



# DALLAS

# EBOLA

# INCIDENT

SEPTEMBER 28 – NOVEMBER 7, 2014

# BEING PREPARED...CONTRIBUTING FACTORS TO SUCCESS WITH EBOLA

## Examples Include:

- **H1N1 (swine) flu pandemic in 2009 (first confirmed H1N1 death occurred in Texas).**
- **Super Bowl XLV Ice Storm in Dallas/Arlington, February 2011**
- **Multiple Tornadoes in Dallas County in Spring of 2012.**
- **West Nile virus (mosquito-borne illness) with 20 deaths in Dallas County in Summer of 2012.**
- **Dedication of George W. Bush Presidential Center (SMU) brought the President and 4 past presidents to Dallas in May 2013.**
- **50<sup>th</sup> Anniversary of President John F. Kennedy's death in Dallas, November of 2013.**
- **Winter Weather (Ice Storm), 800,000 without power, in December 2013.**

# IMPORTANT DATES

- **September 28, 2014 - Thomas Eric Duncan was transported by EMS to Texas Presbyterian Hospital in Dallas after developing symptoms consistent with Ebola. Based on his travel history and symptoms, CDC recommended testing for Ebola. The medical facility isolated the patient (i.e., index patient) and sent specimens for testing at CDC and at a Texas laboratory. Local public health officials identified all close contacts of the index patient for daily monitoring for 21 days after exposure.**
- **October 1, 2014 - The Dallas County Emergency Operations Center (EOC) was activated; in cooperation with City of Dallas and Texas Department of State Health Services**
- **October 2, 2014 - Four members of Mr. Duncan's family are placed under a protective order until October 19, 2014**
- **October 2, 2014 - Dallas Deputy Sheriff tests negative for Ebola**
- **October 3, 2014 - Louise Troh and her family are moved to new location**
- **October 4 - 6, 2014 - Hazmat Crews Clean Mr. Duncan's Apartment**
- **October 8, 2014 - Mr. Duncan (Index Patient) dies from Ebola**

# IMPORTANT DATES CONTINUED

- **October 10, 2014 - A healthcare worker at Texas Presbyterian Hospital who provided care for the index patient tests positive for Ebola. The healthcare worker was isolated after the initial report of a fever and subsequently moved to the National Institute for Health (NIH) Clinical Center. The patient has since recovered and was discharged on October 24, 2014.**
- **October 12 – 13, 2014 - Hazmat crews cleaned Nurse 1's apartment**
- **October 13, 2014 - Bentley the dog is moved to safe area**

# IMPORTANT DATES

## CONTINUED

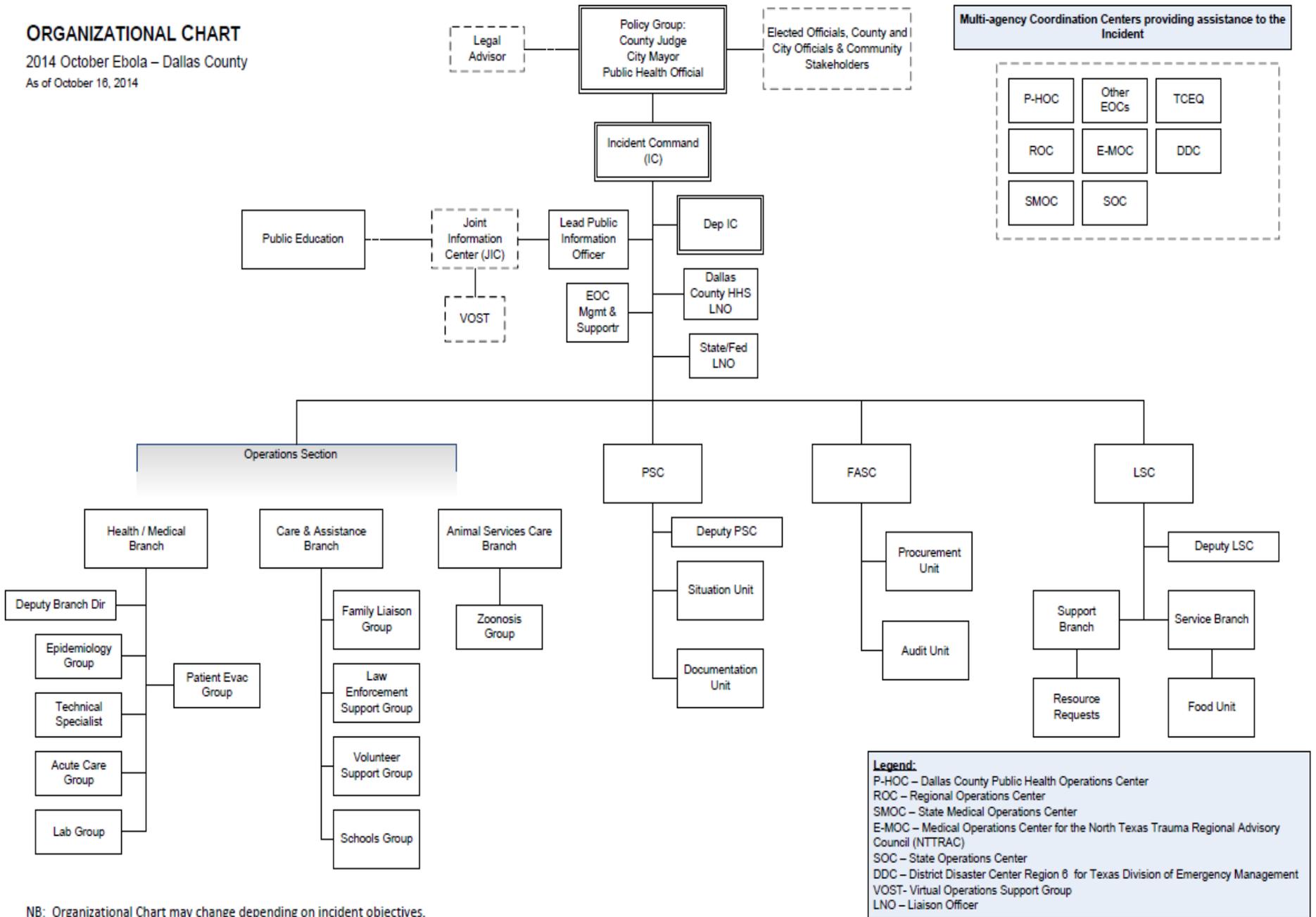
- **October 15, 2014 - A second healthcare worker who provided care for the index patient at Texas Presbyterian Hospital tests positive for Ebola. This second healthcare worker was transferred to a hospital in Atlanta, Georgia. The second healthcare worker had traveled by air October 13, a day before reporting symptoms. All passengers and crew on the two flights (Dallas to Cleveland on October 10, and Cleveland to Dallas on October 13) have since been contacted by public health professionals and are being monitored. The patient has since recovered and was discharged on October 28, 2014.**
- **October 15, 2014 - HazMat crews clean Nurse 2's apartment**
- **October 30, 2014 - Health care workers complete medical monitoring**
- **November 7, 2014 – Dallas County Ebola Free**

# WHO IS IN CHARGE OF WHAT (ICS STRUCTURE)

- **Unified Command Structure (City-County-State Public Health) at County EOC**
- **Policy “Senior Advisors” Group (Mayor, County Judge, Texas Commissioner of Health)**
- **DDC (State Regional Coordination Center) Similar to MAC for State Resource**
- **SOC (State Operations Center Activated to Support DDC and Dallas County EOC)**
- **CDC & U.S. Public Health (Worked from Dallas Co. EOC & Presbyterian Hospital)**

# ORGANIZATIONAL CHART

2014 October Ebola – Dallas County  
As of October 16, 2014



NB: Organizational Chart may change depending on incident objectives.

