

## Interim Table of State\* Ebola Screening and Monitoring Policies for Asymptomatic Individuals

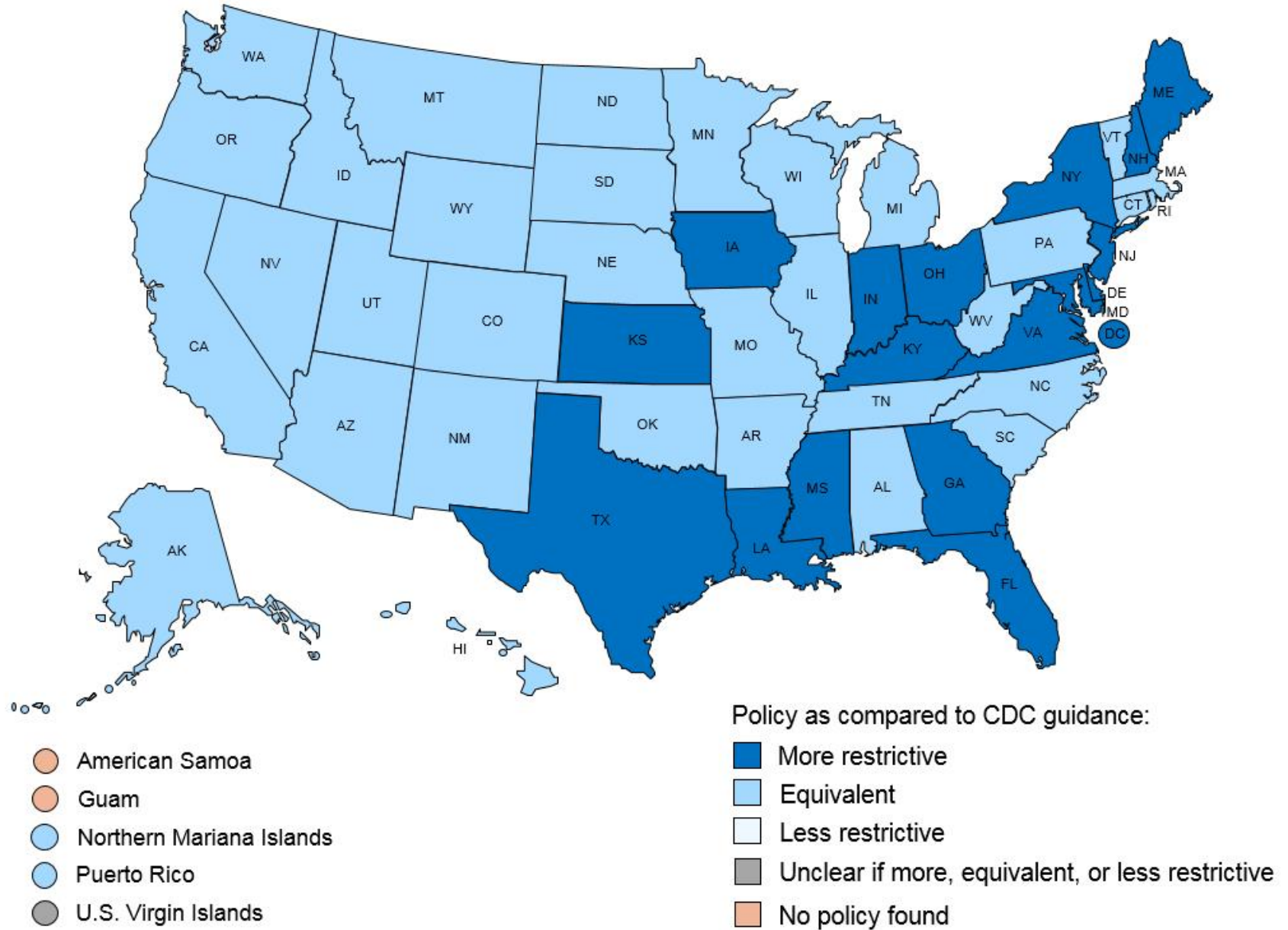
Compiled by CDC's Office for State, Tribal, Local, and Territorial Support, Public Health Law Program & Office of the Associate Director for Policy

\*Includes the District of Columbia, American Samoa, Guam, Northern Mariana Islands, Puerto Rico, and the US Virgin Islands.

*Information provided and conclusions reached in this document are based only on publicly available orders, protocol documentation, and press releases. This list is in draft form and might not be complete for all states.*

Category totals as of August 31, 2015:

More Restrictive: 18; Equivalent: 35; Less Restrictive: 0; Unclear: 1; No Policy Found: 2



STATE	TIERS OF EXPOSURE (All language below is quoted unless otherwise indicated)	ACTION FOR TIER (All language below is quoted unless otherwise indicated)	DIFFERENCE FROM CDC GUIDANCE: MORE RESTRICTIVE/EQUIVALENT/LESS RESTRICTIVE	SOURCE: ORDER/PRESS RELEASE/PLAN/POLICY	LINKS
CDC	<p>High risk includes any of the following:</p> <ul style="list-style-type: none"> <li>• Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola while the person was symptomatic</li> <li>• Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE)</li> <li>• Processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate PPE or standard biosafety precautions</li> <li>• Direct contact with a dead body without appropriate PPE in a country with widespread transmission or cases in urban settings with uncertain control measures</li> <li>• Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring</li> <li>• Public health authority will ensure, through orders as necessary, the following minimum restrictions: <ul style="list-style-type: none"> <li>o Controlled movement: exclusion from all long-distance and local public conveyances (aircraft, ship, train, bus and subway)</li> <li>o Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>o Exclusion from workplaces for the duration of the public health order, unless approved by the state or local health department (telework is permitted)</li> </ul> </li> <li>• Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>• Federal public health travel restrictions (Do Not Board) will be implemented to enforce controlled movement</li> <li>• If travel is allowed, individuals are subject to controlled movement <ul style="list-style-type: none"> <li>o Travel by noncommercial conveyances only</li> <li>o Coordinated with public health authorities at both origin and destination</li> <li>o Uninterrupted direct active monitoring</li> </ul> </li> </ul>		Policy Updated 5-13-15	<a href="http://www.cdc.gov/vhf/ebola/pdf/monitoring-and-movement.pdf">http://www.cdc.gov/vhf/ebola/pdf/monitoring-and-movement.pdf</a> (last accessed 8-31-15)

	<p>Some risk includes any of the following:</p> <ul style="list-style-type: none"> <li>• In countries with widespread transmission or cases in urban settings with uncertain control measures: <ul style="list-style-type: none"> <li>o direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic or with the person's body fluids</li> <li>o any direct patient care in other healthcare settings</li> </ul> </li> <li>• Close contact in households, healthcare facilities, or community settings with a person with Ebola while the person was symptomatic <ul style="list-style-type: none"> <li>o Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet (1 meter) of a person with Ebola while the person was symptomatic</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring</li> <li>• The public health authority, based on a specific assessment of the individual's situation, will determine whether additional restrictions are appropriate, including: <ul style="list-style-type: none"> <li>o Controlled movement: exclusion from long-distance commercial conveyances (aircraft, ship, train, bus) or local public conveyances (e.g., bus, subway)</li> <li>o Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>o Exclusion from workplaces for the duration of a public health order, unless approved by the state or local health department (telework is permitted)</li> </ul> </li> <li>• If the above restrictions are applied, non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>• Other activities should be assessed as needs and circumstances change to determine whether these activities may be undertaken</li> <li>• Any travel will be coordinated with public health authorities to ensure uninterrupted direct active monitoring</li> <li>• Federal public health travel restrictions (Do Not Board) may be implemented based on an assessment of the particular circumstance <ul style="list-style-type: none"> <li>o For travelers arriving in the United States, implementation of federal public health travel restrictions would occur after the traveler reaches the final destination of the itinerary</li> </ul> </li> </ul>			
	<p>Low (but not zero) risk includes any of the following:</p> <ul style="list-style-type: none"> <li>• Having been in a country with widespread transmission or cases in urban settings with uncertain control measures within the past 21 days and having had no known exposures</li> <li>• Having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE, with a person with Ebola while the person was in the early stage of disease</li> <li>• Brief proximity, such as being in the same room (not an Ebola patient care area) for a brief period of time, with a person with Ebola while the person was symptomatic</li> <li>• In countries without widespread transmission or cases in urban settings with uncertain control measures: direct contact while using appropriate PPE with a person with Ebola while the person was</li> </ul>	<p>No restrictions on travel, work, public conveyances, or congregate gatherings</p> <ul style="list-style-type: none"> <li>• Direct active monitoring for: <ul style="list-style-type: none"> <li>o U.S.-based healthcare workers caring for symptomatic Ebola patients while wearing appropriate PPE</li> <li>o Travelers on an aircraft with, and sitting within 3 feet of, a person with Ebola</li> </ul> </li> <li>• Active monitoring for all others in this category</li> </ul>			

	<p>symptomatic or with the person's body fluids</p> <ul style="list-style-type: none"> <li>• Traveled on an aircraft with a person with Ebola while the person was symptomatic</li> </ul>				
	<p>No identifiable risk includes:</p> <ul style="list-style-type: none"> <li>• Contact with an asymptomatic person who had contact with person with Ebola</li> <li>• Contact with a person with Ebola before the person developed symptoms</li> <li>• Having been more than 21 days previously in a country with widespread transmission or cases in urban settings with uncertain control measures</li> <li>• Having been in a country with Ebola cases, but without widespread transmission or cases in urban settings with uncertain control measures, and not having any other exposures as defined above</li> <li>• Having remained on or in the immediate vicinity of an aircraft or ship during the entire time that the conveyance was present in a country with widespread transmission or cases in urban settings with uncertain control measures, and having had no direct contact with anyone from the community</li> </ul>	<ul style="list-style-type: none"> <li>• No actions needed</li> </ul>			
<b>AL</b>	<p>Regarding Ebola, the Alabama Department of Public Health (ADPH) has no plans at this time to preemptively isolate or quarantine individuals at risk of having been exposed who are asymptomatic and compliant with ADPH directives regarding self-monitoring, restricted movement, and structured contact with public health staff.</p>	<p>Directives issued by ADPH to individuals determined to be at risk of having been exposed will conform to guidance issued by the Centers for Disease Control and Prevention. Decisions related to the issuance of orders of isolation and quarantine will be made on a case-by-case basis and will largely be based on an individual's ability and willingness to comply with ADPH directives related to self-monitoring, restricted movement, and structured contact.</p>	Equivalent	Quarantine Policy	<p><a href="http://www.adph.org/ebola/Default.asp?id=6824">http://www.adph.org/ebola/Default.asp?id=6824</a> (last accessed 8-31-15)</p>

<p><b>AK</b></p>	<p>High Risk</p> <ul style="list-style-type: none"> <li>• Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with EVD while the person was symptomatic</li> <li>• Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with EVD while the person was symptomatic without appropriate personal protective equipment (PPE)</li> <li>• Processing blood or body fluids of a person with EVD while the person was symptomatic without appropriate PPE or standard biosafety precautions</li> <li>• Direct contact with a dead body without appropriate PPE in a country with widespread Ebola virus transmission</li> <li>• Having lived in the immediate household and provided direct care to a person with EVD while the person was symptomatic</li> </ul>	<p>Monitoring Type</p> <p>Direct active monitoring for 21 days</p> <p>Restrictions on Work, School, and Other Public Activities</p> <ul style="list-style-type: none"> <li>• Exclusion from public places (e.g., shopping centers, movie theaters) and congregate gatherings</li> <li>• Exclusion from workplaces for the duration of the public health order, unless approved by the State (telework is permitted)</li> <li>• Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> </ul> <p>Travel Restrictions</p> <ul style="list-style-type: none"> <li>• Exclusion from all long-distance and local public conveyances (aircraft, ship, train, bus and subway)</li> <li>• Federal public health travel restrictions<sup>4</sup> (Do Not Board) will be implemented to enforce controlled movement</li> <li>• If travel is allowed, individuals are subject to controlled movement <ul style="list-style-type: none"> <li>o Travel by noncommercial conveyances only</li> <li>o Coordinated with public health authorities at both origin and destination</li> <li>o Uninterrupted direct active monitoring</li> </ul> </li> </ul>	<p>Equivalent</p>	<p>Alaska Department of Health and Social Services Ebola Virus Disease Response Plan Version 4 6-29-15</p>	<p><a href="http://www.epi.hss.state.ak.us/id/dod/ebola/EbolaResponsePlan.pdf">http://www.epi.hss.state.ak.us/id/dod/ebola/EbolaResponsePlan.pdf</a> (last accessed 8-31-15)</p>
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	<p>Some Risk</p> <ul style="list-style-type: none"> <li>• In countries with widespread Ebola virus transmission: direct contact while using appropriate PPE with a person with EVD while the person was symptomatic</li> <li>• Close contact in households, healthcare facilities, or community settings with a person with EVD while the person was symptomatic. <ul style="list-style-type: none"> <li>- Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet (1 meter) of a person with EVD while the person was symptomatic</li> </ul> </li> </ul>	<p>Monitoring Type</p> <p>Direct active monitoring for 21 days</p> <p>Restrictions on Work, School, and other Public Activities</p> <p>Based on specific assessment of the individual's situation, additional restrictions may be appropriate, including</p> <ul style="list-style-type: none"> <li>• Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>• Exclusion from workplaces for the duration of a public health order, unless approved by the State (telework is permitted)</li> <li>• Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>• Other activities should be assessed as needs and circumstances change to determine whether these activities may be undertaken</li> </ul> <p>Travel Restrictions</p> <p>Based on specific assessment of the individual's situation, additional restrictions may be appropriate, including</p> <ul style="list-style-type: none"> <li>• Exclusion from long-distance commercial conveyances (aircraft, ship, train, bus) or local public conveyances (e.g., bus, subway)</li> <li>• Any travel will be coordinated with public health authorities to ensure uninterrupted direct active monitoring</li> <li>• Federal public health travel restrictions (Do Not Board) may be implemented based on an assessment of the particular circumstance</li> <li>• For travelers arriving in the United States, implementation of federal public health travel restrictions would occur after the traveler reaches the final destination of the itinerary</li> </ul>			
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	<p>Low Risk (but not zero)</p> <ul style="list-style-type: none"> <li>• Having been in a country with widespread Ebola virus transmission within the past 21 days and having had no known exposures</li> <li>• Having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE with a person with EVD while the person was in the early stage of disease</li> <li>• Brief proximity, such as being in the same room for a brief period of time, with a person with EVD while the person was symptomatic</li> <li>• In countries without widespread Ebola virus, direct contact while using appropriate PPE with a person with EVD while the person was symptomatic</li> <li>• Traveled on an aircraft with a person with EVD while the person was symptomatic</li> </ul>	<p>Monitoring Type</p> <p>Direct active monitoring for</p> <ul style="list-style-type: none"> <li>• US-based healthcare workers caring for symptomatic EVD patients while wearing appropriate PPE</li> <li>• Travelers on an aircraft with, and sitting within 3 feet of, a person with EVD</li> <li>• Active for all others</li> </ul> <p>Restrictions on Work, School, and other Public Activities</p> <p>None</p> <p>Travel Restrictions</p> <p>None</p>			
	<p>No Identifiable Risk</p> <ul style="list-style-type: none"> <li>• Contact with an asymptomatic person who had contact with person with EVD</li> <li>• Contact with a person with EVD before the person developed symptoms</li> <li>• Having been more than 21 days previously in a country with widespread Ebola virus transmission</li> <li>• Having been in a country without widespread Ebola virus transmission and not having any other exposures as defined above</li> </ul>	<p>Monitoring Type</p> <p>None</p> <p>Restrictions on Work, School, and Other Public Activities</p> <p>None</p> <p>Travel Restrictions</p> <p>None</p>			
<b>AS</b>	[No screening or monitoring policy found as of 3/5/2015]				
<b>AZ</b>	Arizona will use CDC's Interim U.S. Guidance for Monitoring and Movement of Persons with Potential Ebola Virus Exposure to provide ADHS and county health departments with a methodology for assessing the risk of each person exposed or potentially exposed to EVD.	[See CDC guidance.]	Equivalent	Governor's Council on Infectious Disease Preparedness and Response – Preliminary Report 12-1-14	<a href="http://www.azdhs.gov/p/hs/oids/advicouncil/documents/gcid-pr-preliminary-report.pdf">http://www.azdhs.gov/p/hs/oids/advicouncil/documents/gcid-pr-preliminary-report.pdf</a> (last accessed 8-31-15)



<p><b>AR</b></p>	<p>High risk includes any of the following:</p> <ul style="list-style-type: none"> <li>a) Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola while the person was symptomatic</li> <li>b) Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE)</li> <li>c) Processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate PPE or standard biosafety precautions</li> <li>d) Direct contact with a dead body without appropriate PPE in a country with widespread transmission or cases in urban settings with uncertain control measures</li> <li>e) Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>a) Direct active monitoring</li> <li>b) Public health authority will ensure, through orders as necessary, the following minimum restrictions: <ul style="list-style-type: none"> <li>i) Controlled movement: exclusion from all long-distance and local public conveyances (aircraft, ship, train, bus and subway)</li> <li>ii) Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>iii) Exclusion from workplaces for the duration of the public health order, unless approved by the state or local health department (telework is permitted)</li> </ul> </li> <li>c) Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>d) Federal public health travel restrictions (Do Not Board) will be implemented to enforce controlled movement</li> <li>e) If travel is allowed, individuals are subject to controlled movement <ul style="list-style-type: none"> <li>i) Travel by noncommercial conveyances only</li> <li>ii) Coordinated with public health authorities at both origin and destination</li> </ul> </li> <li>ii) Uninterrupted direct active monitoring</li> </ul>	<p>Equivalent</p>	<p>Arkansas Plan for Monitoring, Quarantine, and Isolation of Persons with Potential Ebola Virus Exposure 1-21-15</p>	<p><a href="http://www.healthy.arkansas.gov/programs/communications/features/Documents/EbolaMonitoringPlan.pdf">http://www.healthy.arkansas.gov/programs/communications/features/Documents/EbolaMonitoringPlan.pdf</a> (last accessed 8-31-15)</p>
	<p>Some risk includes any of the following:</p> <ul style="list-style-type: none"> <li>a) In countries with widespread transmission or cases in urban settings with uncertain control measures: <ul style="list-style-type: none"> <li>i) direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic or with the person's body fluids</li> <li>ii) any direct patient care in other healthcare settings</li> </ul> </li> <li>b) Close contact in households, healthcare facilities, or community settings with a person with Ebola while the person was symptomatic <ul style="list-style-type: none"> <li>i) Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet (1 meter) of a person with Ebola while the person was symptomatic</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>a) Direct active monitoring</li> <li>b) The public health authority, based on a specific assessment of the individual's situation, will determine whether additional restrictions are appropriate, including: <ul style="list-style-type: none"> <li>i) Controlled movement: exclusion from long-distance commercial conveyances (aircraft, ship, train, bus) or local public conveyances (e.g., bus, subway)</li> <li>ii) Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>ii) Exclusion from workplaces for the duration of a public health order, unless approved by the state or local health department (telework is permitted)</li> </ul> </li> <li>c) If the above restrictions are applied, non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>d) Other activities should be assessed as needs and circumstances change to determine whether these activities may be undertaken</li> <li>e) Any travel will be coordinated with public health authorities to ensure uninterrupted direct active monitoring</li> </ul>			

		<p>a) Federal public health travel restrictions (Do Not Board) may be implemented based on an assessment of the particular circumstance</p> <p>i) For travelers arriving in the United States, implementation of federal public health travel restrictions would occur after the traveler reaches the final destination of the itinerary</p>			
	<p>Low (but not zero) risk includes any of the following:</p> <p>a) Having been in a country with widespread transmission or cases in urban settings with uncertain control measures within the past 21 days and having had no known exposures</p> <p>b) Having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE, with a person with Ebola while the person was in the early stage of disease</p> <p>c) Brief proximity, such as being in the same room (not an Ebola patient care area) for a brief period of time, with a person with Ebola while the person was symptomatic</p> <p>d) In countries without widespread transmission or cases in urban settings with uncertain control measures: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic or with the person's body fluids</p> <p>e) Traveled on an aircraft with a person with Ebola while the person was symptomatic</p>	<p>a) No restrictions on travel, work, public conveyances, or congregate gatherings</p> <p>b) Direct active monitoring for:</p> <p>i) U.S.-based healthcare workers caring for symptomatic Ebola patients while wearing appropriate PPE</p> <p>ii) Travelers on an aircraft with, and sitting within 3 feet of, a person with Ebola</p> <p>c) Active monitoring for all others in this category</p>			
	<p>No identifiable risk includes:</p> <p>a) Contact with an asymptomatic person who had contact with person with Ebola</p> <p>b) Contact with a person with Ebola before the person developed symptoms</p> <p>c) Having been more than 21 days previously in a country with widespread transmission or cases in urban settings with uncertain control measures</p> <p>d) Having been in a country with Ebola cases, but without widespread transmission or cases in urban settings with uncertain</p>	<p>a) No actions needed</p>			

	control measures, and not having any other exposures as defined above e) Having remained on or in the immediate vicinity of an aircraft or ship during the entire time that the conveyance was present in a country with widespread transmission or cases in urban settings with uncertain control measures, and having had no direct contact with anyone from the community					
CA	1) Pursuant to sections 120145 and 131020 of the California Health and Safety Code, the State Public Health Officer of the State of California HEREBY ORDERS that any person within the State of California who has: a) Traveled to California from an Ebola virus affected area <u>AND</u> b) Had contact with any individual with a confirmed case of Ebola virus disease hereinafter referred to as the "Ebola contact,"... [see next column]	...shall be quarantined for a period of 21 days, beginning with the date upon which the Ebola contact departed the Ebola virus affected area, or until this order is rescinded or superseded by a separate order by the State Public Health Officer, whichever occurs first. ...The specific requirements of an individual quarantine order shall be determined and communicated by the local health officer where the Ebola contact is located, and shall be based on an individual assessment that conforms with the "Guidance for the Evaluation and Management of Contacts to Ebola Virus Disease" issued by the State Department of Public Health [see below]. For the purposes of this order, "quarantine" may include observation and monitoring of the Ebola contact and/or limitations on his or her freedom of movement.	Equivalent	California Department of Public Health Order 10-29-14	<a href="http://www.cdph.ca.gov/Documents/Order%20Ebola10292014.pdf">http://www.cdph.ca.gov/Documents/Order %20Ebola10292014.pdf</a> (last accessed 8-31-15)	
	The recommendations in this document are intended for any individual with potential exposure to an Ebola patient and are based on the Centers for Disease Control and Prevention (CDC) "Interim U.S. Guidance for Monitoring and Movement of Persons with Potential Ebola Virus Exposure" that can be found at <a href="http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html">http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html</a> . ...A description of exposure categories and their corresponding public health actions appears in Table 1 [see below].				Guidance for the Evaluation and Management of U.S. Ebola Case Contacts Revised 1-8-15	<a href="http://cdph.ca.gov/programs/cder/Documents/CDC%20Guidance%20for%20the%20Evaluation%20and%20Management%20of%20US%20Ebola%20Contacts%20MASTER%20(1-8-2015).pdf">http://cdph.ca.gov/programs/cder/Documents/CDC%20Guidance%20for%20the%20Evaluation%20and%20Management %20of%20US%20Ebola%20Contacts %20MASTER %20(1-8-2015).pdf</a> (last accessed 8-31-15)
	High risk includes any of the following: • Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola while the person was symptomatic	• Direct active monitoring • Public health authority will ensure, through orders as necessary, the following minimum restrictions: o Controlled movement: exclusion from all long-distance and local public conveyances (aircraft, ship, train, bus, and subway)				

