

Date: Monday, May 25, 2026

From: Dr. Dueck, Medical Officer of Health

Re: Seasonal Public Health Reminders; Ebola Disease in Democratic Republic of Congo (DRC) and Uganda

Lyme Disease Reporting

Health care providers are required to report suspect or confirmed diseases of public health significance, with the [reportable diseases list](#) found on Lambton Public Health's [website](#).

Action for Health Care Providers

- For eligible patients, **administer antibiotic prophylaxis or treatment**, per guidance:
 - **Ontario Health – [Lyme Disease Clinical Guidance Algorithm](#)**
 - **Public Health Ontario – [Assessment and Prescribing Algorithm for Pharmacists: Antibiotic Prophylaxis to Prevent Lyme Disease following a Tick Bite](#)**
- **[Complete the mandatory reporting form](#)** and fax to Lambton Public Health, as required.

Additional Resources

- **Public Health Ontario – [Blacklegged Tick \(BLT\) Established Risk Areas Map \(includes Pinery Provincial Park and 20 km surrounding area and new identified area in southeastern section of Lambton\)](#)** Note: Link is to the Ontario Vector-Borne Disease Tool. The BLT interactive map is located on tab at bottom of page.
- **Public Health Ontario – [Rocky Mountain Spotted Fever in \[Long Point\], Ontario](#)**

Legionellosis

Ontario's Ministry of Health has communicated the following, given two concurrent Legionella clusters, located in Hamilton and Toronto. These clusters indicate an unexpected early shift in the Legionella season. While legionellosis cases in Ontario typically peak in July, cases may occur year-round.

In 2025, 75.7% of confirmed legionellosis cases in Ontario required hospitalization and 7.3% resulted in a fatal outcome.

Action for Health Care Providers

- **Maintain a high index of suspicion for legionellosis with pneumonia:** Index of suspicion is recommended to be elevated among adults over 60 years of age, who experience the highest rates of the disease in Ontario.
- **Testing Reminders:** While the Urinary Antigen Test (UAT) is commonly used, it only detects *L. pneumophila* serogroup 1 and does not detect infection caused by non-serogroup 1 or allow for sequencing. Submitting a **lower respiratory specimen (culture)** is critical, as a clinical culture isolate is required to make a genetic linkage to an environmental culture during source investigations.

Requirement to Report All Animal Bites and Scratches

All animal bites and scratches must be reported directly to Lambton Public Health, which can be submitted via the digital [Animal Bite Reporting Form](#). Under the *Health Protection and Promotion Act*, physicians, registered nurses in the extended class, veterinarians, police officers, and any other person with information related to a potential rabies exposure are required to notify the Medical Officer of Health as soon as possible. This includes reporting any bite from a mammal or any contact with a mammal that could potentially transmit rabies to a person. Reports must include all relevant information, including the name and contact information of the exposed person (O. Reg. 501/17, s. 1.).

Ebola Disease in Democratic Republic of Congo (DRC) and Uganda

An Ebola disease outbreak, Bundibugyo virus strain, in Democratic Republic of Congo (DRC) and cases identified in Uganda, was declared a [Public Health Emergency of International Concern \(PHEIC\)](#) on May 17, 2026. While global risk is assessed as low, the Public Health Agency of Canada (PHAC) has posted a [Travel Health Notice for DRC](#) and an [Outbreak Monitoring Alert for Uganda](#). PHAC and Canada's border services administer the *Quarantine Act* and have enhanced screening at international ports of entry into Canada.

Action for Health Care Providers

- **Screening should include travel history.**
- **If a special pathogen, including Ebola disease, is suspected, immediately:**
 - Isolate the patient, implementing additional precautions (i.e., airborne and contact/droplet precautions) and [Public Health Ontario IPAC guidance](#).
 - Report by phone to Lambton Public Health 24/7 at **519-383-8331**.
 - Engage **hospital infection prevention and control, occupational health and safety**, and an **Infectious Diseases Specialist**.

- **Complete Public Health Ontario’s [Viral Hemorrhagic Fever \(VHF\) Clinical Risk Assessment Tool](#)** (May 2026) to support conducting a VHF risk assessment including an appropriate review of the patient’s symptoms, travel history, and potential exposures to a VHF.
- Notify [Health Care Provider Hotline 1-866-212-2272](#) for a coordination call.
- **Do not initiate any specimen collection** until the Ministry of Health coordination call with all health partners determines need for testing. This includes ensuring Public Health Ontario Laboratory Microbiologist is consulted prior to any collection of specimens.