# DECISION MAKING

- “Making Soup While the World Watches on CNN” & Local Media...
- Decisions were being made from National to Local level as incident evolved...No Playbook
- Importance of good situational awareness
- There was no Ebola Plan...County plans were generic
- CDC Guidance Was Important
- Having faith in the “science”
- Contracting/Purchasing, Who Pays for What, Legal Clarification...
- Decision made not to declare an emergency
- Being truthful and clear is important
- “You don’t know what you don’t know”



White House



CDC



State



City & County



Hospital

# EBOLA...A HAZMAT INCIDENT

- **Class A-pathogen in Bio-Hazard Category**
- **Apartments exteriors cleaned by Dallas HazMat & Contractor**
- **Clean Up Contractor hired to sanitize apartments interior**
- **Waste materials (in barrels) was moved to Dallas County Security Staging Area by County Fire Marshal**
- **Patients Vehicles - DECON, Storage, Transportation**
- **Waste Disposal Plan/Decisions, Permits, Location, Contents of Containers, Decon of Area & Containers**
- **Shortage of PPE Equipment & Supplies**



# COMMUNICATIONS

- **EOC (breakout for County, City, State/Federal, conference rooms for meetings)**
- **WebEOC (Used to post Sit Reps, IAP, Significant Events, Resource Requests)**
- **Email List Distribution Created**
- **Face To Face (EOC Briefings-Twice Per Day)**
- **Emergency Managers Conference Call (Daily at 12 noon)**
- **Mayor & Judge Conference Call (Daily at 6pm)**
- **Medical Conference Call (Periodically)**
- **State - Regional EM Conference Call (Periodically)**
- **Persons assigned to keep elected and appointed officials updated**
- **Citizen Phone Bank established (Staffed by MRC)**
- **Community health teams & police deployed to distribute flyers & information**

# COMMUNICATIONS CONTINUED

- Elected Official walked neighborhoods
- 211/311 were provided with information
- Reverse 911 was used by City of Dallas to alert residents
- Dallas medical society provided public call-in sessions and responded to questions
- Texas Commissioner of Health was part of CDC briefings on a regular basis (from Dallas County EOC)
- Frequent communications between City, County, State and Federal agencies (including White House and CDC)

# **MEDIA INTERACTION**

- **Joint Information Center (At times virtual)**
- **EOC Media Spokespersons included:**
  - **City of Dallas Mayor**
  - **County Judge (Chairman of County Commissioners)**
  - **State Commissioner of Public Health**
- **County Public Health Officials provided technical information**
- **Presbyterian Hospital representatives conducted press conferences**
- **DISD Schools Superintendent provided information to schools/parents**
- **VOAD provided information through their membership**
- **CDC conducted regular press conferences**
- **Media Releases were approved by County Judge, Mayor and Commissioner's senior staff**
- **National conference calls & broadcast (CDC, CNN, national and local media)**
- **Rumor control is important**
- **Social media is critical**
- **Websites provided good detailed information through links**

# MEDICAL MONITORING OF POTENTIALLY EXPOSED PERSONS/ANIMALS (21 DAYS)

- Ways Persons Were Monitored (County & State Legal Team)
  - Voluntary monitoring by self and Epi teams (County, State, CDC)
  - Persons placed under State protective orders (Issued by Commissioner of Health)
  - Persons under restraining order (Issued by Commissioner of Health/Courts)
  - Persons under volunteer travel restrictions
  - Problematic persons (individual basis)
  - Release Orders
  
- Worried Well Persons
  - Emergency & Law Enforcement personnel (Local Medical Society)
  - Misinformation to residents (Worked through media)
  - Health Officials set up hotline (Staffed by MRC volunteers)

# MEDICAL MONITORING OF POTENTIALLY EXPOSED PERSONS/ANIMALS

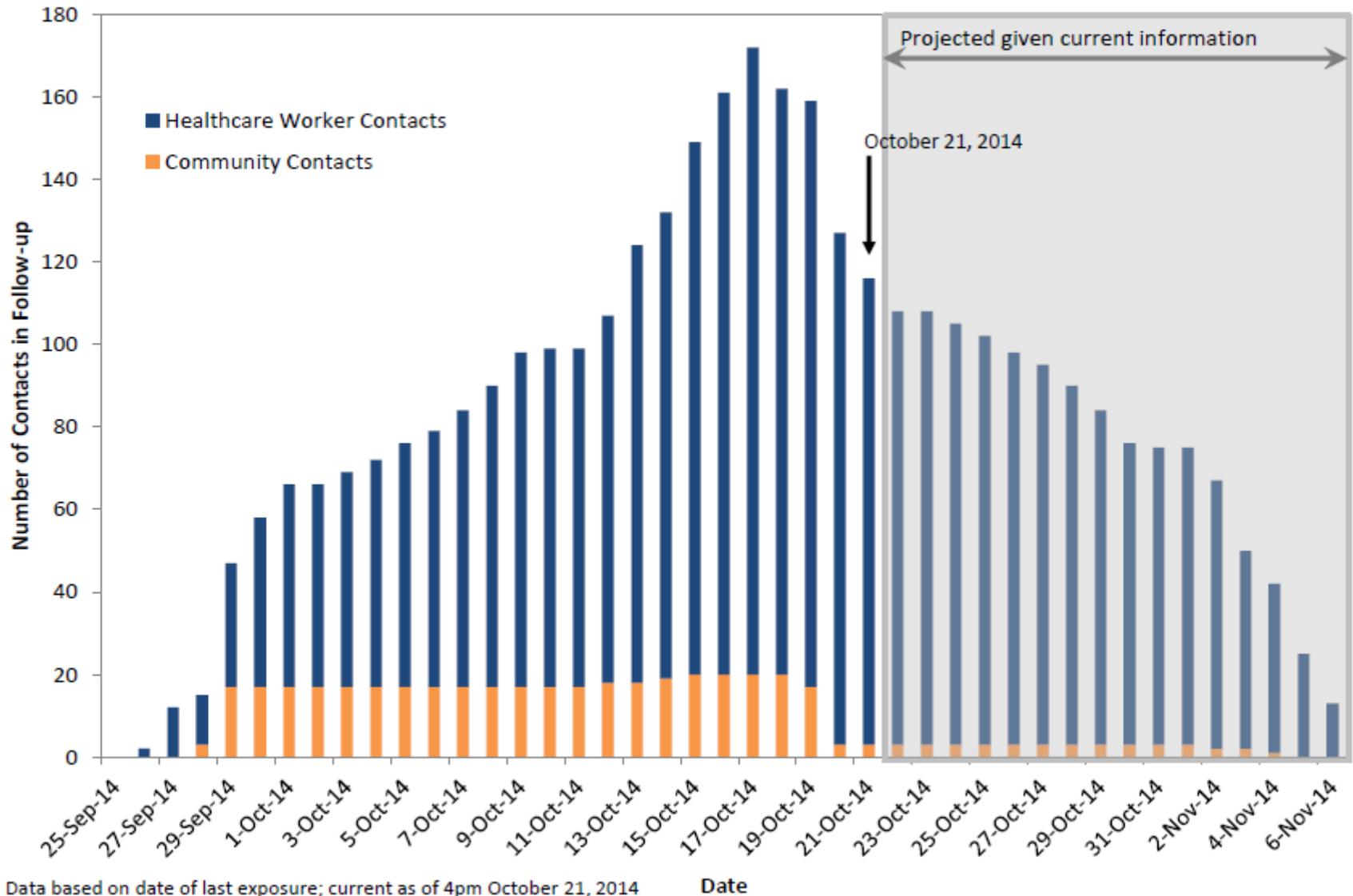
- Mr. Duncan's Immediate Family (Under Protective Order)
  - Need to remove waste from apartment quickly (phases I and II)
  - Need to find them temporary (secure) living accommodations (took several days)
  - Need to find them clothing & household goods (Use of ARC & VOAD)
  - Need to remove, decon and store their vehicle
  - Need to provide security of site (County Sheriff)
  - Need for compassion & understanding (Minister, County Judge & Mayor)
- Bentley the "Ebola Dog"
  - City of Dallas Animal Services was lead
  - Location for isolation (Hensley Field)
  - Monitoring requirements - special equipment & training
  - Care & feeding
  - Testing of dog
  - Media attention



# MEDICAL MONITORING OF POTENTIALLY EXPOSED PERSONS/ANIMALS

- Who Did the Medical Monitoring?
  - Dallas County Health lab certified to conduct Ebola
  - Epidemiologists (Provided by CDC, State Health & County Health Officials)
  - Tracking the numbers of persons monitored (minute-by-minute and need for daily totals)
  - Unmarked County Vehicles with Drivers (need to protect privacy)
  
- To Whom Was Information Released?
  - CDC & State decided not to release addresses of those persons being monitored
  - County Commissioners, working with legal counsel, decided to release addresses (not names) to Law Enforcement for inclusion in 911 Center CAD dispatch systems, upon written request. Sample letter was sent to cities (approved to form).
  - Media was respectful of family and those being monitored's privacy (for most part)

## Number of Contacts in Follow-Up - Dallas, TX



Data based on date of last exposure; current as of 4pm October 21, 2014

Date

# ROLE OF HOSPITALS & HEALTH CARE PROVIDERS

- **Texas Department of Health Services**
  - Provided CDC and other health guidance
  - Worked from Dallas County EOC
  - Managed/Tracked medical side of the event
  
