friday, October 24, 2014 8:07 AM

**To:** Dolan, Tracy

**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond

**Subject:** Re: Health protocols for Ebola monitoring in Vermont- summary and update

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fax: 802-951-1275

**Mishaan, Jessica**

---

**From:** Allen, Susan  
**Sent:** Friday, October 24, 2014 6:06 PM  
**To:** Rogan, Bob  
**Cc:** Miller, Elizabeth  
**Subject:** Re: Mission accomplished??

Great. [REDACTED]

Sent from my iPhone

On Oct 24, 2014, at 5:55 PM, "Rogan, Bob" <[Bob.Rogan@mail.house.gov](mailto:Bob.Rogan@mail.house.gov)> wrote:

Fyi

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Sent using BlackBerry

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**From:** Marcus, Robert [[mailto:Robert\\_N\\_Marcus@who.eop.gov](mailto:Robert_N_Marcus@who.eop.gov)]

**Sent:** Friday, October 24, 2014 05:51 PM

**To:** Rogan, Bob

**Subject:**

<http://newyork.cbslocal.com/2014/10/24/new-york-new-jersey-set-up-mandatory-quarantine-requirement-amid-ebola-threat/>

Robert N. Marcus  
Special Assistant to the President  
White House Office of Legislative Affairs  
[rmarcus@who.eop.gov](mailto:rmarcus@who.eop.gov)  
202-456-6620



**Mishaan, Jessica**

---

**From:** Tom Huebner <thuebner@rrmc.org>  
**Sent:** Friday, October 24, 2014 3:00 PM  
**To:** Dolan, Tracy; Louras, Chris  
**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond  
**Subject:** RE: Health protocols for Ebola monitoring in Vermont- summary and update

To state that which is probably obvious be sure that the law enforcement folks understand the risks associated with enforcing a forced quarantine should it come to that.

---

**From:** Dolan, Tracy [mailto:tracy.dolan@state.vt.us]  
**Sent:** Friday, October 24, 2014 2:30 PM  
**To:** Tom Huebner; Louras, Chris  
**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond  
**Subject:** RE: Health protocols for Ebola monitoring in Vermont- summary and update

Thank you. Based on our understanding of the purpose of the traveler's trip to West Africa (to assist sick patients), we will recommend quarantine due to uncertain risk of exposure. Where voluntary quarantine seems insufficient, we will enforce mandatory quarantine through a health order and with the cooperation of local law enforcement.

Tracy.

---

**From:** Tom Huebner [mailto:thuebner@rrmc.org]  
**Sent:** Friday, October 24, 2014 2:16 PM  
**To:** Dolan, Tracy; Louras, Chris  
**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond  
**Subject:** RE: Health protocols for Ebola monitoring in Vermont- summary and update

Thank you Tracy.

---

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**Sent:** Friday, October 24, 2014 2:10 PM

**To:** Louras, Chris

**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond

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**Sent:** Friday, October 24, 2014 8:07 AM

**To:** Dolan, Tracy

**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond

**Subject:** Re: Health protocols for Ebola monitoring in Vermont- summary and update

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**Mishaan, Jessica**

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**Sent:** Friday, October 24, 2014 2:56 PM  
**To:** Dolan, Tracy  
**Cc:** Tom Huebner; Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Mary Nemeth; Hopkins, Richmond  
**Subject:** Re: Health protocols for Ebola monitoring in Vermont- summary and update

Tracy,

Standing by to cooperate as required.

Still hopeful that [REDACTED] will incubate somewhere other than Vermont for the 21-day period.

Will be on at 1600. City of Rutland partners who do not call in remotely will be at RPD at 108 Wales Street, upstairs (2nd floor), VISION Center conference room.

If Rutland-based VDH staff wishes to join us on-site, we would be delighted to host.

Chris

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Thank you Tracy.

[REDACTED]



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Answers to you questions are below. We are also suggesting a call with local officials in Rutland and local law enforcement this afternoon at 4pm (details at end of message) While our answers below do not name the particular individual of concern (we are using this process to establish a protocol that we might use in other similar situations) please know that we are very much aware of the particulars of this case and that we believe this guidance will serve the situation in Rutland well.

