



Nebraska Department of Health and Human Services

Department of Health & Human Services
DHHS
NEBRASKA

HEALTH ALERT NETWORK

Advisory



TO: Student Health

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RE: Ebola Screening Recommendations for Traveling and International Students & Faculty

DATE: August 12, 2014

This advisory is to provide recommendations to healthcare providers in the university/college health setting that may have students or faculty arriving from regions in West Africa currently affected by the Ebola Virus Disease (EVD) Outbreak.

Screening and Testing Recommendations for Traveling and International Students or Staff

It is advised that providers conduct an initial screening for EVD exposure risks and clinical symptoms of all students and faculty who present for healthcare and who previously resided in or are returning from regions where EVD transmission is occurring (the most up-to-date list of affected countries can be found at: <http://www.cdc.gov/vhf/ebola/outbreaks/guinea/index.html>).

I. Exposure Risk Screening

Providers should obtain a detailed history to assess for any EVD exposures that patients might have experienced prior to arrival in the United States.

Notify the Nebraska Department of Health and Human Services (NDHHS) Epidemiology Office (402-471-2937) or your local health department (see attached document) regarding anyone with any of the following exposures:

- Providing health or supportive care in a region, facility, or household with any suspected or confirmed cases of EVD,
- Percutaneous or mucous membrane exposure or direct skin contact with body fluids or secretions (blood, saliva, urine, stool, sweat, breast milk, and semen) of a person with a confirmed or suspected case of EVD without appropriate personal protective equipment (PPE),
- Sexual contact with an EVD survivor within 3 months of recovery,
- Laboratory processing of body fluids of suspected or confirmed EVD cases without appropriate PPE or standard biosafety precautions,
- Participation in funeral rites or other direct exposure to human remains in the geographic area where the EVD transmission is occurring,
- Direct handling of bats, rodents, or primates in a lab or in nature within a disease-endemic area or where transmission is occurring,



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- Has been a household member or had other casual contact* with an EVD patient, or
- Providing patient care or casual contact* without high-risk exposure with EVD patients in health care facilities in EVD outbreak affected countries.

*Casual contact is defined as a) being within approximately 3 feet (1 meter) or within the room or care area for a prolonged period of time (e.g., healthcare personnel, household members) while not wearing recommended personal protective equipment (i.e., droplet and contact precautions; or b) having direct brief contact (e.g., shaking hands) with an EVD case while not wearing recommended personal protective equipment.

II. Clinical Screening and Reporting

Individuals arriving within 21 days from travel to an outbreak-affected country who present for care should be screened for any symptoms meeting EVD clinical criteria which include: fever of greater than 38.6 degrees Celsius or 101.5 degrees Fahrenheit, and additional symptoms such as severe headache, muscle pain, vomiting, diarrhea, abdominal pain, or unexplained hemorrhage or bleeding.

- **Contact your local health department (see attached document) or the NDHHS Epidemiology Office (402-471-2937) to report persons fitting any of the following criteria:**
 - Any persons with consistent travel history who develop a fever **and** any of the aforementioned clinical symptoms of EVD for further discussion of laboratory testing and necessary control measures.
 - Persons with a pertinent travel history with no symptoms but with abnormal bloodwork (i.e., thrombocytopenia <150,000 cells/ μ L and/or elevated transaminases) within 21 days of travel, without a pre-existing condition or alternative diagnosis.
- In the event that a suspected case of EVD is identified, healthcare providers are advised to follow the recommended isolation and infection control procedures, including standard, contact, and droplet precautions with the appropriate PPE. Detailed recommendations can be found at:

<http://www.cdc.gov/vhf/ebola/hcp/infection-prevention-and-control-recommendations.html>



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Prevention Recommendations for Traveling and International Students or Staff

At this time it is recommended to avoid nonessential travel to some areas or regions where EVD transmission is occurring. Up-to-date travel notices and information on the specified countries are available here: <http://wwwnc.cdc.gov/travel/notices>.

If an individual must travel to these regions, please make sure to advise the following:

- Practice careful hygiene. Avoid contact with blood and body fluids.
- Do not handle items that may have come in contact with an infected person's blood or body fluids.
- Avoid funeral or burial rituals that require handling the body of someone who has died from Ebola.
- Avoid contact with animals or with raw meat.
- Avoid hospitals where Ebola patients are being treated. The US Embassy or consulate is often able to provide advice on facilities that are suitable for your needs.

Additional Resources

An attached screening tool is provided and can be utilized to assist with the screening process. Contact your local health department (see attached document) or the Nebraska Department of Health and Human Services (NDHHS) Epidemiology Office (402-471-2937) if your institution will need further assistance or guidance to conduct an appropriate symptom and exposure risk screen.

- General information on EVD can be found at: <http://www.cdc.gov/ebola>
- Interim Guidance on EVD for healthcare workers can be found at: <http://www.cdc.gov/vhf/abroad/healthcare-workers.html>
- Frequently asked questions on Ebola virus disease: <http://www.who.int/csr/disease/ebola/ebola-faq.pdf?ua=1>

Acknowledgment:

This document was adapted by NDHHS for dissemination in Nebraska from guidance originally developed by the South Carolina Department of Health and Environmental Control.

Risk Assessment for Colleges and Universities

As a result of the ongoing Ebola outbreak in West Africa the college/university is reaching out to faculty, staff, and students who are recently traveling from the outbreak-affected countries to inquire about any potential exposures to Ebola and to ask about any symptoms of illness experienced since returning.

As you have recently traveled from an area identified by the Centers for Diseases Control and Prevention as a potential risk for being exposed to Ebola, I would like to ask you some specific questions concerning your health, possible contacts with a person or persons who might be afflicted with this disease, and contacts with any animals that might be carriers of the virus.

NAME

DOB/Age

Full Address

Travel dates; departure from _____ Airports _____

Arrival _____ Airports _____

What countries and cities did you visit within the past 30 days while in West Africa? What dates were you in each city/country?

Country	City	Date Arrived	Date Departed

Did you have recent contact with anyone who was sick while in West Africa? If yes, please describe their symptoms and the type of contact (shaking hands, hug, being in the same room, etc).

Were you involved in providing health care, changing dressings, bathing, changing bed linens, etc?

Were you in contact with anyone who was diagnosed with or suspected to have Ebola infection? If yes please describe the contact. Were you wearing personal protective equipment (gown, gloves, eye protection, etc) during the contact?

Did you have contact with body fluids such as blood, saliva, sweat, urine, tears, stool, including laboratory specimens or sustain any needle stick injuries related to caring for a person with diagnosed or potential Ebola infection? Were you wearing personal protective equipment (gown, gloves, eye protection, etc) during the contact?

Did you participate in any funeral preparations or burial services?

Did you have contact with animals, specifically bats, non-human primates, antelopes or porcupines?

Were you ill within the past month during your time in West Africa? If so, were you seen by a physician or did you visit a healthcare facility in West Africa?

Have you experienced any of the following symptoms since your return:

Fever? If yes, when did it develop and what was the highest recorded temperature?

Significant headaches

Joint or muscle aches or pains not related to your normal daily activities

Nausea or vomiting

Diarrhea

Abdominal pains

Unexplained hemorrhage or bleeding

(If the person responds in the affirmative to any of the above try to ascertain the onset date of the symptom and the date of resolution).

Have you consulted your personal physician? If yes, did he or she order any lab tests? May we have his/her name and your permission to contact them?

Nebraska Local Health Departments

LHD Contact Information for Distribution to Health Care Providers Only

