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To: Local Health Departments, Hospitals and Other Public Health and Health Care Partners
From: Shereen Semple, New Jersey Department of Health, Communicable Disease Service
Date: December 29, 2015
Subject: Updated Protocol for Activating Monitoring for Ebola Virus Disease (EVD) in Travelers from Guinea

PURPOSE:

The purpose of this document is to supplement the LINCS message sent on December 21, 2015 (103017-12-21-2015-PHUP), which outlined changes to EVD enhanced airport entry screening and active monitoring protocols issued by the Centers for Disease Control and Prevention (CDC), the Department of Homeland Security (DHS) and New Jersey Department of Health (NJDOH). **Effective December 29, 2015, local health departments can discontinue active monitoring (AM) of all travelers from Guinea, both new and currently open reports.**

BACKGROUND:

On October 11, 2014, in response to the West African outbreak of Ebola virus disease (EVD), the CDC and the U.S. Customs and Border Protection (CBP) implemented enhanced airport entry screening for EVD in persons entering the U.S. after traveling from or through a country where EVD transmission was occurring. Since that time, enhanced airport entry screening for EVD has been implemented at five U.S. airports, including Newark Liberty International Airport in New Jersey. Through enhanced airport entry screening, travelers entering the U.S. from EVD-affected countries undergo an exposure risk assessment, risk classification and a non-contact fever and symptom check; low risk, asymptomatic travelers are then required to complete a traveler declaration prior to leaving the airport. In the past, for countries experiencing widespread transmission, contact information was sent to state health departments for active monitoring (AM) of the traveler for the 21 day incubation period (as of December 28, 2015, no countries are reporting widespread transmission). Although enhanced airport entry screening has, at varying times, focused on travelers from six EVD-affected countries (Liberia, Sierra Leone, Guinea, Nigeria, Senegal and Mali), the countries of Sierra Leone, Guinea and Liberia experienced the most widespread and uncontrolled transmission of EVD. As such, persons entering the U.S. from these countries accounted for the highest number of travelers undergoing enhanced airport entry screening and activating monitoring.

Over the past seven months, modifications have been made to enhanced airport entry screening and AM protocols, due to the waning outbreak in West Africa. Below are highlights of these changes, including new modifications:

Liberia

- May 9, 2015: The World Health Organization (WHO) formally declared an end to the outbreak of EVD in Liberia after 42 days (twice the maximum incubation period) had passed since a case was identified in that country.

- June 17, 2015: The CDC updated its EVD movement and monitoring guidelines; travelers returning from Liberia were no longer required to participate in AM, and instead were asked to self-observe their health status for 21 days following departure from that country.
- September 21, 2015: The CDC and DHS removed Liberia from the list of EVD-affected countries, and travelers returning from Liberia were no longer required to undergo enhanced airport entry screening in the U.S.

Sierra Leone

- November 7, 2015: The WHO formally declared an end to the outbreak of EVD in Sierra Leone after 42 days (twice the maximum incubation period) had passed since a case was identified in that country.
- November 9, 2015: The CDC updated its EVD movement and monitoring guidelines; travelers returning from Sierra Leone were no longer required to participate in AM, and instead were asked to self-observe their health status for 21 days following departure from that country.
- December 22, 2015: The CDC and DHS will remove Sierra Leone from the list of EVD-affected countries, and travelers returning from Sierra Leone will no longer be required to undergo enhanced airport entry screening in the U.S.

Guinea

- December 28, 2015: The WHO formally declared an end to the outbreak of EVD in Guinea after 42 days (twice the maximum incubation period) had passed since a case was identified in that country. **(New)**
- December 29, 2015: The CDC updated its EVD movement and monitoring guidelines; travelers returning from Guinea are no longer required to participate in AM, and instead are asked to self-observe their health status for 21 days following departure from that country. **(New)**

UPDATED PROTOCOLS PERTAINING TO GUINEA: (New)

On December 28, 2015, the WHO declared Guinea Ebola-free after 42 days (twice the maximum incubation period) has passed since a case was identified in that country. Effective December 29, 2015, the CDC is no longer requiring states to initiate AM of asymptomatic persons entering the U.S. after traveling from or through Guinea. NJDOH will no longer receive reports of new travelers from Guinea, and local health departments may discontinue AM for travelers from Guinea who are currently in the U.S. In place of AM, the CDC is recommending that asymptomatic persons who traveled from or through Guinea self-observe their health until 21 days after the date of departure from that country. Self-observe means that returning travelers should “watch their health” for possible symptoms of illness including feeling feverish, diarrhea, vomiting, weakness, fatigue, stomach pain, muscle pain, or unexplained bleeding or bruising. The traveler does not need to report daily normal temperature readings to local health departments. Should individuals from Guinea become symptomatic during the 21 day incubation and self-observation period, they will be asked to call the state and/or local health department. Local health departments receiving a phone call from a symptomatic traveler should take a detailed epidemiologic history related to possible exposures to EVD (travel to Guinea or contact with those who had/suspected to have had EVD) and then contact the NJDOH immediately for consultation. The NJDOH can be reached at (609) 826-5964 during regular business hours and (609) 392-2020 on nights, weekends and holidays.

Although travelers from Guinea will no longer be required to undergo AM, enhanced airport entry screening by the CDC and CBP will continue in a modified format. Travelers from Guinea will still undergo a non-contact fever check and complete a traveler declaration, and then triage will occur as follows:

- **Asymptomatic travelers:**

Asymptomatic persons with travel to Guinea will be given a modified CDC CARE (Call and Report Ebola) kit. The modified kit contains instructions for self-observation, a thermometer, and contact information for the CDC and state health departments. Since travelers from Guinea are no longer required to undergo daily active monitoring, the modified CDC CARE kit does not include a pre-paid cell phone.

- **Symptomatic travelers:**

Symptomatic persons with travel to Guinea (i.e., symptomatic at the airport) will be evaluated in the same manner as other febrile or symptomatic travelers from an international location. NJDOH will not be notified of a febrile or symptomatic traveler from Guinea unless the person requires immediate transport to a medical facility.

Thank you for your continued effort. As the outbreak in West Africa wanes, the NJDOH wants to remind hospitals and health care providers to always remain alert and prepared for Ebola and other emerging and re-emerging infectious diseases. Febrile and/or symptomatic persons should always be evaluated for travel history and other relevant exposures, and the possibility of Ebola or other contagious diseases should be considered. If Ebola or other immediately reportable diseases are suspected, immediately isolate the traveler and contact the local health department where the person is staying or resides. Contact information for local health departments can be found on localhealthnj.gov. If the local health department is unavailable, the NJDOH can be reached at (609) 826-5964 during regular business hours and (609) 392-2020 on nights, weekends and holidays.