1. Who specifically are the healthcare team members in the Rutland area that are prepared to provide "active post-arrival monitoring" on a daily basis?

Joanne Calvi, the district director for the VDH Rutland District Office and a public health nurse, is the lead for this contact and has briefed other staff members. They are available in Rutland at any time that the traveler

arrives. We will provide contact information to you and your local authorities for all relevant staff this afternoon both on our call and electronically.

2. When and where specifically will the healthcare team members make initial contact w/ [REDACTED] to advise that daily monitoring is required?

VDH Rutland District office staff will make contact with the traveler immediately upon arrival in Rutland. We are in contact with CDC screening at JFK, Vermont Homeland Security and VIC, and local officials. If we are aware of the method of arrival in Vermont, the traveler will be met at his destination. If that arrival is in Burlington, our Health staff here in Burlington will meet him first. If possible, first contact will be made by telephone to ask about fever or symptoms then to be followed by face to face contact as per CDC recommendations.

In the case of a traveler that has attempted to or has in fact provided medical care or otherwise been in close contact with someone that has Ebola, we will ask first for the traveler to participate in voluntary quarantine for 21 days from the time they left the affected countries or had close contact with an Ebola patient. If the traveler refuses to enter voluntary quarantine, they will be served with a public health order to be quarantined for the same time period. In either case, twice daily face-to-face contact will be made by VDH local staff to monitor for fever and symptoms. Based on our knowledge of the specific traveler from Rutland we have discussed, we anticipate that we will be asking the traveler to enter voluntary quarantine. If the traveler refuses to comply, an emergency order will be on hand and ready to deliver to the traveler (more below).

3. If the healthcare team members fail to make initial contact w/ [REDACTED] and he makes contact with local officials, do those local officials have the legal authority to advise [REDACTED] that daily monitoring is required?

We would ask local officials to notify us as soon as they become aware of the traveler if he arrives unannounced. Local VDH staff will be available at any time to make this contact with the traveler.

4. Where will [REDACTED] reside as he is undergoing daily monitoring?

If the traveler has a residence, he/she will be quarantined in that location. During quarantine, the traveler will not be permitted to leave the residence. Food and other necessities will be provided, either by AHS or an associated agency.

5. If [REDACTED] as he asserts, where will the daily monitoring occur and what would be the DoH plan to keep contact if [REDACTED]?

If the traveler does not have a residence, AHS economic services will be contacted to find a location for him/her for the quarantine period. They are currently actively searching for a location for the current individual as a contingency plan and we are attempting to secure a location by COB today.

6. If [REDACTED] complies with daily monitoring, has no movement restrictions, but subsequently approaches the press (as he has done in Rutland before) to provide details of his travels as already publicly posted on Facebook, who specifically will fill role as PIO?

We would request that VDH and the Rutland local officials share a Joint Information System and coordinate messaging. Nancy Erickson, the director of communications for VDH will be the lead for us.

7. If he is asked to voluntarily quarantine, where specifically will the voluntary quarantine take place?

Whether voluntary or not, quarantine will be spent at the traveler's residence. If the traveler does not have a residence, as indicated above, AHS will assign them a location for the quarantine period.

8. If he is deemed non-compliant for daily monitoring, and the Commissioner exercises the authority to involuntarily quarantine, where specifically will the involuntary quarantine take place, who specifically will place [REDACTED] into that location, and what security measures will be established to enforce the quarantine?

If a traveler has indicated that they do not intend to comply or at any point fails to comply with the voluntary quarantine, VDH will work with law enforcement to deliver the health order and enforce it. VDH will request that the local Sheriff or law enforcement personnel provide 24/7 posting of an officer to the traveler's residence or in the case of homelessness, to the location that we have provided for him/her to be quarantined.

VDH would suggest a conference call/meeting this afternoon at 1600 with Rutland elected officials, Rutland PD, Rutland Sheriff and any other necessary local partners. If this is acceptable, the following conference line is available: [REDACTED] room [REDACTED]. We ask that Rutland-based VDH staff can either host the meeting locally or travel to city offices.

