

Guidance for Employers and Healthcare Personnel Working in Ebola Virus Disease or Marburg Virus Disease Outbreak Areas

This Guidance Is Intended For:

- a) Healthcare personnel (HCP) who plan to work in Ebola Virus Disease (EVD) or Marburg Virus Disease (MVD) outbreak areas,
- b) HCP returning from work in EVD or MVD outbreak areas, and
- c) Sponsoring organizations and/or employers of HCP returning from EVD or MVD outbreak areas.

If your work puts you at risk of exposure to EVD or MVD, Los Angeles County Department of Public Health (LAC DPH) recommends the following:

Pre-deployment

- Know who to contact in your organization in event of exposure or if symptoms develop during travel and during 21 days after leaving the outbreak area.
- Receive training on [infection control measures](#) including use of [personal protective equipment](#) (PPE) including donning and doffing.
- Know what the exposure risks and signs and symptoms of [EVD](#) or [MVD](#) are.
- Discuss options for [Ebola vaccination](#) with your sponsoring organization.
- Reduce the possibilities of a febrile illness developing by:
 - Using malaria chemoprophylaxis and avoiding mosquito bites while traveling.
 - Getting updated vaccinations (e.g., influenza, novel Coronavirus (COVID-19)) and travel vaccines for disease risks in the country you are visiting (e.g., typhoid, cholera, and yellow fever vaccination).
 - Following food and water precautions to stay healthy.
- Obtain travel health and medical evacuation insurance.

During Deployment

- Wear recommended PPE whenever you are at risk of exposure to EVD or MVD. Recommended PPE should prevent skin or mucous membrane exposure to blood or bodily fluids.
- Practice proper infection control.
- Periodically assess for symptoms and potential exposures.
- Promptly report any potential exposures and/or new signs and symptoms to your employer.

After Departure from an Outbreak Area

- Upon leaving the EVD or MVD outbreak area:
 - Monitor yourself for fever (temperature $\geq 100.4^{\circ}\text{F}/38.0^{\circ}\text{C}$), and other symptoms of EVD or MVD, which include severe headache, muscle pain, fatigue, diarrhea, vomiting, stomach pain, rash, and unexplained bleeding or bruising during the 21 days after leaving the EVD or MVD outbreak area.
 - Prior to returning to work in the United States during the 21-day monitoring period, contact your employer's occupational health or infection control and notify them of recent travel and self-monitoring activities.
 - LAC DPH will contact you and provide instructions on symptom monitoring and reporting to LAC DPH.
 - Notify state and local health departments of travel plans during the 21-day monitoring period, including intentions to relocate to another state or leave the United States.
 - If you have been in an area where there is active transmission of EVD or MVD and have developed symptoms of EVD or MVD during the 21-day monitoring:
 - DO NOT go out in public
 - Stay at home and isolate yourself from others.
 - Avoid close contact with other people you live with.
 - Use separate bathroom, if possible.
 - Avoid close contact with any pets in the home.
 - Seek care **immediately by notifying** LAC DPH Mon-Fri 8am-5pm at (213) 240-7941 or after hours at (213) 974-1234 and ask to speak with the on-call doctor (AOD). If you have a medical emergency, call 911 and inform them about the recent travel and symptoms.

Sponsoring Organization's Occupational Health Actions for HCP returning from EVD outbreak areas:

Pre-deployment

- Educate HCP regarding EVD or MVD exposure risks, symptoms, travel vaccines, healthy behaviors, appropriate PPE use, and travel health insurance.
- Provide information about whom HCP should contact in event of symptoms or exposure.
- Ensure HCP with higher potential occupational risk of exposure to EVD or MVD have access to appropriate PPE. Provide training on the correct use of PPE and other infection control measures.

During Deployment

- Remain in contact with all HCP throughout their stay. Periodically ask about symptoms and potential exposures.
- Ensure all HCP are aware Center of Disease Control and Prevention (CDC) will not allow travel to the United States if they:
 - Had a [high-risk exposure](#) to EVD or MVD (without use of appropriate and effective PPE)
 - Have confirmed ebolavirus or Marburgvirus infection, until determined not infectious.

- Have symptoms compatible with EVD or MVD, and history of nonhigh-risk exposure in previous 21 days.
- Coordinate with the nearest U.S. embassy or health officials (country's ministry of health) to facilitate timely medical evaluation and care of any symptomatic HCP.
- Contact CDC to discuss management of HCP with high-risk exposures and to coordinate safe return travel if necessary.

Before HCP Depart from Outbreak Area and Travel to the United States

- Lower Potential Occupational Risk¹: conduct limited pre-departure assessment that confirms the following:
 - Occupational activities did not change and increase risk of EVD or MVD exposure.
 - Worker had no known high-risk exposures to EVD or MVD or to a person with signs and symptoms of Ebola disease or MVD in past 21 days.
 - HCP reports no signs or symptoms or exposures of EVD or MVD.
- Higher Risk²:
 - Conduct a [comprehensive exposure and health assessment](#) before travel to the United States.
- For All HCP:
 - Contact LAC DPH for any HCP who will stay in LAC during their 21-day monitoring period after leaving the outbreak area. LAC DPH Mon-Fri 8am-5pm at (213) 240-7941.

