



Ebola Virus Disease Screening **Criteria for EMS**

Obtain a travel history from any patient presenting with a fever or unexplained illness.

Consider Ebola as possible in any patient with the following symptoms and risk factors:

1. Fever (≥ 101.5 degrees F or 38.6 degrees C) or Ebola compatible symptoms such as headache, joint and muscle aches, weakness, fatigue, diarrhea, vomiting, stomach pain and lack of appetite, or unexplained bleeding or bruising

AND

2. Household or other close contact with a person known to have or suspected to have Ebola **OR** any travel to Liberia, Sierra Leone, Guinea, Nigeria or other countries where Ebola transmission has been reported by World Health Organization (WHO) within 21 days (3 weeks) of symptom onset.

If both criteria are met:

- A. The patient should be isolated and STANDARD, CONTACT, and DROPLET precautions followed during further assessment, treatment, and transport.
- B. IMMEDIATELY report suspected Ebola cases to receiving facility.

If patient is not transported (refusal, pronouncement, etc.), promptly inform:

1. Local Health Department: Contact Name _____ Contact Phone _____ Contact Email _____
2. Kentucky Department for Public Health: 502-564-3261 or after hours at 888-9REPORT (888-973-7678)