Sincerely,

Tracy Dolan

Acting Commissioner of Health

Vermont Department of Health

108 Cherry Street, Burlington, VT 05402-0070

[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)

tel: [REDACTED]

fax: 802-951-1275

**From:** Christopher Louras [<mailto:mavoriouras@gmail.com>]

**Sent:** Friday, October 24, 2014 8:07 AM

**To:** Dolan, Tracy

**Cc:** Spaulding, Jeb; Manning, Michael; Miller, Elizabeth; Rogan, Bob; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith;

Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond  
**Subject:** Re: Health protocols for Ebola monitoring in Vermont- summary and update

Thank you. Standing by.

Chris

On Fri, Oct 24, 2014 at 7:53 AM, Dolan, Tracy <[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)> wrote:

We have been working on many of these same questions specific to Rutland's situation since yesterday. I will send answers later today once we've worked out a few more details with our local partners in Rutland.

Sent from my iPhone

On Oct 24, 2014, at 6:32 AM, "Christopher Louras" <[mayorlouras@gmail.com](mailto:mayorlouras@gmail.com)> wrote:

All,

If the City of Rutland defers to the State of Vermont / CDC and presupposes that [REDACTED] poses no risk exposure, thus accepting the health protocols for Ebola monitoring in Vermont (as established by the Commissioner of Health), and also understanding that the DoH "look(s) forward to assisting local officials with any concerns," we would ask the following questions:

Who specifically are the healthcare team members in the Rutland area that are prepared to provide "active post-arrival monitoring" on a daily basis?

When and where specifically will the healthcare team members make initial contact w/ [REDACTED] to advise that daily monitoring is required?

If the healthcare team members fail to make initial contact w/ [REDACTED] and he makes contact with local officials, do those local officials have the legal authority to advise [REDACTED] that daily monitoring is required?

Where will [REDACTED] reside as he is undergoing daily monitoring?

If [REDACTED] as he asserts, where will the daily monitoring occur and what would be the DoH plan to keep contact if [REDACTED]?

If he is asked to voluntarily quarantine, where specifically will the voluntary quarantine take place?

If he is deemed non-compliant for daily monitoring, and the Commissioner exercises the authority to involuntarily quarantine, where specifically will the involuntary quarantine take place, who specifically will place [REDACTED] into that location, and what security measures will be established to enforce the quarantine?

Thanks in advance for assisting with our concerns.

Chris

On Thu, Oct 23, 2014 at 1:47 PM, Dolan, Tracy <[tracy.dolan@state.vt.us](mailto:tracy.dolan@state.vt.us)> wrote:

I just wanted to provide a brief summary/update on our plans for Ebola-related monitoring, quarantine and possible emergency health orders.

- The Department of Health has an emergency health order for Ebola quarantine finalized in the event we need to utilize it.
- We now have teams that are prepared to provide 'active post-arrival monitoring' on a daily basis for passengers arriving in Vermont with a recent travel history to the affected region.
- Depending on the risk of exposure, we can include quarantine as part of that health monitoring. For example, if a traveler arrives in Vermont who was working with patients in West Africa but for some reason was not held at one of the major airports and was cleared to fly into Vermont, we have the option of requesting that either they comply with daily health monitoring OR that they comply with quarantine (depending on risk of exposure).

- If a traveler does not comply with daily health monitoring or quarantine (where that is required), we will immediately contact the local Sheriff to deliver an emergency health order which would then authorize mandatory quarantine for up to 21 days.
- While CDC guidance indicated that active post arrival monitoring will begin on Monday, October 27<sup>th</sup> or later, the Vermont Department of Health can and will begin this monitoring at any time once we have relevant information.
- Over the next two weeks, our sources from CDC may not be able to provide this information in a timely manner so any assistance you can provide in the meantime with arrival information or contact information for a recent traveler to Guinea, Sierra Leone or Liberia, would be greatly appreciated. Therefore, due to this delay, if you have information about a specific traveler who is arriving into Vermont and can provide us with the arrival date and the address/contact information of the traveler, we can put our process in place immediately.

We look forward to assisting local officials with any concerns that they may have potential public health risks to their communities.