	<ul style="list-style-type: none"> <li>• Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE)</li> <li>• Processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate PPE or standard biosafety precautions</li> <li>• Direct contact with a dead body without appropriate PPE in a country with widespread Ebola virus transmission (see the CDC Website for current listing of Ebola-affected countries)</li> <li>• Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>o Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>o Exclusion from workplaces for the duration of the public health order, unless approved by the state or local health department (telework is permitted)</li> <li>• Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>• Federal public health travel restrictions (Do Not Board) will be implemented to enforce controlled movement</li> <li>• If travel is allowed, individuals are subject to controlled movement</li> <li>o Travel by noncommercial conveyances only</li> <li>o Coordinated with public health authorities at both origin and destination</li> <li>o Uninterrupted direct active monitoring</li> </ul>			
	<p>Some risk includes any of the following:</p> <ul style="list-style-type: none"> <li>• In countries with widespread Ebola virus transmission (see CDC website for listing of current Ebola-affected countries.): <ul style="list-style-type: none"> <li>o direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic or with the person's body fluids</li> <li>o any direct patient care in other healthcare settings</li> </ul> </li> <li>• Close contact in households, healthcare facilities, or community settings with a person with Ebola while the person was symptomatic <ul style="list-style-type: none"> <li>o Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet (1 meter) of a person with Ebola while the person was symptomatic</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring</li> <li>• The public health authority, based on a specific assessment of the individual's situation, will determine whether additional restrictions are appropriate, including: <ul style="list-style-type: none"> <li>o Controlled movement: exclusion from long-distance commercial conveyances (aircraft, ship, train, bus) or local public conveyances (e.g., bus, subway)</li> <li>o Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>o Exclusion from workplaces for the duration of a public health order, unless approved by the state or local health department (telework is permitted)</li> </ul> </li> <li>• If the above restrictions are applied, non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>• Other activities should be assessed as needs and circumstances change to determine whether these activities may be undertaken</li> <li>• Any travel will be coordinated with public health authorities to ensure uninterrupted direct active monitoring</li> <li>• Federal public health travel restrictions (Do Not Board) may be implemented based on an assessment of the particular circumstance <ul style="list-style-type: none"> <li>o For travelers arriving in the United States, implementation of federal public health travel restrictions would occur</li> </ul> </li> </ul>			

<p>Low (but not zero) risk includes any of the following:</p> <ul style="list-style-type: none"> <li>• Having been in a country with widespread Ebola virus transmission (see CDC website for current listing of Ebola-affected countries) within the past 21 days and having had no known exposures</li> <li>• Having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE, with a person with Ebola while the person was in the early stage of disease</li> <li>• Brief proximity, such as being in the same room for a brief period of time, with a person with Ebola while the person was symptomatic</li> <li>• In countries without widespread Ebola virus transmission (see CDC website for current listing of countries without widespread Ebola transmission), direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic*</li> <li>• Traveled on an aircraft with a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• No restrictions on travel, work, public conveyances, or congregate gatherings</li> <li>• Direct active monitoring for: <ul style="list-style-type: none"> <li>o U.S.-based healthcare workers caring for symptomatic Ebola patients while wearing appropriate PPE</li> <li>o Travelers on an aircraft with, and sitting within 3 feet of, a person with Ebola</li> </ul> </li> <li>• Active monitoring for all others in this category</li> </ul>			
<p>No identifiable risk includes:</p> <ul style="list-style-type: none"> <li>• Contact with an asymptomatic person who had contact with person with Ebola</li> <li>• Contact with a person with Ebola before the person developed symptoms</li> <li>• Having been more than 21 days previously in a country with widespread Ebola virus transmission (see CDC website for current listing of Ebola-affected countries)</li> <li>• Having been in a country without widespread Ebola virus transmission (see the CDC website for current listing of countries without widespread transmission of Ebola) and not having any other exposures as defined above</li> <li>• Aircraft or ship crew members who remain on or in the immediate vicinity of the</li> </ul>	<ul style="list-style-type: none"> <li>• No actions needed</li> </ul>			

	conveyance and have no direct contact with anyone from the community during the entire time that the conveyance is present in a country with Ebola transmission				
<b>CO</b>	Ebola: State and local health officials following CDC guidance	[See CDC guidance.]	Equivalent	Ebola: State and local health officials following CDC guidance 10-6-14	<a href="https://www.colorado.gov/pacific/cdphe/news/ebolastmt2">https://www.colorado.gov/pacific/cdphe/news/ebolastmt2</a> (last accessed 8-31-15)
<b>CT</b>	<p>Some examples of exposures in the High risk level include:</p> <ul style="list-style-type: none"> <li>• direct contact with body fluids, from a person sick with Ebola and showing symptoms, through: <ul style="list-style-type: none"> <li>o a needle stick</li> <li>o splashes to eyes, nose, or mouth</li> <li>o getting body fluids directly on skin</li> </ul> </li> <li>• 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</li> <li>• both living with and taking care of a person sick with Ebola</li> </ul>	<p>Monitoring Plan Direct active monitoring</p> <p>Persons deemed to be at ‘some’ or ‘high’ risk may receive direct active monitoring that includes directly observing the person being monitored at least once a day.</p> <p>Movement Restrictions Yes</p> <p>Travelers in the ‘some’ or ‘high’ risk categories may be required to restrict their movements, including limiting local and long-distance travel and exclusion from public places, workplace, congregate gatherings, or other public activities.</p>	Equivalent	Interim Guidance for Monitoring and Movement of Persons with Potential Ebola Virus Exposure in Connecticut	<a href="http://www.ct.gov/dph/cwp/view.asp?a=3115&amp;Q=555954&amp;PM=1">http://www.ct.gov/dph/cwp/view.asp?a=3115&amp;Q=555954&amp;PM=1</a> (last accessed 8-31-15)
	<p>Some examples of people who are in the Some risk level include:</p> <ul style="list-style-type: none"> <li>• close contact (within 3 feet) of a person sick with Ebola for a long time</li> <li>• Direct contact with a person sick with Ebola (such as in a hospital) in a country with a large Ebola outbreak even while wearing PPE correctly</li> </ul>	<p>Monitoring Plan Active monitoring or direct active monitoring</p> <p>Persons deemed to be at ‘some’ or ‘high’ risk may receive direct active monitoring that includes directly observing the person being monitored at least once a day.</p> <p>Movement Restrictions Case-by-case assessment</p> <p>Travelers in the ‘some’ or ‘high’ risk categories may be required to restrict their movements, including limiting local and long-distance travel and exclusion from public places, workplace, congregate gatherings, or other public activities.</p>			

	<p>Some examples of people who are in the Low risk level include:</p> <ul style="list-style-type: none"> <li>• 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)</li> <li>• being in the same room for a brief period of time with a person sick with Ebola</li> <li>• brief direct contact, like shaking hands, with someone sick with Ebola</li> <li>• direct contact with a person sick with Ebola in the United States while wearing PPE correctly</li> <li>• traveling on an airplane with a person sick with Ebola</li> </ul>	<p>Monitoring Plan Active monitoring</p> <p>Movement Restrictions No</p> <p>Travelers in the low risk category have no movement restrictions and may travel outside Connecticut as long active monitoring continues uninterrupted.</p>			
	<p>Assuming there are no other risk factors from previous categories, some examples of No risk of exposure are:</p> <ul style="list-style-type: none"> <li>• having contact with a healthy person who had contact with a person sick with Ebola</li> <li>• having contact with a person sick with Ebola before he or she had any symptoms</li> <li>• someone who left a country with a large Ebola outbreak more than 21 days ago and has not been sick with Ebola since leaving that country</li> <li>• having been in a country where there have been Ebola cases, but no large Ebola outbreak (for example, Spain)</li> </ul>	<p>Monitoring Plan None</p> <p>Movement Restrictions No</p>			
<b>DE</b>	<p>Low Risk Persons with no known direct contact with Ebola patients are categorized as “low risk.”</p>	<p>Effective Monday, October 27, DPH began daily monitoring of all travelers from the three affected West African countries, whether or not those people reported contact with known or suspected Ebola patients. Mali was added to the list of DPH monitored countries on November 17.</p> <p>In coordination with the Centers for Disease Control (CDC), DPH is receiving notice of all travelers from those West African countries including Mali. DPH is in daily contact with those persons to ask about their status and health, and will remain in daily contact throughout the 21-day period following their last potential Ebola exposure. These persons are provided a 24/7 contact number at which they can reach DPH epidemiologists should they develop symptoms or have any questions related to their monitoring.</p>	More Restrictive	Preserving Public Health in Delaware: Monitoring & Managing Potential Ebola Virus Exposure 12-3-14	<a href="http://dhss.delaware.gov/dhss/dms/files/ebolamonitoringfacsheet.pdf">http://dhss.delaware.gov/dhss/dms/files/ebolamonitoringfacsheet.pdf</a> (last accessed 8-31-15)

	<p>Some Risk Most persons who have had direct or close contact with symptomatic Ebola patients are considered by the CDC to be at “some risk” of contracting Ebola. This would include health care workers who have had direct patient contact with a person who is symptomatic with <b>the</b> Ebola virus who appropriately uses personal protection equipment (PPE) at all times or were within households, health care treatment areas or community settings with a person with Ebola while the person had symptoms but with no exposure to bodily fluids and no provision of direct care to an Ebola patient.</p>	<p>Persons who are at some risk of the Ebola virus, but who do not report any symptoms of Ebola, should limit their activities during the 21-day period following their last potential Ebola exposure. These persons will sign agreements outlining restrictions on their activities, such as refraining from attending meetings, using public transportation or other activities that would prevent them from maintaining arms’ length distance from others. They should not travel without approval from DPH.</p> <p>These persons would receive direct, active monitoring by the Division of Public Health, including daily face-to-face visits or online communications by health care personnel.</p>			
	<p>High Risk Persons who have been in direct contact with symptomatic Ebola patients who cannot assure appropriate use of PPE at all times are considered by <b>the</b> CDC to be at high risk of Ebola. This would include persons who have been exposed to the blood or body fluids of a person with Ebola who was symptomatic, such as through a “needle stick” or other exposure. It may also include close family members who provided direct care to a symptomatic Ebola patient.</p>	<p>Persons at high risk shall remain at home at all times during the <b>21-day</b> period following their last potential Ebola exposure. These persons will receive direct, active monitoring by the Division of Public Health, including provision of health care and any basic necessities.</p>			
<p><b>DC</b></p>	<p>The District of Columbia Department of Health (DOH) currently conducts active monitoring of all travelers returning from countries currently included in the Centers for Disease Control and Prevention (CDC) monitoring recommendations.</p> <ul style="list-style-type: none"> <li>• Persons who traveled a country included in CDC monitoring recommendations <b>more than</b> 21 days ago</li> <li>• Persons who have traveled to countries that do not have widespread EVD transmission (i.e. countries other than countries included in CDC monitoring recommendations)</li> </ul>	<p><b>Movement/Work Restrictions</b> [These] groups <b>do not</b> have any movement/work restrictions</p>	<p>More Restrictive</p>	<p>Guidelines for Employers of Travelers Returning from Countries with Widespread Ebola Transmission 6-30-15</p>	<p><a href="http://doh.dc.gov/sites/default/files/dc/sites/doh/page_content/attachments/Employers%20of%20Returned%20traveler%20protocol%206-30-15_250.pdf">http://doh.dc.gov/sites/default/files/dc/sites/doh/page_content/attachments/Employers%20of%20Returned%20traveler%20protocol%206-30-15_250.pdf</a> (last</p>



	<p>Anyone who has traveled to a country included in CDC monitoring recommendations <b>during the past 21 days</b> and was involved in the care or treatment of persons with EVD (e.g. health care provider, aid worker) should restrict their movement/work as follows: [see next column]</p>	<ul style="list-style-type: none"> <li>• Voluntarily isolate themselves at home for the 21 day monitoring period</li> <li>• Not have any patient care or patient contact</li> <li>• Avoid public transportation</li> <li>• Avoid mass gatherings, including but not limited to movies theaters, religious events, sports events, and lectures</li> <li>• Avoid unnecessary visits to supermarkets, pharmacies, and other businesses</li> <li>• Not travel long distances except with the approval of the District of Columbia DOH</li> <li>• Maintain a log of home visitors and residents</li> <li>• Maintain a log for each time they leave home, including the locations visited and persons with whom they had contact</li> <li>• Take other steps in consultation with the District of Columbia DOH</li> </ul>			accessed 8-31-15)
	<p>For all other persons who traveled to a country with widespread EVD transmission <b>during the past 21 days...</b> [see next column]</p>	<p>...the determination on movement/work restrictions will be made by the DOH based on the interview and other appropriate considerations.</p>			
FL	<p>High Risk (not defined)</p>	<p>Section 2 Will quarantine all high-risk travelers from EVD-affected countries in West Africa who are identified by the CDC as being located in Florida for a period of 21 days following the last known EVD exposure.</p>	More Restrictive	<p>State of Florida Office of the Governor Executive Order Number 14-280 (Establishes Ebola Virus Disease Response Protocol) 10-25-14</p>	<p><a href="http://www.flgov.com/wp-content/uploads/2014/10/SKMBT_C35314102515490.pdf">http://www.flgov.com/wp-content/uploads/2014/10/SKMBT_C35314102515490.pdf</a> (last accessed 8-31-15)</p>
	<p>All asymptomatic travelers with no known exposure to the EVD who are identified by the CDC as being located in Florida for a period of 21 days after leaving the EVD-affected country</p>	<p>Section 1 The Florida Department of Health will actively monitor . . . A. An in-person risk assessment within 12 hours of the traveler's arrival in Florida. B. Twice daily, in-person temperature checks of the traveler.</p>			
		<p>Section 3 I hereby direct the Florida Department of Health to make its own determinations as to quarantine and other necessary public health interventions as permitted under Florida law [see rows below].</p>			
	<p>High risk: Contact with a known or suspect EVD case in the past 21 days regardless of the use and type of personal protective equipment that was used.</p>	<p>All high risk travelers will be advised to voluntarily quarantine themselves for the duration of the monitoring period. Non-compliance with voluntary quarantine will result in institution of an involuntary quarantine by the County Health Officer.</p> <p>For all travelers follow-up consists of twice daily temperature checks and observation of any illness symptoms, with verification of health status and compliance by in-person visits by the county</p>			

		health officials. The traveler should immediately report by phone to the CHD any fever or other symptoms for a period of 21 days after departure from an EVD outbreak country.		Countries Currently Experiencing an Outbreak of Ebola Virus Disease 11-18-14	<a href="#">monitoring-travelers-full.pdf</a> (last accessed 8-31-15)
	Low risk: Travelers from Guinea, Liberia, Mali, or Sierra Leone who have not had contact with a known or suspect EVD case in the past 21 days.	<p>For all travelers follow-up consists of twice daily temperature checks and observation of any illness symptoms, with verification of health status and compliance by in-person visits by the county health officials. The traveler should immediately report by phone to the CHD any fever or other symptoms for a period of 21 days after departure from an EVD outbreak country.</p> <p>For travelers transferring to another state or country, the CHD performing active monitoring will notify the Bureau of Epidemiology prior to the anticipated travel and provide the anticipated transfer date, location, and traveler contact information. The Bureau of Epidemiology will notify the CDC and the health agency receiving the transferring traveler.</p>			
	The Florida Department of Health (DOH), Bureau of Epidemiology (BOE) is requesting that all travelers returning from a county impacted by the Ebola Virus Disease (EVD)...[see next column]	...have their temperature and symptoms monitored for 21 days after they were potentially last exposed to EVD.		Ebola Traveler Monitoring Data Entry Guidance for County Health Departments Version 1.0 4-21-15	<a href="http://www.floridahealth.gov/diseases-and-conditions/ebola/documents/ebola-traveler-monitoring-data-entry-guidance-for-chds.pdf">http://www.floridahealth.gov/diseases-and-conditions/ebola/documents/ebola-traveler-monitoring-data-entry-guidance-for-chds.pdf</a> (last accessed 8-31-15)
<b>GA</b>	Category 1: High Risk Travelers with known direct exposure to an Ebola patient	Travelers in this category will be subject to quarantine at a designated facility.	More Restrictive	Deal issues new policy for travelers from Ebola-affected countries 10-27-14	<a href="http://gov.georgia.gov/press-releases/2014-10-27/deal-issues-new-policy-travelers-ebola">http://gov.georgia.gov/press-releases/2014-10-27/deal-issues-new-policy-travelers-ebola</a>
	Category 2: Low Risk Travelers from affected area with no known exposure to an Ebola patient	Travelers in this category will sign a monitoring agreement with the Georgia Department of Public Health. This agreement requires travelers to conduct temperature and symptom self-checks twice per day and report results to Public Health once per day (electronic, email or phone contact acceptable). Travelers who fail to report during the 21-day incubation period will be contacted by Public Health and issued a mandatory quarantine order if necessary.			

	Category 3: Medical personnel actively involved in treating Ebola patients returning to the United States.	Individuals in this category will be issued a 21-day active monitoring order and will be visually monitored (video communications or home visit) by Public Health twice per day. Public Health will assess for the development of symptoms and adjust restrictions as necessary. Noncompliance will result in quarantine at a state-designated facility.		Governor's Ebola Response Team Report May 2015	<a href="#">affected-countries</a> (last accessed 8-31-15)  <a href="http://dph.georgia.gov/sites/dph.georgia.gov/files/EbolaReportFinal.pdf">http://dph.georgia.gov/sites/dph.georgia.gov/files/EbolaReportFinal.pdf</a> (last accessed 8-31-15)
<b>GU</b>	[No screening or monitoring policy found as of 3/5/2015]				
<b>HI</b>	The Hawaii State Department of Health (HDOH) is adapting CDC guidelines regarding the monitoring and movement of individuals with potential exposure to Ebola to conduct case-by-case risk assessments of all such identified travelers.	[See CDC guidance.]	Equivalent	Ebola Virus Disease (EVD) 6-8-15	<a href="http://health.hawaii.gov/docd/ebola/">http://health.hawaii.gov/docd/ebola/</a> (last accessed 8-31-15)

