

Ebola Virus Disease (EVD)

Algorithm for Evaluation of the Returned Traveler



FEVER (subjective or $\geq 100.4^{\circ}\text{F}$ or $\geq 38^{\circ}\text{C}$) or compatible EVD symptoms* in patient who has traveled to an Ebola-affected area** in the 21 days before illness onset

*headache, weakness, muscle pain, vomiting, diarrhea, abdominal pain or hemorrhage

NO

Report asymptomatic patients with high- or low- risk exposures (see below) in the past 21 days to the Oklahoma State Department of Health (OSDH) Acute Disease Service (ADS) Epi-on-Call at (405) 271-4060.

YES

1. Isolate patient in single room with a private bathroom and with door to hallway closed
2. Implement standard, contact, and droplet precautions (gown, facemask, eye protection, and gloves)
3. Notify the hospital Infection Control Program and other appropriate staff
4. Evaluate for any risk for EVD
5. IMMEDIATELY report to the Oklahoma State Department of Health Acute Disease Service Epi-on-Call available 24/7/365 at (405) 271-4060

HIGH-RISK EXPOSURE

Percutaneous (e.g., needle stick) or mucous membrane contact with blood or body fluids from an EVD patient

OR

Direct skin contact with, or exposure to blood or body fluids of, an EVD patient

OR

Processing blood or body fluids from an EVD patient without appropriate personal protective equipment (PPE) or biosafety precautions

OR

Direct contact with a dead body (including during funeral rites) in an Ebola affected area** without appropriate PPE

LOW-RISK EXPOSURE

Household members of an EVD patient and others who had brief direct contact (e.g., shaking hands) with an EVD patient without appropriate PPE

OR

Healthcare personnel in facilities with confirmed or probable EVD patients who have been in the care area for a prolonged period of time while not wearing recommended PPE

NO KNOWN EXPOSURE

Residence in or travel to affected areas** without HIGH- or LOW-risk exposure

Review Case with ADS Epi-on-Call at (405) 271-4060 Including:

- Severity of illness
- Laboratory findings (e.g., platelet counts)
- Alternative diagnoses

EVD suspected

EVD not suspected

TESTING IS INDICATED

The ADS Epi-on-Call will advise on the procedure for specimen transport to CDC for testing

The ADS Epi-on-Call, in consultation with CDC, will provide guidance to the hospital on all aspects of patient care and management

TESTING IS NOT INDICATED

If the patient does not require in-hospital management:

- Ensure the ADS Epi-on-Call is aware before discharge to arrange appropriate discharge instructions and to determine if the patient should self-monitor for illness
- Public health will conduct symptom monitoring for 21 days following the patient's last exposure to an Ebola patient

If patient does require in-hospital management:

- Decisions regarding infection control precautions should be based on the patient's clinical situation. Consult with hospital infection control and the ADS Epi-on-Call
- If patient's symptoms progress or change, re-assess need for testing with the ADS Epi-on-Call