Sincerely,

Tracy Doian  
Acting Commissioner of Health  
Vermont Department of Health  
108 Cherry Street, Burlington, VT 05402-0070  
[tracy.doian@state.vt.us](mailto:tracy.doian@state.vt.us)  
tel: [REDACTED]  
fax: 802-951-1275

error, or have reason to believe you are not authorized to receive it, please promptly delete this message and notify the sender by e-mail.

Thank You

**Mishaan, Jessica**

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**From:** Christopher Louras <mayorlouras@gmail.com>  
**Sent:** Sunday, October 19, 2014 7:40 PM  
**To:** Miller, Elizabeth  
**Cc:** Allen, Susan; Spaulding, Jeb; Baker, James; bob.rogan@mail.house.gov  
**Subject:** Re: [REDACTED] Our Guy

All,  
Bob Rogan responded that he and Rep. Welch are pursuing options and have reached out to Dr. Chen. One of our greatest concerns is the potential disconnect between State/Local and Federal partners (CBP, DHS, CDC, NIH).

Recommend any conf call also include staff from Rep. Welch office, if not entire delegation.

My last commo w/ this guy [REDACTED]

[REDACTED]  
I reached back out, will advise if he responds.

Thanks for the quick response to this, I am not one to overreact but my radar is really lit up over this one.  
Chris

On Sun, Oct 19, 2014 at 3:29 PM, Christopher Louras <mayorlouras@gmail.com> wrote:  
Agreed re: health and HomeSec.  
Thanks for all.

On Sun, Oct 19, 2014 at 3:22 PM, Miller, Elizabeth <Elizabeth.Miller@state.vt.us> wrote:  
I'd recommend we include health and homeland sec for state side planning.  
Obviously we hope the situation is contained before reaching Vermont but we understand the need to prepare...  
I'll talk with our team tomorrow for sure. Liz

Sent from my iPhone

On Oct 19, 2014, at 3:18 PM, Christopher Louras <mayorlouras@gmail.com> wrote:

All,

I spoke with Congressman Welch last night and emailed his Chief of Staff, Bob Rogan, today with the following information.

The email effectively boils down the [REDACTED] issue from the City's perspective to its basics.

The City is requesting we schedule a conference call to develop a plan that gives assurance to the City that we will not be put in the position of managing and controlling the [REDACTED] situation in the event the system fails and he returns to Rutland.

Please read and digest the following email, and let me know when we can discuss a strategy in detail.

[REDACTED]

Unfortunately, we do not enjoy the benefits of time, and the City must develop its course of action.

Chris



----- Forwarded message -----

From: **Christopher Louras** <[mayorlouras@gmail.com](mailto:mayorlouras@gmail.com)>

Date: Sun, Oct 19, 2014 at 11:36 AM

Subject: [REDACTED] Our Guy

To: [bob.rogan@mail.house.gov](mailto:bob.rogan@mail.house.gov)

Hey Bob,

I spoke w/ Congressman Welch last night to advise him of a real-life Ebola issue that has some true potential for Rutland and Vermont. I'll provide attachments/links for context as the mental health aspect of this case is what makes it both unique and extremely troubling.

On the policy side, Gov. Shumlin and his immediate staff are aware, including Sec. Human Services Dr. Harry Chen (cell [REDACTED]). On the law enforcement side, CBP, DHS, TSA, FBI, VSP, RPD are aware. On health side, RPMC Pres. Tom Huebner and immediate staff are aware as well as Dr. Chen at the State. Our concern in Rutland is that given the silos within and across State and Federal governments, that this guy will slip through the cracks and end up in Rutland even though we have been advised that he has been flagged by both CBP and CDC.

In short, our immediate request is that CBP and/or CDC ensure that he not proceed into Vermont until the 21-day incubation period elapses, and that CDC advises local policy makers what their plan is to provide us assurance that he will not return to Rutland until that time.

Thanks for your good work and please reach out if you need further information.