<p><b>ID</b></p>	<p>The main approach when evaluating and managing asymptomatic persons with potential Ebola exposure will be [see column to the right]:</p>	<p>District will educate the potentially exposed person as to the possible risk to others should they become ill with Ebola Viral Disease, what to do if they become symptomatic during the monitoring period, and what actions may be taken by Public Health officials should they become symptomatic.</p> <ul style="list-style-type: none"> <li>• The potentially exposed person will review and sign an agreement on a form provided by the Public Health District which <ul style="list-style-type: none"> <li>- Acknowledges the Public Health District’s plan to use active monitoring or active direct monitoring and/or controlled movement as outlined in the form</li> <li>- Indicates understanding of the risks of spread</li> <li>- Indicates intent to cooperate with the public health measures listed in the form</li> </ul> </li> <li>• For potentially exposed persons that do not agree to voluntarily sign the agreement for monitoring and movement, a legal order may be imposed based on exposure risk.</li> </ul> <p><b>[Note]</b> • If the potentially exposed person is a healthcare worker who will be monitored by their employer, such as a hospital or clinic, and infection prevention staff have received training and agree to provide monitoring data to public health, the Public Health District will work with the employer to jointly manage the situation, including direct reports to the employer by the potentially exposed person and daily contact between the employer and the Public Health District.</p> <ul style="list-style-type: none"> <li>• Asymptomatic persons who are not in a high risk category who remain asymptomatic during the monitoring period may be allowed to participate in their usual daily activities in the area they live, including work (unless the employer mandates otherwise), as long as they demonstrate cooperation with the monitoring plan outlined in the agreement.</li> </ul>	<p>Equivalent</p>	<p>Idaho Public Health Guidance for Monitoring and Movement of Asymptomatic Persons with Potential Ebola Virus Exposure 10-30-14</p> <p>Idaho Department of Health and Welfare Ebola Home</p> <p><a href="http://health.wfare.idaho.gov/Portals/46/Documents/IdahoEbolaGuidanceMonitoringMovementofAsymptomaticPersons%20withPotentialEbolaVirusExposure10-30-14.pdf">http://health.wfare.idaho.gov/Portals/46/Documents/IdahoEbolaGuidanceMonitoringMovementofAsymptomaticPersons%20withPotentialEbolaVirusExposure10-30-14.pdf</a> (last accessed 8-31-15)</p> <p><a href="http://health.wfare.idaho.gov/emresp/Home/tabid/1475/Default.aspx">http://health.wfare.idaho.gov/emresp/Home/tabid/1475/Default.aspx</a> (last accessed 8-</p>
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	<p>News/Updates: Tuesday, Nov. 4: Idaho plans follow CDC guidance for monitoring people with possible Ebola exposure.</p> <p>Healthcare Worker News and Information:</p> <p>Idaho Public Health Guidance for Monitoring Asymptomatic People with Potential Ebola Virus Exposure.</p> <p>Idaho public health agencies support the revised CDC guidance for monitoring people with potential Ebola exposure, which would include volunteer healthcare workers returning from West Africa.</p>	<p>[See CDC guidance.]</p>		<p>Idaho Department of Health and Welfare Healthcare Worker News and Information</p>	<p>31-15)</p> <p><a href="http://health.welfare.idaho.gov/emresp/HealthcareWorkers/tabid/2869/Default.aspx">http://health.welfare.idaho.gov/emresp/HealthcareWorkers/tabid/2869/Default.aspx</a> (last accessed 8-31-15)</p>
<p>IL</p>	<p>High risk includes any of the following:</p> <ul style="list-style-type: none"> <li>• Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola while the person was symptomatic</li> <li>• Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE)</li> <li>• Processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate PPE or standard biosafety precautions</li> <li>• Direct contact with a dead body without appropriate PPE in a country with widespread Ebola virus transmission</li> <li>• Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring</li> <li>• Public health authority will ensure, through modified quarantine orders, the following minimum restrictions: <ul style="list-style-type: none"> <li>o Exclusion from all long-distance and local public conveyances (aircraft, ship, train, bus, and subway)</li> <li>o Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>o Exclusion from workplaces for the duration of the public health order, <b>unless approved by the state or local health department</b></li> <li>o Travel outside of jurisdiction of the local health authority must be under mutual agreement with the local health authority who will assume responsibility for daily observation</li> </ul> </li> <li>• Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>• Federal public health travel restrictions (Do Not Board) will be implemented to enforce controlled movement</li> <li>• If travel is allowed (e.g. to allow travelers arriving in the United States to reach home/housing facility), individuals are subject to restrictions <ul style="list-style-type: none"> <li>o Travel by noncommercial conveyances (private plane or car) only</li> <li>o Coordinated with public health authorities at both origin and destination</li> <li>o Uninterrupted direct active monitoring during travel</li> </ul> </li> </ul>	<p>Equivalent</p>	<p>Updated Interim Guidance for Monitoring and Movement of Persons with Potential Ebola Virus Exposure 1-23-15</p>	<p><a href="http://www.idph.state.il.us/ebola/01232015_Update_Interim_IDPH_Guidance_Ebola_Monitoring.pdf">http://www.idph.state.il.us/ebola/01232015_Update_Interim_IDPH_Guidance_Ebola_Monitoring.pdf</a> (last accessed 8-31-15)</p>

<p>Some risk includes any of the following:</p> <ul style="list-style-type: none"> <li>• In countries with widespread Ebola virus transmission: <ul style="list-style-type: none"> <li>o Direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic, or with the person’s body fluids</li> <li>o Any direct patient care in other health care settings</li> </ul> </li> <li>• Close (but not high risk) contact in households, healthcare facilities, or community settings with a person with Ebola while the person was symptomatic <ul style="list-style-type: none"> <li>o Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet (1 meter) of a person with Ebola while the person was symptomatic *</li> </ul> </li> </ul> <p>*depending on activities, may include flight attendants who interacted with an individual with “some risk” on an airplane</p>	<ul style="list-style-type: none"> <li>• Direct active monitoring (health care facilities may participate in monitoring process, in collaboration with LHD)</li> <li>• Participation in patient care activities (with direct active monitoring before each shift and as otherwise required by the health care facility) when/if cleared by the health care facility in collaboration with public health authorities</li> <li>• The LHD, based on a science-based risk assessment of the individual’s specific situation, in collaboration with IDPH, will determine whether any additional restrictions are needed. These could include: <ul style="list-style-type: none"> <li>o Exclusion from long-distance commercial conveyances (aircraft, ship, train, bus) or local public conveyances (e.g., bus, subway). For travelers arriving in the United States, in most cases any such restrictions would begin after the traveler reaches the final destination of the itinerary.</li> <li>o Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings.</li> <li>o Exclusion from other workplace settings</li> </ul> </li> <li>• If the above restrictions are applied, non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>o Other activities should be assessed as needs and circumstances change to determine whether these activities may be undertaken</li> <li>o Travel will be coordinated with public health authorities to ensure uninterrupted direct active monitoring</li> <li>• Federal public health travel restrictions (Do Not Board) may be implemented based on an assessment of the particular circumstance <ul style="list-style-type: none"> <li>o For travelers arriving in the United States, implementation of federal public health travel restrictions would typically occur after the traveler reaches the final destination of the itinerary</li> </ul> </li> </ul>				
<p>Low (but not zero) risk includes any of the following:</p> <ul style="list-style-type: none"> <li>• Having been in a country with widespread Ebola virus transmission within the past 21 days and having had no known exposures</li> <li>• Having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE, with a person with Ebola while the person was in the early stage of disease</li> <li>• Brief proximity, such as being in the same room (not an Ebola treatment area) for a brief period of time, with a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• No restrictions on travel, work, public conveyances, or congregate gatherings</li> <li>• Direct active monitoring for: <ul style="list-style-type: none"> <li>o Healthcare workers caring for symptomatic Ebola patients in the U.S. while wearing appropriate PPE (it is expected that health care facilities will participate in this process, in collaboration with LHD)</li> <li>o Travelers on an aircraft with, and sitting within 3 feet of, a person with Ebola</li> </ul> </li> <li>• Active monitoring for all others in this category</li> </ul>				

	<ul style="list-style-type: none"> <li>• In countries without widespread Ebola virus transmission: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic</li> <li>• Traveled on an aircraft with a person with Ebola while the person was symptomatic</li> </ul>				
	<p><b>No identifiable risk includes:</b></p> <ul style="list-style-type: none"> <li>• Contact with an asymptomatic person who had contact with person with Ebola</li> <li>• Contact with a person with Ebola before the person developed symptoms</li> <li>• Having been more than 21 days previously in a country with widespread Ebola virus transmission</li> <li>• Having been in a country without widespread Ebola virus transmission and not having any other exposures as defined above</li> <li>• Aircraft or ship crew members who remain on or in the immediate vicinity of the conveyance and have no direct contact with anyone from the community during the entire time that the conveyance is present in a country with widespread Ebola virus transmission</li> </ul>	No actions needed			
IN	...travelers... [and] returning healthcare workers from West Africa...	<p><i>Q. Is the health department monitoring travelers from Africa?</i></p> <p>A. The ISDH and local health departments are providing direct, active monitoring for all travelers who have been in Liberia, Guinea, Sierra Leone, and Mali during the past 21 days. The CDC Division of Global Migration and Quarantine provides local contact information for these travelers, and local health departments actively monitor them twice daily for fever and symptoms of EVD until they complete the 21 day risk period.</p> <p><i>Q. Does Indiana require quarantine for returning healthcare workers from West Africa? Will Indiana quarantine me if I take care of a patient with EVD in the U.S.?</i></p> <p>A. Indiana is following the CDC guidance for returning visitors from affected countries (<a href="http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html">http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html</a>) with the exception that all individuals returning to Indiana or healthcare workers caring for a patient with EVD in the US will be provided direct, active</p>	More Restrictive	Ebola Virus Disease (EVD) FAQ for Clinicians 3-3-15	<a href="http://www.in.gov/isdh/files/EVD_FAQ_for_Clinicians_3_3_15.pdf">http://www.in.gov/isdh/files/EVD_FAQ_for_Clinicians_3_3_15.pdf</a> (last accessed 8-31-15)

		monitoring for fever and other signs and symptoms of EVD by the local health department twice daily during the 21-day risk period. The CDC guidance stratifies travelers and healthcare workers based on their risk of contact with symptomatic people infected with Ebola virus. The guidance also provides isolation and quarantine recommendations but leaves some discretion to state health departments for individuals who are not high-risk but who are also not low-risk regarding further quarantine or travel restrictions.			
	<b>No to fever or symptoms</b>	LHD conducts subsequent monitoring in person, via FaceTime, Skype, or a combination of all. This includes visually observing temperature and symptoms twice daily for 21 days after arrival into the United States. Record data on temperature log.		Flow Chart for Monitoring Travelers Arriving from Guinea, Liberia, and Sierra Leone 3-6-15	<a href="http://www.in.gov/isdh/files/ISDH_Passenger_Algorithm_3_6_15.pdf">http://www.in.gov/isdh/files/ISDH_Passenger_Algorithm_3_6_15.pdf</a> (last accessed 8-31-15)
<b>IA</b>	<b>Low risk</b>	Self-monitoring Order: Low risk travelers are allowed normal activities and twice daily self-monitoring and reporting of temperature and any other Ebola consistent symptoms. No signs of illness are present.	More Restrictive	Iowa Department of Health Ebola Updates 8-4-15	<a href="http://www.idph.state.ia.us/IDPHChannelsService/file.ashx?file=9534F598-8DF6-4EDA-9253-02D09EAC424A">http://www.idph.state.ia.us/IDPHChannelsService/file.ashx?file=9534F598-8DF6-4EDA-9253-02D09EAC424A</a> (last accessed 8-31-15)
	<b>Some or high risk</b>	Quarantine Order: Some or high risk travelers are restricted to a specified location (i.e. home) and reporting of temperature (twice daily with at least once in presence of public health official) or any other Ebola consistent symptoms. No signs of illness are present.			
<b>KS</b>	<b>High Risk</b> <ul style="list-style-type: none"> <li>• Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola while the person was symptomatic</li> <li>• Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE) (KDHE tier 1 level of PPE as described in Appendix 4)</li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring and restricted movement until 21 days after last known potential exposure</li> </ul> <p>For direct active monitoring, a public health worker from the local health department or KDHE will directly observe the individual at least once daily to review symptoms and monitor temperature measurement. It is recommended that an initial visit by a public health worker be conducted in person early in the direct active monitoring process to help build rapport. This initial visit should be preceded by a telephone call to ensure the individual is well and is not experiencing any symptoms of EVD. Subsequent visits throughout the 21-day period may be conducted via videoconference at the discretion of the local health department or</p>	More Restrictive	KDHE Ebola Preparedness and Response Plan Version 7.0 Management of Persons Potentially Exposed to Ebola Virus and	<a href="http://www.kdheks.gov/ebola/preparedness/plan/Management_of_Persons_Potentially_Exposed_to_Ebola_Virus_and_Suspected_EVD_Cases.pdf">http://www.kdheks.gov/ebola/preparedness/plan/Management_of_Persons_Potentially_Exposed_to_Ebola_Virus_and_Suspected_EVD_Cases.pdf</a>



<ul style="list-style-type: none"> <li>• Processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE) (KDHE Tier 1 level of PPE as described in Appendix 4) and standard biosafety precautions</li> <li>• Direct contact with a dead body, water used to wash dead bodies, or cloth used to cover dead body without appropriate personal protective equipment (PPE) (KDHE tier 1 level of PPE as described in Appendix 4) in a country with widespread transmission or cases in a country with widespread transmission or cases in urban settings with uncertain control measures (<a href="http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html">http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html</a>)</li> <li>• Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic</li> </ul>	<p>KDHE. The information from the monitoring process shall be recorded on a log sheet (Appendix 3). The public health monitoring process will help to ensure compliance with self-monitoring, assess and identify symptoms early, reduce risks of transmission if the individual develops EVD, and to discuss any potential concerns.</p> <p>Restricted movement – Persons must remain at their residence or other living location as determined by KDHE or the local health officer for a period of 21 days following their last potential exposure; any movement outside the residence or other living location must be approved in advance by KDHE or the local health officer on a case-by-case basis. During this 21-day period of restricted movement, there shall be no visitors to the residence or living location except those approved by KDHE or the local health officer in advance.</p>		<p>Suspected EVD Cases</p> <p>Appendix 2 Interim Guidance for Evaluation and Management of Persons with Potential Ebola Virus Disease Exposure 2-27-15</p>	<p>(last accessed 8-31-15)</p> <p><a href="http://www.kdheks.gov/ebola/preparedness/Appendix_2_Evaluation_and_Management_of_Persons_with_Potential_Ebola_Virus_Disease_Exposure">http://www.kdheks.gov/ebola/preparedness/Appendix_2_Evaluation_and_Management_of_Persons_with_Potential_Ebola_Virus_Disease_Exposure</a> (last accessed 8-31-15)</p>
<p><b>Some Risk of Exposure</b></p> <ul style="list-style-type: none"> <li>• In countries with widespread transmission or cases in urban settings with uncertain control measures (<a href="http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html">http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html</a>): <ul style="list-style-type: none"> <li>o direct contact while using appropriate personal protective equipment (PPE) (KDHE Tier 1 level of PPE as described in Appendix 4) with a person with Ebola while the person was symptomatic or with the person's body fluids <ul style="list-style-type: none"> <li>o any direct patient care in other health care settings</li> </ul> </li> <li>• Close contact in households, health care facilities, or community settings with a person with Ebola while the person was symptomatic</li> <li>• Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet (1 meter) of a person with Ebola while the person was symptomatic</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring</li> <li>• Restricted movement until 21 days after last known potential exposure</li> <li>• Special considerations for health care workers <ul style="list-style-type: none"> <li>o Health care workers who utilize the Tier 1 level of personal protective equipment (PPE) as detailed in Appendix 4 will be exempt from the 21-day restricted movement period</li> <li>o Health care workers potentially exposed to Ebola virus who utilize a lower than Tier 1 level of PPE during patient care will be subjected to restricted movement, dependent on a risk assessment, except such workers may continue to work as part of a dedicated Ebola virus disease patient care team, and may not provide care or services to any other patient, until 21 days after the last known potential exposure.</li> </ul> </li> </ul>			

<p><b>Low (but now zero) risk</b></p> <ul style="list-style-type: none"> <li>• Having been in a country with widespread transmission or cases in urban settings with uncertain control measures (<a href="http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html">http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html</a>) within the past 21 days and having had no known exposures</li> <li>• Having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE (as determined on a case by case basis), with a person with Ebola while the person was in the early stage of disease</li> <li>• Brief proximity, such as being in the same room for a brief period of time, with a person with Ebola while the person was symptomatic</li> <li>• In countries without widespread transmission: direct contact while using appropriate personal protective equipment (PPE) (KDHE Tier 1 level of PPE as described in Appendix 4) with a person with Ebola while the person was symptomatic or with the person's body fluids</li> <li>• Traveled on an aircraft with a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring for: <ul style="list-style-type: none"> <li>o U.S.-based health care workers caring for symptomatic Ebola patients while wearing appropriate PPE (KDHE Tier 1 level of PPE as described in Appendix 4)</li> <li>o Travelers on an aircraft with, and sitting within 3 feet of, a person with Ebola</li> </ul> </li> <li>• Active monitoring until 21 days after leaving country for all others in this category</li> <li>• No movement restrictions except the requirement to notify the local health officer or KDHE before any overnight travel outside the state of Kansas for 21 days after last potential exposure.</li> </ul> <p>Active monitoring will entail self-monitoring for fever and other potential symptoms of Ebola virus infection twice per day until 21 days since last potential exposure, with the requirement of daily public health follow-up via telephone or other means of regular communication.</p>			
<p><b>No identifiable risk</b></p> <ul style="list-style-type: none"> <li>• Contact with an asymptomatic person who had contact with person with Ebola</li> <li>• Contact with a person with Ebola before the person developed symptoms</li> <li>• Having been more than 21 days previously in a country with widespread transmission or cases in urban settings with uncertain control measures (<a href="http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html">http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html</a>)</li> <li>• Having been in a country with Ebola cases, but without widespread transmission or cases in urban settings with uncertain control measures, and not having any other exposures as defined above</li> <li>• Having remained on or in the immediate vicinity of an aircraft or ship during the</li> </ul>	<ul style="list-style-type: none"> <li>• No actions needed</li> </ul>			

	entire time that the conveyance was present in a country with widespread transmission or cases in urban settings with uncertain control measures ( <a href="http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html">http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.html</a> ), and having had no direct contact with anyone from the community				
<b>KY</b>	<p>HIGH RISK: direct contact with infected body fluids through:</p> <ul style="list-style-type: none"> <li>● needle stick, splashes to eyes, nose, or mouth or directly on skin</li> <li>● handling body fluids such as in a laboratory, without wearing PPE or following recommended safety precautions</li> <li>● touching a dead body without correctly wearing PPE in a country with widespread Ebola transmission</li> <li>● living with and caring for a person showing symptoms of Ebola</li> </ul>	<p>Monitor  <b>YES, Direct Active Monitoring:</b>  Local or state health department officials will actively monitor the individual by checking his or her temperature and any possible symptoms in person or via other approved means.</p> <p>Quarantine  <b>YES,</b> the individual will be encouraged to sign an agreement to remain at home or another approved location. Household members can decide whether they will also remain in the home with the individual as long as he or she is not experiencing symptoms of Ebola. Visitors will not be allowed without state or local health department approval. However, state and local health department officials will work with community partners to help meet essential needs of the individual. If the individual refuses to agree to the quarantine, official may seek a court order for quarantine.</p> <p>Restrict Travel  <b>YES,</b> The individual will be restricted to the home or another approved location and will not travel without prior approval of state or local health department officials.</p>	More Restrictive	At-A-Glance Guidance for Ebola Outbreak 11-10-14	<a href="http://healthalerts.ky.gov/Documents/At%20A%20Glance%20Ebola%20Guidance%20Final%2011%2010%2014.pdf">http://healthalerts.ky.gov/Documents/At%20A%20Glance%20Ebola%20Guidance%20Final%2011%2010%2014.pdf</a> (last accessed 8-31-15)

	<p><b>SOME RISK:</b></p> <ul style="list-style-type: none"> <li>● close contact with a person showing symptoms of Ebola such as in a household, healthcare facility or the community without wearing PPE</li> <li>● providing healthcare to a patient with Ebola in countries with widespread Ebola transmission even if PPE was worn</li> </ul>	<p><b>Monitoring</b>  <b>YES, Direct Active Monitoring:</b>  The individual will be required to monitor his or her temperature twice daily and report those readings twice a day to local health officials on a schedule agreed upon by the individual and the health official.</p> <p><b>Quarantine</b>  <b>CASE BY CASE:</b>  The need for a quarantine agreement or order will be determined on a case by case basis after extensive screening by a local or state health official based upon scientific/medical risk factor analysis specific to the individual's exposure history.</p> <p><b>Restrict Travel</b>  <b>YES,</b> the individual will be asked to forego travel by public means (taxis, buses, airplanes, etc.) without prior approval of state or local health officials. The individual will also be asked to forego travel outside of the county or state without prior approval of the local or state health department.</p>			
	<p><b>LOW RISK:</b></p> <ul style="list-style-type: none"> <li>● having been in a country with widespread Ebola transmission within the previous 21 days and having no known exposures</li> <li>● providing healthcare to a patient with Ebola in the United States while wearing appropriate PPE and there was no evidence of a breach in infection control practices</li> </ul>	<p><b>Monitoring</b>  <b>YES, Active Monitoring:</b>  The individual will be required to monitor his or her temperature twice daily and report those readings twice a day to local health officials on a schedule agreed upon by the individual and the health official.</p> <p><b>Quarantine</b>  <b>NO, IF COMPLIANT WITH MONITORING</b>  As long as the individual is compliant with conditions of temperature monitoring and reporting, no quarantine will be required.</p> <p><b>Restrict Travel</b>  <b>CASE BY CASE:</b>  The need for a controlled movement agreement or order will be decided on a case by case basis after extensive follow up screening by a local or state health official based upon scientific/medical risk factor analysis specific to the individual's exposure history.</p>			

