

Evaluating Patients for Ebola Virus Disease (EVD)

Information at a Glance for Physicians and Health-Care Providers

FEVER (subjective or $\geq 38.6^{\circ}\text{C}$) or compatible EVD symptoms* in patient who has traveled to an Ebola-affected area** in the 21 days before illness onset

* headache, weakness, muscle pain, vomiting, diarrhea, abdominal pain or hemorrhage

NO

Report asymptomatic patients with high- or low-risk exposures (see below) in the past 21 days to Public Health at 306-655-4620

YES

1. Isolate patient in single room with a private bathroom and with the door to hallway closed
2. Implement routine contact/ droplet precautions (PPE: gown, facemask, eye protection, and gloves)
3. Notify the Infectious Disease specialist on-call @ 306-655-1000 and Medical Health Officer (MHO) on-call @ 306-655-4620
4. Evaluate for any risk exposures for EVD
5. IMMEDIATELY report to Public Health

HIGH-RISK EXPOSURE

Percutaneous (e.g., needle stick) or mucous membrane contact with blood or body fluids from an EVD patient

OR

Direct skin contact with, or exposure to blood or body fluids of an EVD patient

OR

Contact with blood or body fluids from an EVD patient without appropriate personal protective equipment (PPE) or biosafety precautions

OR

Direct contact with a dead body (including during funeral rites) in an Ebola affected area** without appropriate PPE

LOW-RISK EXPOSURE

Household members of an EVD patient and others who had brief direct contact (e.g., shaking hands) with an EVD patient without appropriate PPE

OR

Health-care personnel in facilities with confirmed or probable EVD patients who have been in the care area for a prolonged period of time while not wearing recommended PPE

NO KNOWN EXPOSURE

Residence in or travel to affected areas** without HIGH- or LOW-risk exposure

Review Case with Public Health Services Including:

- Severity of illness
- Laboratory findings (e.g., platelet counts)
- Alternative diagnoses

EVD suspected

EVD not suspected

TESTING IS INDICATED

The regional laboratory department will arrange specimen transport and testing at the National Microbiology Lab.

The infectious disease specialist, in consultation with public health and infection control, will provide guidance to the hospital on all aspects of patient care and management.

TESTING IS NOT INDICATED

If patient requires in-hospital management:

Decisions regarding infection control precautions should be based on the patient's clinical situation and in consultation with hospital infection control and public health.

If patient's symptoms progress or change, re-assess need for testing with the infectious disease specialist.

If patient does not require in-hospital management:

Alert public health before discharge to arrange appropriate discharge instructions and to determine if the patient should self-monitor for illness.

Self-monitoring includes taking their temperature twice a day for 21 days after their last exposure to an Ebola patient