Chris

Cell [REDACTED]

[REDACTED]

Mishaan, Jessica

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**From:** Allen, Susan  
**Sent:** Sunday, October 19, 2014 5:28 PM  
**To:** Louras, Chris  
**Cc:** Miller, Elizabeth; Spaulding, Jeb; Baker, James  
**Subject:** Re: [REDACTED] Our Guy

Have looped in Harry Chen, Keith Flynn and Joe Flynn. They will touch base with you Chris, and make some calls to see what our options are. We will stay on it. Thank you for the alert. Sue

Sent from my iPhone

On Oct 19, 2014, at 3:29 PM, "Christopher Louras" <[mayorlouras@gmail.com](mailto:mayorlouras@gmail.com)> wrote:

Agreed re: health and HomeSec.  
Thanks for all.

On Sun, Oct 19, 2014 at 3:22 PM, Miller, Elizabeth <[Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us)> wrote:  
I'd recommend we include health and homeland sec for state side planning.  
Obviously we hope the situation is contained before reaching Vermont but we understand the need to prepare... I'll talk with our team tomorrow for sure. Liz

Sent from my iPhone

On Oct 19, 2014, at 3:18 PM, Christopher Louras <[mayorlouras@gmail.com](mailto:mayorlouras@gmail.com)> wrote:

All,  
I spoke with Congressman Welch last night and emailed his Chief of Staff, Bob Rogan, today with the following information.  
The email effectively boils down the [REDACTED] issue from the City's perspective to its basics.  
The City is requesting we schedule a conference call to develop a plan that gives assurance to the City that we will not be put in the position of managing and controlling the [REDACTED] situation in the event the system fails and he returns to Rutland.  
Please read and digest the following email, and let me know when we can discuss a strategy in detail.

[REDACTED]

Unfortunately, we do not enjoy the benefits of time, and the City must develop its course of action.

Chris

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**From:** Christopher Louras <[mayorlouras@gmail.com](mailto:mayorlouras@gmail.com)>  
**Date:** Sun, Oct 19, 2014 at 11:36 AM

Subject: [REDACTED] Our Guy  
To: [bob.rogan@mail.house.gov](mailto:bob.rogan@mail.house.gov)

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In short, our immediate request is that CBP and/or CDC ensure that he not proceed into Vermont until the 21-day incubation period elapses, and that CDC advises local policy makers what their plan is to provide us assurance that he will not return to Rutland until that time.

Thanks for your good work and please reach out if you need further information.

Chris

Cell



**Mishaan, Jessica**

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**From:** Christopher Louras <mayorlouras@gmail.com>  
**Sent:** Sunday, October 19, 2014 3:30 PM  
**To:** Miller, Elizabeth  
**Cc:** Allen, Susan; Spaulding, Jeb; Baker, James  
**Subject:** Re: [REDACTED] Our Guy

Agreed re: health and HomeSec.  
Thanks for all.

On Sun, Oct 19, 2014 at 3:22 PM, Miller, Elizabeth <[Elizabeth.Miller@state.vt.us](mailto:Elizabeth.Miller@state.vt.us)> wrote:  
I'd recommend we include health and homeland sec for state side planning.  
Obviously we hope the situation is contained before reaching Vermont but we understand the need to prepare...  
I'll talk with our team tomorrow for sure. Liz

Sent from my iPhone

On Oct 19, 2014, at 3:18 PM, Christopher Louras <[mavorlouras@gmail.com](mailto:mavorlouras@gmail.com)> wrote:

All,

I spoke with Congressman Welch last night and emailed his Chief of Staff, Bob Rogan, today with the following information.

The email effectively boils down the [REDACTED] issue from the City's perspective to its basics.

The City is requesting we schedule a conference call to develop a plan that gives assurance to the City that we will not be put in the position of managing and controlling the [REDACTED] situation in the event the system fails and he returns to Rutland.

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[REDACTED]

Unfortunately, we do not enjoy the benefits of time, and the City must develop its course of action.

Chris

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**From:** Christopher Louras <[mavorlouras@gmail.com](mailto:mavorlouras@gmail.com)>  
**Date:** Sun, Oct 19, 2014 at 11:36 AM  
**Subject:** [REDACTED] Our Guy  
**To:** [bob.rogan@mail.house.gov](mailto:bob.rogan@mail.house.gov)

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Thanks for your good work and please reach out if you need further information.