<p><b>LA</b></p>	<p>7.4.6-Louisiana approach mandated by the DHH Administration The approach used in Louisiana is to use regardless of the risk category... [see next column]</p>	<ul style="list-style-type: none"> <li>• Active direct monitoring and</li> <li>• Voluntary quarantine</li> </ul>	<p>More Restrictive</p>	<p>Ebola Hemorrhagic Fever Ebola Virus Disease (EVD) 12-1-14</p>	<p><a href="http://new.dhh.louisiana.gov/assets/oph/Center-PHCH/Centers-CH/infectious-epi/EpiManual/EbolaManual.pdf">http://new.dhh.louisiana.gov/assets/oph/Center-PHCH/Centers-CH/infectious-epi/EpiManual/EbolaManual.pdf</a> (last accessed 8-31-15)</p>
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	<p>[Note: the following monitoring policy only applies to individuals returning from travel in an Ebola-affected country who are affiliated with]</p> <p>Higher education institutions</p> <ul style="list-style-type: none"> <li>• Students</li> <li>• Faculty</li> <li>• Staff</li> <li>• State departments, offices, budget units</li> <li>• Employees</li> </ul> <p>See full list of applicable agencies attached.</p>	<p>After travel</p> <ul style="list-style-type: none"> <li>• With 24 hours after an individual returns from travel in an Ebola-affected country, DHH EPI must be notified.</li> <li>• For example, if a student returns from travel in Sierra Leone on Dec. 10 at 10 am, DHH EPI must be notified no later than 10 am Dec. 11.</li> </ul> <p>Restrictions on travel in Louisiana following a trip to an Ebola-affected area</p> <ul style="list-style-type: none"> <li>• For 21 days following travel, individuals may not use any form of commercial transportation, including the following: <ul style="list-style-type: none"> <li>- Airplane</li> <li>- Ship</li> <li>- Bus</li> <li>- Train</li> <li>- Taxi</li> <li>- Other public conveyance</li> </ul> </li> </ul> <p>Restrictions on use of public places following travel to an Ebola-affected area</p> <ul style="list-style-type: none"> <li>• For 21 days following travel, individuals may not go to places where the public congregate, including but not limited to the following: <ul style="list-style-type: none"> <li>- Restaurants</li> <li>- Grocery stores</li> <li>- Gymnasiums</li> <li>- Theaters</li> <li>- Schools</li> <li>- Places of worship</li> </ul> </li> </ul> <p>Public health monitoring</p> <ul style="list-style-type: none"> <li>• For 21 days following travel, individuals are required to allow public health medical monitoring in order to quickly identify any potential symptoms of Ebola. <ul style="list-style-type: none"> <li>- Medical monitoring shall include, but is not limited to, the following: <ul style="list-style-type: none"> <li>o Daily monitoring of body temperature and other vital signs, and</li> <li>o Daily monitoring of symptoms that could be related to contracting Ebola.</li> </ul> </li> </ul> </li> <li>• Individuals must also maintain communication with DHH EPI staff.</li> </ul>		<p>Public Health Guidance for Travel to and from Ebola-Affected Countries 10-30-14</p>	<p><a href="http://new.dhh.louisiana.gov/assets/oph/ebola/TravelGuidanceForm-Letter.pdf">http://new.dhh.louisiana.gov/assets/oph/ebola/TravelGuidanceForm-Letter.pdf</a> (last accessed 8-31-15)</p>
<b>ME</b>	<p>A traveler who did not come into direct contact with Ebola positive individuals and who is not currently exhibiting symptoms of the disease</p>	<p>Pursuant to the federal CDC guidelines, an individual will be required to make contact daily with the Maine CDC to report his or her temperature, which is taken twice daily. In addition, the traveler will be required to notify the Maine CDC immediately of any other Ebola symptoms, such as headache, joint and muscle aches,</p>	<p>More Restrictive</p>	<p>Ebola Protocol for Travelers from Liberia, Sierra Leone</p>	<p><a href="http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/">http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/</a></p>

		weakness, diarrhea, vomiting, stomach pain, lack of appetite or abnormal bleeding, as well as any additional travel plans.		and Guinea 10-27-14	<a href="http://www.zoonotic/ebola/documents/Maine-Ebola-Protocols-October-27.pdf">zoonotic/ebola/documents/Maine-Ebola-Protocols-October-27.pdf</a> (last accessed 8-31-15)
	A traveler who did come into direct contact with or treat Ebola-positive individuals and who is not currently exhibiting symptoms of the disease	In addition to the federal CDC guidelines outlined above, Maine will require active monitoring to be followed in this instance. In addition Maine will take further measures, out of an abundance of caution, to ensure public safety.  We will work collaboratively with the affected individual to establish quarantine of the individual in his or her home for 21 days after the last possible exposure to Ebola. Twenty-one days is the longest time it can take from the time a person is infected with Ebola until that person has symptoms of Ebola. Maine Center for Disease Control and Prevention October 27, 2014. Under this policy, Maine will make every possible effort to implement an agreed-upon in-home quarantine. We fully expect individuals to voluntarily comply with an in-home quarantine. The Maine CDC will coordinate care services such as food and assistance with partners as needed.			
<b>MD</b>	High Risk Those with known exposure to Ebola-containing bodily fluids without protection	Home restriction for individuals at "high risk." Individuals with a known exposure to Ebola virus, such as through a splash of body fluid on exposed skin or a needle-stick injury will remain at home for the 21-day period and will be closely monitored. <ul style="list-style-type: none"> <li>• Stay at home</li> <li>• Temperature is taken four times a day</li> <li>• Report all symptoms</li> <li>• Daily contact with health officials, including in-person assessment</li> <li>• Signed agreement</li> <li>• Option for public health order</li> </ul>	More Restrictive	Protecting Maryland through Active Surveillance of Returning Health Care Workers and Other Travelers from Liberia, Sierra Leone, and Guinea	<a href="http://dohmhs.maryland.gov/newsroom1/Documents/Traveler%20Monitoring%20backgrounder%2010.27.14%20FINAL.pdf">http://dohmhs.maryland.gov/newsroom1/Documents/Traveler%20Monitoring%20backgrounder%2010.27.14%20FINAL.pdf</a> (last accessed 8-31-15)
	Some Risk Those with known exposure to Ebola-containing bodily fluids with protection	Activity restriction for individuals at "some risk." Healthcare workers who were wearing personal protective equipment during care for patients with Ebola virus are at "some risk." They will refrain from attending mass gatherings and using public transportation, will refrain from traveling long distances without approval from health department officials, and will also be closely monitored by state and local health officials. <ul style="list-style-type: none"> <li>• Activity restrictions: no public transportation, no large gatherings</li> <li>• Consult public health on all travel</li> <li>• Temperature is taken four times a day</li> <li>• Daily contact with health officials, including in-person assessment</li> <li>• Sign agreement on restrictions</li> <li>• Option for public health order</li> </ul>		Active Monitoring of Travelers and Health Care Workers Whose Travel	<a href="http://dohmhs.maryland.gov/newsroom1/Documents/Active%20Traveler%20Monitoring%20">http://dohmhs.maryland.gov/newsroom1/Documents/Active%20Traveler%20Monitoring%20</a>

	<p>Low Risk (but not zero) Other travelers from affected countries</p>	<ul style="list-style-type: none"> <li>• Twice daily, temperature is taken</li> <li>• Daily contact with public health officials</li> <li>• Option for public health order</li> </ul>		<p>Originates in Liberia, Sierra Leone or Guinea 10-27-14</p>	<p><a href="#">slides%20FINAL%20102714.pdf</a> (last accessed 8-31-15)</p>
<b>MA</b>	<p>High Risk [based on CDC screening]</p>	<p>Travelers in the... “some risk” or “high risk” categories will undergo direct active monitoring.</p> <p>Movement ...For travelers in the higher risk categories, movement restrictions will be decided on a case-by- case basis, but will be prohibited from direct patient care activities and instructed to limit their contact with groups of people.</p>	Equivalent	<p>Post-arrival Monitoring of Travelers Returning to Massachusetts from Countries with Ebola Virus Transmission 12-5-14</p>	<p><a href="http://www.mass.gov/eohhs/docs/dph/emergency-prep/ebola-plan-cdc-guidance-monitoring.pdf">http://www.mass.gov/eohhs/docs/dph/emergency-prep/ebola-plan-cdc-guidance-monitoring.pdf</a> (last accessed 8-31-15)</p>
	<p>Some Risk [based on CDC screening]</p>	<p>Travelers in the... “some risk” or “high risk” categories will undergo direct active monitoring. ... Direct active monitoring includes twice-daily temperature checks and a general health assessment conducted through a visual check of the traveler.</p> <p>Movement ...For travelers in the higher risk categories, movement restrictions will be decided on a case-by- case basis, but will be prohibited from direct patient care activities and instructed to limit their contact with groups of people.</p>			



	Low Risk [based on CDC screening]	<p>Travelers in the “low risk” category will undergo active monitoring. ...Active monitoring involves daily communication between the traveler and a public health department regarding twice-daily temperature readings and a general health assessment, which does not require in-person contact with the traveler.</p> <p><b>Movement</b> There are no movement restrictions for “low risk” travelers. These travelers are asked to check in once per day with twice-daily temperature checks and to communicate any travel plans outside the state or country during their monitoring period.</p>			
MI	<p>High Risk</p> <ul style="list-style-type: none"> <li>• Direct contact</li> <li>• Needle stick or splash to mucous membranes</li> <li>• Body fluids directly on skin</li> <li>• Handling body fluids without PPE or recommended lab precautions</li> <li>• Touching a dead body without PPE</li> <li>• Cared for a patient in a US hospital at which another healthcare worker contracted Ebola with unknown transmission</li> </ul>	<p><b>Monitoring Type</b> Self-Quarantine<sup>4</sup></p> <ul style="list-style-type: none"> <li>• Controlled movement</li> <li>• Exclusion from public places</li> <li>• Exclusion from work places</li> </ul> <p>Direct Active Monitoring</p> <p><sup>4</sup>Quarantine and monitoring for 21 days. 90% of the time symptoms occur within 2 weeks. Mandatory quarantine should only be considered in extreme circumstances for lack of adherence to self-quarantine or flight risk.</p> <p><b>Client</b></p> <ul style="list-style-type: none"> <li>• No travel unless approved by LHD</li> <li>• Stay home</li> <li>• Must communicate with LHD twice daily: temperature and health status</li> </ul> <p><b>Local Health Department (LHD) Actions</b></p> <ul style="list-style-type: none"> <li>• Maintain visual and oral communications with individual twice daily (one per day may be by phone, email or text) 3 One of the two contacts must be in person or through electronic visualization (e.g., Skype or FaceTime) to directly observe the individual.</li> <li>• Ensure additional restrictions: controlled movement, exclusion from public places, and exclusion from gatherings</li> <li>• Coordinate allowed travel according to controlled movement standards</li> <li>• Facilitate uninterrupted direct active monitoring</li> </ul> <p><b>Work</b> No work outside of home (telework permitted)</p>	Equivalent	Traveler Evaluation and Monitoring (TEAM) Protocol – 12-22-14	<a href="http://www.michigan.gov/document/s/emergingdiseases/TEAM_Protocol_V1-102414_472464_7.pdf">http://www.michigan.gov/document/s/emergingdiseases/TEAM_Protocol_V1-102414_472464_7.pdf</a> (last accessed 8-31-15)

	<p>Some Risk</p> <ul style="list-style-type: none"> <li>• Close contact (within 3 feet) of a person with or showing symptoms of Ebola without PPE for a long time</li> <li>• In countries with widespread Ebola, direct contact with a person showing symptoms of Ebola while wearing PPE</li> </ul>	<p><b>Monitoring Type</b></p> <ul style="list-style-type: none"> <li>• Direct Active Monitoring<sup>1</sup> (If self-quarantine recommended follow high risk category)</li> </ul> <p><b>Client</b></p> <ul style="list-style-type: none"> <li>• Travel coordinated with LHD</li> <li>• No movement using mass transit, no public places or gatherings</li> <li>• Must communicate with LHD twice daily: temperature and health status</li> </ul> <p><b>Local Health Department (LHD) Actions</b></p> <ul style="list-style-type: none"> <li>• Maintain visual and oral communications with individual twice daily (one per day may be by phone, email or text) <sup>3</sup> One of the two contacts must be in person or through electronic visualization (e.g., Skype or FaceTime) to directly observe the individual.</li> <li>• Assess individual's situation and determine additional restrictions: controlled movement, exclusion from public places, and exclusion from gatherings</li> <li>• Coordinate any travel to assure uninterrupted direct active monitoring</li> </ul> <p><b>Work</b></p> <p>Work dependent on employer and LHD approval</p>			
	<p>Low Risk (but not zero)</p> <ul style="list-style-type: none"> <li>• Been in a country with widespread Ebola within the past 21 days, without exposure</li> <li>• Brief contact or being in the room with a person with Ebola</li> <li>• Traveled on an aircraft with a person while the person was symptomatic</li> <li>• Epidemiologists, contact tracers, screeners, lab workers who used appropriate PPE</li> <li>• Cared for Ebola patient in U.S. facility while wearing appropriate PPE with no known breaches</li> </ul>	<p><b>Monitoring Type</b></p> <ul style="list-style-type: none"> <li>• Active Monitoring of general population<sup>1</sup></li> <li>• Direct Active Monitoring for healthcare workers<sup>1</sup></li> </ul> <p><b>Client</b></p> <ul style="list-style-type: none"> <li>• No travel restrictions</li> <li>• Must communicate with LHD twice daily: temperature and health status</li> </ul> <p><b>Local Health Department (LHD) Actions</b></p> <ul style="list-style-type: none"> <li>• Active - LHD may receive reports once daily by phone, e-mail, electronic visualization (e.g., Skype or FaceTime), or in-person to check on health status.</li> <li>• Direct Active - Maintain visual and oral communications with individual twice daily (one per day may be by phone, email or text) One of the two contacts must be in person or through electronic visualization (e.g., Skype or FaceTime) to directly observe the individual.</li> <li>• Assess individual's situation and determine additional restrictions: controlled movement, exclusion from public places, and exclusion from gatherings</li> </ul>			

		<ul style="list-style-type: none"> <li>• Coordinate any travel to assure uninterrupted direct active monitoring</li> </ul> <p><b>Work</b> No restrictions on work</p>			
	<p>No Identified Risk</p> <ul style="list-style-type: none"> <li>• Traveled more than 21 days ago or to other unaffected countries in Africa</li> <li>• Contact with an asymptomatic person with Ebola before the person developed symptoms</li> </ul>	<p><b>Monitoring Type</b> No actions</p> <p><b>Client</b> No actions</p> <p><b>Local Health Department (LHD) Actions</b> No actions</p> <p><b>Work</b> No restrictions on work</p>			
<b>MN</b>	<p>High Risk</p> <p>Direct contact of infected body fluids through</p> <ul style="list-style-type: none"> <li>• Needle stick, or splashes to eyes, nose, or mouth</li> <li>• Getting body fluids directly on skin</li> <li>• Handling body fluids, such as in a laboratory, without wearing personal protective equipment (PPE) or following recommended safety precautions</li> <li>• Touching a dead body without correctly wearing PPE in a country with widespread Ebola transmission (In countries with widespread Ebola transmission, it is not always known what a person died of.</li> </ul>	<p>Direct active monitoring</p> <p>Restricted Public Activities Yes</p> <p>Restricted Travel Yes</p>	Equivalent	Ebola Exposure Risk Categories 12-23-14	<a href="http://www.health.state.mn.us/divs/idepc/diseases/vhf/monitoringriskcats.pdf">http://www.health.state.mn.us/divs/idepc/diseases/vhf/monitoringriskcats.pdf</a> (last accessed 8-31-15)

<p>Therefore, touching any dead body in one of these countries is considered a high-risk exposure.)</p> <ul style="list-style-type: none"> <li>• Living with and caring for a person showing symptoms of Ebola</li> </ul>			Active Traveler Monitoring 8-25-15	<a href="http://www.health.state.mn.us/divs/idepc/diseases/vhf/monitoring.html">http://www.health.state.mn.us/divs/idepc/diseases/vhf/monitoring.html</a>
<p>Some Risk</p> <ul style="list-style-type: none"> <li>• Close contact with a person showing symptoms of Ebola such as in a household, healthcare facility, or the community (no PPE worn). Close contact means being within three feet of the person with Ebola for a long time without wearing PPE.</li> <li>• In countries with widespread Ebola transmission: direct contact with a person showing symptoms of Ebola while wearing PPE</li> </ul>	<p>Direct active monitoring</p> <p>Restricted Public Activities Case by case</p> <p>Restricted Travel Case by case</p>			(last accessed 8-31-15)
<p>Low Risk (but not zero)</p> <ul style="list-style-type: none"> <li>• Having been in a country with widespread Ebola transmission within the previous 21 days and having no known exposure</li> <li>• Being in the same room for a brief period of time (without direct contact) with a person showing symptoms of Ebola</li> <li>• Having brief skin contact with a person showing symptoms of Ebola when the person was believed to be not very contagious</li> <li>• In countries without widespread Ebola transmission: direct contact with a person showing symptoms of Ebola while wearing PPE</li> <li>• Travel on an airplane with a person showing symptoms of Ebola</li> </ul>	<p>Active monitoring for most; direct active monitoring for some</p> <p>Restricted Public Activities No</p> <p>Restricted Travel No</p>			
<p>No Risk</p> <ul style="list-style-type: none"> <li>• Contact with a person who is not showing symptoms after that person was in contact with a person with Ebola</li> <li>• Contact with a person with Ebola before the person was showing symptoms</li> <li>• Having traveled to a country with Ebola outbreak more than 21 days ago</li> </ul>	<p>Monitoring No</p> <p>Restricted Public Activities No</p> <p>Restricted Travel No</p>			

<b>MS</b>	Anyone arriving in MS with travel to Guinea, Liberia, Mali and Sierra Leone in the previous 21 days... [see next column]	... will be directly monitored by MSDH for signs and symptoms of EVD for the duration of the potential incubation period (21 days). Restrictive movement or quarantine orders will be issued based on the potential exposure risk to EVD. In the event of fever or other EVD symptoms, transportation to a biological containment facility will be arranged by MSDH and pre-identified partners. All response plans are designed to bypass local healthcare facilities and prevent any infectious exposures to local residents.	More Restrictive	Ebola Virus Disease Response Planning in Mississippi 11-24-14	<a href="http://msdh.ms.gov/msdhsite/index.cfm/23,6059,386,661,pdf/EbolaResponsePlanningMSHAN-20141124-00107-ADV.pdf">http://msdh.ms.gov/msdhsite/index.cfm/23,6059,386,661,pdf/EbolaResponsePlanningMSHAN-20141124-00107-ADV.pdf</a> (last accessed 8-31-15)
	Currently, the Mississippi State Department of Health (MSDH) does not consider returning travelers from Liberia at risk of Ebola.	All travelers returning from Liberia will be given a fact sheet on febrile illnesses that includes contact information for MSDH and CDC, and a healthcare notification card in the event that the traveler needs medical attention within 21 days of travel. MSDH will be notified by CDC of travelers from Liberia with a final destination in Mississippi.		Evaluation of Ill Travelers from Liberia to the United States 6-22-15	<a href="http://msdh.ms.gov/msdhsite/statistics/resources/6285.pdf">http://msdh.ms.gov/msdhsite/statistics/resources/6285.pdf</a> (last accessed 8-31-15)
<b>MO</b>	<p>Process for Evaluating Symptomatic Persons at Risk for EVD in Missouri</p> <p>The current process utilized by the Missouri Department of Health and Senior Services (DHSS) for evaluating symptomatic persons at risk for EVD is the following.</p> <p>Travelers who have recently returned to Missouri from one of the four Ebola-impacted countries in West Africa...[see next column]</p> <p>***</p> <p>Current Guidance for Evaluating Persons for Ebola Virus Disease (EVD)</p> <p>Presently there are four West African countries of concern for Ebola transmission: Liberia, Sierra Leone, Guinea, and Mali. All</p>	<p>...are being monitored for 21 days by public health officials. Currently, each traveler who is being monitored for Ebola in the state has been asked to pre-identify a specific health care facility where he/she will go for assessment should Ebola-compatible symptoms develop.</p> <p>***</p> <p>...are subject to a 21-day active post- arrival monitoring and movement protocol, with twice-daily temperature and symptom checks in coordination with state or local public health authorities.</p>	Equivalent	Update 3: Hospital Preparedness for Patients with Possible or Confirmed Ebola Virus Disease (EVD) 12-24-14	<a href="http://health.mo.gov/emergencies/alertsadvories/pdf/HU122414.pdf">http://health.mo.gov/emergencies/alertsadvories/pdf/HU122414.pdf</a> (last accessed 8-31-15)

	travelers entering the United States from these countries...[see next column]				
<b>MT</b>	<p>Governor Steve Bullock announced on October 31, 2014, <a href="#">new state health agency protocols</a> for Montanans who have returned from Ebola-affected regions of West Africa.</p> <p>The new protocols, based on Centers for Disease Control and Prevention (CDC) guidelines, direct how all passengers who return from West Africa will be monitored.</p>	["New state health agency protocols" links directly to pdf of CDC guidance]	Equivalent	<p>Ebola Virus Disease</p> <p>Ebola Update: Updated CDC Guidance Monitoring Symptoms and Controlling Movement to Stop Spread of Ebola 10-31-14</p>	<p><a href="http://dphhs.mt.gov/publichealth/cdepi/diseases/Ebola.aspx">http://dphhs.mt.gov/publichealth/cdepi/diseases/Ebola.aspx</a> (last accessed 8-31-15)</p> <p><a href="http://dphhs.mt.gov/Portals/85/publichealth/documents/CDCEpi/Ebola/EbolaStateProtocols.pdf">http://dphhs.mt.gov/Portals/85/publichealth/documents/CDCEpi/Ebola/EbolaStateProtocols.pdf</a> (last accessed 8-31-15)</p>
<b>NE</b>	Monitoring travelers from West Africa for signs and symptoms of Ebola according to CDC guidance.	[see CDC guidance]	Equivalent	Ebola Facts and Resources - Nebraska Specific Information	<a href="http://dphhs.ne.gov/publichealth/Ebola/Pages/NebraskaSpecific.aspx">http://dphhs.ne.gov/publichealth/Ebola/Pages/NebraskaSpecific.aspx</a> (last accessed 8-31-15)
<b>NV</b>	Individuals traveling from a West African country that is experiencing Ebola outbreak are being screened upon arrival by US Customs and Border Protection and the	If travelers are identified as needing post –arrival monitoring based on CDC criteria, these individuals, as a designated Person Under Investigation (PUI), will be referred to a state or local health	Equivalent	Public Health Preparedness (PHP):	<a href="http://dphhs.nv.gov/Programs/PHP/">http://dphhs.nv.gov/Programs/PHP/</a>