- **Texas Health Care - Presbyterian Hospital**
  - Activated their EOC on site at hospital and provided office and meeting space
  - County assisted with medical waste from hospital
  - Regional Hospital Advisory Council played a major coordination role with other health care providers
  - Provided logistical support to City, County, State, Federal agencies

# BIGGEST CHALLENGES

- **Ensuring the safety of the public, health care personnel, employees and those under medical surveillance.**
- **Working under national media attention...**
- **Ensuring we provide correct information to media and public during news conferences...**
- **Managing “worried well” and public concerns...**
- **Ensuring we follow County/State legal, purchasing and operational requirements...**
- **Tracking costs and having those cost figures available...**
- **Keeping a good situational awareness throughout the incident...**
- **Managing distractions or “white noise”...**
- **Separating correct information from disinformation...**

# RECOMMENDATIONS

- **Have a plan for Ebola - Planning is most important part of the planning process**
- **Train and exercise the plan; ensure you are ready**
- **Have pre-existing contracts ahead of the event**
- **Make sure all persons involved are treated with respect and compassion**
- **Documentation is very important - Freedom of Information (Pictures)**
- **Know the importance of legal, purchasing and media team**
- **Manage expectations - Media will attempt to drive the event**
- **“Don’t create your own emergencies”**
- **Communicate frequently - Have a public face of the event**
- **Have a situation unit that can plan, react and implement on the fly**

# QUESTIONS





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FEBRUARY 2015

# Trial by Ebola



Dallas County chief epidemiologist Dr. Wendy Chung, far right, and members of her team—from left, Sonya Hughes, Emily Hall, and Sibeso Joyner. Chung suspected Thomas Eric Duncan had Ebola and urged that he be tested, despite doubts from the Centers for Disease Control and Prevention., Photograph by Dan Winters.

When Ebola reached America, arriving in Dallas on September 20, the city had no real plan to handle the outbreak. Nor, it appeared, did the federal government. As epidemiologist Wendy Chung, county judge Clay Jenkins, and other local officials quickly realized, they were largely on their own. Bryan Burrough has the untold story of their heroic response.

BY BRYAN BURROUGH  
PHOTOGRAPHS BY DAN WINTERS

**E**bola arrived in the streets of America just after seven o'clock on the evening of Saturday, September 20, 2014, when United Airlines Flight 822 touched down at Dallas/Fort Worth International Airport. The deadly virus was coursing through the bloodstream of a single passenger, a 42-year-old Liberian man named Thomas Eric Duncan, a chauffeur who had flown via Brussels and Washington, D.C., with plans to marry the mother of his 19-year-old son, a 54-year-old Dallas woman named Louise Troh.

No one knew he had it, including Duncan himself, though he may have suspected. He had lied on his departure forms in Liberia, failing to mention the young Ebola victim, his landlord's daughter, he had helped carry to a hospital. In Dallas, Duncan headed to Troh's apartment, at the Ivy Apartments, a tidy warren in the city's Vickery Meadow neighborhood. In recent years Vickery Meadow—

while only a few miles from some of the city's wealthiest neighborhoods, where Mark Cuban and Ross Perot and members of the oil-rich Hunt family live—has emerged as a haven for all manner of refugees and immigrants. Walking into the Ivy complex is like walking into the United Nations; women in brightly colored headscarves linger outside apartments that house families from countries as far afield as Kazakhstan, Bhutan, and Myanmar.

Five days later, on Thursday, September 25, Duncan began feeling unwell. He went to the emergency room at Texas Health Presbyterian Hospital, known locally as “Presby”—one of the city's largest medical facilities—where he complained of a headache and nausea. A doctor, failing to notice he was also running a fever that spiked at 103 degrees and that he had recently traveled from Africa, never imagined he might have Ebola, gave him a prescription for antibiotics, and sent him home. Over the next two days Duncan began to sweat profusely and took to his bed, his fever rising. He was returned to Presby by ambulance Sunday afternoon. Despite widespread reports to the contrary in following days, he had yet to show other signs of Ebola, including excessive vomiting and diarrhea. This time, though, a nurse, taking note of his origins, decided to make a call.

Dallas County employs a squad of nine epidemiologists—they call themselves “epis”—headed by a sharp young doctor named Wendy Chung. Among their duties is manning a 24-hour phone line that area doctors and nurses can call if they suspect a new infectious disease. That afternoon one of Chung's epis, 30-year-old Sonya Marie Hughes, was gardening with her 5-year-old at their home, near Love Field, when the phone rang. Hustling into the house, Hughes spoke to the answering service, which told her they had a possible Ebola patient at Presby.

The epis call such a patient a potential “person under investigation,” or P.U.I. With Ebola raging in West Africa, the county had already had eight potential Ebola P.U.I.'s, all false alarms, so the call didn't especially worry Hughes; the patient was saying he had never been exposed to the virus. Hughes talked to the attending nurse, took down the information, and alerted Chung, who by late afternoon was studying Duncan's blood work, details of which were faxed to her home. Chung didn't like what she saw. The blood was low on platelets, something Ebola might cause. While there was still no vomiting or diarrhea, Chung decided to take no chances. She wanted more tests.

## PHOTOS: Trial by Ebola

ENLARGE SLIDESHOW

1/4



Dallas County judge Clay Jenkins, center, and staff, Ruby Blum, Philip Haigh, Lauren Trimble, and Shay Cathey, at the Dallas County Courthouse.

PHOTOGRAPH BY DAN WINTERS.

In calls to the Centers for Disease Control and Prevention, in Atlanta, that evening, however, Chung was surprised when her counterparts there saw no need for them. “The C.D.C. was actually not real keen on testing; there was no indication he’d been to a funeral, no evidence he’d eaten bushmeat, no evidence of Ebola exposure,” she says. “All he was was a gentleman from Liberia with a fever.”

Still, Chung wanted testing. She was aware that the Texas State Department of Health, in Austin, had recently gained the ability to test for Ebola. When she telephoned a state doctor that night, she discovered this had happened barely a month before. The state lab, in fact, had never performed an actual Ebola test. But they were willing, and now able, to try. When Chung asked for shipping instructions, the state doctor apologized, saying the process was so new she didn’t know them. She promised to find out and pass them on in the morning. Even so, it would take five full days before Duncan’s blood could be analyzed; one day to ship to Austin, two days for the Austin lab to do its work, then two days for the C.D.C. to confirm. Chung hung up, irate. Five days was far too long.

In calls and e-mails that stretched past midnight, she talked again with the C.D.C., which still saw no need for testing, and again with Austin, and finally got both to agree to take samples and test the blood by Tuesday afternoon. The next morning she and her staff packed Duncan’s samples into special mailing containers, a process that, while of proven reliability, would nevertheless draw criticism. Some would later suggest that precious hours might have been saved by driving a sample to Austin, barely three hours south. “We weren’t even sure that was allowable,” Chung says. “You had to have special training to transport the specimens,” and no one she knew of seemed to have it.

Chung, meanwhile, was growing concerned about the situation at Presby. In an effort to isolate Duncan, the hospital was keeping him in the emergency department, where he had no access to a private bathroom, which increased the chances others could be infected if he was. When the C.D.C. convened a conference call Monday morning, Chung assumed the priority would be improving Duncan’s situation. Instead, she listened with mounting concern to news that Duncan’s condition had deteriorated overnight. His diarrhea had “increased incredibly,” Chung recalls, and he had begun to vomit. But there was still no evidence Duncan had been exposed to Ebola. “It was still far from certain even then,” Chung says. “After that call I talked to C.D.C. people, who said maybe 50–50.”

## The Diagnosis

Monday evening the C.D.C. made its first announcement that a patient in Dallas was being tested for Ebola, with the results due probably by late Tuesday afternoon. “None of us, I think, slept that night,” says Chung. “It was almost that feeling of incredulousness. Is this real?”

As the world now knows, it was real. Ebola—the virus made famous in Richard Preston’s 1994 best-seller, *The Hot Zone*, a disease that kills fully half of all those it infects—had come to America. The medical response would be far from perfect, a situation many have blamed on the Obama administration and especially the C.D.C., whose guidelines for protecting medical professionals from the virus turned out to be woefully inadequate, probably leading to the infection of two Presby nurses. That’s the story the world has been told, and it’s all true. But in the scramble to assign blame for medical mistakes that ended up endangering hundreds of people, the press has generally overlooked the frankly remarkable work that inexperienced local officials in Dallas did in preventing Ebola’s spread. This was a job, after all, that much of the public, and all of official Dallas, thought would fall to the C.D.C.

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It didn’t.

“The C.D.C., they’re a government agency, but they have no authority,” says Jennifer Gates, the councilwoman for the area where Duncan stayed. “There was this assumption they would take over. And they didn’t. The city and the county did. We did everything.”