Chris

Cell [REDACTED]

[REDACTED]

Mishaan, Jessica

---

**From:** Christopher Louras <mayorlouras@gmail.com>  
**Sent:** Sunday, October 19, 2014 3:19 PM  
**To:** Miller, Elizabeth; Allen, Susan; Spaulding, Jeb; Baker, James  
**Subject:** Fwd: [REDACTED] Our Guy  
**Attachments:** [REDACTED]

All,  
I spoke with Congressman Welch last night and emailed his Chief of Staff, Bob Rogan, today with the following information.  
The email effectively boils down the [REDACTED] issue from the City's perspective to its basics.  
The City is requesting we schedule a conference call to develop a plan that gives assurance to the City that we will not be put in the position of managing and controlling the [REDACTED] situation in the event the system fails and he returns to Rutland.  
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[REDACTED]  
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Chris

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**From:** Christopher Louras <mayorlouras@gmail.com>  
**Date:** Sun, Oct 19, 2014 at 11:36 AM  
**Subject:** [REDACTED] Our Guy  
**To:** [bob.rogan@mail.house.gov](mailto:bob.rogan@mail.house.gov)

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Thanks for your good work and please reach out if you need further information.

Chris

Cell [REDACTED]

## Allen, Susan

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**From:** Erickson, Nancy  
**Sent:** Monday, October 27, 2014 7:57 AM  
**To:** Allen, Susan  
**Subject:** FW: NYTimes: The Flu, TB and Now Ebola: A Rare Legal Remedy Returns

haven't read this yet, but apparently refers to our situation.

Nancy Erickson / Communication Director / Vermont Department of Health  
108 Cherry Street Box 70 Burlington, VT 05402

[Nancy.erickson@state.vt.us](mailto:Nancy.erickson@state.vt.us) / [www.healthvermont.gov](http://www.healthvermont.gov)  
802.863.7285 (desk) / [REDACTED] (mobile)

Join us on Facebook / Follow us on Twitter @healthvermont

On 10/27/14, 7:55 AM, "Nancy" <[nancy@svlvand.net](mailto:nancy@svlvand.net)> wrote:

><http://nyti.ms/1oN1Nsb>

>

>The quarantine by New Jersey of medical workers returning from  
>Ebola-afflicted areas of West Africa is virtually without precedent in  
>the modern history of the United States, experts said on Sunday.

>

>

>Sent from my iPhone

## Allen, Susan

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**From:** Miller, Elizabeth  
**Sent:** Sunday, October 26, 2014 8:37 PM  
**To:** Louras, Chris  
**Cc:** Allen, Susan  
**Subject:** Re: PIO

agreed and ready. I actually believe that we have good communication and a plan in place. Will still need local support and advice, of course. what a situation.

Elizabeth H. Miller  
[REDACTED] cell  
[elizabeth.miller@state.vt.us](mailto:elizabeth.miller@state.vt.us)

> On Oct 26, 2014, at 7:46 PM, "Christopher Louras" <[mayorlouras@gmail.com](mailto:mayorlouras@gmail.com)> wrote:

>

> Liz and Susan,

> I have stood down.

> Recommend that VDH PIOs are plugged into and prepared for Rutland social media network dynamic and the associated FB/Twitter challenges if this were to break, which we all hope does not occur.

> Chris

**Allen, Susan**

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**From:** Manning, Michael  
**Sent:** Thursday, October 23, 2014 10:32 AM  
**To:** Allen, Susan  
**Subject:** FW: [REDACTED] coming back

FYI...

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**From:** Judd, Derek M [mailto:Derek.M.Judd@ice.dhs.gov]  
**Sent:** Thursday, October 23, 2014 10:08 AM  
**To:** Manning, Michael  
**Cc:** karabinv@state.gov  
**Subject:** RE: [REDACTED] coming back

Here is the latest from CDC in regards to their protocol involving travelers from the affected area in Africa...