	Centers for Disease Control and Prevention (CDC) upon entering the United States. Screening criteria is located on the CDC website: <a href="http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html">http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html</a>	authority at their end destination or home of record for 21-day follow up monitoring.  Information for travelers: <a href="http://www.cdc.gov/vhf/ebola/travelers/index.html">http://www.cdc.gov/vhf/ebola/travelers/index.html</a>  This monitoring will follow CDC guidance and will be reported to CDC as required weekly and once the 21-day reporting period has ended for the individual. CDC Monitoring Guidance- <a href="http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html">http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html</a>		Ebola - Active Monitoring or Direct Active Monitoring  Active Monitoring or Direct Active Monitoring	<a href="#">HP - Home/</a> (last accessed 8-31-15)  <a href="http://dpbh.nv.gov/uploadedFiles/dpbhnavgov/content/Programs/PHP/Docs/ActiveDirectMonitoringWebSite.pdf">http://dpbh.nv.gov/uploadedFiles/dpbhnavgov/content/Programs/PHP/Docs/ActiveDirectMonitoringWebSite.pdf</a> (last accessed 8-31-15)
<b>NH</b>	High Risk Exposures: 1) Percutaneous or mucous membrane exposure to body fluids of symptomatic EVD patient, 2) Direct contact with body fluids of symptomatic EVD patient without appropriate PPE 3) Processing body fluids of symptomatic EVD patient without appropriate PPE or standard biosafety precautions 4) Direct contact with dead body without appropriate PPE in country with widespread Ebola transmission 5) Immediate household contact who provided care to EVD case while person was symptomatic	Quarantined at Home (Yes - mandatory)  Prohibited from Public Transport (Yes)  Notification to Local Officials (Yes)  Symptom Monitoring (Yes)  Public Health Daily Check-In (Yes direct active)	More Restrictive	Interim Policy Summary for Isolation of Suspect Ebola Patients and Quarantine of Persons Potentially-Exposed to Ebola Virus 11-10-14  2014 State of New Hampshire Ebola Response Plan 12-22-14	<a href="http://www.dhhs.state.nh.us/dphs/communications/isolationquarantine-interim.pdf">http://www.dhhs.state.nh.us/dphs/communications/isolationquarantine-interim.pdf</a> (last accessed 8-31-15)  <a href="http://www.dhhs.state.nh.us/dphs/communications/ebola-stateplan.pdf">http://www.dhhs.state.nh.us/dphs/communications/ebola-stateplan.pdf</a>
	Some Risk Exposures: 1) Direct contact with symptomatic EVD case while using appropriate PPE in country with widespread Ebola transmission 2) Brief direct contact (e.g., shaking hands) with symptomatic EVD case early in disease without appropriate PPE	Quarantined at Home (Yes - voluntary)  Prohibited from Public Transport (Yes)  Notification to Local Officials (Yes)  Symptom Monitoring (Yes)			

	<p>3) Other close household contacts to symptomatic EVD case (within 3 feet) while not wearing appropriate PPE</p>	<p>Public Health Daily Check-In (Yes direct active)</p>			<p>(last accessed 8-31-15)</p>
	<p>Low/Negligible* Risk Exposure (close airline contacts and US-based healthcare workers)</p> <p>Low/Negligible Risk Exposures:  1) Returning travelers from Ebola-affected countries with no specific exposures to virus  2) Brief indirect contact (e.g., being in same room) with symptomatic EVD case without appropriate PPE  3) Direct contact with symptomatic EVD case while using appropriate PPE in country without widespread Ebola transmission  4) Travel on an aircraft with a symptomatic EVD case (those sitting within 3 feet of the patient will have direct active monitoring and others will have active monitoring unless an individual had direct contact with the person)</p>	<p>Quarantined at Home (No)</p> <p>Prohibited from Public Transport (No)</p> <p>Notification to Local Officials (No)</p> <p>Symptom Monitoring (Yes)</p> <p>Public Health Daily Check-In (Yes direct active)</p>			
	<p>Low/Negligible* Risk Exposure (all others)</p> <p>Low/Negligible Risk Exposures:  1) Returning travelers from Ebola-affected countries with no specific exposures to virus  2) Brief indirect contact (e.g., being in same room) with symptomatic EVD case without appropriate PPE  3) Direct contact with symptomatic EVD case while using appropriate PPE in country without widespread Ebola transmission  4) Travel on an aircraft with a symptomatic EVD case (those sitting within 3 feet of the patient will have direct active monitoring and others will have active monitoring unless an individual had direct contact with the person)</p>	<p>Quarantined at Home (No)</p> <p>Prohibited from Public Transport (No)</p> <p>Notification to Local Officials (No)</p> <p>Symptom Monitoring (Yes)</p> <p>Public Health Daily Check-In (Yes, active)</p>			



NJ	<p>Low Risk</p> <p>If the individual traveled to one of the three affected West African nations, but had no known exposure to anyone with the Ebola Virus, the individual is considered Low Risk and the following actions will be taken [see column to the right]:</p>	<ul style="list-style-type: none"> <li>• If the individual is a New Jersey resident, Division of Global Migration and Quarantine (DGMQ) send the individual's contact information to NJDOH. <ul style="list-style-type: none"> <li>- CDC provides the individual with an Ebola Care Kit and a 24/7 phone number for NJDOH.</li> <li>- NJDOH contacts the individual's local health department for active monitoring for 21 days from the date of their departure from the affected country.</li> <li>- Local health department provides the individual contact information for area hospitals and Emergency Medical Services.</li> </ul> </li> <li>• If the individual is a non-New Jersey resident, they are released and NJDOH sends the individual's contact information to the Department of Health in their home state.</li> <li>• If the passenger is determined to have had some risk following the questionnaire and oral interview, the passenger completes a more detailed exposure and risk assessment. Following the more detailed exposure and risk assessment, the passenger is moved into one of two other risk categories:</li> </ul>	More Restrictive	New Jersey Mandatory Quarantine and Screening Protocols 10-31-14	<a href="http://www.state.nj.us/health/news/2014/approved/20141031b.html">http://www.state.nj.us/health/news/2014/approved/20141031b.html</a> (last accessed 8-31-15)
	<p>Some Risk</p> <p>If the individual traveled to one of the three affected West African nations, and for example, was a healthcare worker who treated an Ebola patient with active symptoms while wearing PPE, the individual is considered to have Some Risk and the following actions will be taken in such a case [see column to the right]:</p>	<ul style="list-style-type: none"> <li>• Individual is subject to NJDOH mandatory quarantine order.</li> <li>• No commercial conveyance or movement by the individual is permitted.</li> <li>• NJDOH will contact the individual's local health department for active monitoring for 21 days from the date of their last exposure.</li> <li>• The local health department will provide the individual contact information for area hospitals and Emergency Medical Services.</li> </ul>			

	<p>High Risk</p> <p>If the individual traveled to one of the three affected West African nations and had direct contact with the body fluids of an individual with the Ebola Virus, he/she is considered to have High Risk and the following actions will be taken [see column to the right]:</p>	<ul style="list-style-type: none"> <li>• Individual is subject to NJDOH mandatory quarantine order.</li> <li>• No commercial conveyance or movement by the individual is permitted.</li> <li>• NJDOH will contact the individual's local health department for active monitoring for 21 days from the date of their last exposure.</li> <li>• The local health department will provide the individual contact information for area hospitals and Emergency Medical Services.</li> </ul> <p>All other scenarios will be addressed on a case-by-case basis for possible mandatory quarantine, with the following additional measures as appropriate:</p> <ul style="list-style-type: none"> <li>• CDC provides an Ebola Care Kit with 24/7 phone number for NJDOH.</li> <li>• NJDOH sends information to local health department.</li> <li>• NJDOH limits or prohibits commercial conveyance or movement of the individual.</li> <li>• Local health departments will contact the individual for direct active monitoring for symptoms for 21 days and provide contact information for area hospitals and Emergency Medical Services.</li> <li>• Controlled movement and conditional release based upon person's compliance and adherence to local health department's instructions.</li> </ul>			
<b>NM</b>	<p>High Risk</p> <ul style="list-style-type: none"> <li>• Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of EVD patient</li> <li>• Direct skin contact with, or exposure to blood or body fluids of, an EVD patient without appropriate personal protective equipment (PPE)</li> <li>• Processing blood or body fluids of a confirmed EVD patient without appropriate PPE or standard biosafety precautions</li> <li>• Direct contact with a dead body without appropriate PPE in a country where an EVD outbreak is occurring</li> <li>• Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic.</li> </ul>	<ul style="list-style-type: none"> <li>• If asymptomatic, high risk and some risk persons will be required to conduct a 21-day fever log. NMDOH staff will conduct direct active monitoring of the person over the phone and in person to assess whether the person remains asymptomatic during the 21 days following exposure.</li> <li>• These persons will be monitored by the NMDOH for 21 days after their last known potential Ebola virus exposure to ensure that immediate actions are taken if they develop symptoms consistent with EVD during this period. Persons will be required to be available during in-person visits by NMDOH staff and immediately notify the NMDOH if they develop fever or other symptoms.</li> <li>• Asymptomatic high risk and some risk persons will not travel by commercial conveyances (e.g., airplane, ship, long-distance bus, or train). These individuals will also be excluded from public places and from work places.</li> </ul>	Equivalent	Ebola Virus Disease Response Plan Appendix F: Contact Tracing & Monitoring 2-27-15	<a href="http://nmhealth.org/publication/view/plan/953/">http://nmhealth.org/publication/view/plan/953/</a> (last accessed 8-31-15)

	<p>Some Risk</p> <ul style="list-style-type: none"> <li>• In countries with widespread Ebola virus transmission: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic.</li> <li>• Close contact in household, healthcare facilities, or community settings with a person with Ebola while the person was symptomatic.</li> </ul>	<p>If asymptomatic, high risk and some risk persons will be required to conduct a 21-day fever log. NMDOH staff will conduct direct active monitoring of the person over the phone and in person to assess whether the person remains asymptomatic during the 21 days following exposure.</p> <p>These persons will be monitored by the NMDOH for 21 days after their last known potential Ebola virus exposure to ensure that immediate actions are taken if they develop symptoms consistent with EVD during this period. Persons will be required to be available during in-person visits by NMDOH staff and immediately notify the NMDOH if they develop fever or other symptoms.</p> <p>Asymptomatic high risk and some risk persons will not travel by commercial conveyances (e.g., airplane, ship, long-distance bus, or train). These individuals will also be excluded from public places and from work places.</p>			
	<p>Low Risk</p> <ul style="list-style-type: none"> <li>• Having been in a country with widespread Ebola virus transmission within the past 21 days and having had no known exposures.</li> <li>• Having brief direct contact (e.g. shaking hands), while not wearing appropriate PPE, with a person with Ebola while the person was in the early stages of the disease.</li> <li>• Brief proximity, such as being in the same room for a brief period of time, with a person with Ebola while the person was symptomatic.</li> <li>• In countries without widespread Ebola virus transmission: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic.</li> <li>• Traveled on an aircraft with a person with Ebola while the person was symptomatic.</li> </ul>	<ul style="list-style-type: none"> <li>• If individuals are low risk and they are asymptomatic, they will be required to be available for NMDOH staff when they visit in person during the 21-day fever monitoring period.</li> <li>• For asymptomatic low risk persons, NMDOH staff will actively (or direct actively) monitor their temperature and assess whether the person remains asymptomatic during the 21 days following exposure.</li> <li>• These persons will be monitored by the NMDOH for 21 days after their last known potential Ebola virus exposure to ensure that immediate actions are taken if they develop symptoms consistent with EVD during this period.</li> <li>• Any movement restrictions for asymptomatic low risk persons will be negotiated between the traveler and the NMDOH.</li> </ul>			

<p><b>NY</b></p>	<p><u>"Direct contact" shall mean a "higher risk exposure" or "lower risk exposure," as defined herein.</u></p> <p>"Higher risk exposure" includes, but is not limited to, the following experienced by a person while in a country where there exists widespread transmission of EVD (including Guinea, Liberia, and Sierra Leone):</p> <ol style="list-style-type: none"> <li>1. Physical contact with, or exposure to blood or body fluids of, a person with EVD, or a person with a fever and a second symptom of EVD, or with a dead body, regardless of Personal Protective Equipment (PPE) used. This includes but is not limited to any person who performed direct medical or nursing care to persons with EVD in such countries;</li> <li>2. Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with EVD, or of a person with a fever and a second symptom of EVD;</li> <li>3. Processing blood or body fluids of a person with EVD, or a person with a fever and a second symptom of EVD, without appropriate PPE or standard biosafety precautions; and</li> <li>4. Living in the same household as a person with EVD while such person has EVD symptoms.</li> </ol> <p>"Lower risk exposure" includes, but is not limited to, the following experienced by a person while in a country where there exists widespread transmission of EVD (including Guinea, Liberia, and Sierra Leone):</p> <ol style="list-style-type: none"> <li>1. Coming within 3 feet of a person with EVD while not wearing appropriate PPE; and</li> <li>2. Being in a room or other enclosed location with a person with EVD for a prolonged period of time while not wearing appropriate PPE as determined by the facts and circumstances of that particular case.</li> </ol>	<ol style="list-style-type: none"> <li>1. Destination: Residence in New York City:       <ol style="list-style-type: none"> <li>a. NYC DOHMH will issue a quarantine order to the passenger requiring them to stay in quarantine in their residence for 21 days from the date of their last exposure;</li> <li>b. NYS DOH will arrange transportation by private vehicle to their residence;</li> <li>c. NYC DOHMH will implement quarantine protocol in coordination with NYSDOH.</li> </ol> </li> <li>2. Destination: Hotel or other non-residential accommodation in New York City:       <ol style="list-style-type: none"> <li>a. NYC DOHMH will assess the suitability of the hotel or other non-residential accommodation in New York City for quarantine. If not suitable, NYS DOHMH will identify other suitable quarantine location;</li> <li>b. NYC DOHMH will issue a quarantine order to the passenger requiring them to stay in quarantine in a suitable residence for 21 days from the date of their last exposure;</li> <li>c. NYS DOH will arrange transportation by private vehicle to their residence;</li> <li>d. NYC DOHMH will implement quarantine protocol in coordination with NYSDOH.</li> </ol> </li> <li>3. Destination: A location in New York State outside New York City:       <ol style="list-style-type: none"> <li>a. NYC DOHMH and NYSDOH may approve the relocation of such a person to another jurisdiction.</li> <li>b. NYC DOHMH will notify the local health official in the receiving jurisdiction.</li> <li>c. NYS DOH will arrange suitable transportation to the receiving jurisdiction if the passenger does not have suitable transportation arrangements.</li> <li>d. The receiving jurisdiction will issue a quarantine order pursuant to the NYSDOH Commissioner's Order and assure a suitable location for quarantine giving preference to the passenger's residence.</li> <li>e. If during a screening process that includes personnel of NYSDOH or its designee, such person does not voluntarily consent to an arrangement deemed appropriate by NYSDOH to travel to his or her ultimate destination outside of NYC, DOHMH and its Commissioner shall issue a QO for 21 days from the date of the person's last exposure, consistent with due process of law and follow the steps in paragraph 2, above.</li> <li>f. If the facts and circumstances of the particular situation warrant, for example if suitable transportation is not available until the next day, NYC DOHMH will issue a quarantine order, consistent with due</li> </ol> </li> </ol>	<p>More Restrictive</p>	<p>Order for Summary Action: In the Matter of the Prevention and Control of Ebola Virus Disease Statewide and Via John F. Kennedy International Airport 10-27-14</p> <p>Screening Operations at JFK International Airport 10-29-14</p>	<p><a href="http://www.health.ny.gov/diseases/communicable/ebola/docs/commissioner_order_2.pdf">http://www.health.ny.gov/diseases/communicable/ebola/docs/commissioner_order_2.pdf</a> (last accessed 8-31-15)</p> <p><a href="http://www.health.ny.gov/diseases/communicable/ebola/docs/screening_protocol_jfk.pdf">http://www.health.ny.gov/diseases/communicable/ebola/docs/screening_protocol_jfk.pdf</a> (last accessed 8-31-15)</p>
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		<p>process of law, and follow the steps in paragraph 2, above.</p> <p>4. Destination: A location outside New York State.</p> <ul style="list-style-type: none"> <li>a. NYC DOHMH and NYSDOH may approve the relocation of such a person to another jurisdiction.</li> <li>b. NYS DOH will notify the state health official in the receiving jurisdiction.</li> <li>c. NYS DOH will arrange suitable transportation to the receiving jurisdiction if the passenger does not have suitable transportation arrangements.</li> <li>d. If the facts and circumstances of the particular situation warrant, for example, if suitable transportation is not available until the next day, NYC DOHMH will issue a quarantine order, consistent with due process of law, and follow the steps in paragraph 2, above.</li> </ul>			
	<p><b>"No direct contact"</b>: Arriving from a country where there exists widespread transmission of EVD (including Guinea, Liberia, and Sierra Leone), but with no reported "direct contact", as defined herein.</p>	<p>Scenario</p> <p>3: If a person arrives from one of the affected areas with no symptoms and has had no direct contact with anyone infected with the Ebola virus:</p> <ul style="list-style-type: none"> <li>a. NYC DOHMH will notify the local health department if the passenger's destination is within in New York State outside New York City, or the NYS DOH will notify the state health department if the passenger's destination is another state;</li> <li>b. The passenger will be allowed to travel to their destination.</li> <li>c. If the facts and circumstances of the particular situation warrant, for example, if suitable transportation is not available until the next day, NYC DOHMH will issue a quarantine order, consistent with due process of law, and follow the steps in paragraph 2, above.</li> </ul>			

<p><b>NC</b></p>	<p><b>HIGH RISK</b></p> <ul style="list-style-type: none"> <li>• Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola while the person was symptomatic</li> <li>• Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE)*</li> <li>• Processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate PPE* or standard biosafety precautions</li> <li>• Direct contact with a dead body without appropriate PPE* in a country designated by CDC as posing a risk of Ebola exposure**</li> <li>• Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring</li> <li>• Public health authority will ensure, through orders as necessary, the following minimum restrictions: <ul style="list-style-type: none"> <li>o Controlled movement: exclusion from all long-distance and local public conveyances (aircraft, ship, train, bus, and subway)</li> <li>o Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>o Exclusion from workplaces for the duration of the public health order, unless approved by the state or local health department (telework is permitted)</li> </ul> </li> <li>• Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>• Federal public health travel restrictions (Do Not Board) will be implemented to enforce controlled movement</li> <li>• If travel is allowed, individuals are subject to controlled movement <ul style="list-style-type: none"> <li>o Travel by noncommercial conveyances only</li> <li>o Coordinated with public health authorities at both origin and destination</li> <li>o Uninterrupted direct active monitoring</li> </ul> </li> </ul>	<p>Equivalent</p>	<p>Communicable Disease Branch 2014 Program Alert # 8 – Update “Local Health Department Guidance for Evaluation and Management of Persons with Potential Ebola Virus Exposure” 6-15-15</p>	<p><a href="http://epi.publichealth.nc.gov/cd/lhds/manuals/cd/ebola/CDProgramAlert8EbolaUpdate06152015.pdf">http://epi.ublichealth.nc.gov/cd/lhds/manuals/cd/ebola/CDProgramAlert8EbolaUpdate 06152015.pdf</a> (last accessed 8-31-15)</p>
	<p><b>SOME RISK</b></p> <ul style="list-style-type: none"> <li>• In countries designated by CDC as posing a risk of Ebola exposure**:</li> <li>o Direct contact while using appropriate PPE* with a person with Ebola while the person was symptomatic or with the person’s body fluids</li> <li>o Any direct patient care in other healthcare settings</li> <li>• Close contact in households, healthcare facilities, or community settings with a person with Ebola while the person was symptomatic</li> <li>o Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE* within approximately 3 feet (1 meter) of a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring</li> <li>• The public health authority, based on a specific assessment of the individual’s situation, will determine whether additional restrictions are appropriate, including: <ul style="list-style-type: none"> <li>o Controlled movement: exclusion from long-distance commercial conveyances (aircraft, ship, train, bus) or local public conveyances (e.g., bus, subway)</li> <li>o Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>o Exclusion from workplaces for the duration of a public health order, unless approved by the state or local health department (telework is permitted)</li> </ul> </li> <li>• Any travel will be coordinated with public health authorities to ensure uninterrupted direct active monitoring</li> <li>o Federal public health travel restrictions (Do Not Board) may be implemented based on an assessment of the particular circumstance</li> <li>o For travelers arriving in the United States, implementation of federal public health travel restrictions would occur after the traveler reaches the final destination of the itinerary</li> </ul>			

	<p><b>LOW (BUT NOT ZERO) RISK</b></p> <ul style="list-style-type: none"> <li>• Having been in a country designated by CDC as posing a risk of Ebola exposure** within the past 21 days and having had no known exposures</li> <li>• Having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE,* with a person with Ebola while the person was in the early stage of disease</li> <li>• Brief proximity, such as being in the same room for a brief period of time, with a person with Ebola while the person was symptomatic</li> <li>• In countries NOT designated by CDC as posing a risk of Ebola exposure: direct contact while using appropriate PPE* with a person with Ebola while the person was symptomatic</li> <li>• Traveled on an aircraft with a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring for: <ul style="list-style-type: none"> <li>o U.S.-based healthcare workers caring for symptomatic Ebola patients while wearing appropriate PPE</li> <li>o Travelers on an aircraft with, and sitting within 3 feet of, a person with Ebola</li> </ul> </li> <li>• Active monitoring for all others in this category</li> <li>• No restrictions on work or congregate gatherings</li> <li>• Obtain local health department permission prior to using public transportation or leaving the county</li> </ul>			
	<p><b>NO IDENTIFIABLE RISK</b></p> <ul style="list-style-type: none"> <li>• Contact with an asymptomatic person who had contact with person with Ebola</li> <li>• Contact with a person with Ebola before the person developed symptoms</li> <li>• Having been more than 21 days previously in a country designated by CDC as posing a risk of Ebola exposure**</li> <li>• Having been in a country NOT designated by CDC as posing a risk of Ebola exposure and not having any other exposures as defined above</li> <li>• Aircraft or ship crew members who remain on or in the immediate vicinity of the conveyance and have no direct contact with anyone from the community during the entire time that the conveyance is present in a country designated by the CDC as posing a risk of Ebola exposure**</li> </ul>	<ul style="list-style-type: none"> <li>• No monitoring or restrictions recommended</li> </ul> <p><i>*See CDC Guidance (<a href="http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html">http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html</a>)</i></p> <p><i>** See countries listed at <a href="http://www.cdc.gov/vhf/ebola/exposure/risk-factors-when-evaluating-person-for-exposure.html">http://www.cdc.gov/vhf/ebola/exposure/risk-factors-when-evaluating-person-for-exposure.html</a></i></p>			