Clay Jenkins, the county judge who assumed management of the outbreak, remembers walking into his first teleconference with the C.D.C.’s director, Tom Frieden, with the belief the C.D.C. would be running things. “My hope talking with Frieden was ‘Hey, big man, you’re freaking in charge of this,’” Jenkins recalls. “Turned out I was.”

“When we started out, we had no information about any of this. Everything was on the fly. We had to learn as we go,” says Lauren Trimble, the judge’s 31-year-old chief of staff. “Everyone thinks the C.D.C. comes and takes charge. That was our assumption. Well, they don’t. They’ll help, sure. But we still have to do it, the local people.”

Judge Jenkins, along with hundreds of unheralded city, county, and state workers, would make their share of mistakes as well. Theirs was a chaotic effort, especially in those first frenzied days, a time of heated arguments and petty politics and moments of quiet heroism that never made it into the press. The untold story of what really happened is one of ordinary people confronting extraordinary circumstances.

**T**uesday morning, after confirming that the blood samples had arrived safely in Atlanta and Austin, Wendy Chung and several of her epis went to Presby to see Duncan’s new room; he had finally been moved out of the emergency department into the Medical Intensive Care Unit, or MICU, one of two such 24-bed units in the hospital; the existing MICU patients were all moved to the second unit. His vomiting and diarrhea had been brought under control once nurses inserted a tube into his nostril and down his throat, along with a catheter for urine and a tube for feces.

“We were just sitting there, and a nurse manager comes in and says, ‘I just got a report from one of the night nurses that Mr. Duncan confided in her that he had a family tragedy in Liberia, a pregnant daughter who died [of Ebola] that he may have been exposed to.’”

Chung stammers as she tries to recall her reaction. “That, I mean ... we ... we ... I just ... we were stunned,” she says. “My face went white, literally.”

“The reason he was so open with the nurse was she was also from Africa,” says Sibeso Joyner, an epi originally from Zambia. “She had actually heard the story Sunday night,” Chung says with a wince, “but she hadn’t thought to tell us.”

Chung immediately called the C.D.C. If the nurse’s story was true, Duncan almost surely had Ebola. And, if so, hours mattered. She had heard a rumor that Duncan had visited an immigration office between his visits to Presby; if so, then others might have been exposed. Chung’s mind raced. Ordinarily, such circumstances called for an “interview by proxy,” that is, calling on a doctor or nurse to question the patient. But Chung felt this was too important to rely on an outsider. “You know what?” she told her C.D.C. counterpart. “I’m going to go in and interview him myself.”

There was risk involved, and the Presby professionals did their best to reduce it. Chung was taken to an outer room, where nurses helped her put on a full face shield, double sets of gloves and gowns, and knee-high plastic boots. At about 10 A.M., two doctors led her into the isolation room where Duncan lay in bed. “My first impression was: this man’s very sick and very afraid,” Chung recalls. “He has a look of great fear. He is short of breath. He wasn’t really able to complete sentences. Several times he looked at me and said, ‘Help me.’”

Gently, Chung guided Duncan through his story. “I ask him where he’s been since he arrived. When the symptoms started. It was a story that was very hard to nail down. He hadn’t gone to the immigration office, it appeared. In these situations, it’s just so hard to know if they’re being forthright. I asked about the sick daughter. He denies it.” In fact, Duncan strenuously denied being around anyone with Ebola. After maybe 20 minutes, Chung left. Even today she is unsure how she felt afterward. “I feel good, that he is accurate as to that he wasn’t sick on the plane. I’m relieved at that. And he didn’t go to the immigration office. I believed that.” As to the sick daughter, “I don’t know what to make of it. It’s hard to know what’s true.”

She purses her lips. “We all had the suspicion it was true.”

For her trouble, Wendy Chung ended up on Dallas County’s “contact list,” meaning those who had come into contact with an Ebola

sufferer and who had to be monitored—in her case, for the next 21 days.

The C.D.C., having examined Duncan's blood work, announced Tuesday afternoon that Ebola had in fact come to Dallas. A C.D.C. team arrived from Atlanta that night. For Gary Weinstein, the doctor who headed Presby's MICU—and who suddenly found himself overseeing his first Ebola patient—the first priority was determining how to treat Duncan.

There is no cure for Ebola. But there are at least four experimental treatments. "Convalescent serum" is derived from the blood of Ebola survivors; in the U.S., however, there were only two batches, taken that summer from two medical workers treated at Emory University, in Atlanta, and neither of their blood types matched Duncan's, rendering them unusable. Emory had also tried an experimental drug called TKM-Ebola, but they advised against its use, warning it might make Duncan even sicker. No supplies of a third drug, ZMapp, were available in the U.S.

Thus, from their first conference call with the C.D.C., on Wednesday, it was clear to Weinstein and his partners that they had to take the fourth option, an experimental pill with the jawbreaking name brincidofovir. Choosing the treatment and administering it, however, were not the same thing. Using brincidofovir would require at least three sets of approvals: from the Food and Drug Administration; from the local Institutional Review Board, which approves the safety of experimental drugs locally; and from the drug company that made the pill.

"We had people on the phones for literally hundreds of hours getting all this paperwork done, just tons of forms and e-mails," says Weinstein. "There's a lot of hoops to jump through. And then you have to find the thing. There's not a lot of it. I mean, it's not at the CVS." As luck would have it, there was a batch of the medicine at a clinical trial in Fort Worth. It could be commandeered, but the paperwork delays meant treatment wouldn't begin before the weekend.

It was unclear if Duncan had that long to wait.

**T**he Texas governor, Rick Perry, held a press conference at Presby Wednesday afternoon. At meetings before and after, local officials tried to understand what was expected of them; at least initially, that was far from clear. Most of the Dallas politicians, including Mayor Mike Rawlings, an avuncular former Pizza Hut C.E.O., had assumed that the C.D.C. was taking over, but what little they were hearing from the C.D.C. suggested that wasn't in the cards. "It was obvious to me and the mayor there was broad confusion over who was in charge and what would happen next," recalls Judge Jenkins, a steely Democrat whose job essentially makes him the mayor of Dallas County. "Mike came up to me at one point and said, 'I am freaking out here.' I told him, 'I'll get this fixed by dark.'"

Late that afternoon Jenkins and the Texas health commissioner, Dr. David Lakey, repaired to a Presby conference room to teleconference with Tom Frieden and other C.D.C. officials. This was the meeting where Jenkins had assumed Frieden would take charge. Instead, Lakey urged they adopt an "incident command structure," or I.C.S., which would place a single local official at the helm of the entire crisis.

"Well, who's going to be in charge?" Jenkins asked.

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"You would be in charge, Clay," Frieden said.

"Well, I'm not a doctor," Jenkins replied. "David, you should be in charge," he said to Lakey. Both of the doctors, however, insisted that Jenkins take charge.

Afterward, talking to Mayor Rawlings, Jenkins tried to explain how the I.C.S. would work. But Rawlings cut him off. “I don’t give a fuck about that,” he said. “Who’s in charge?”

“Well, I am.”

“Oh, good,” Rawlings said, exhaling. “Good.”

The I.C.S. made sense. It was the same structure Dallas officials had adopted in 2012 when confronted with an outbreak of West Nile virus, which killed 19 people in the area. Now almost everyone involved took on the same roles they had during the earlier epidemic. As before, they set up an emergency operations center, known as the E.O.C., on the third floor of the Dallas County Records Building, on Elm Street. After a C.D.C. teleconference, Judge Jenkins and David Lakey retreated there to chart out a plan of attack on a large whiteboard.

Their first priority was controlling the Ebola site, Louise Troh’s apartment, where Troh lived with three others—her 13-year-old son, Duncan’s 21-year-old nephew, and his friend. Wendy Chung’s people had told the family to stay inside on Monday, but the children attended school anyway, which eventually led the school system to insist the boys be home-schooled until proven uninfected. The government administrators needed to keep Troh and the children in the apartment, but they were deeply concerned with issues of civil liberty; they couldn’t be seen as imprisoning the family, at least in part because they feared it might set a precedent for future epidemics. In the end, they issued a “control order,” a device often used in tuberculosis cases, which would instruct the family to remain on the premises at the risk of arrest.

“What we were doing was something no one was really comfortable with. We were signing an order that abridged people’s ability to move about,” Jenkins recalls. “We knew we were leaving ourselves open to criticism.” In the end, they decided to issue the order in the names of both Jenkins, a Democrat, and Governor Perry, a Republican, in order to present a united front to the press. Two doctors from the county delivered it to Troh that evening.