The Centers for Disease Control and Prevention (CDC) announced that public health authorities will begin active post-arrival monitoring of travelers whose travel originates in Liberia, Sierra Leone, or Guinea. These travelers are now arriving to the United States at one of five airports where entry screening is being conducted by Customs and Border Protection and CDC. Active post-arrival monitoring means that travelers without febrile illness or symptoms consistent with Ebola will be followed up daily by state and local health departments for 21 days from the date of their departure from West Africa. Six states (New York, Pennsylvania, Maryland, Virginia, New Jersey, and Georgia), where approximately 70% of incoming travelers are headed, have already taken steps to plan and implement active post-arrival monitoring which will begin on Monday, October 27. Active post-arrival monitoring will begin in the remaining states in the days following. CDC is providing assistance with active post-arrival monitoring to state and local health departments, including information on travelers arriving in their states, and upon request, technical support, consultation and funding.

Active post-arrival monitoring is an approach in which state and local health officials maintain daily contact with all travelers from the three affected countries for the entire 21 days following their last possible date of exposure to Ebola virus. Twenty-one days is the longest time it can take from the time a person is infected with Ebola until that person has symptoms of Ebola.

Specifically, state and local authorities will require travelers to report the following information daily: their temperature and the presence or absence of other Ebola symptoms such as headache, joint and muscle aches, weakness, diarrhea, vomiting, stomach pain, lack of appetite, or abnormal bleeding; and their intent to travel in-state or out-of-state. In the event a traveler does not report in, state or local public health officials will take immediate steps to locate the individual to ensure that active monitoring continues on a daily basis.

In addition, travelers will receive a CARE (Check And Report Ebola) kit at the airport that contains a tracking log and pictorial description of symptoms, a thermometer, guidance for how to monitor with thermometer, a wallet card on who to contact if they have symptoms and that they can present to a health care provider, and a health advisory infographic on monitoring health for three weeks.

Active monitoring establishes daily contact between public health officials and travelers from the affected region. In the event a traveler begins to show symptoms, public health officials will implement an isolation and evaluation plan following appropriate protocols to limit exposure, and direct the individual to a local hospital that has been trained to receive potential Ebola patients.

Post arrival monitoring is an added safeguard that complements the existing exit screening protocols, which require all outbound passengers from the affected West African countries to be screened for fever, Ebola symptoms, and contact with Ebola and enhanced screening protocols at the five U.S. airports that will now receive all travelers from the affected countries. All three of these nations have asked for, and continue to receive, CDC assistance implementing exit screening.

---

**From:** Manning, Michael [<mailto:Michael.Manning@state.vt.us>]  
**Sent:** Thursday, October 23, 2014 9:26 AM  
**To:** Judd, Derek M; Karabin, Viktor  
**Subject:** RE: [REDACTED] coming back

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**From:** Judd, Derek M [<mailto:Derek.M.Judd@ice.dhs.gov>]  
**Sent:** Thursday, October 23, 2014 8:42 AM  
**To:** Manning, Michael; Karabin, Viktor  
**Subject:** RE: [REDACTED] coming back

---

**From:** Manning, Michael [<mailto:Michael.Manning@state.vt.us>]  
**Sent:** Wednesday, October 22, 2014 4:53 PM  
**To:** Karabin, Viktor; Judd, Derek M  
**Cc:** Emmons, Mark  
**Subject:** RE: [REDACTED] coming back

---

**From:** Karabin, Viktor [<mailto:KarabinV@state.gov>]  
**Sent:** Wednesday, October 22, 2014 4:51 PM  
**To:** Manning, Michael; 'Derek.M.Judd@ice.dhs.gov'  
**Cc:** 'mark.emmons@ic.fbi.gov'  
**Subject:** Re: [REDACTED] coming back

---

**From:** Manning, Michael [<mailto:Michael.Manning@state.vt.us>]  
**Sent:** Wednesday, October 22, 2014 04:44 PM  
**To:** Judd, Derek M <[Derek.M.Judd@ice.dhs.gov](mailto:Derek.M.Judd@ice.dhs.gov)>; Karabin, Viktor  
**Cc:** Emmons, Mark <[mark.emmons@ic.fbi.gov](mailto:mark.emmons@ic.fbi.gov)>  
**Subject:** RE: [REDACTED] coming back

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**From:** Judd, Derek M [<mailto:Derek.M.Judd@ice.dhs.gov>]  
**Sent:** Wednesday, October 22, 2014 4:41 PM  
**To:** Manning, Michael; Karabin, Viktor