<b>ND</b>	<p>“We are monitoring people who have traveled from the affected countries in accordance with CDC guidelines. Our department tracks and shares the latest information on Ebola with health care providers and other stakeholders on a daily basis,” according to the State Health Officer Terry Dwelle, MD.</p>	[See CDC guidance.]	Equivalent	<p>North Dakota Department of Health Continues Protective Measures on Ebola 10-29-14</p> <p>Weekly Ebola Traveler Monitoring Report for August 28, 2015</p>	<p><a href="http://www.ndhan.gov/d/ata/mrNews/Ebola%20014-10-29-ProtectiveEbola%20Updates%20NR-v%20FINAL%20(2).pdf">http://www.ndhan.gov/d/ata/mrNews/Ebola%20014-10-29-ProtectiveEbola%20Updates%20NR-v%20FINAL%20(2).pdf</a> (last accessed 8-31-15)</p> <p><a href="https://www.ndhealth.gov/PageContenters/EbolaTravelerMonitoringReportforAugust28,2015">https://www.ndhealth.gov/PageContenters/EbolaTravelerMonitoringReportforAugust28,2015</a> (last accessed 8-31-15)</p>
<b>NMI</b>	<p>Warren Villagomez, director of CHCC Public Health and Hospital Emergency Preparedness Programs, makes sure that all surveillance activities and monitoring are done at all critical access points and sentinel sites every day, in accordance with Centers for Disease Control and Prevention guidelines and protocol.”</p>	[See CDC guidance]	Equivalent	<p>CHCC, CPA working to identify isolation site for Ebola if it comes</p>	<p><a href="http://www.cpa.gov/mp/newsitm.asp?newsID=1394">http://www.cpa.gov/mp/newsitm.asp?newsID=1394</a> (last accessed 8-31-15)</p>
<b>OH</b>	<p>Any direct skin to skin or mucus membrane contact or contact with blood and body fluids without using appropriate personal protective equipment (PPE)</p>	<ul style="list-style-type: none"> <li>• Full quarantine: Supported confinement at home or in temporary housing provided by the state</li> <li>AND</li> <li>• Direct active monitoring: Twice daily temperature and symptom checks for 21 days after departing the impacted country, observed once and reported once by phone</li> <li>AND</li> <li>• Movement restrictions: Confined to home and no commercial conveyance for 21 days after last contact</li> </ul>	More Restrictive	<p>ODH Crosswalk for Ebola Exposure and Risk Intervention 10-31-14</p>	<p><a href="http://www.odh.ohio.gov/~media/ODH/ASSETS/Files/ebola/Strengthened%20Traveler%20Protocols.ashx">http://www.odh.ohio.gov/~media/ODH/ASSETS/Files/ebola/Strengthened%20Traveler%20Protocols.ashx</a></p>



	<ul style="list-style-type: none"> <li>• Any healthcare worker (HCW) in one of the countries impacted by Ebola who had been treating patients with the Ebola virus within 21 days, including HCWs who used PPE</li> <li>OR</li> <li>• Any traveler who has been to one of the countries impacted by Ebola within 21 days with uncertain direct contact or uncertain exposure</li> </ul>	<ul style="list-style-type: none"> <li>• Home confinement: Supported confinement at home</li> <li>AND</li> <li>• Direct active monitoring: Twice daily temperature and symptom checks for 21 days after departing the impacted country, observed once and reported once by phone</li> <li>AND</li> <li>• Movement restrictions: The public health authority, based on a specific assessment of the individual's situation, will determine whether additional restrictions are appropriate, including <ul style="list-style-type: none"> <li>- Exclusion from long-distance commercial conveyances (e.g., aircraft, ship, bus, train) or local public conveyances (e.g., bus, subway);</li> <li>- Any travel outside of the jurisdiction of the local health authority must be under mutual agreement of the health authority of jurisdiction and the public health official who will assume responsibility for daily observation;</li> <li>- Exclusion from public places and congregate gatherings;</li> <li>- Exclusion from workplaces for the duration of a public health order, unless approved by the state or local health department (telework is permitted)</li> <li>- Some non-congregate public activities while maintaining a 3-foot distance from others may be permitted</li> <li>- Federal public health travel restrictions (Do Not Board) may be implemented based on an assessment of particular circumstances</li> </ul> </li> </ul>			(last accessed 8-31-15)
	<ul style="list-style-type: none"> <li>• No direct skin to skin or mucus membrane contact or contact with blood and body fluids but within a 3-foot radius ("risk zone") of an infected individual</li> <li>OR</li> <li>• Any traveler who has been to one of the countries impacted by Ebola<sup>1</sup> within 21 days but with no direct contact or known exposure</li> <li>OR</li> <li>• US-based health care workers caring for symptomatic Ebola patients while wearing appropriate PPE</li> </ul>	<ul style="list-style-type: none"> <li>• Direct active monitoring: Twice daily temperature and symptom checks, observed once and reported once by phone, for 21 days after last contact</li> <li>AND</li> <li>• Movement restrictions: The public health authority, based on a specific assessment of the individual's situation, will determine whether additional restrictions are appropriate, including <ul style="list-style-type: none"> <li>- Exclusion from long-distance commercial conveyances (e.g., aircraft, ship, bus, train);</li> <li>- Any travel outside of the jurisdiction of the local health authority must be under mutual agreement of the health authority of jurisdiction and the public health official who will assume responsibility for daily observation; and</li> <li>- Some restrictions on local public transit, work, and congregate activities may apply</li> </ul> </li> </ul>			

	Brief proximity, such as being in the same room for a brief period of time, with a person with Ebola while the person was symptomatic	<ul style="list-style-type: none"> <li>• Active monitoring: Twice daily temperature and symptom checks, reported daily to a public health official, for 21 days after last contact</li> </ul> AND <ul style="list-style-type: none"> <li>• Movement restrictions: No travel outside of the United States due to the inability to verify and act upon non-compliance with reporting requirements.</li> </ul>			
	No direct contact, but within broad vicinity	Education			
<b>OK</b>	<ul style="list-style-type: none"> <li>• High Risk: A person who has provided care for a patient diagnosed with Ebola and may have had a needle stick or direct contact with blood or bodily fluids of the infected person; or someone who has lived with or cared for a person showing symptoms with Ebola.</li> <li>• Some Risk: A person who has been in the vicinity (within 3 feet) of someone with Ebola virus disease for an extended period of time, but who had no direct contact or who did not provide care for a person infected with Ebola. This category also includes health care workers who used personal protection equipment while providing care to patient(s) showing symptoms of Ebola in countries with widespread Ebola transmission.</li> <li>• Low Risk: A person who has traveled to Guinea, Liberia, or Sierra Leone within the previous 21 days, but did not have any known exposure to Ebola. This category also includes persons with brief skin contact with a person showing symptoms of Ebola when the person was not very contagious, and health care workers at a US facility in contact with an Ebola patient while wearing personal protection equipment.</li> <li>• No Identified Risk: A person who did not travel to one of the affected countries within the previous 21 days, or someone who is a close contact of an asymptomatic person who traveled to one of the Ebola-affected countries. A person who had contact with someone with Ebola BEFORE</li> </ul>	<p>Each state will be required to provide active monitoring of its residents in the low to high risk categories to ensure public health and safety while at the same time recognizing the rights of individuals and the science of how Ebola virus is spread. Persons assessed to be at the high risk level will be quarantined and unable to travel on commercial airplanes or other public conveyances until completion of the 21-day monitoring period for development of fever or other symptoms of Ebola virus disease.</p> <p>Concurrent with CDC’s announcement, key staff at the Oklahoma State Department of Health (OSDH) met to revise the state’s Ebola contact monitoring protocols to align with the national guidance. As this responsibility unfolds, many public health workers will be involved with monitoring persons arriving from Ebola-affected countries. Epidemiologists in the OSDH Acute Disease Service will receive notifications of arriving passengers, assess the risk level of the individual, and coordinate the monitoring with staff at the county health department where the individual resides. For residents or visitors staying in Tulsa or Oklahoma counties, the respective city-county health department will supervise the monitoring process. In all other Oklahoma counties, communicable disease nurses in the county health department will provide the active daily monitoring.</p>	Equivalent	<p>Situation Update No. 11 – Updated Guidelines for Monitoring and Restricting Movement of Persons with Suspected Ebola Contact 10-27-14</p> <p>News Health Officials Monitoring Travelers Returning from Ebola-Affected Countries 10-30-14</p>	<p><a href="http://www.ok.gov/health/Organization/Office_of_Communications/News_Releases/Situation_Updates/Surveillance_and_Preparedness_for_Ebola_Virus_Disease/EVD_Situation_Update_No_11.html">http://www.ok.gov/health/Organization/Office_of_Communications/News_Releases/Situation_Updates/Surveillance_and_Preparedness_for_Ebola_Virus_Disease/EVD_Situation_Update_No_11.html</a> ! (last accessed 8-31-15)</p> <p><a href="http://www.tulsa-health.org/news/health-officials-monitoring-travelers-returning-ebola-affected-countries#.VP34JHYpC9I">http://www.tulsa-health.org/news/health-officials-monitoring-travelers-returning-ebola-affected-countries#.VP34JHYpC9I</a> (last</p>

	the person was showing symptoms of disease is also classified as having no identifiable risk.				accessed 8-31-15)
		In accordance with recently implemented Oklahoma State Department of Health active post-arrival monitoring program, Tulsa Health Department officials have been monitoring an individual in Tulsa County who recently traveled from West Africa for the Ebola virus. Per the CDC post-arrival monitoring guidelines, the individual is classified as low risk, which means the person has traveled to Guinea, Liberia or Sierra Leone within the previous 21 days, but did not have any known exposure to Ebola.			
<b>OR</b>	Oregon public health officials are following federal CDC guidance for monitoring and movement of people with potential Ebola virus exposure.	[See CDC guidance.]	Equivalent	Oregon Public Health: Interim Ebola Monitoring Plan 11-12-14	<a href="https://public.health.oregon.gov/Preparedness/CurrentHazards/Events/EbolaResponse/Document/Ebola-Monitoring-Plan.pdf">https://public.health.oregon.gov/Preparedness/CurrentHazards/Events/EbolaResponse/Document/Ebola-Monitoring-Plan.pdf</a> (last accessed 8-31-15)
	As of June 17, 2015, Oregon will discontinue active monitoring for travelers returning from Liberia, unless the travelers have other risk factors for Ebola within the past 21 days.	Travelers returning from Liberia will be asked to watch their health for 21 days after leaving Liberia and to contact their local health department and seek appropriate medical care if they have a fever or other symptoms consistent with Ebola. The screening and monitoring program for travelers from Guinea and Sierra Leone is unchanged.		Oregon Ebola Updates 6-16-15	<a href="http://public.health.oregon.gov/Preparedness/CurrentHazards/Events/EbolaResponse/Pages/EbolaUpdates.aspx">http://public.health.oregon.gov/Preparedness/CurrentHazards/Events/EbolaResponse/Pages/EbolaUpdates.aspx</a> (last accessed 8-31-15)

PA	Uncertain Risk—meaning they don't know if they were exposed to Ebola or does not acknowledge any exposure	<p>If travelers do not have or report any symptoms, have no measured fever and have been determined to have an "uncertain exposure risk"—meaning they don't know if they were exposed to Ebola or does not acknowledge any exposure—they will be allowed to continue their journey, as long as they follow-up with public health authorities and are monitored for 21 days. Federal officials will provide the traveler's key information to relevant state health departments. Travelers will be given a "CARE" (Check and Report Ebola) kit which includes a fact sheet and instructions to self-monitor for signs and symptoms of Ebola, a temperature and symptoms log, a thermometer, and a contact sheet with the 24/7 phone numbers of state health departments.</p> <p>Travelers who stay in counties that have local health departments will be monitored on the local level. The Pennsylvania Department of Health will monitor travelers staying in counties that do not have local health departments. Travelers will be monitored daily for 21 days after their arrival to the US. The method—whether by phone, Skype, or in-person—will be determined by the health department during the monitoring. Passengers will use a "Passenger Symptom Follow-Up Diary" to track the following types of information twice daily and report to the health department: Temperature (taken at two different times per day) Other symptoms like: chills, weakness, headache, joint or muscle aches, abdominal pain, diarrhea (and the number of times per day), vomiting, unexplained bleeding, stomach pain, lack of appetite, other symptoms</p> <p>Travelers will also be asked daily if they have plans to travel anywhere within the 21-day monitoring period. This will ensure health officials can check in with travelers.</p>	Equivalent (although monitoring all returning travelers regardless of risk categorization is more restrictive than CDC guidance, the health department indicates this is being done at the direction of CDC and therefore being categorized as equivalent to CDC guidance)	Ebola	<a href="http://www.health.pa.gov/My%20Health/Diseases%20and%20Conditions/E-Health/Pages/Ebola1124-7264.aspx#.VeSF6XYpDIU">http://www.health.pa.gov/My%20Health/Diseases%20and%20Conditions/E-Health/Pages/Ebola1124-7264.aspx#.VeSF6XYpDIU</a> (last accessed 8-31-15)
	No Known Potential Exposure	If the individuals have no known potential exposures to Ebola, they will not be given any travel restrictions.			
	Possible Exposures to Ebola (not defined)	If individuals had possible exposures to Ebola, their travel will be restricted and they will be instructed not to use commercial travel methods (planes, buses, trains, etc.).			
	[All risk categories]	<p>How will the Department of Health be monitoring individuals who are flying into the five designated airports in the U.S. and whose final destination is Pennsylvania?</p> <p>Pennsylvania is one of six states that have been directed by the Centers for Disease Control and Prevention (CDC) to actively monitor all travelers from the West African countries of Guinea, Liberia, and Sierra Leone who arrive at five designated airports in the U.S. and then travel into the commonwealth. Designated</p>			

		airports are JFK (New York City); Newark Liberty (New Jersey); Atlanta Hartsfield Jackson (Georgia); Dulles (Virginia); and O'Hare (Illinois).			
<b>PR</b>	HIGH risk	Active monitoring: Yes: Direct active monitoring  Travel restrictions: Yes  Restrictions on public activities: Yes	Equivalent	Policy: GUÍA PARA EL MANEJO Y CONTROL DE LA ENFERMEDAD DEL VIRUS DEL ÉBOLA (EVE) EN FACILIDADES DE SALUD <i>Revisada Policy</i> Monitoreo y restricción de movimiento para detener la propagación del Ébola	<a href="http://www.salud.gov.pr/Sobre-tu-Salud/Documents/Ebola/Guia%20Manejo%20y%20Control%20de%20la%20enfermedad%20del%20Virus%20del%20Ebola%20Revisada%20Policy%20Monitoreo%20y%20restriccion%20de%20movimiento%20para%20detener%20la%20propagacion%20del%20Ebola.pdf">http://www.salud.gov.pr/Sobre-tu-Salud/Documents/Ebola/Guia%20Manejo%20y%20Control%20de%20la%20enfermedad%20del%20Virus%20del%20Ebola%20Revisada%20Policy%20Monitoreo%20y%20restriccion%20de%20movimiento%20para%20detener%20la%20propagacion%20del%20Ebola.pdf</a> (last accessed 8-31-15)
	SOME (moderate) risk	Active monitoring: Yes: Direct active monitoring  Travel restrictions: Possible  Restrictions on public activities: Possible			
	LOW (but not zero) risk	Active monitoring: Yes: Direct active monitoring for some persons*; active for others * Direct active monitoring is advised for health workers in the United States who use the necessary PPE and who are responsible for patients with Ebola, as well as for travelers on airplanes sitting less than 3 feet away from a person infected with the disease.  Travel restrictions: No  Restrictions on public activities: No			
	NO risk	Active monitoring: No  Travel restrictions: No  Restrictions on public activities: No			

<b>RI</b>	<p><i>Federal Ebola monitoring program in place in Rhode Island</i></p> <p>Rhode Island has adopted the Centers for Disease Control and Prevention (CDC)'s guidelines for the movement and monitoring of travelers entering the United States from Ebola-affected countries in West Africa.</p>	[See CDC guidance]	Equivalent	Ebola Update - Contacting the Rhode Island Department of Health about Ebola 3-6-15	<a href="http://www.ricsnt.org/ricsnt/assets/File/Ebola%20Update36_15.pdf">http://www.ricsnt.org/ricsnt/assets/File/Ebola%20Update36_15.pdf</a> (last accessed 8-31-15)
<b>SC</b>	<p>Our goal is prevention, as we strictly follow guidance provided by the federal Centers for Disease Control and Prevention.</p>	[See CDC guidance]	Equivalent	Ebola – A Message from DHEC	<a href="http://www.scdhec.gov/Health/DiseasesandConditions/InfectiousDiseases/Ebola/EbolaStatement/">http://www.scdhec.gov/Health/DiseasesandConditions/InfectiousDiseases/Ebola/EbolaStatement/</a> (last accessed 8-31-15)
<b>SD</b>	<p>South Dakota Ebola Update (as of 7/6/2015) ...•Number of individuals currently being monitored – 0 (South Dakota follows CDC guidance for monitoring of persons with potential Ebola virus exposure)</p>	[See CDC guidance]	Equivalent	Ebola Virus Disease - South Dakota Ebola Update 7-6-15	<a href="http://doh.sd.gov/diseases/ebola.aspx">http://doh.sd.gov/diseases/ebola.aspx</a> (last accessed 8-31-15)

<p><b>TN</b></p>	<p>High Risk:</p> <ol style="list-style-type: none"> <li>1) Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola while the person was symptomatic,</li> <li>2) Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE)</li> <li>3) Processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate PPE or standard biosafety precautions,</li> <li>4) Direct contact with a dead body without appropriate PPE in a country with widespread transmission or cases in urban areas with uncertain control measures<sup>1</sup>,</li> <li>5) Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic</li> </ol>	<p>Monitoring</p> <p>21- Day Direct Active Monitoring:</p> <p>Twice-daily public health monitoring:</p> <ul style="list-style-type: none"> <li>• Initial assessment in person</li> <li>• Once daily temperature and symptom monitoring in person or by video chat</li> <li>• Once daily temperature and symptom monitoring by phone, text or email</li> <li>• Completion letter in person or by mail</li> </ul> <p>Movement</p> <p>Not allowed:</p> <ul style="list-style-type: none"> <li>• Long-distance commercial transportation</li> </ul> <p>Not allowed without discussion and pre-approval from the Health Department:</p> <ul style="list-style-type: none"> <li>• Use of local public transportation</li> <li>• Attending public places and group gatherings</li> <li>• Out-of-state travel by personal vehicle</li> <li>• Working</li> <li>• Out-of-town travel by personal vehicle</li> </ul>	<p>Equivalent</p>	<p>TDH Interim Ebola Exposure, Monitoring and Movement Definitions Updated 5-14-15</p>	<p><a href="http://tn.gov/assets/entities/health/attachments/TDH_Interim_Exposure_Monitoring_and_Movement_Definitions_Public_20150514.pdf">http://tn.gov/assets/entities/health/attachments/TDH_Interim_Exposure_Monitoring_and_Movement_Definitions_Public_20150514.pdf</a> (last accessed 8-31-15)</p>
	<p>Some Risk<sup>2</sup>:</p> <ol style="list-style-type: none"> <li>1) In countries with widespread transmission or cases in urban areas with uncertain control measures<sup>1</sup>: <ol style="list-style-type: none"> <li>a. Direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic or with the person's body fluids</li> <li>b. Any direct patient care in other healthcare settings</li> </ol> </li> <li>2) Close contact in households, health care facilities, or community settings with a person with Ebola while the person was symptomatic <ol style="list-style-type: none"> <li>a. Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet (1 meter) of a person with Ebola while the person was symptomatic</li> </ol> </li> <li>3) In countries without widespread transmission or cases in urban areas with uncertain control measures<sup>1</sup>: a breach in</li> </ol>	<p>Monitoring</p> <p>21- Day Direct Active Monitoring:</p> <p>Twice-daily public health monitoring:</p> <ul style="list-style-type: none"> <li>• Initial assessment in person</li> <li>• Once daily temperature and symptom monitoring in person or by video chat</li> <li>• Once daily temperature and symptom monitoring by phone, text or email</li> <li>• Completion letter in person or by mail</li> </ul> <p>Movement</p> <p>Not allowed:</p> <ul style="list-style-type: none"> <li>• Long-distance commercial transportation</li> </ul> <p>Not allowed without discussion and pre-approval from the Health Department:</p> <ul style="list-style-type: none"> <li>• Use of local public transportation</li> <li>• Attending public places and group gatherings</li> <li>• Out-of-state travel by personal vehicle</li> <li>• Working</li> <li>• Out-of-town travel by personal vehicle</li> </ul>			

<p>PPE (including during doffing process) resulting in skin exposure to blood or body fluids of a person with Ebola while the person was symptomatic or person deemed at increased risk (e.g., cared for an Ebola patient who was vomiting/diarrhea/bleeding and person had no prior demonstrated competency in appropriate PPE use<sup>3</sup>)</p>				
<p>Low Risk<sup>2</sup>:</p> <ol style="list-style-type: none"> <li>1) Having been in a country with widespread transmission or cases in urban areas with uncertain control measures<sup>1</sup> within the past 21 days and having had no known exposures</li> <li>2) Having brief direct contact (e.g., shaking hands) while not wearing appropriate PPE, with a person with Ebola while the person was in the early stage of disease</li> <li>3) Brief proximity, such as being in the same room (not an Ebola patient care area) for a brief period of time, with a person with Ebola while the person was symptomatic</li> <li>4) In countries without widespread transmission or cases in urban areas with uncertain control measures<sup>1</sup>: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic or with the person's body fluids</li> <li>5) Traveled on an aircraft with a person with Ebola while the person was symptomatic.</li> </ol>	<p>Monitoring</p> <p>21- Day Active Monitoring:</p> <p>Once-daily public health monitoring:</p> <ul style="list-style-type: none"> <li>• Initial assessment in person</li> <li>• Once daily phone contact to assess twice daily temperature and symptoms</li> <li>• Completion letter in person or by mail</li> </ul> <p>21- Day Direct Active Monitoring (see above) for:</p> <ul style="list-style-type: none"> <li>• U.S. healthcare workers caring for symptomatic Ebola Patients while wearing appropriate PPE</li> <li>• Travelers on an aircraft with, and sitting within 3 feet of, a person with Ebola</li> </ul> <p>Movement</p> <p>Notify the Health Department prior to out-of-state travel.</p> <p>No restrictions on:</p> <ul style="list-style-type: none"> <li>• Travel</li> <li>• Work</li> <li>• Public transportation</li> <li>• Group gatherings</li> </ul>			