After Departure from Outbreak Area

- Inform LAC DPH of any HCP who will be in LAC during the 21-day monitoring period. LAC DPH Mon-Fri 8am-5pm at (213) 240-7941.
- Ensure HCP self-monitor for signs and symptoms for 21 days after leaving outbreak area and know how to reach LAC DPH if they become symptomatic.
- Sponsoring organizations should monitor HCP with higher potential risk and those who report nonoccupational [situations with additional exposure potential](#), at a minimum:
 - After arrival in the United States.
 - Midway through their 21-day monitoring.
 - At end of 21-day monitoring.
- For HCP with lower potential occupational health risk and no reports of nonoccupational situations, conduct single follow-up at end of 21-day monitoring period.
- Monitoring may be conducted by phone, video conferencing, other electronic means or in person (if HCP does not have signs or symptoms) according to resources available.
- LAC DPH will also contact HCP and conduct symptom monitoring.
- Notify LAC DPH immediately if HCP under monitoring becomes symptomatic.
 - LAC DPH Mon-Fri 8am-5pm at (213) 240-7941 or after hours at (213) 974-1234.
 - HCP should isolate and wait for further instructions from LAC DPH.

¹<https://www.cdc.gov/quarantine/vhf/recs-organizations-sending-workers-ebola.html>

² <https://www.cdc.gov/quarantine/vhf/recs-organizations-sending-workers-ebola.html#high-risk-def>

- ☐ Notify LAC DPH of HCP travel plans during the 21-day monitoring period, including intention to relocate to another state or leave the United States.

As outbreak situations in EVD or MVD outbreak areas and countries can rapidly evolve, consultation with LAC DPH is recommended if there is any concern regarding EVD or MVD risk and exposures in returning HCP. LAC DPH will be closely monitoring updates from the World Health Organization (WHO), CDC, and California Department of Public Health (CDPH) including the need for Los Angeles County Health Officer Orders for movement restrictions and active public health monitoring of returning travelers.

BOX 1. High Risk Exposure Definition

- Percutaneous (i.e., piercing the skin), mucous membrane (e.g., eye, nose, or mouth), or skin contact with blood or body fluids (include but not limited to feces, saliva, sweat, urine, vomit, sputum, breast milk, tears and semen) of a person with known or suspected Ebola or Marburg
- Direct contact with person who has known or suspected Ebola or Marburg
- Providing health care to a patient with known or suspected Ebola or Marburg without use of recommended PPE (should be sufficient to prevent skin or mucous membrane exposure to blood or body fluids), or experiencing a breach in infection control precautions that results in the potential for percutaneous, mucous membrane, or skin contact with the blood or body fluids of a patient with Ebola or Marburg while working in an Ebola treatment hospital or associated facility (e.g., laboratory) or while taking care of a patient with Ebola or Marburg
- Direct contact with or the occurrence of a breach in infection control precautions while handling a dead body in an Ebola or Marburg outbreak area, the body of a person who died of Ebola or had an illness compatible with Ebola or Marburg, or who died of unknown cause after any potential exposure to Ebola or Marburg virus
- Living in the same household as a person with symptomatic known or suspected Ebola or Marburg

Box 2. Situations with Additional Exposure Potential

Nonoccupational

- Visiting a health care facility or traditional healer in an outbreak area
- Attending a funeral or burial in an outbreak area

Occupational¹

- Providing health care or environmental cleaning in an Ebola disease or MVD treatment unit (E/MTU)
- Entry into a patient care area of an E/MTU for any other reason
- Providing health care in an outbreak area to acutely ill patients not known to have Ebola disease or MVD
- Environmental cleaning in a non-E/MTU healthcare facility in an outbreak area
- Clinical laboratory work associated with an E/MTU or other health care setting in an outbreak area
- Burial work in an outbreak area
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¹These occupational exposure situations assume correct and consistent use of [personal protective equipment](#) (PPE). Correct and consistent use of PPE during situations with occupational exposure risk is highly protective and prevents transmission to healthcare or other personnel. However, unrecognized errors during the use of PPE (e.g., self-contaminating when removing contaminated PPE) may create opportunities for transmission to personnel.

Resources:

- Updated information regarding EVD transmission, countries affected, and EVD prevention can be found at: www.cdc.gov/vhf/ebola/outbreaks/index-2018.html and <https://www.cdc.gov/vhf/ebola/index.html>.
- For more Ebola information, see Ebola Disease Information for Clinicians at: <https://www.cdc.gov/vhf/ebola/clinicians/index.html>
- Updated information regarding MVD transmission, countries affected, and MVD prevention: <https://www.cdc.gov/vhf/marburg/outbreaks/chronology.html> and <https://www.cdc.gov/vhf/marburg/index.html>
- For updated CDC travel notices refer to: <https://wwwnc.cdc.gov/travel>.
- For CDC Guidance for organizations sending U.S.-based healthcare or emergency response workers to areas with Ebola disease or Marburg virus disease outbreaks at: <https://www.cdc.gov/quarantine/vhf/recs-organizations-sending-workers-ebola.html>
- For Guidance on Personal Protective Equipment (PPE) for Confirmed Ebola Patients or Clinically Unstable PUIs: <https://www.cdc.gov/vhf/ebola/healthcare-us/ppe/guidance.html>
- For Guidance on Personal Protective Equipment (PPE) for Clinically Stable PUIs: <https://www.cdc.gov/vhf/ebola/healthcare-us/ppe/guidance-clinically-stable-puis.html>