Interim Guidance for Monitoring and Movement of Persons with Ebola Virus Disease Exposure

Updated: August 22, 2014

http://www.cdc.gov/vhf/ebola/hcp/monitoring-and-movement-of-persons-with-exposure.html

The world is facing the biggest and most complex <u>Ebola</u> virus disease (EVD) outbreak in history. On August 8, 2014, the EVD outbreak in West Africa was declared by the <u>World Health Organization</u> (<u>WHO</u>) to be a Public Health Emergency of International Concern (PHEIC) because it was determined to be an 'extraordinary event' with public health risks to other States. The possible consequences of further international spread are particularly serious considering the following factors:

- 1. the virulence of the virus,
- 2. the intensive community and health facility transmission patterns, and
- 3. the strained health systems in the currently affected and most at-risk countries.

Coordinated <u>public health actions</u> are essential to stop and reverse the spread of Ebola virus. Due to the complex nature and seriousness of the outbreak, CDC has created guidance for monitoring people exposed to Ebola virus and for evaluating their travel, including the application of movement restrictions when indicated.

Definitions used in this document

For case and exposure level definitions, see: <u>Case Definition for Ebola Virus Disease</u> (<u>EVD</u>).

Close contact

Close contact is defined as

- a. being within approximately 3 feet (1 meter) of an EVD patient or within the patient's room or care area for a prolonged period of time (e.g., health care personnel, household members) while not wearing recommended personal protective equipment (i.e., standard, droplet, and contact precautions; see Infection Prevention and Control Recommendations); or
- b. having direct brief contact (e.g., shaking hands) with an EVD patient while not wearing recommended personal protective equipment.

Brief interactions, such as walking by a person or moving through a hospital, do not constitute close contact.

Conditional release

Conditional release means that people are monitored by a public health authority for 21 days after the last known potential Ebola virus exposure to ensure that immediate actions are taken if they develop symptoms consistent with EVD during this period. People conditionally released should self-monitor for fever twice daily and notify the public health authority if they develop <u>fever or other</u> <u>symptoms</u>.

Controlled movement

Controlled movement requires people to notify the public health authority about their intended travel for 21 days after their last known potential Ebola virus exposure. These individuals should not travel by commercial conveyances (e.g. airplane, ship, long-distance bus, or train). Local use of public transportation (e.g. taxi, bus) by asymptomatic individuals should be discussed with the public health authority. If travel is approved, the exposed person must have timely access to appropriate medical care if symptoms develop during travel. Approved long-distance travel should be by chartered flight or private vehicle; if local public transportation is used, the individual must be able to exit quickly.

Quarantine

Quarantine is used to separate and restrict the movement of persons exposed to a communicable disease who don't have symptoms of the disease for the purpose of monitoring.

Self-monitoring

Self-monitoring means that people check their own temperature twice daily and monitor themselves for other symptoms.

Early Recognition and Reporting of Suspected Ebola Virus Exposures

Early recognition is critical to controlling the spread of Ebola virus. Health care providers should be alert for and evaluate any patients with symptoms consistent with EVD and potential exposure history. <u>Standard, contact, and droplet precautions</u> should be immediately implemented if EVD is suspected. Guidance for clinicians evaluating patients from EVD outbreak-affected countries is available at http://www.cdc.gov/vhf/ebola/hcp/clinician-information-us-healthcare-settings.html.

Health care professionals in the United States should immediately report to their state or local health department any person being evaluated for EVD if the medical evaluation suggests that diagnostic testing may be indicated. If there is a high index of suspicion, US health departments should immediately report any probable cases or persons under investigation (PUI) to CDC's Emergency Operations Center at 770-488-7100.

Important Evaluation Factors

Both clinical presentation and level of exposure should be taken into account when determining appropriate public health actions, including the need for medical evaluation or monitoring and the application of movement restrictions when indicated.

Recommendations for Evaluating Exposure Risk to Determine Appropriate Public Health Actions

This guidance provides public health authorities and other partners a framework for determining the appropriate public health actions based on risk factors and clinical presentation. It also includes criteria for monitoring exposed people and for when movement restrictions may be needed. At this time, CDC is NOT recommending that asymptomatic contacts of EVD patients be quarantined, either in facilities or at home.

Exposure Level	Clinical Criteria	Public Health Actions
 appropriate personal protective equipment (PPE) Processing blood or body fluids of a confirmed EVD patient without appropriate PPE or standard biosafety precautions Direct contact with a dead body 	Fever OR other symptoms consistent with EVD without fever	 Consideration as a probable case Medical evaluation using infection control precautions for suspected Ebola, consultation with public health authorities, and testing if indicated If air transport is clinically appropriate and indicated, only <u>air medical</u> <u>transport</u> (no travel on commercial conveyances permitted) If <u>infection control precautions</u> are determined not to be indicated: <u>conditional release</u> and <u>controlled</u> <u>movement</u> until 21 days after last known potential exposure
without appropriate PPE in a country where an EVD outbreak is occurring	Asymptomatic	<u>Conditional release</u> and <u>controlled</u> <u>movement</u> until 21 days after last known potential exposure

Exposure Level	Clinical Criteria	Public Health Actions
 Some Risk of Exposure Household contact with an EVD patient Other <u>close contact</u> with an EVD patient in health care facilities or community settings 	Fever WITH OR WITHOUT other symptoms consistent with EVD	 Consideration as <u>a probable case</u> Medical evaluation using initial <u>infection control precautions</u> for suspected Ebola, consultation with public health authorities, and testing if indicated If air transport is clinically appropriate and indicated, <u>air medical transport</u> only (no travel on commercial conveyances permitted) If <u>infection control precautions</u> are determined not to be indicated: <u>Conditional release</u> and <u>controlled</u> <u>movement</u> until 21 days after last known potential exposure
	Asymptomatic or clinical criteria not met	<u>Conditional release</u> and <u>controlled</u> <u>movement</u> until 21 days after last known potential exposure
 Having been in a country in which an EVD outbreak occurred within the past 21 days and having had no exposures 	Fever WITH other symptoms consistent with EVD	 Consideration as a person under investigation (PUI) Medical evaluation and optional consultation with public health authorities to determine if movement restrictions and infection control precautions are indicated If movement restrictions and infection control precautions are determined not to be indicated: travel by commercial conveyance is allowed; self-monitor until 21 days after leaving country
	Asymptomatic or clinical criteria not met	 No movement restrictions Travel by commercial conveyance allowed <u>Self-monitor</u> until 21 days after leaving country