	<p>No Identifiable Risk: No Identifiable Risk:</p> <ol style="list-style-type: none"> <li>1) Contact with an asymptomatic person who had contact with person with Ebola</li> <li>2) Contact with a person with Ebola before the person developed symptoms</li> <li>3) Having been more than 21 days previously in a country with widespread transmission or cases in urban areas with uncertain control measures<sup>1</sup></li> <li>4) Having been in a country with Ebola cases, but without widespread transmission or cases in urban settings with uncertain control measures, and not having any other exposures as defined above</li> <li>5) Having remained on or in the immediate vicinity of an aircraft or ship during the entire time that the conveyance was present in a country with widespread transmission or cases in urban areas with uncertain control measures<sup>1</sup>, and having had no direct contact with anyone from the community</li> </ol>	<p>Monitoring No restrictions</p> <p>Movement No restrictions</p>			
<b>TX</b>	<p>High risk exposures: Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola while the person was symptomatic; exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE); processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate PPE or standard biosafety precautions; direct contact with a dead body without appropriate PPE in a country with widespread Ebola virus transmission; having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic.</p>	<ul style="list-style-type: none"> <li>• Public health meets passenger at the airport, and retakes temperature</li> <li>• Support Do Not Board (DNB) if issued by CDC</li> <li>• Notification of LHD followed by in-home visit within 12 hours of LHD notification</li> <li>• Control Order issued for quarantine (No public transportation, no large congregate setting activities, and no leaving home)</li> <li>• Twice daily visualized temperature checks at least 6 hours apart for 21 days after departure from country <ul style="list-style-type: none"> <li>o At least one must be in-person, both in-person preferred</li> </ul> </li> <li>• Report daily monitoring outcomes to DSHS Emerging and Acute Infectious Disease Branch 7 days/week</li> <li>• Proceed to “symptomatic” if indicated</li> </ul>	More Restrictive	Guidance: Monitoring and Movement of People with Potential Exposure to Ebola Virus Disease 11-7-14	<a href="http://www.dshs.state.tx.us/WorkArea/DownloadAsset.aspx?id=8589993293">http://www.dshs.state.tx.us/WorkArea/DownloadAsset.aspx?id=8589993293</a> (last accessed 8-31-15)

	<p>Some risk exposures: In countries with widespread Ebola virus transmission: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic; close contact in households, healthcare facilities, or community settings with a person with Ebola while the person was symptomatic. (Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet [1 meter] of a person with Ebola while the person was symptomatic).</p>	<ul style="list-style-type: none"> <li>• Public health meets passenger at the airport, and retakes temperature, and interviews for risk factors</li> <li>• If interview demonstrates need to reassess risk, consult with DSHS Emerging and Acute Infectious Disease Branch</li> <li>• If elevation of risk is agreed upon, follow instructions of the higher risk category</li> <li>• Support Do Not Board (DNB) if issued by CDC</li> <li>• Notification of LHD followed by in-home visit within 12 hours of LHD notification</li> <li>• Twice daily visualized temperature checks at least 6 hours apart for 21 days after departure from country <ul style="list-style-type: none"> <li>o In person checks preferred</li> </ul> </li> <li>• No public transportation or large congregate setting activities; failure to comply can result in Control Order <ul style="list-style-type: none"> <li>o Healthcare workers are not allowed to care for any patients</li> <li>o Visitors allowed</li> </ul> </li> <li>• Report daily monitoring outcomes to DSHS Emerging and Acute Infectious Disease Branch 7 days/week</li> <li>• Proceed to “symptomatic” if indicated</li> </ul>			
	<p>Low (but not zero) risk exposures: Having been in a country with widespread Ebola virus transmission within the past 21 days and having had no known exposures; having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE with a person with Ebola while the person was in the early stage of disease; brief proximity, such as being in the same room for a brief period of time, with a person with Ebola while the person was symptomatic; in countries without widespread virus Ebola transmission: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic; traveled on an aircraft with a person with Ebola while the person was symptomatic.</p>	<ul style="list-style-type: none"> <li>• Notification of LHD followed by in-home visit and risk interview within 12 hours of LHD notification</li> <li>• If interview demonstrates need to reassess risk, consult with DSHS Emerging and Acute Infectious Disease Branch</li> <li>• If elevation of risk is agreed upon, follow instructions of the higher risk category</li> <li>• Twice daily temperature checks at least 6 hours apart for 21 days after departure from country</li> <li>• Report daily monitoring outcomes to DSHS Emerging and Acute Infectious Disease Branch each business day</li> <li>• Proceed to “symptomatic” if indicated</li> </ul>			
	<p>No identifiable risk exposures: Contact with an asymptomatic person who had contact with a person with Ebola; contact with a person with Ebola before the person developed symptoms; having been more than 21 days previously in a country with widespread Ebola virus transmission; having been in a country without widespread Ebola</p>	<p>No monitoring</p>			

	virus transmission and not having any other exposures as defined above.				
<b>UT</b>	<p>High Risk Category – Direct Active Monitoring</p> <ul style="list-style-type: none"> <li>• Percutaneous (e.g., needle stick) or mucus membrane exposure to blood or body fluids (including, but not limited to: feces, saliva, sweat, urine, vomit, and semen<sup>1</sup>) from a person with Ebola while the person was symptomatic</li> <li>• Direct contact without appropriate personal protective equipment (PPE) with a person with Ebola while the person was symptomatic or the person’s body fluids</li> <li>• Laboratory processing of blood or body fluids from a person with Ebola while the person was symptomatic without appropriate PPE or standard biosafety precautions</li> <li>• Direct contact with a dead body without appropriate PPE in a country with widespread transmission or a country with cases in urban settings with uncertain control measures</li> <li>• Having provided direct care in a household setting to a person with Ebola while the person was symptomatic</li> </ul>	<p>Direct active monitoring is recommended for people in the high risk and some risk categories, and for some individuals in the low (but not zero) risk category. In these instances, the local public health authorities will directly observe the individual at least once daily to review symptom status and monitor temperature; a second follow-up per day may be conducted by telephone in lieu of a second direct observation. Direct active monitoring will include discussion of plans to work, travel, take public conveyances, or be present in congregate locations.</p> <p>The local public health department in the jurisdiction where the person requiring direct active monitoring is residing will conduct these activities according to the established local Ebola Active and Direct Active Monitoring Plan. The UDOH Ebola epidemiologist will update CDC’s Countermeasures &amp; Response Administration website (<a href="http://www.cdc.gov/cts/cra/">http://www.cdc.gov/cts/cra/</a>) daily with information provided by the LHD on the individual undergoing direct active monitoring.</p> <p><b>PUBLIC ACTIVITY &amp; TRAVEL RESTRICTIONS</b></p> <p><b>Public Activity Restrictions</b></p> <p>All people under active or direct active monitoring will be treated on a case-by-case basis for activity restrictions. Under Title 26.A of Utah Code, local health officers have the authority to restrict the movement of people under direct active monitoring if the public is at risk. Potential public activity restrictions may include, but are not limited to, movies/concerts, school, work, sporting events, shopping, and church/worship services. Per local public health authority, the PAM may participate in non-congregate public activities as long as they can ensure 3-foot distance to others (e.g., jogging in the park).</p> <p><b>Travel between Jurisdictions in Utah</b></p> <p>If traveling from one jurisdiction to another does occur, LHDs will coordinate to ensure that active or direct active monitoring and prompt follow up continue uninterrupted. The local health officer may limit or restrict travel by bus, airplane, boat, ship, ferry, subway/metro, train, or shuttle. Travel by nonpublic conveyance, such as a private chartered flight or a private vehicle, may be allowed as long as it is coordinated with public health authorities at both the origin and destination of travel, and monitoring can occur uninterrupted. UDOH will ensure that traveler information is shared between LHDs.</p> <p>Short Term Interstate Travel</p>	Equivalent	EBOLA VIRUS DISEASE (EVD) Active and Direct Active Monitoring Utah Department of Health State Plan June 2015	<a href="http://health.utah.gov/epi/diseases/ebola/Utah_Ebola_Monitoring_Plan.pdf">http://health.utah.gov/epi/diseases/ebola/Utah_Ebola_Monitoring_Plan.pdf</a> (last accessed 8-31-15)

		<p>If a person under active or direct active monitoring is traveling overnight (or longer) outside their original jurisdiction, the LHD will inform UDOH about the planned travel. LHD staff will initiate discussions with the other affected local health department(s) to determine who will take over active monitoring. If necessary, the originating LHD will ensure appropriate routing of the PAM's information is entered into EpiTrax UT-NEDSS. Unless other arrangements are made, the originating LHD will maintain responsibility for monitoring and documentation.</p> <p><b>Long Term Out-of-State and International Travel</b></p> <p>If a person under active or direct active monitoring will be traveling outside of Utah during their monitoring period, the LHD will notify UDOH as soon as possible. UDOH will alert the receiving state via Epi-X and a phone call (or CDC for international travel) of the individual's travel plans immediately. The LHD will collect all travel information (including flight times, cities/states, itinerary, etc.), enter information in EpiTrax UT-NEDSS, and relay information to UDOH. Any travel will be coordinated with local and state public health authorities to ensure uninterrupted monitoring.</p>			
	<p>Some Risk – Direct Active Monitoring</p> <ul style="list-style-type: none"> <li>• In countries with widespread transmission: <ul style="list-style-type: none"> <li>o Direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic or the person's body fluids or being in the patient-care area of an Ebola treatment unit</li> <li>o Any direct patient care in non-Ebola health care settings</li> </ul> </li> <li>• Close contact in households, health care facilities, or community settings with a person with Ebola while the person was symptomatic<sup>2</sup></li> </ul>	<p>Direct active monitoring is recommended for people in the high risk and some risk categories, and for some individuals in the low (but not zero) risk category. In these instances, the local public health authorities will directly observe the individual at least once daily to review symptom status and monitor temperature; a second follow-up per day may be conducted by telephone in lieu of a second direct observation. Direct active monitoring will include discussion of plans to work, travel, take public conveyances, or be present in congregate locations.</p> <p>The local public health department in the jurisdiction where the person requiring direct active monitoring is residing will conduct these activities according to the established local Ebola Active and Direct Active Monitoring Plan. The UDOH Ebola epidemiologist will update CDC's Countermeasures &amp; Response Administration website (<a href="http://www.cdc.gov/cts/cra/">http://www.cdc.gov/cts/cra/</a>) daily with information provided by the LHD on the individual undergoing direct active monitoring.</p> <p><b>PUBLIC ACTIVITY &amp; TRAVEL RESTRICTIONS</b></p> <p><b>Public Activity Restrictions</b></p> <p>All people under active or direct active monitoring will be treated on a case-by-case basis for activity restrictions. Under Title 26.A of Utah Code, local health officers have the authority to restrict the movement of people under direct active monitoring if the public is at risk. Potential public activity restrictions may include, but are not limited to, movies/concerts, school, work, sporting events,</p>			

		<p>shopping, and church/worship services. Per local public health authority, the PAM may participate in non-congregate public activities as long as they can ensure 3-foot distance to others (e.g., jogging in the park).</p> <p><b>Travel between Jurisdictions in Utah</b></p> <p>If traveling from one jurisdiction to another does occur, LHDs will coordinate to ensure that active or direct active monitoring and prompt follow up continue uninterrupted. The local health officer may limit or restrict travel by bus, airplane, boat, ship, ferry, subway/metro, train, or shuttle. Travel by nonpublic conveyance, such as a private chartered flight or a private vehicle, may be allowed as long as it is coordinated with public health authorities at both the origin and destination of travel, and monitoring can occur uninterrupted. UDOH will ensure that traveler information is shared between LHDs.</p> <p><b>Short Term Interstate Travel</b></p> <p>If a person under active or direct active monitoring is traveling overnight (or longer) outside their original jurisdiction, the LHD will inform UDOH about the planned travel. LHD staff will initiate discussions with the other affected local health department(s) to determine who will take over active monitoring. If necessary, the originating LHD will ensure appropriate routing of the PAM's information is entered into EpiTrax UT-NEDSS. Unless other arrangements are made, the originating LHD will maintain responsibility for monitoring and documentation.</p> <p><b>Long Term Out-of-State and International Travel</b></p> <p>If a person under active or direct active monitoring will be traveling outside of Utah during their monitoring period, the LHD will notify UDOH as soon as possible. UDOH will alert the receiving state via Epi-X and a phone call (or CDC for international travel) of the individual's travel plans immediately. The LHD will collect all travel information (including flight times, cities/states, itinerary, etc.), enter information in EpiTrax UT-NEDSS, and relay information to UDOH. Any travel will be coordinated with local and state public health authorities to ensure uninterrupted monitoring.</p>			
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	<p>Low Risk (But Not Zero) – Active Monitoring</p> <ul style="list-style-type: none"> <li>• Having been in a country with widespread transmission, a country with cases in urban settings with uncertain control measures, or a country with former widespread transmission and now established control measures and having had no known exposures</li> <li>• Brief direct contact (e.g., shaking hands) while not using appropriate PPE, with a person with Ebola while the person was in the early stage of disease</li> <li>• Brief proximity with a person with Ebola while the person was symptomatic, such as being in the same room (not the patient-care area of an Ebola treatment unit) for a brief period of time</li> <li>• In countries other than those with widespread transmission: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic or the person's body fluids or being in the patient-care area of an Ebola treatment unit</li> <li>• Laboratory processing of blood or body fluids from a person with Ebola while the person was symptomatic while using appropriate PPE and standard biosafety precautions</li> <li>• Having traveled on an airplane with a person with Ebola while the person was symptomatic and having had no identified some or high risk exposures</li> </ul>	<p>Active monitoring is recommended for people in the low (but not zero) risk category. In these instances, the local public health authority assumes responsibility for establishing regular communication with potentially exposed people, including daily checks to assess for the presence of symptoms and fever, rather than relying solely on individuals to self-monitor and report symptoms if they develop.</p> <p>The LHDs will conduct daily active monitoring check-ins. Phone calls and check-ins should be conducted at different times each day, as recommended by CDC. (Refer to the specific LHD's Ebola Active and Direct Active Monitoring Plan). LHDs will carry out active monitoring activities, and document them in EpiTrax UT-NEDSS.</p> <p>UDOH's Ebola epidemiologist will review active monitoring reports at least weekly and report lapses in monitoring activities to LHD personnel and managers.</p> <p>UDOH's Ebola epidemiologist, or, if after hours, the on-call epidemiologist, will be notified immediately if the PAM reports any symptoms. If symptoms develop, the UDOH Management and Transport of Persons Under Investigation (PUIs) for Ebola Virus Disease (EVD) plan will be implemented. This plan can be found at: <a href="http://health.utah.gov/epi/diseases/ebola/Utah_Ebola_PUI_management.pdf">http://health.utah.gov/epi/diseases/ebola/Utah_Ebola_PUI_management.pdf</a>.</p> <p><b>PUBLIC ACTIVITY &amp; TRAVEL RESTRICTIONS</b></p> <p><b>Public Activity Restrictions</b></p> <p>All people under active or direct active monitoring will be treated on a case-by-case basis for activity restrictions. Under Title 26.A of Utah Code, local health officers have the authority to restrict the movement of people under direct active monitoring if the public is at risk. Potential public activity restrictions may include, but are not limited to, movies/concerts, school, work, sporting events, shopping, and church/worship services. Per local public health authority, the PAM may participate in non-congregate public activities as long as they can ensure 3-foot distance to others (e.g., jogging in the park).</p> <p><b>Travel between Jurisdictions in Utah</b></p> <p>If traveling from one jurisdiction to another does occur, LHDs will coordinate to ensure that active or direct active monitoring and prompt follow up continue uninterrupted. The local health officer may limit or restrict travel by bus, airplane, boat, ship, ferry, subway/metro, train, or shuttle. Travel by nonpublic conveyance, such as a private chartered flight or a private vehicle, may be allowed as long as it is coordinated with public health authorities at both the origin and destination of travel, and monitoring can occur</p>			
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		<p>uninterrupted. UDOH will ensure that traveler information is shared between LHDs.</p> <p><b>Short Term Interstate Travel</b>          If a person under active or direct active monitoring is traveling overnight (or longer) outside their original jurisdiction, the LHD will inform UDOH about the planned travel. LHD staff will initiate discussions with the other affected local health department(s) to determine who will take over active monitoring. If necessary, the originating LHD will ensure appropriate routing of the PAM's information is entered into EpiTrax UT-NEDSS. Unless other arrangements are made, the originating LHD will maintain responsibility for monitoring and documentation.</p> <p><b>Long Term Out-of-State and International Travel</b>          If a person under active or direct active monitoring will be traveling outside of Utah during their monitoring period, the LHD will notify UDOH as soon as possible. UDOH will alert the receiving state via Epi-X and a phone call (or CDC for international travel) of the individual's travel plans immediately. The LHD will collect all travel information (including flight times, cities/states, itinerary, etc.), enter information in EpiTrax UT-NEDSS, and relay information to UDOH. Any travel will be coordinated with local and state public health authorities to ensure uninterrupted monitoring.</p>			
	<p>No Risk – No Monitoring Required</p> <ul style="list-style-type: none"> <li>• Laboratory processing Ebola-containing specimens in a Biosafety Level 4 facility</li> <li>• Any contact with an asymptomatic person who had potential exposure to Ebola virus</li> <li>• Contact with a person with Ebola before the person developed symptoms</li> <li>• Any potential exposure to Ebola virus that occurred more than 21 days previously</li> <li>• Having been in a country with Ebola cases, but without widespread transmission, cases in urban settings with uncertain control measures, or former widespread transmission and now established control measures, and not having had any other exposures</li> <li>• Having remained on or in the immediate vicinity of an aircraft or ship during the entire time that the aircraft or ship was in a country with widespread transmission or a country with cases in urban settings with uncertain control measures, and having had</li> </ul>				

	<p>no direct contact with anyone from the community</p> <ul style="list-style-type: none"> <li>• Having had laboratory-confirmed Ebola and subsequently been determined by public health authorities to no longer be infectious (i.e., Ebola survivors)</li> </ul>				
<b>VI</b>	<p>The Department of Health's Territorial Epidemiologist, Dr. Esther Ellis stated that travelers returning from West Africa. . . [see column to the right]</p>	<p>. . . Should monitor their health for 21 days if they were in an area with an Ebola outbreak, especially if they were in contact with blood or body fluids, items that have come in contact with blood or body fluids, animals or raw meat, or hospitals where Ebola patients are being treated or participated in burial rituals.</p>	<p>Unclear (Unclear if this is an established policy or just suggestions for returning travelers; press release predates CDC guidance)</p>	<p>DOH Issues Public Health Alert on Ebola DOH Collaborating and Communicating with CDC, Local Hospital Officials and Healthcare Partners to Ensure Strong Ebola Preparedness and Response In the US Virgin Islands 10-7-14</p>	<p><a href="http://www.healthvt.org/news/press-releases/2014/10/health-alert-ebola.html">http://www.healthvt.org/news/press-releases/2014/10/health-alert-ebola.html</a> (last accessed 8-31-15)</p>
<b>VT</b>	<p>Healthcare workers and EMS providers who provide care for a patient with Ebola in the United States while using appropriate PPE (and do not report a breach) are considered to be at <b>low (but not zero) risk</b> for exposure.</p>	<p>These individuals will be asked to participate in Direct Active Monitoring (see definition below) for 21 days since their last potential exposure. The Health Department does not plan to recommend any restrictions on travel, work, public conveyances, or congregate gatherings as long as these individuals remain asymptomatic during the 21 day incubation period.</p>	<p>Equivalent</p>	<p>Interim Health Department Plans for Monitoring Healthcare Workers</p>	<p><a href="http://healthvermont.gov/advisory/2014/documents/20141107_ebola_hc_w_monitoring.pdf">http://healthvermont.gov/advisory/2014/documents/20141107_ebola_hc_w_monitoring.pdf</a></p>



	Healthcare workers who return from providing care for Ebola patients in West Africa while using appropriate PPE (and do not report a breach) are considered to be at <b>some risk</b> for exposure.	These individuals will be asked to participate in Direct Active Monitoring (see definition below) for 21 days since their last potential exposure. These healthcare workers should not participate in direct patient care for at least 11 days after their last potential exposure. The Health Department does not plan to routinely recommend restrictions on travel, public conveyances, or congregate gatherings. However, some restrictions such as exclusion from long-distance commercial conveyances may be recommended on a case by case basis.		with Potential Ebola Virus Exposure 11-7-14	(last accessed 8-31-15)
	Healthcare workers who report a breach in PPE while caring for a patient with Ebola, or who care for an Ebola patient without using appropriate PPE, are considered to be at <b>high risk</b> for exposure.	These individuals will be asked to participate in Direct Active Monitoring (see definition below) for 21 days since their last potential exposure. The Health Department may recommend exclusion from public conveyances, congregate gatherings, and workplaces during the 21 day incubation period.			
	For additional information see: <a href="http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html#definitions">http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html#definitions</a>				
<b>VA</b>	<p>High Risk</p> <ul style="list-style-type: none"> <li>• Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola while the person was symptomatic</li> <li>• Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE)</li> <li>• Processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate PPE or standard biosafety precautions</li> <li>• Direct contact with a dead body without appropriate PPE in a country with widespread Ebola virus transmission</li> <li>• Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• LHD Documentation Needed: Voluntary Agreement – High Risk (or quarantine order)</li> <li>• Movement and activities restriction</li> <li>• Travel restrictions via state agreement and Federal Do Not Board list</li> <li>• Public health monitoring 2x/day including 1 in-person visit</li> <li>• Work/school restrictions</li> </ul> <p>***</p> <p>Under this agreement, you must:  <u>Adhere to restrictions on travel</u></p> <ul style="list-style-type: none"> <li>• Do not use public transportation.</li> <li>• You may travel by private car to your destination, but only persons also under the agreement or an Involuntary Quarantine Orders may travel with you.</li> <li>• If you must travel to other locations, you must notify the local health department. If you travel to another health district, personnel from that health district will contact you and monitor your health while you remain in quarantine.</li> </ul> <p><u>Stay at home or at another place where you do not have contact with other people.</u></p> <ul style="list-style-type: none"> <li>• You may leave your house to spend time in your yard, patio or other location on your property, but you must remain on your property, and not have face-to-face contact with anyone other than members of your household.</li> </ul>	More Restrictive	<p>Ebola – Basic Airport Screening and Active Monitoring Protocol 1-27-15</p> <p>Voluntary Agreement – High Risk For traveler screened at Dulles International Airport and referred to the Virginia Department of Health</p>	<p><a href="http://www.vdh.virginia.gov/epidemiology/ebola/BasicAirportProtocol.htm">http://www.vdh.virginia.gov/epidemiology/ebola/BasicAirportProtocol.htm</a>  (last accessed 8-31-15)</p> <p><a href="http://www.vdh.virginia.gov/epidemiology/ebola/documents/pdf/Appa_Voluntary_Agreement_High_Dulles.pdf">http://www.vdh.virginia.gov/epidemiology/ebola/documents/pdf/Appa_Voluntary_Agreement_High_Dulles.pdf</a>  (last accessed 8-31-15)</p>