#### Apartment 614

**O**n Thursday they opened the E.O.C., and dozens of administrators took up their positions. They were still deep in initial meetings that morning when CNN aired an interview Anderson Cooper had done with Louise Troh, in which she bemoaned the fact that no plans existed to move her family from an apartment that was still strewn with the sweat-streaked linens and mattresses Duncan had used. “Oh, the CNN piece,” moans Lauren Trimble, Judge Jenkins’s chief of staff. “That raised quite an alarm. We didn’t know it was that bad. This was totally new information to us.”

All the energies of official Dallas, until then tentative and diffuse, now focused on Apartment 614 at the Ivy. As stories flew around the world that the Troh family was being quarantined inside an apartment that might be sullied with Ebola-infected vomit and feces, deputies were dispatched to guard it and make sure no one went inside. Calls went out in search of someone to clean it. In Austin and Washington, bureaucrats scrambled to ascertain what permits were needed to transport materials taken from it. In the meantime, Councilwoman Gates and the mayor’s chief of staff drove to the Ivy.

“The owner, the manager, they didn’t know a thing when we got there. They didn’t even know this had been confirmed,” recalls Gates. “What if Mrs. Troh called for a plumber? What if the toilet backed up?... That was a real concern.”

Almost as bad, the international press had invaded, pulling aside schoolchildren for interviews and handing out \$20 bills to anyone whose apartment had a view of Louise Troh’s; after security guards were called in to keep them outside the complex, one reporter actually barricaded herself in a neighbor’s apartment rather than give up her hard-won perch. Late that afternoon, as if to underscore the city’s evolving crisis, a furious storm struck. Torrential rains and high winds knocked out power to much of Dallas. The Ivy had its power returned quickly after a call from the mayor.

mid the deluge, Judge Jenkins decided it was long past time to brief Troh on the efforts to clean her apartment and move the family. He got out of the E.O.C. unnoticed. “I saw him switch cars. It was all very secretive,” recalls Philip Haigh, the policy aide who emerged as Judge Jenkins’s “body man” during the crisis. “We had no idea where he was going.”

**A**The mayor's young chief of staff, Adam McGough, was standing in the Ivy's driveway with the complex's owner and manager around seven P.M. when he saw Judge Jenkins stride forcefully out of the darkness. Two women were with him. "He walked right past us," McGough recalls. "It was clear he was on a mission." The judge proceeded down the driveway, then vanished around a corner, toward the Troh apartment, as McGough looked on in amazement: "We kind of looked at each other—'Do you think he's going to the unit?'" They hustled after him, reaching the apartment just as the judge disappeared inside. "We were standing there going, 'What is he doing?'" says McGough. "When we've heard all this talk about not doing this, that Duncan was in there with vomit and all this stuff, it was very concerning."

Inside, the judge, who had been told he was at little risk for contamination unless the family showed signs of infection, assured Troh they were doing everything possible to clean the apartment and get them moved. After about 15 minutes he and the women, who turned out to be epidemiologists from the county and the C.D.C., re-emerged. McGough, now deeply worried that the judge might have been exposed to the virus, guided them to the office, where the judge washed his hands.

"There were these awkward moments," McGough says, who suddenly found himself worrying about his own safety. "I didn't know whether he hugged everybody in there, or if he rolled around in the beds. You just didn't know. He did go in and wash his hands. But I wouldn't shake his hand. At that point I had concerns about even being in the same room with him. I didn't want to touch the doorknobs. I was trying not to touch the walls or furniture. I'm just anxious at the whole environment. It's my job, but am I putting my kids at risk?"

Then there was a knock on the office door.

**M**any in Dallas assumed the decontamination of Troh's apartment and any other Ebola sites would fall to some agency of the federal government, perhaps the C.D.C. But responsibility for this too fell to local authorities. The city brought in a veteran hazardous-materials outfit called the Cleaning Guys of Fort Worth, which, thanks to an array of state contracts, has been mopping up chemical and other kinds of spills on area highways for years. At first glance the company's headquarters, a stone ranch house on a country road outside Fort Worth, appear as unassuming as its name. Hidden behind the house, however, is a sprawling compound, bustling with dusty trucks and broad-chested men in neon-colored golf shirts.

The Cleaning Guys' owner, Erick McCallum, is an imposing 45-year-old whose warehouse office is lined with antique guns and swords. News reports suggested his was the only local firm willing to do the cleanup; McCallum doubts that. What he knows is that for his crew Ebola was just like any other biological hazard. "We're trained for anthrax, ricin, sarin—all a lot deadlier than Ebola," he says with a shrug. "A biological event is a biological event. Unless someone is gushing blood like in [the movie] *Alien*, we do everything the same. The type of gear, the decontamination, the protocols. All the same."

After an initial call Wednesday night, McCallum took the job on Thursday, lining up his trucks into a convoy whose departure was delayed by the sudden October deluge. The crews finally pulled up outside the Ivy around eight that evening. They were sitting in their trucks, waiting for a go-ahead to begin, when a security guard approached.

What he said startled them.

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"One of the guards comes up to me and says, 'I can't believe he went into the apartment,'" McCallum remembers. "I said, 'Excuse me?'"

"The judge. He went into the apartment."

"Are you sure?"

"I saw them come out."

McCallum says he was incredulous. The apartment was a hot zone. No one was supposed to enter without full biohazard protective

gear. He jumped out of his truck and asked the guard where the judge was now.

“In the office,” the guard said.

“Get me in there now,” McCallum barked.

Shown to the office, McCallum knocked, then went in. He found the judge sitting with a group of people. “I walked in and I said—I announced this to the whole room—‘Who went in that apartment?’” he recalls. “The judge looked at me and said, ‘I did, at the direction of these ladies here.’” He gestured to the two epidemiologists. “O.K.,” McCallum said. “Why did you do that?”

“And he said, ‘I did it with the approval of the C.D.C. Everything is fine.’ And he goes to shake hands, [saying], ‘I’m Judge Jenkins.’ I wouldn’t shake his hand, because he had been in a contaminated apartment. So he says, ‘It’s O.K. We didn’t touch anything.’”

McCallum was starting to get angry. Without thinking, he blurted out, “So, you levitated in there?”

“You have to understand,” he says today, “we had reports of vomit and feces in that apartment. They walked through it, then down common stairs, to a common parking lot, and it’s raining, water everywhere, so we didn’t know where this might have spread.”

He turned to the judge and the epidemiologists and said, “I want to decontaminate you right now.” At that point, he continues, “the C.D.C. lady, her eyes got real big. She couldn’t get out to my truck fast enough. And the judge says, ‘I think we can agree to that.’”

To one side, McGough was growing increasingly anxious. “They’re still talking, and I get up and go into the bathroom and start washing up,” he says. “I mean, I’m rolling up my sleeves and starting to take off my shirt, and then I’m thinking, I’m doing this in the worst possible place. The judge may have infected the bathroom.”

After McCallum sprayed chemical disinfectants on the shoes of Judge Jenkins and the two women, the cleaning crews left; the permits needed to remove waste from the Troh apartment weren’t yet ready. The cleanup was delayed until morning.

Amid the confusion a call came to the judge’s cell phone. The ID said only “Restricted.” It turned out to be President Obama. Judge Jenkins missed the call.

McGough, meanwhile, returned home to find his wife sitting in the van in their driveway with their three children. Their power was out. “I can’t touch y’all,” he said when she got out, explaining what had happened. Not for the last time, McGough, as many in Dallas would do that chaotic week, confronted the yawning gulf between the facts about Ebola’s spread and the fears in his heart. In this case his fears won out. Minutes later he found himself standing in his darkened garage, stripping off his clothes, while his sons, aged seven and six, trained flashlights on him. Once naked, he scrubbed himself with the alcohol wipes the family used on the boys’ infant sister. “I knew this was ridiculous,” McGough says today. “But at the same time, I needed to take every step to alleviate my family’s concerns. And mine.”

**T**hat Friday, October 3, dawned with the urgent need to get the Troh apartment decontaminated and to move the family. But by sunrise, despite dozens of calls from one of the judge’s aides, no one—no hotel, no apartment complex, no shelter of any kind—was willing to take the family. They decided to start the decontamination process anyway, hoping they could find a home at some point during the day.

“I remember the mayor came into the E.O.C.—he’d been doing tons of press interviews—and said, ‘Give me something real to do, man,’” Jenkins recalls. “So I said, ‘Find me a freaking place for Louise to go.’ And he goes, ‘Well, this is going to be easy. I got this. I’ll do this in 15 minutes.’ Two hours later he comes up and goes, ‘This is a lot harder than I thought it’d be.’ And I’m like, ‘Yeah, you think?’”

