Think Ebola when you approach a patient. Start the steps for basic infection control before assessing the patient for risks.

- Always use standard precautions
- If there are concerns that the patient could meet the criteria for Ebola, immediately separate the patient from others

**Think Ebola**

**Early recognition is critical for infection control**

**IDENTIFY**

Assess your patient for:

- International travel
- OR
- Contact with someone with Ebola within the last 21 days

AND

- Other symptoms:
  - Fever
  - Severe headache
  - Muscle pain
  - Weakness
  - Fatigue
  - Diarrhea
  - Vomiting
  - Abdominal (stomach) pain
  - Unexplained hemorrhage (bleeding or bruising)

- If the patient has both exposure and symptoms, immediately isolate the patient and inform others (see INFORM)

**ISOLATE**

If assessment indicates possible Ebola virus infection, take action.

- Isolate the patient in a private room with a private bathroom or covered, bedside commode and close the door
- Wear appropriate personal protective equipment (PPE): [http://go.usa.gov/szgB](http://go.usa.gov/szgB)
- Limit the healthcare personnel who enter the room
- Keep a log of everyone who enters and leaves the patient’s room
- Consider alternative diagnoses, and evaluate appropriately
- Only perform necessary tests and procedures
- Avoid aerosol-generating procedures
- Follow CDC guidelines for cleaning, disinfecting, and managing waste: [http://go.usa.gov/szYA](http://go.usa.gov/szYA)

**INFORM**

Alert others, including public health authorities.

- Notify your facility’s infection control program and other appropriate staff
- Contact your state or local public health authorities
- Consult with state or local public health authorities about testing for Ebola

For more information, visit: [https://www.cdc.gov/vhf/ebola/clinicians/evaluating-patients/think-ebola.html](https://www.cdc.gov/vhf/ebola/clinicians/evaluating-patients/think-ebola.html)