

**Ebola Virus Disease (EVD)**

*Algorithm for Evaluation of Patients Suspected to have Ebola*

**EXPOSURE HISTORY**

<p style="text-align: center;"><b>High-Risk Exposure</b></p> <p><b>Percutaneous (e.g. needle stick) or mucous membrane contact with blood or body fluids from an EVD patient</b></p> <p><b>OR</b></p> <p><b>Direct skin contact with, or exposure to blood or body fluids of, an EVD patient</b></p> <p><b>OR</b></p> <p><b>Processing blood or body fluids from an EVD patient without appropriate personal protective equipment (PPE) or biosafety precautions</b></p> <p><b>OR</b></p> <p><b>Direct contact with a dead body (including during funeral rites) in an Ebola affected area** without appropriate PPE</b></p>	<p style="text-align: center;"><b>EBOLA TESTING IS INDICATED</b></p> <p style="text-align: center;"><b>PROCEDURES</b></p> <ul style="list-style-type: none"><li>• <b>Isolate the patient and use standard droplet and contact precautions</b></li> <li>• <b>Contact DOH immediately and submit communicable disease report form</b></li> <li>• <b>DOH will make arrangements for specimen testing in collaboration with CDC</b></li> <li>• <b>In consultation with CDC, DOH will provide guidance to the hospital on all aspects of patient care and management</b></li></ul>
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Epidemiological Surveillance and Response Plan

<p><b>Low-Risk Exposure</b></p> <p>Household members of an EVD patient and others who had brief direct contact (e.g., shaking hands) with an EVD patient without appropriate PPE</p> <p>OR</p> <p>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</p> <p>OR</p> <p>Patient who has traveled to an Ebola-affected area in the 21 days before illness onset</p> <p>OR</p> <p>Patient in contact with a person who has traveled to an Ebola-affected area</p>	<p><b>SYMPTOMS</b></p> <p><b>FEVER (subjective or <math>\geq 101.5^{\circ}\text{F}</math> or <math>38.6^{\circ}\text{C}</math>) or compatible EVD symptoms (headache, weakness, muscle pain, vomiting, diarrhea, abdominal pain or hemorrhage)</b></p>	<p><b>PROCEDURES</b></p> <p>Isolate the patient and use standard droplet and contact precautions</p> <p>Contact DOH immediately and submit communicable disease report form</p> <p><b>Review Case with DOH Including:</b></p> <ul style="list-style-type: none"> <li>• Severity of illness</li> <li>• Rule out endemic diseases (e.g. Typhoid, Malaria),</li> <li>• Perform other appropriate diagnostic tests</li> </ul>
	<p><b>NO SYMPTOMS</b></p>	<p><b>PROCEDURES</b></p> <p>Contact DOH immediately and submit communicable disease report form</p> <p><b>Review Case with DOH Including:</b></p> <ul style="list-style-type: none"> <li>• Severity of illness</li> <li>• Rule out endemic diseases (e.g. Typhoid, Malaria),</li> <li>• Perform other appropriate diagnostic tests</li> </ul>

<p><b>No Known Exposure</b></p> <p>Residence in or travel to affected areas** without HIGH- or LOW-risk exposure</p>	<p><b>EBOLA TESTING IS <i>NOT</i> INDICATED</b></p> <p><b>PROCEDURES</b></p> <p>Contact DOH immediately and submit communicable disease report form</p> <p><b>Review Case with DOH Including:</b></p> <ul style="list-style-type: none"> <li>• Severity of illness</li> <li>• Rule out endemic diseases (e.g. Typhoid, Malaria),</li> <li>• Perform other appropriate diagnostic tests</li> </ul>
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\*\*Based on most up-to-date CDC information