Out at the Ivy, meanwhile, a media throng had gathered to catch glimpses of the decontamination efforts, which McCallum’s Cleaning Guys had under way by midmorning. They had little information on what they would find inside. One staffer had told them there would be a single mattress to dispose of, along with some clothing. In fact, there turned out to be eight mattresses; Duncan had apparently used all of them. “That was a bunch of horseshit, whoever told us that,” says R. J. Schwartz, the “incident commander” of

the job. “Just in one bedroom, there were three mattresses, plus two in the living room and three in another bedroom.” The other furniture included a set of metal folding chairs, along with a 60-inch Samsung television and a PlayStation.

The cleaning crews, clad in head-to-toe HAZMAT gear, worked in 45-minute shifts, spraying chemical cleaners everywhere, then tearing up the mattresses and stuffing them inside three layers of protective bags before jamming it all into specially designed barrels. They took chain saws to the television and the PlayStation. It was a fairly typical job except for one thing: the presence of the Troh family. The cleaning crews moved them from room to room as they worked, but, throughout, the family remained in their street clothes.

“We don’t typically do cleanups like that while there are unprotected people there, no,” says McCallum. “We wanted to put them into protective gear, but that didn’t happen. The judge didn’t want them put in that gear. My question was ‘Why?’ ”

“I don’t understand why those people stayed in there,” says Schwartz. “We offered to evacuate them, in a safe manner. But I guess they’d already been with Duncan. We couldn’t make it much worse.”

“They were dealing with this from a very different perspective than we were,” Haigh says, referring to the Cleaning Guys. “They weren’t looking at it from a human angle but from a very strict cleaning perspective. So, no, we didn’t want the family in HAZMAT gear. It would have completely negated the very message we were trying to send, which was they were not a health risk.”

### The Safe House

**A**round noon, Judge Jenkins was in a C.D.C. teleconference when the mayor knocked on the door and drew him outside. Rawlings, who had been on the phone for hours trying to find the family a new home, was hopping up and down he was so excited.

“I’ve got it!” he exclaimed.

“Yeah?” the judge said.

“Gunnar’s house!”

The mayor’s 26-year-old son, Gunnar Rawlings, was renovating a bungalow in the Oak Cliff neighborhood. It was currently unoccupied.

The judge, caught up in the moment, pumped both fists into the mayor’s chest. “That’s what I’m talking about!” he exclaimed. “This is great! This is awesome!” A moment later, the judge recalls, he glanced over at a pair of deputies wearing notably skeptical expressions. They weren’t alone. When McGough heard the news, he called the mayor’s outside P.R. adviser, Laurey Peat, and said, “You’re not going to believe this.” Says McGough now, “I was worried about the media and the neighborhood. The whole place would go crazy: what did it mean for the neighbors? You were worried about a million things. Property values. Would Gunnar even be able to sell his house one day?”

Once the mayor headed to his son’s house to prepare it, Judge Jenkins decided it was time to move the family. He then startled his aides by declaring that he intended to do this himself, once again entering the apartment—without protective gear—and leading the family out. Those around him thought this unwise. The judge’s aides feared it would appear he was grandstanding a month before Election Day. “We were not thrilled he was going over there, period,” says Lauren Trimble. “It felt like he didn’t need to be in that role. But he felt so strongly for these folks. They needed to know Dallas cared. He wanted to apologize. As he was going over there, we were hoping, Maybe he won’t go in. Maybe he’ll just hang back, talk with the media.”

“I thought, This is going to look bad,” recalls Haigh. “The judge, going in and out of the house unprotected, with the HAZMAT people all decked out in their suits. It just looked bad.”

Jenkins, accompanied by Haigh and Councilwoman Gates, arrived at the Ivy around one, sliding in through a rear entrance. The judge

knew all the deputies on guard, and several, he says, beseeched him not to enter the apartment. “I got deputies in tears saying, ‘Judge, don’t go in there. You’re going to die,’ ” he says. “There were two schools of thought: ‘You crazy S.O.B., you’re going to get yourself killed.’ And the other was ‘You crazy S.O.B., you’re going to get us all killed.’ This one guy, he just wouldn’t stop, going on and on, and I finally had to tell him, ‘You have to stop this, because candidly, you’re freaking me out.’ ”

The judge then walked to the apartment. But when he went to lift the red tape that kept outsiders at bay, a deputy swiftly reacted.

“Whoa, whoa!” the deputy said. “You can’t go in there.”

‘Well, I’m going to,’ the judge said. There ensued a discussion in which Jenkins attempted to explain the science of Ebola and emphasize that the C.D.C. had told him he was in no danger by simply entering the apartment. After a bit, the deputies summoned McCallum, who had confronted the judge the night before. The apartment may have been safe for entry before the decontamination began, McCallum thought, but the cleaning process involved destroying almost everything inside; there was no telling what kind of virus or infected particles might have been thrown up into the air. (In fact, Ebola cannot be transmitted through the air.)

The judge “shook my hand, and his exact words were ‘Erick, say what you have to say, quickly, because I’m going to overrule everything you’re about to say,’ ” says McCallum, who remains incensed at the day’s events. “I said, ‘Sir, I’m speaking now not as a HAZMAT technician, not as the owner of this company, but as a citizen of this area for many years: we have to stop this virus NOW.’ I said, ‘If you go in there again, your publicity stunt is going to jeopardize the lives of many people.’ And he looked at me and said, ‘Are you done?’ ”

At that point, the judge turned and walked away. McCallum angrily caucused with his men, including R. J. Schwartz, and considered their options. “I was pretty hot,” McCallum recalls. “I said, ‘This is my equipment. If he goes through with this, I’ll pack up and leave.’ But R.J. and them calmed me down.” Recalls Schwartz, “We just said, ‘Look, yeah, this is a publicity stunt, but we really need to go through with this, for Dallas and, you know, for the country.’ ”

In fact, Jenkins was right about the risks, and to back him up Dr. David Lakey and Dr. Inger Damon, of the C.D.C., would soon issue public letters stating that the judge’s visits to the family had not put himself or others at risk.

Judge Jenkins lifted the red tape and walked upstairs toward the apartment. McCallum, fearing he couldn’t control his temper, left the scene. Schwartz asked the judge, “What is your game plan?” The judge said he intended to enter the apartment and prepare the family to leave. “I said to him, three or four times, Please, don’t go into the hot zone,” Schwartz recalls. “And he didn’t. He stopped at the threshold.”

Before heading upstairs, Jenkins had spoken on the telephone with Troh for a half-hour. She didn’t want to leave, again. It was the mayor’s family, especially his wife, Micki. “She was saying, ‘You can’t do this to Gunnar,’ ” Rawlings recalls. “I was saying, You don’t understand. I have to move them. She said, ‘Then bring them to our house—we can put them upstairs.’ I said, ‘Micki, we can’t. We have good furniture. You don’t know what’s going to happen.’ ” It was Gunnar Rawlings who ended up solving the problem. He knew the Dallas Catholic bishop’s chief of staff, called him, and handed the phone to his father. Judge Jenkins had already tried the bishop, but for some reason Rawlings’s call did the trick. The bishop offered the family a house the church owned.

It took two more hours, however, for it to be readied, during which time Judge Jenkins paced outside Apartment 614. “The logistics of moving the family just took a lot longer than we thought,” says Lauren Trimble. Amazingly, there was still no health professional on-site. The judge felt they shouldn’t move the family without a go-ahead from someone in the health field. They threw out call after call, expecting someone from the C.D.C. would come. “This was crazy for us,” recalls Haigh. “We kept waiting for someone to come, and it turns out they were never going to.” The message from the C.D.C., Haigh says, was that their presence was unnecessary and might only serve to fan fears that the virus was still present at the apartment complex.

Finally, the incident commander, R. J. Schwartz, urged the family members to wear Tyvek HAZMAT suits, the better to protect anyone who might come into contact with them. The judge said no. “I didn’t understand this,” Schwartz says today. “I mean, we gave him all these options. We offered the Tyvek suits or just the M95 masks, the gloves. He said ‘No.’ To everything.”

“We were never given a factual reason why they were not given this protective gear,” McCallum says today.

McCallum and Schwartz believed Jenkins was dead set on being televised leading the family to their new home for political reasons. The judge heatedly denies this. He says it was important to show the world the Trohs were no risk.

By four they were finally ready to leave. But they couldn't, because of the helicopters still filming overhead. No one wanted them to follow the departing convoy and turn it into an O.J.-in-the-Bronco-style media circus. Jenkins had initially planned to head for Parkland hospital and lose the media by discreetly changing cars in its parking garage. When others objected, Mayor Rawlings suggested he simply call his new White House friends and ask them to clear the airspace. “Mike, listen to what you're saying,” Jenkins said, skeptical. “You want me to call the president and ask him to restrict the airspace?”