		<ul style="list-style-type: none"> <li>• If you live in an apartment complex, you must remain in your own apartment. Do not go to any common areas in the building.</li> <li>• You may not go to work or school or any other scheduled activities.</li> <li>• You are not to go to any public or commercial buildings, including the grocery stores, pharmacies, other businesses, movie theaters or malls.</li> <li>• If you need something from outside, such as groceries, you must ask a family member or friend who is not covered in a similar agreement to bring the items to you.</li> <li>• If you have no family member or other person who can bring items to you, you must call the Local Health Department at the number provided to you and ask for assistance.</li> </ul> <p><u>If you have a medical or other emergency.</u></p> <ul style="list-style-type: none"> <li>• You may not leave your property during this period for any reason, except a medical emergency.</li> </ul>			
	<p>Some Risk</p> <ul style="list-style-type: none"> <li>• In countries with widespread Ebola virus transmission: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic</li> <li>• Close contact in households, healthcare facilities, or community settings with a person with Ebola while the person was symptomatic <ul style="list-style-type: none"> <li>- Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet (1 meter) of a person with Ebola while the person was symptomatic</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• LHD Documentation Needed: Voluntary Agreement – Some Risk</li> <li>• Movement and Activities: <ul style="list-style-type: none"> <li>Permitted: <ul style="list-style-type: none"> <li>- Live in usual home and engage in usual family/friend interactions</li> <li>- Run errands to meet essential needs, e.g., grocery shopping, visiting pharmacies. Note: Errands for essential needs should be run during off-peak shopping hours and person should maintain 3 ft distance from others</li> <li>- Small group gatherings are allowed where all attendees are known and can be identified later</li> <li>- Interactions where <math>\geq 3</math> feet can be maintained from strangers</li> </ul> </li> <li>Restricted: <ul style="list-style-type: none"> <li>- Activities in the community where <math>\geq 3</math> feet from strangers cannot be maintained (e.g., the gym, restaurants, places of worship)</li> <li>- Attendance at large gatherings where <math>\geq 3</math> feet from strangers cannot be maintained (e.g., concerts, ball games, movies)</li> </ul> </li> </ul> </li> <li>• Travel restrictions <ul style="list-style-type: none"> <li>- Travel on commercial conveyance (e.g., bus, subway, train, plane) is not allowed; travel within community on foot or private vehicle is allowed.</li> <li>- Any travel outside of the community (<math>\geq 50</math> miles) is not allowed; public health may grant exceptions on a case-by-case basis depending on multiple factors (e.g., monitoring compliance, trip duration, continued ability to monitor, timing with respect to</li> </ul> </li> </ul>			

		<p>incubation period, and access to care if symptoms develop).</p> <ul style="list-style-type: none"> <li>- Federal restrictions may be imposed to restrict commercial conveyance (Federal Do Not Board list)</li> <li>• Public health monitoring 2x/day including 1 in-person visit</li> <li>• Work/school restrictions: <ul style="list-style-type: none"> <li>- If a healthcare worker, direct patient care is not allowed <ul style="list-style-type: none"> <li>o Generally restricted but exceptions can be granted on a case-by-case basis depending upon multiple factors (e.g., employer’s approval, ability to maintain 3 feet distance, minimize contacts with strangers)</li> <li>o Teleworking from home (with employer’s approval) is encouraged if feasible</li> <li>o Children are not allowed to attend school or daycare</li> <li>o College/university students are not allowed to attend classes in person</li> </ul> </li> </ul> </li> </ul>			
	<p>Low Risk (but not zero)</p> <ul style="list-style-type: none"> <li>• Having been in a country with widespread Ebola virus transmission within the past 21 days and having had no known exposures</li> <li>• Having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE, with a person with Ebola while the person was in the early stage of disease</li> <li>• Brief proximity, such as being in the same room for a brief period of time, with a person with Ebola while the person was symptomatic</li> <li>• In countries without widespread Ebola virus transmission: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic</li> <li>• Traveled on an aircraft with a person with Ebola while the person was symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• LHD Documentation Needed: Voluntary Agreement – Low but not Zero Risk</li> <li>• No movement and activities restriction</li> <li>• No travel restriction, but traveler should notify LHD of travel ≥50 miles from the residence and monitoring should be ensured</li> <li>• Public health monitoring: Usually 1x/day check-in (remotely via phone, Facetime, email, text, survey, etc)‡</li> <li>‡If the individual is either 1) a healthcare worker (HCW) based in the US caring for a symptomatic Ebola patient while wearing appropriate PPE, or 2) a traveler on an aircraft with, and sitting within 3 feet of, a person with Ebola, then direct active monitoring (i.e., in-person visit) 1x/day is required.</li> <li>• No work/school restrictions</li> </ul>			
<b>WA</b>	<p>High risk</p> <p>Direct contact with infected body fluids through:</p> <ul style="list-style-type: none"> <li>• needle stick, splashes to eyes/nose/mouth</li> <li>• body fluids directly on skin</li> <li>• Handling body fluids, such as in lab without PPE or safety precautions</li> <li>• Touching a dead body without proper PPE</li> </ul>	<p>Public Health Monitoring</p> <p>Yes-Direct Active Monitoring for 21 days</p> <p>Restrictions on Work School and other Public Activities</p> <p>Yes-Public Health Order for Restrictive Movement and implement involuntary home quarantine order if contact refuses to adhere to restrictions.</p> <p>Restricted Travel</p> <p>Yes – avoid long-distance commercial conveyances (airplane, ship, long distance bus or train) Yes-exclusion from public conveyances</p>	Equivalent	Interim Guidance for Local Health Jurisdictions Regarding Follow-up of Asymptomatic Persons with Potential	<a href="http://www.doh.wa.gov/Portals/1/Documents/5100/420-132-Ebola-LHJ-MonitoringGuide.pdf">http://www.doh.wa.gov/Portals/1/Documents/5100/420-132-Ebola-LHJ-MonitoringGuide.pdf</a> (last

<ul style="list-style-type: none"> <li>• Living with and caring for a person with symptoms of Ebola</li> <li>• Coworker in same US facility unexpectedly becomes sick with Ebola (high risk)</li> </ul>	<p>(e.g. bus or taxi), congregate settings, and public places (movie theaters, gym, etc.) unless able to maintain a 3 foot space in non-congregate settings</p> <p>Yes-exclusion from school and workplace unless approved by LHJ</p>		<p>Exposure to the Ebola Virus 4-13-15</p>	<p>accessed 8-31-15)</p>
<p>Some risk</p> <p>Close contact with a person showing symptoms of Ebola</p> <ul style="list-style-type: none"> <li>• In a household, healthcare facility, or community (no PPE)</li> <li>• In a country with widespread Ebola transmission while wearing PPE</li> </ul>	<p>Public Health Monitoring Yes-Direct Active Monitoring for 21 days</p> <p>Restrictions on Work School and other Public Activities Not routinely unless risk assessment warrants additional restrictions.</p> <p>See guidance for risk assessment.</p> <p>See “some risk” letter template attached for further voluntary restrictions</p> <p>Restricted Travel Not routinely unless assessment warrants additional restrictions See “some risk” letter template attached for further voluntary restrictions</p>			
<p>Low but not zero risk</p> <p>Travel on and airplane within 3 feet of a person showing symptoms of Ebola Present in same room w/out direct contact with a person showing symptoms of Ebola Having brief skin contact with a person showing symptoms of Ebola when the person was in early stage of disease but not in a patient care area. Travel in a country with widespread Ebola transmission within the previous 21 days and no known exposures In countries w/o widespread Ebola and direct contact with a person showing symptoms of Ebola while wearing PPE</p>	<p>Public Health Monitoring Yes-Direct Active Monitoring for US based healthcare workers and aircraft travelers exposed</p> <p>Restrictions on Work School and other Public Activities NO</p> <p>Restricted Travel no</p>			
<p>No risk</p> <p>o risk Contact with a person who is NOT showing symptoms AFTER that person was in contact with a person with Ebola Contact with a person with Ebola BEFORE the person was showing symptoms</p>	<p>Public Health Monitoring no</p> <p>Restrictions on Work School and other Public Activities no</p> <p>Restricted Travel</p>			

	<p>Travel to a country with Ebola outbreak more than 21 days ago or to a country with no widespread Ebola transmission, and having no other exposures to Ebola, or a person who remained in the vicinity of an aircraft or ship within country with no direct contact with Ebola patients.</p> <p>Lab Workers in a biosafety 4 level lab wearing proper PPE.</p>	NO			
<b>WV</b>	<ul style="list-style-type: none"> <li>• Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola</li> <li>• Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE)</li> <li>• Processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate PPE or standard biosafety precautions</li> <li>• Direct contact with a dead body without appropriate PPE in a country with widespread Ebola virus transmission or cases in urban settings with uncertain control measures</li> <li>• Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic</li> </ul> <p>If the contact reported any of the above risk factors → Go to Section J for High Risk</p>	<p><b>HIGH RISK INDIVIDUALS</b></p> <ul style="list-style-type: none"> <li>• Direct active monitoring</li> <li>• Public health authority will ensure, through orders as necessary, the following minimum restrictions: <ul style="list-style-type: none"> <li>o Controlled movement: exclusion from all long-distance and local public conveyances (aircraft, ship, train, bus, and subway)</li> <li>o Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>o Exclusion from workplaces for the duration of the public health order, unless approved by the state or local health department (telework is permitted)</li> </ul> </li> <li>• Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g. jog in a park)</li> <li>• Federal public health travel restrictions (Do Not Board) will be implemented to enforce controlled movement</li> <li>• If travel is allowed, individuals are subject to controlled movement <ul style="list-style-type: none"> <li>o Travel by noncommercial conveyances only</li> <li>o Coordinated with public health authorities at both origin and destination</li> <li>o Uninterrupted direct active monitoring</li> </ul> </li> </ul>	Equivalent	<p>Ebola Returned Traveler Active Surveillance Form (Adapted from CDC Ebola Contact Tracing Form) December 2014</p>	<p><a href="http://www.dhhr.wv.gov/oeps/disease/zoonosis/other/ebola/documents/ebola-traveller-surveillance.pdf">http://www.dhhr.wv.gov/oeps/disease/zoonosis/other/ebola/documents/ebola-traveller-surveillance.pdf</a> (last accessed 8-31-15)</p>
	<ul style="list-style-type: none"> <li>• Direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic in countries with widespread transmission or cases in urban settings with uncertain control measures</li> <li>• Any direct patient care in other healthcare settings in countries with widespread transmission or cases in urban settings with uncertain control measures</li> <li>• Close contact in households, healthcare facilities, or community settings with a</li> </ul>	<p><b>SOME RISK INDIVIDUALS</b></p> <ul style="list-style-type: none"> <li>• Direct active monitoring</li> <li>• Public health authority will ensure, through orders as necessary, the following minimum restrictions: <ul style="list-style-type: none"> <li>o Controlled movement: exclusion from all long-distance commercial and local public conveyances (aircraft, ship, train, bus, and subway)</li> <li>o Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> </ul> </li> </ul>			

	<p>person with Ebola while the person was symptomatic (close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet (1 meter) of a person with Ebola).</p> <p>If the contact reported any of the above risk factors→ Go to Section J for Some Risk</p>	<p>o Exclusion from workplaces for the duration of the public health order, unless approved by the state or local health department (telework is permitted)</p> <ul style="list-style-type: none"> <li>• Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g. jog in a park)</li> <li>• Other activities should be assessed as needs and circumstances change to determine whether these activities may be undertaken</li> <li>• Any travel will be coordinated with public health authorities to ensure uninterrupted direct active monitoring</li> <li>• Federal public health travel restrictions (Do Not Board) may be implemented based on an assessment of the particular circumstance</li> </ul>			
	<ul style="list-style-type: none"> <li>• Having been in a country with widespread Ebola virus transmission or cases in urban settings with uncertain control measures within the past 21 days and having had no known exposures</li> <li>• Having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE, with a person with Ebola while the person was in the early stage of disease).</li> <li>• Brief proximity, such as being in the same room for a brief period of time, with a person with Ebola while the person was symptomatic</li> <li>• In countries without widespread Ebola virus transmission or cases in urban settings with uncertain control measures: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic</li> <li>• Traveled on an aircraft with a person with Ebola while the person was symptomatic</li> </ul> <p>If the contact reported any of the above risk factors→ Go to Section J for Low(but not zero) Risk</p>	<p>LOW(BUT NOT ZERO) RISK INDIVIDUALS</p> <ul style="list-style-type: none"> <li>• No restrictions on travel, work, public conveyances, or congregate gatherings</li> <li>• Direct active monitoring for: <ul style="list-style-type: none"> <li>o U.S.-based healthcare workers caring for symptomatic Ebola patients while wearing appropriate PPE</li> <li>o Travelers on an aircraft with, and sitting within 3 feet of, a person with Ebola</li> </ul> </li> <li>• Active monitoring for all others in this category</li> </ul>			
	<ul style="list-style-type: none"> <li>• Contact with an asymptomatic person who had contact with person with Ebola</li> <li>• Contact with a person with Ebola before the person developed symptoms</li> <li>• Having been more than 21 days previously in a country with widespread Ebola virus</li> </ul>	<p>NO IDENTIFIABLE RISK INDIVIDUALS</p> <ul style="list-style-type: none"> <li>•No actions needed</li> </ul>			

	transmission or cases in urban settings with uncertain control measures  If the contact reported any of the above risk factors →Go to Section J for No Identifiable Risk				
<b>WI</b>	CDC notifies DHS of all individuals traveling from the affected West African countries to Wisconsin, and DHS notifies the local public health agencies (LPHAs) where those individuals reside.	These LPHAs are in daily communication with the travelers and are checking for the presence of fever or other symptoms. This active monitoring ensures that if these individuals become ill, they can be rapidly isolated and evaluated.  On Monday, November 3, DHS released a memo containing Guidance for Local Health Department Staff Regarding Direct Active Post-Arrival Monitoring of Travelers from West Africa. This guidance includes a new directive from the CDC requiring that persons who have been classified as either high or some risk experience daily direct active monitoring by the LHD. Direct active monitoring requires that a public health official personally observes the individual in question at least once a day as they check their temperature and review any symptoms.	Equivalent	Ebola Situation Report 11-20-14	<a href="https://www.dhs.wisconsin.gov/disease/sitrep-11-20-14.pdf">https://www.dhs.wisconsin.gov/disease/sitrep-11-20-14.pdf</a> (last accessed 8-31-15)
<b>WY</b>	High Risk <ul style="list-style-type: none"> <li>• Percutaneous (e.g., needle stick) or mucous membrane exposure to blood or body fluids of a person with Ebola while the person was symptomatic</li> <li>• Exposure to the blood or body fluids (including but not limited to feces, saliva, sweat, urine, vomit, and semen) of a person with Ebola while the person was symptomatic without appropriate personal protective equipment (PPE)</li> <li>• Processing blood or body fluids of a person with Ebola while the person was symptomatic without appropriate PPE or standard biosafety precautions</li> <li>• Direct contact with a dead body without appropriate PPE in a country with widespread Ebola virus transmission</li> <li>• Having lived in the immediate household and provided direct care to a person with Ebola while the person was symptomatic</li> </ul> Some Risk <ul style="list-style-type: none"> <li>• In countries with widespread Ebola virus transmission: direct contact while using</li> </ul>	Asymptomatic (no fever or other symptoms consistent with Ebola) <ul style="list-style-type: none"> <li>• Direct active monitoring</li> <li>• Public health authority will ensure, through orders as necessary, the following minimum restrictions: <ul style="list-style-type: none"> <li>- Controlled movement: exclusion from all long-distance and local public conveyances (aircraft, ship, train, bus, and subway)</li> <li>- Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>- Exclusion from workplaces for the duration of the public health order, unless approved by the state or local health department (telework is permitted)</li> </ul> </li> <li>• Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>• Federal public health travel restrictions (Do Not Board) will be implemented to enforce controlled movement</li> <li>• If travel is allowed, individuals are subject to controlled movement <ul style="list-style-type: none"> <li>- Travel by noncommercial conveyances only</li> <li>- Coordinated with public health authorities at both origin and destination</li> <li>- Uninterrupted direct active monitoring</li> </ul> </li> </ul>	Equivalent	Monitoring Persons Potentially Exposed to Ebola 6-22-15	<a href="http://www.health.wyo.gov/Media.aspx?mediaid=1751">www.health.wyo.gov/Media.aspx?mediaid=1751</a> 3 (last accessed 8-31-15)

	<p>appropriate PPE with a person with Ebola while the person was symptomatic</p> <ul style="list-style-type: none"> <li>• Close contact in households, healthcare facilities, or community settings with a person with Ebola while the person was symptomatic <ul style="list-style-type: none"> <li>- Close contact is defined as being for a prolonged period of time while not wearing appropriate PPE within approximately 3 feet (1 meter) of a person with Ebola while the person was symptomatic</li> </ul> </li> </ul>	<p>individual's situation, will determine whether additional restrictions are appropriate, including</p> <ul style="list-style-type: none"> <li>- Controlled movement: exclusion from long-distance commercial conveyances (aircraft, ship, train, bus) or local public conveyances (e.g., bus, subway)</li> <li>- Exclusion from public places (e.g., shopping centers, movie theaters), and congregate gatherings</li> <li>- Exclusion from workplaces for the duration of a public health order, unless approved by the state or local health department (telework is permitted)</li> <li>• Non-congregate public activities while maintaining a 3-foot distance from others may be permitted (e.g., jogging in a park)</li> <li>• Other activities should be assessed as needs and circumstances change to determine whether these activities may be undertaken</li> <li>• Any travel will be coordinated with public health authorities to ensure uninterrupted direct active monitoring</li> <li>• Federal public health travel restrictions (Do Not Board) may be implemented based on an assessment of the particular circumstance <ul style="list-style-type: none"> <li>- For travelers arriving in the United States, implementation of federal public health travel restrictions would occur after the traveler reaches the final destination of the itinerary</li> </ul> </li> </ul>			
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	<p>Low (but not zero) Risk</p> <ul style="list-style-type: none"> <li>• Having been in a country with widespread Ebola virus transmission within the past 21 days and having had no known exposures</li> <li>• Having brief direct contact (e.g., shaking hands), while not wearing appropriate PPE, with a person with Ebola while the person was in the early stage of disease</li> <li>• Brief proximity, such as being in the same room for a brief period of time, with a person with Ebola while the person was symptomatic</li> <li>• In countries without widespread virus Ebola transmission: direct contact while using appropriate PPE with a person with Ebola while the person was symptomatic</li> <li>• Traveled on an aircraft with a person with Ebola while the person was symptomatic</li> </ul>	<p>Fever (subjective fever or measured temperature <math>\geq 100.4^{\circ}\text{F}/38^{\circ}\text{C}</math>) OR any of the following:*</p> <ul style="list-style-type: none"> <li>• Vomiting</li> <li>• Diarrhea</li> <li>• Unexplained bruising or bleeding</li> <li>• Implement rapid isolation with immediate contact of public health authorities to arrange for safe transport to an appropriate healthcare facility for Ebola evaluation</li> <li>• Medical evaluation is required. <ul style="list-style-type: none"> <li>- Isolation orders may be used to ensure compliance</li> <li>- Air travel is permitted only by air medical transport</li> </ul> </li> <li>• If medically evaluated and discharged with a diagnosis other than Ebola, conditions as outlined for asymptomatic individuals in this exposure category will apply</li> </ul> <p>Asymptomatic (no fever, vomiting, diarrhea, or unexplained bruising or bleeding)</p> <ul style="list-style-type: none"> <li>• No restrictions on travel, work, public conveyances, or congregate gatherings</li> <li>• Direct active monitoring for <ul style="list-style-type: none"> <li>- US-based healthcare workers caring for symptomatic Ebola patients while wearing appropriate PPE</li> <li>- Travelers on an aircraft with, and sitting within 3 feet of, a person with Ebola</li> </ul> </li> <li>• Active monitoring for all others in this category</li> </ul>			
	<p>No Identifiable Risk</p> <ul style="list-style-type: none"> <li>• Contact with an asymptomatic person who had contact with person with Ebola</li> <li>• Contact with a person with Ebola before the person developed symptoms</li> <li>• Having been more than 21 days previously in a country with widespread Ebola virus transmission</li> <li>• Having been in a country without widespread Ebola virus transmission and not having any other exposures as defined above</li> </ul>	<p>Asymptomatic</p> <ul style="list-style-type: none"> <li>• No actions needed</li> </ul>			
<p>Acknowledgements: Public Health Law Program's Matthew Penn, JD, MLIS, Gregory Sunshine, JD &amp; Dawn Pepin, JD, MPH &amp; Office of the Associate Director for Policy's Georgia Moore, MS &amp; Kate Agin, MPA. For questions, please email Matthew Penn at <a href="mailto:mpenn@cdc.gov">mpenn@cdc.gov</a> or Gregory Sunshine at <a href="mailto:gsunshine@cdc.gov">gsunshine@cdc.gov</a>.</p>					