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Sample Tool for U.S. Health Departments to Assess Ebola Virus Exposure Risk in Travelers Arriving from a Country with an Ebola Outbreak

OVERVIEW

Contents

This document contains sample questions that can be used to assess risk for Ebola virus exposure in travelers identified as having spent time in the past 21 days in a country with an Ebola virus disease (EVD) outbreak.

How to use these questions

Screen traveler for potential exposure using the initial screening questions. Ask the additional public health risk assessment questions if a traveler answers YES to questions B, C, D, or E. Questions in the public health assessment may be tailored to the results of the initial screening.

INITIAL SCREENING QUESTIONS

In the last 21 days, while in outbreak country:

- A. Were you in the area where the outbreak is occurring [refer to published map on CDC website]?
- B. Did you have any contact with or were you around a person sick with Ebola, or a person who was sick with or died of an unknown sickness?
- C. Did you have any exposure to blood or other body fluids
- D. Did you visit a health clinic or hospital?
- E. Did you touch a dead body or attend a funeral?

ADDITIONAL PUBLIC HEALTH RISK ASSESSMENT QUESTIONS

All questions refer to experiences in [outbreak country] over the last 21 days.

•	· · · · · · · · · · · · · · · · · · ·
1.	Were you in contact with or around a person with Ebola or a person who was sick with or died of an
	unknown illness?
	□ Yes □ No
	a. If YES , which one?
	☐ Person with Ebola
	☐ Person with an unknown illness (List district:)
	☐ Person who died of an unknown illness (List district:)
	b. If YES , what type of contact?
	i. Stayed in the same residence as the person while the person was sick? \Box Yes \Box No
	ii. Provided direct care to the person? \square Yes \square No
	If YES , check one: □ Healthcare (<i>complete additional questions below</i>) or □ Home (or another
	non-healthcare setting)
	Have other direct contact with the person? \square Yes \square No
	iii. Was near (within 3 feet/1 meter) the person but had no physical contact. \square Yes ⁺
	(Duration:)
2.	Were you ever exposed to the blood or other body fluids (including feces, saliva, sweat, urine, vomit,

- 2. Were you ever exposed to the blood or other body fluids (including feces, saliva, sweat, urine, vomit, sputum, breast milk, tears, or semen) of a person with Ebola or an unknown illness?
 - a. If YES which one?

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☐ Person with Ebola	
☐ Person with an unknown illness (List district:)	
☐ Person who died of an unknown illness (List district:)	
Did the exposure include:	
i. Getting stuck with a needle or other sharp object? \square Yes \square No	
ii. Splashing blood or body fluids in the eye, nose, or mouth? \Box Yes \Box No	
iii. Direct skin contact with the ill person's blood or body fluids? \square Yes	□ No
3. Did you have any exposure to dead bodies? \square Yes \square No	
a. If YES , was the person known <u>or suspected</u> to have Ebola? \Box Yes \Box No (List distribution)	ict:
b. If YES (to exposure to dead bodies), what type of exposure?	
i. Touched a dead body? \square Yes \square No	
ii. Prepared a body for burial? \square Yes \square No	
iii. Touched any items that had been in contact with a dead body? \square Yes	□ No
iv. Worked as a burial worker? ☐ Yes ☐ No	
 If YES (to burial worker): Did you wear personal protective equipment 	ent (including
gloves, gowns, masks, and eye protection) at ALL times? 🗆 Yes	□ No
Healthcare-specific questions: 1. During all encounters with a patient with Ebola, did you wear the recommended personal equipment (gloves, gown, mask, and eye protection)? ☐ Yes ☐ No a. If NO (to PPE use):	al protective
i. Did you have any physical contact with the person with Ebola? ☐ Yes	□ No
If NO physical contact, were you within 3 feet (1 meter) of the person with Ebola?	□ 1 10
☐ Yes ⁺ (Duration:) ☐ No	
 2. Did you have unprotected exposure to any of the following? Unprotected exposure mea use of the recommended personal protective equipment (gloves, gown, mask, and eye prexperiencing a breach in infection control precautions. a. Blood or other body fluids (including feces, saliva, sweat, urine, vomit, sputum, be tears, or semen) of a person with Ebola or an unknown illness?	otection) or
For each potential exposure, obtain: Exposure date(s):	
Duration of exposure(s):	
Description of the exposure(s):	
All YES answers, except for those marked with a $^{+}$, indicate a $HIGH$ -RISK exposure if the ill/deceases	ised person
was known or suspected to have Ebola, or if the exposure occurred in the outbreak area.	