“Yeah.”

So he did. And while Jenkins politely declines to discuss what happened next, another local official is happy to. “The White House will never confirm this,” he says, “and I don't know exactly who did it, the Secret Service or whoever, but they called and said a dignitary may have been flying into Love Field and they needed to clear the airspace. They were awesome. Today, when you mention that to them, they're like, Well, we don't remember anything about that.”

**A**s another source tells it, a White House official telephoned Jenkins and said, “This would be a good time to move the family.’ And Clay says, ‘Well, did you [clear the airspace]?’ And the guy goes, ‘Well, we can't, but if you could move her in the next 17 minutes, it would be good.’ ”

When the judge returned to the apartment door, one of the teenagers said he didn't want his face photographed. Jenkins offered a HAZMAT mask; they decided on a towel instead. Jenkins had told the boys they couldn't take their personal items, but he wryly pointed out that they would not be searched. “I'm telling you,” Jenkins says with a grin, “those kids all had on cargo pants and they had, like, 30 pounds of stuff jammed in all their pockets.”

Just before six P.M., Jenkins led the family down the stairs to a waiting S.U.V. Councilwoman Gates took that moment to talk to the press, diverting its attention and allowing a convoy of S.U.V.'s to discreetly ferry the family away. A half-hour later Jenkins pulled up at the new address the mayor had given them, in a downtrodden area of Oak Cliff. “It was an abandoned house, with a tree growing through the porch,” Jenkins recalls. “And Louise goes, ‘Oh Lord, Judge, no.’ So I go up to the place. No one's there. So I'm going, ‘I'm going to kill Mike Rawlings.’ Then a deputy goes, ‘Judge, I think we have the wrong address.’ ”

A block away, they found the right address: a clean, neat four-bedroom home where the family was eventually able to complete its quarantine, though not without the press discovering their whereabouts. In time three different local television stations tracked them down, but Jenkins prevailed upon each not to report it.

That evening, when the judge returned to his Highland Park home before attending a charity event, he was surprised to see his wife emerge from the front door to meet him in the driveway. He had forgotten to tell her he was going to the apartment. She had seen it all on CNN, and she wasn't happy.

“She came out of that front door like J. J. Watt to a quarterback,” Jenkins recalls with a smile. “She's like, ‘Can you even come in this house?’ And she starts in on me, and then the neighbor's door opens, and the neighbor goes, ‘Yeah, talk to your wife about what you're doing!’ I'm like, ‘O.K., Renee!’ And then another neighbor, a widow, comes out and starts giving it to me. And I'm like, ‘Ladies, let's all go back into our own homes and have this discussion in private. All right?’ ”

## The Panic

**B**ehind the scenes, much of the work that week had fallen to teams of county and C.D.C. epidemiologists, who tracked down and interviewed the dozens of people who had come into contact with Duncan after his arrival in America. Eventually 177 people in the Dallas area would fall under some type of quarantine. Monitoring these people became a monumental job. The epi had to visit each person twice a day to take his or her temperature, every visit limited by strict medical guidelines. The epi couldn't approach within three feet of the person; the person took his or her own temperature, then held the thermometer aloft for

the epi to read. But tending to the quarantined quickly became more than just medical visits. Once people were restricted to their homes, they had to be brought groceries and medicine. Children who couldn't go to school still needed their homework. "It's medical work, but really, you become these people's therapists," says Sibeso Joyner, one of the epis. "It's so hard. They want hugs, but you can't. There are lots of tears, and we are the only ones they can talk to."

It had fallen to Emily Hall, an auburn-haired 33-year-old, to track down all those who had come into contact with the vehicle that transported Duncan to the hospital, Dallas Fire Rescue ambulance 37. By that Friday morning only one person remained to be found, a grizzled homeless man named Michael Lively, who had had the misfortune of riding in the ambulance immediately after Duncan. Hall spent that day phoning shelters, hospitals, and jails in a vain search for Lively. By that evening, amid mounting concern that he might be infected, all she had to show for her efforts was an old mug shot.

At the E.O.C.'s eight A.M. meeting, Lauren Trimble was startled at the news. "I'm thinking, Oh my God, there is a homeless man walking the streets of Dallas who is in contact with this virus," she recalls. "It's one of those moments where your head falls right in your hands, you know? This can't be happening. You almost wanted to laugh out loud, [like] this is a joke, right? And then you realize, it's not a joke."

**B**y midmorning Wendy Chung's epidemiologists had scattered across the area looking for Lively or anyone who knew him. Around noon Emily Hall was driving north on Central Expressway with a C.D.C. specialist when she saw someone panhandling outside NorthPark mall.

"That's him!" she blurted. "That's Mr. Lively!"

Hall stopped the car and approached the man, who was in fact Lively, and gently explained his predicament. She guided him into a parking garage adjacent to a Whole Foods, took his temperature, and asked if he was experiencing any symptoms; to her relief, he seemed perfectly healthy. "He was a friendly guy," Hall recalls. "He kept saying, 'I'm glad you found me. I didn't know about any of this.'"

They took him to Presby, sat him on a bench out front, and gave him some food and a newspaper while he waited to be examined further. When Hall was called away, another epi volunteered to stay with him. Hours passed. Hall had almost forgotten the incident when, around five, the second epi called her. "She said, 'He's walking off,'" Hall recalls. "I'm like, 'What? You've got to stop him!'" Having waited all afternoon to see a doctor, Lively had lost patience. With no control order in place, they had no authority to stop him. Inexplicably, no one followed him. In minutes, Michael Lively had once again vanished into the streets of Dallas.

"What ensued," Hall says, "was a lot of madness."

Within the hour, dozens of Dallas police were scrambling to find Lively again. Before mounting a more systematic effort, however, they decided to obtain a control order, so that once found he could be detained. That took several hours. Finally, around 10 that evening, Lauren Trimble drove the order to the parking lot of a Half Price Books store on Northwest Highway, a block east of where Lively had first been found. There she encountered a scene so surreal, she says, that "this is the story I'll tell my grandchildren." Arrayed across the lot was what amounted to a Texas-style Ebola posse, more than 40 police officers and sheriff's deputies gathered around Judge Jenkins and the mayor to press an all-night search for the elusive Michael Lively. "I kept thinking, What in the world are we doing? Is this really happening?" Trimble recalls. "I live barely half a mile from here."

After an all-night search, Dallas police detained Lively in a nearby parking lot and placed him in custody. His detention, however, was more than a tragicomic episode. It raised a host of new issues for Dallas officials, among them: Where do you "voluntarily" quarantine someone who has no home and who may resist quarantine altogether? "The main focus was ensuring that there was no blowback against the taking of people's civil liberties," says Philip Haigh. "The focus was on how to keep this man, and how to keep him happy."

"This was bigger than Dallas," Jenkins says. "This is America's Ebola crisis. If we go and arrest this person, then in the next Ebola outbreak in Cincinnati or New York, you're going to have a lot of people who won't come forward [with information]. If they think they'll be jailed, they won't come forward. And they have to come forward. The repercussions would be tremendous."

Unwilling to place Lively in jail, Judge Jenkins decided to put him up at a Motel 6. Deputies guarded him closely. But when Lively

insisted on going for cigarettes, Jenkins was obliged to personally intervene. Finally, after too many people seemed to notice their presence, they moved him to Presby, where he was installed as the only patient in an empty wing of the hospital. “We kept that under tight wraps,” Haigh says, “because we didn’t want people to know about it and we didn’t want people to think we were arresting people left and right.” Social workers tended to Lively’s needs, and he completed his three-week quarantine without incident.

“I really had serious issues with the way [Lively] was treated,” says Emily Hall. “He was treated like a criminal. It ruined his life is what he told us. He said he would have to leave Dallas.”

All that next week the city held its breath, wondering if the crisis was over. Each day seemed to bring a new sideshow. Tuesday it was Jesse Jackson, who staged a press conference with some of Duncan’s family and suggested that his inability to gain prompt medical attention was racially motivated. “I met with Reverend Jackson,” Mayor Rawlings notes with a sigh, “and he was lovely, and it was lovely. But suddenly you had race thrown into the equation. Duncan had been rejected, after all. He was a black man without health insurance. I talked to a lot of black leaders, and everyone came to see these were honest mistakes, and that no discrimination took place.”

