



Factsheet on Updated CDC Guidance:

Monitoring Symptoms and Controlling Movement to Stop the Spread of Ebola

Department of Health and Human Services | Centers for Disease Control and Prevention | Office of the Director

Purpose

This fact sheet explains CDC's updated [Monitoring and Movement guidance](#) to protect America from Ebola. The guidance focuses on how people who may have been exposed to Ebola are monitored and whether or not their movement needs to be limited. Through this guidance, CDC and state and local health departments seek to support people who may have been exposed to Ebola, as well as those who have not been exposed. The guidance helps to make sure a system is in place to quickly recognize when people who develop symptoms may need to be routed to medical care. These actions will better protect people who may have been exposed to Ebola and America as a whole.

Key points of the updated monitoring and movement guidance

- Risk levels are defined for people who may have been exposed to Ebola and for those not at risk for the disease.
- The guidance recommends stricter actions for the different levels of risk. The high, some, and low risk levels are based on the type of exposure to Ebola. No actions are recommended for people who have no risk.
- State and local public health departments are advised to use active monitoring or direct active monitoring for Ebola symptoms rather than having people monitor themselves.
- Clear guidance is given about monitoring healthcare workers who have taken care of patients with Ebola.

New risk levels

The updated guidance defines four risk levels based on degree of exposure:

High risk—

- direct contact with body fluids, from a person sick with Ebola who is showing symptoms,* through:
 - a needle stick
 - splashes to eyes, nose, or mouth
 - getting body fluids directly on skin
- touching a dead body while in a country with a large Ebola outbreak without wearing recommended personal protective equipment (PPE) or not wearing PPE correctly
- both living with and taking care of a person sick with Ebola

Some risk—

- close contact with a person sick with Ebola such as in a household, healthcare facility, or the community (with no PPE worn). *Close contact means being within 3 feet of the person sick with Ebola for a long time.*
- direct contact with a person sick with Ebola in a country with a large Ebola outbreak while wearing PPE correctly

Low (but not zero) risk—

- having been in a country with a large Ebola outbreak within the past 21 days, with no known exposure (such as NO direct contact with body fluids from a person sick with Ebola)
- being in the same room for a brief period of time with a person sick with Ebola
- brief direct contact, like shaking hands, with someone sick with Ebola
- direct contact with a person sick with Ebola in the United States while wearing PPE correctly
- travel on an airplane with a person sick with Ebola

No risk— assuming there are no other risk factors from previous categories, examples in the No risk category include:

- contact with a healthy person who had contact with a person sick with Ebola
- having contact with a person sick with Ebola **before** he or she had any symptoms
- having left a country with a large Ebola outbreak MORE than 21 days ago and has not been sick with Ebola since leaving that country
- having been in a country where there have been Ebola cases, but no large Ebola outbreak (for example, Spain)

Public health workers will use these risk levels along with assessing symptoms to decide how best to monitor for symptoms and what other restrictions may be needed. The table below provides further information about CDC’s recommended action for each risk level.

Recommended actions for people with fever or other Ebola symptoms*

**Symptoms of Ebola to consider:*

- For high and some risk levels: fever (temperature of 100.4°F/38°C or higher or feeling like they have a fever), severe headache, fatigue, muscle pain, vomiting, diarrhea, stomach pain, or unexplained bruising or bleeding.
- For low risk levels: fever (temperature of 100.4°F/38°C or higher or feeling like they have a fever), vomiting, diarrhea, or unexplained bruising or bleeding.

High, Some, and Low risk levels

People in the High, Some, and Low risk levels who have fever or other possible symptoms of Ebola MUST have a medical examination to make sure they don’t have Ebola. They will remain isolated in a hospital until doctors and public health workers are certain that Ebola is not a concern.

No risk level

These people might need to have a medical examination for other diseases (not Ebola).

Recommended actions for people without Ebola symptoms

RISK LEVEL	PUBLIC HEALTH ACTION		
	Active Monitoring	Travel Restrictions	Restricted Public Activities
HIGH risk	Yes—direct active	Yes	Yes
SOME risk	Yes—direct active	Possible	Possible
LOW risk	Yes—direct active for some*; active for others	No	No
NO risk	No	No	No

*Direct active monitoring is recommended for healthcare workers caring for sick Ebola patients in the United States while wearing appropriate PPE correctly and for travelers on an airplane who were seated within 3 feet of a person sick with Ebola.

Public Health Action Definitions

Below are the definitions of actions that are recommended in the updated guidance based on risk levels and symptoms. Isolation, active monitoring, and restrictions to travel and public activities help protect the public by preventing the spread of disease from people who may have a contagious disease.

- **Isolation** separates sick people who are confirmed to have a contagious disease from people who are not sick.
- **Active monitoring** means that public health workers are responsible for checking at least once a day to see if people in these risk levels have a fever or other symptoms of Ebola. In addition, people being monitored must take their temperature twice daily, watch themselves for symptoms, and immediately tell public health workers if they have a fever or other symptoms. Active monitoring must take place until 21 days after the last possible exposure and can occur on a voluntary basis or be required by public health order by public health departments.
 - All people in the high and some risk levels, and some people in the low risk level, will have **direct active monitoring**. With direct active monitoring, public health workers will make a direct observation at least once a day to see if people have a fever or other symptoms. An example of direct observation is an in-person visit. A second follow-up can be done by telephone.
- **Travel restrictions** means that people must NOT travel long distances by airplane, ship, bus or train, even if they are NOT sick. The reason for this is to prevent the possible spread of Ebola if the person becomes sick with Ebola during travel.
 - Some people will also NOT be allowed to travel on local public transportation, including buses, trains, or subways.
 - People in the high risk level are not allowed to travel on long-distance or local public transportation.
 - People in the some risk level should discuss all of their travel plans with their local health department.
 - People with travel restrictions might be allowed to travel by private plane or car as long as they continue to be monitored during travel.
- **Restricted public activities** means that people must NOT go to public places where people are in close contact with each other. Close contact means being within 3 feet of other people. This includes places like movie theaters and shopping centers. Activities like jogging in a park may be allowed. This is because people can stay at least 3 feet away from each other.

See [Interim U.S. Guidance for Monitoring and Movement of Persons with Potential Ebola Virus Exposure](#) for the full guidance document.