Cc: Emmons, Mark  
Subject: RE: [REDACTED] coming back

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**From:** Manning, Michael  
**Sent:** Wednesday, October 22, 2014 4:02:06 PM  
**To:** Karabin, Viktor  
**Cc:** Judd, Derek M; Emmons, Mark  
**Subject:** RE: [REDACTED] coming back

Please note *new* e-mail address: [michael.manning@state.vt.us](mailto:michael.manning@state.vt.us)

*Lieutenant Michael J. Manning  
Chief - Homeland Security  
Division of Emergency Management & Homeland Security  
Vermont State Police  
103 South Main Street  
Waterbury, VT 05676*

*Phone: 802.241.5095  
Cell: [REDACTED]  
Fax: 802.241.5615*

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**From:** Karabin, Viktor [<mailto:KarabinV@state.gov>]  
**Sent:** Wednesday, October 22, 2014 2:28 PM  
**To:** Manning, Michael  
**Cc:** Judd, Derek M; [mark.emmons@ic.fbi.gov](mailto:mark.emmons@ic.fbi.gov)  
**Subject:** RE: [REDACTED] coming back

Privacy/PII  
This email is UNCLASSIFIED.

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**From:** Manning, Michael [<mailto:Michael.Manning@state.vt.us>]  
**Sent:** Wednesday, October 22, 2014 1:50 PM  
**To:** Judd, Derek M; Karabin, Viktor; [mark.emmons@ic.fbi.gov](mailto:mark.emmons@ic.fbi.gov)  
**Subject:** FW: [REDACTED] coming back

Please note *new* e-mail address: [michael.manning@state.vt.us](mailto:michael.manning@state.vt.us)

Lieutenant Michael J. Manning  
Chief - Homeland Security  
Division of Emergency Management & Homeland Security  
Vermont State Police  
103 South Main Street  
Waterbury, VT 05676

Phone: 802.241.5095

Cell: [REDACTED]

Fax: 802.241.5615

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**From:** Christopher Louras [<mailto:mayorlouras@gmail.com>]

**Sent:** Wednesday, October 22, 2014 1:31 PM

**To:** Rogan, Bob; Miller, Elizabeth; Allen, Susan; Baker, James; Flynn, Joe; Flynn, Keith; Covell, David; Chen, Harry; Tom Huebner; Mary Nemeth; Hopkins, Richmond; Manning, Michael; Spaulding, Jeb

**Subject:** [REDACTED] coming back

**Allen, Susan**

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**From:** Baker, James  
**Sent:** Sunday, October 19, 2014 8:30 PM  
**To:** Luras, Chris  
**Cc:** Miller, Elizabeth; Allen, Susan; Spaulding, Jeb; bob.rogan@mail.house.gov; Chen, Harry; Tom Huebner; Mary Nemeth  
**Subject:** Re: Guidance?

Mayor,

The police officer in me wonders if we know he is at a given location then what prevents an embassy from sending investigators (agents) to interview him and get a sense of his travel and future plans. Not sure of processes....

JB

James W. Baker  
Chief of Police  
Rutland City Police Department  
Rutland, Vt. 05701  
802-773-1816  
[james.baker@state.vt.us](mailto:james.baker@state.vt.us)

**Mishaan, Jessica**

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**From:** Christopher Louras <mayorlouras@gmail.com>  
**Sent:** Friday, October 17, 2014 5:02 PM  
**To:** Miller, Elizabeth  
**Subject:** Ebola issue, honest

Liz,

I am assuming The Boss has been briefed, but if not, at a minimum he should know what I know.

Short story below, can speak at length at your request.

[REDACTED]

[REDACTED]

He is in Guinea/Sierra Leone [REDACTED]

[REDACTED]

He has scheduled his return trip to JFK [REDACTED]

Law Enforcement aware, including State Dept, DHS, TSA, Customs/Border Patrol, VSP, RutPD

We have been advised that CDC is aware.

Rutland Regional Medical Center aware, Sec. Chen aware.

I have traded emails with [REDACTED] will forward to you.

[REDACTED]