Wednesday brought a bizarre incident that suggested how nervous people remained. In the northern suburb of Frisco, a deputy named Michael Monnig walked into a CareNow medical clinic complaining of a stomachache. When he mentioned he had been among the deputies who had gone inside Louise Troh’s apartment, someone called 911. When Monnig learned this, he called his wife and said, “All hell’s about to break loose.” Within minutes news helicopters began appearing overhead. Doctors and patients put on masks. When local stations reported that someone who’d had contact with Duncan was inside, the clinic shut down. Health workers in HAZMAT suits were soon on the scene. Not until the next day would everyone realize it had been a false alarm.

In the middle of all this, Duncan died. It happened Wednesday morning. He had remained lucid until the previous Friday, the day Judge Jenkins evacuated the Troh family. By that night he was having increasing difficulty breathing. His lungs and his kidneys were failing. With his approval, Duncan was then placed in a “pharmacological coma”; yet another catheter was inserted, this one for kidney dialysis. On Saturday, once the brincidofovir arrived from Fort Worth, he was given a dose. During the next three days Duncan remained “stable in an unsatisfactory way,” as one doctor puts it. His blood pressure began to edge up, a good sign. “He had a chance,” Gary Weinstein says. “It was not uncommon for a patient with lung and kidney failure to make it. He could’ve made it. But then something happened.”

Wednesday morning a little after dawn, for reasons doctors still don’t understand, Duncan’s blood pressure plunged. A half-hour later, his heart suddenly stopped. “There was no pulse, no pressure,” Weinstein says. “That happened in a minute. A minute.” They did not try to resuscitate him; Duncan had said he didn’t want that. Having administered only two doses of brincidofovir, doctors had no way to know whether it had helped. Nor was there an autopsy. “I didn’t even bring it up,” says Weinstein. “Everybody would have just said ‘No.’”

It fell to Judge Jenkins and the family’s pastor to break the news to Troh. There was a poignant moment when 13-year-old Timmy asked the judge, “Are you waiting for me to get a temperature so you can take me to the hospital and die?” The judge knelt down beside Timmy on the floor and said, “Look at me now. You’re not going to die. You’re not. You’re going to be O.K.” Afterward, Jenkins was obliged to track down Duncan’s 19-year-old son and persuade him to sign papers allowing them to cremate the body. “David Lakey said we couldn’t take the risk of the body being dug up,” Jenkins says. “We had the power to just take the body and burn it, but we thought it was important that people be given power over their own decisions.”

And then, for a full two days, nothing much happened. Thursday passed, and then Friday, with no news that the virus had spread. “Friday at five, we had a call, and it was a bit jovial, actually,” recalls Mayor Rawlings. “Everybody had worked so hard. There were no new cases. We had gotten Louise Troh through 14 days, and her family was fine. You’re thinking, If she doesn’t have it, maybe we’re out of this. And that’s exactly when we heard about Nina.”

## **The Fever Spreads**

At least initially, Nina Pham, the 26-year-old Presby nurse who became Dallas’s second Ebola patient, just felt queasy. “She called me first, that day around 4:30,” recalls Sibeso Joyner, one of the epis. “She wasn’t feeling well, but her temperature was still low. She just didn’t feel well. She thought she had allergies. I told her to keep taking her temperature.” Thanks to a smart decision by Texas health



officials, Pham may have received the fastest Ebola diagnosis in medical history. C.D.C. guidelines call for an Ebola test to be arranged only after a patient posts a temperature of 101.5 or higher. Early on, David Lakey had ruled that threshold too high; instead he mandated tests for at-risk subjects once their temperature reached 100.5. When Pham hit that level, she went to the hospital. By late the next night, Saturday, the state lab in Austin had confirmed she had Ebola.

The news floored Official Dallas, which thought the Troh family most at risk. “That was a complete surprise,” says Philip Haigh. “She wasn’t even on the monitoring list. None of the health-care personnel wearing P.P.E. [Personal Protective Equipment] were on it, because they weren’t thought to be at risk.”

Judge Jenkins got the call at 11:15 P.M., just as he was reaching for a sleeping pill. By 12:10 he was at Presby, where in consultation with the C.D.C. he and the hospital made a series of decisions. All doctors and nurses who’d had any contact with Duncan were removed from active duty. (Nina Pham, they were surprised to learn, hadn’t treated Duncan in the emergency room, when the vomiting and diarrhea were at their worst, but in the MICU.) Far more dramatically, at 1:50 the hospital decided to go on “diversion,” meaning all incoming ambulances would be diverted to other hospitals; it would take in as few new patients as possible.

The next day Jenkins and Rawlings held a press conference—they actually announced the case before the C.D.C. confirmed it—and met with the Pham family. They were surprised to find that Pham and her parents appeared far less worried about her condition than about that of her dog, a tiny King Charles spaniel named Bentley, which remained at her apartment. Even before the media got wind of Bentley’s plight, the judge ordained that the dog would be saved, no matter what. (When authorities in Spain euthanized the dog of a nurse with Ebola, demonstrators had actually gotten violent.) He was isolated and underwent a 21-day quarantine, and was soon an Internet sensation, much to the consternation of those tasked with safeguarding the city. “The media was playing it that she had vomited in the apartment, and the dog ate the vomit and spread it,” recalls Philip Haigh. “I mean, most of us didn’t care that much about this dog. We had a sick nurse, and all anyone wanted to talk about is this dog, this vomit-eating dog.”

And then, two days later, came more devastating news. Another nurse, Amber Vinson, was diagnosed with Ebola.

Worse, Vinson had been allowed to fly on commercial flights to and from Ohio, where she was planning her wedding. The C.D.C. and the state of Texas eventually tracked down and quarantined dozens of those on her return flight. “The lowest point was Amber,” says Mayor Rawlings. “Suddenly there was a trend.”

A series of heated discussions broke out between C.D.C. officials and Clay Jenkins over preparations for the epidemic that suddenly appeared imminent. “They kept saying, ‘Where are you going to put the next 10 patients? The next hundred?’” Jenkins remembers. “They wanted Parkland [a major county hospital]. We only have five flagship hospitals. People were already avoiding Presby. You take two down and you’re just screwed. There will be people waiting in 16-hour lines at those that remain, dying of heart attacks, asthma, emphysema.”

By that point Judge Jenkins had made a decision. Dallas, and especially the doctors and nurses at Presby, couldn’t take this anymore. “At the hospital, you could just see it in their eyes,” he says. “They were just spent.” So Pham and Vinson were transferred to hospitals out of state.

The media frenzy escalated over those next few days as everyone waited for the epidemic to spread. And then ... it didn’t. Each morning the people of Dallas woke up without a new Ebola patient. One day became two, then three, then a week. And then a week became a month and people began to realize it might actually be over. One by one, people began finishing their 21-day quarantines and walking out into the sunshine.

“At first it was very emotional for the contacts,” says Sibeso Joyner. “Tears. Lots of tears. But with each passing day you saw smiles. Smiling faces. Then jokes. But that took a long time.” Emily Hall told me in mid-November, “Anytime you do a good job on an epidemic, the ending is anticlimactic. It ends, just by going away. And then one day you wake up and you realize it’s over. The past few weeks have been super-boring. And, believe me, boring never felt so good.”

Both Nina Pham and Amber Vinson recovered. They returned to their homes in Dallas in late October and were greeted as heroines. “I’m so proud that we had just one fatality,” says Mayor Rawlings. “I’m heartbroken he died, but that’s it. That’s the thing I’m happiest about.”

**D**octors and academics are studying what happened in Dallas. C.D.C. officials say they may never know exactly how the two nurses became infected, but they have acknowledged that the agency’s guidelines and procedures for P.P.E. were insufficient, falling short of the head-to-toe coverage Doctors Without Borders has used in West Africa. A common assumption is that the virus spread when the nurses changed out of their gear. “The big lesson for us is,” says the C.D.C.’s Inger Damon, “regardless of what constellation of P.P.E. one uses, the most important thing is that people need to practice using it, especially how to safely put it all on and safely take it off.”

David Lakey says other public-health officials have also learned a few crucial things. “This was a monumental event, unlike anything that’s happened before in the U.S.,” Lakey told me. “There were some bumps. The [protective gear], of course. But one of the premises going into this was the C.D.C. kept saying that any major hospital anywhere in the U.S. could take care of an Ebola patient. That strategy is a flawed strategy. Caring for a person with Ebola is very complex. They have a lot of virus, a lot of diarrhea, a lot of vomit. It becomes extremely stressful for the nurses, and on the community. Many people don’t want to go to an ‘Ebola’ hospital. Not every hospital can handle Ebola.”

“We tried to treat people with the respect we’d want to be treated with,” Clay Jenkins says today. “And we tried to think three steps ahead. By and large, we were successful. We were also lucky.”

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