

DHEC Guidance

College and University Ebola Virus Disease Screening Recommendations for Traveling and International Students & Faculty

10/16/2014

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

I. Clinical Screening

It is advised that providers conduct an initial screening for clinical symptoms and EVD exposure risks of all students and faculty 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>).

Individuals arriving within 21 days from travel to an outbreak-affected country should be screened for any symptoms meeting EVD clinical criteria which include: measured or subjective fever and /or symptoms such as severe headache, muscle pain, vomiting, diarrhea, abdominal pain, or unexplained hemorrhage or bleeding.

For any persons with a consistent travel history and any of the above symptoms, providers should immediately report to their regional DHEC office for further discussion of laboratory testing and necessary control measures.

II. Exposure Risk Screening

In addition to screening for symptoms, it is recommended that providers obtain a detailed history to assess persons for possible EVD exposures prior to arrival in the United States.

Notify the Regional DHEC office 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,
- 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.

III. Monitoring and Reporting

- All asymptomatic individuals traveling from the affected regions without any known exposures should be advised to self-monitor for fever twice daily and symptoms for 21 days from their departure date from any affected region, with instructions to seek medical attention if they develop fever or symptoms.
- Any persons with a pertinent travel history and any exposure risk from those listed above will require monitoring by a public health authority and further evaluation of their duties and activities depending on their risk factors, role and responsibilities for 21 days from the date of exposure.
- Contact your local DHEC office to report persons fitting any of the following criteria:
 - Any persons with a pertinent travel history who develops a fever **or** any clinical symptoms

- Persons with a pertinent travel history with no symptoms but with abnormal bloodwork (i.e., thrombocytopenia <150,000 cells/μL and/or elevated transaminases) within 21 days of travel, without a pre-existing condition or alternative diagnosis.
 - Persons with a positive exposure risk screen.
- In the event that there is a suspected case of EVD, healthcare providers are advised to follow the recommended isolation and infection control procedures, including standard, contact, and droplet precautions with the appropriate PPE. Details on these recommendations can be found at <http://www.cdc.gov/vhf/ebola/hcp/infection-prevention-and-control-recommendations.html>

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. You can receive up-to-date travel notices and information on the specified countries at <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 DHEC office if your institution will need further assistance or guidance to conduct an appropriate symptom and exposure risk screen.

- **Advice for Colleges, Universities, and Students about Ebola in West Africa:** <http://wwwnc.cdc.gov/travel/page/advice-for-colleges-universities-and-students-about-ebola-in-west-africa>
- 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>

PLEASE CHECK THIS WEBSITE FREQUENTLY FOR UPDATES CONTAINING THE MOST CURRENT INFORMATION AVAILABLE.

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 arrival into the United States.

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.

Please understand that the purpose of this call is to allow early identification of individuals who might have been exposed to this disease in order to monitor for potential illness and begin early treatment if needed. These measures will protect you and prevent the possibility of spread into the community should you become ill.

Section I: Demographics and Travel History

NAME _____ DOB/Age _____

Full Address _____

Travel dates: Departure _____ 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

Section II: Contacts and Symptoms

1. Did you have recent contact with anyone who was sick while in West Africa? **Yes** ____ **No** ____

If yes:

Please describe their symptoms

Please describe the type of contact (shaking hands, hug, being in the same room, etc).

2. Were you involved in providing health care, changing dressings, bathing, changing bed linens, etc?
Yes ____ **No** ____

3. Were you in contact with anyone who was diagnosed with or suspected to have Ebola infection?
Yes ____ **No** ____

If yes:

Please describe the contact.

Were you wearing personal protective equipment (gown, gloves, eye protection, etc) during the contact? **Yes** ____ **No** ____

4. 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? **Yes** ____ **No** ____

If yes, were you wearing personal protective equipment (gown, gloves, eye protection, etc) during the contact? **Yes** ____ **No** ____

5. Did you participate in any funeral preparations or burial services? **Yes** ____ **No** ____

6. Did you have contact with animals, specifically bats, non-human primates, antelopes or porcupines?
Yes ____ **No** ____

7. Were you ill within the past month during your time in West Africa? **Yes** ____ **No** ____

If yes, were you seen by a physician or did you visit a healthcare facility in West Africa?

Yes ____ **No** ____

8. Have you experienced any of the following symptoms since your arrival in the United States:

Symptom	Yes or No	Onset	Duration
Fever	(If yes, highest temp)		
Headache			
Joint or Muscle Pain			
Nausea or Vomiting			
Diarrhea			
Abdominal Pain			
Unexplained hemorrhage or bleeding			

If yes to any of the above:

Have you consulted your personal physician? **Yes** _____ **No** _____

(If yes, collect physician contact information and additional information on labs previously ordered)

If individual has a negative screen, answering no to all questions in section II:

Because the incubation period for Ebola can be as long as 21 days, it is recommended that you continue to monitor your temperature 2 times a day until it has been 21 days since you left West Africa.

Please call _____ immediately if you develop any fever or other symptoms or have any questions. {Provide your phone number and the afterhours number, if you will be unavailable; 24/7 capability is vital}.

If individual has an affirmative screen, answering yes to any questions in section II:

Based on your responses to the questions, it is indicated that we consult with the South Carolina Department of Health and Environmental Control (SC DHEC) to determine a plan for closer monitoring of your symptoms and additional instructions regarding your activities. Someone will be in contact to follow-up with you soon.

Thank you.