

June 24, 2015

**LAC DPH Health Update:**  
Ebola Risk and Management of Travelers Returning from Liberia

*This message is intended for all health care providers.  
Please distribute as appropriate.*

**Key messages**

- **Liberia has been declared Ebola-free**
- **Travelers from Liberia (who were not also in Guinea or Sierra Leone) do not need to be managed as having suspect Ebola Viral Disease (EVD)**
- **EVD outbreaks continue in Guinea and Sierra Leone; management of travelers from these countries remains unchanged.**
- **Always collect a travel history from patients presenting with infectious disease symptoms and remain aware of current outbreaks overseas**

**Situation**

The EVD outbreak in Liberia has been declared over by the World Health Organization (WHO). As of June 17<sup>th</sup>, following guidance from the Centers for Disease Control and Prevention (CDC), the Los Angeles County Department of Public Health (LAC DPH) is no longer monitoring persons who traveled from Liberia (unless they also have been in Guinea and Sierra Leone). The risk of Ebola in travelers from Liberia is extremely low. It is important to consider other travel-associated diseases when evaluating febrile patients coming to the U.S. from Liberia.

EVD circulation is ongoing in two West African countries, Guinea and Sierra Leone. There is no change in the monitoring or management of travelers returning from these countries and U.S. enhanced entry screening and LAC DPH monitoring of these travelers continues. Patients who have been in Guinea or Sierra Leone during the past 21 days and seek medical care with fever or other symptoms compatible with EVD should be isolated and reported immediately to LAC DPH. Strict guidelines for PPE and infection control should be instituted.

**Actions requested of providers**

- ✓ Take a detailed travel history from patients presenting with fever and/or other infectious disease symptoms
- ✓ When a patient with recent travel to Liberia presents with symptoms and has no history of travel to Sierra Leone or Guinea in the past 21 days:
  - Assess for any possible infectious disease exposures as suggested by the clinical presentation and travel history (e.g. malaria, gastroenteritis).
  - Implement appropriate infection control measures (standard, contact, droplet) depending on clinical presentation. No Ebola specific precautions are required.
  - Follow standard protocols for routine patient care (e.g. medical equipment, medical procedures, laboratory testing and infection control).
- ✓ When a patient with recent travel to Liberia presents with EVD-compatible symptoms and has traveled to Sierra Leone or Guinea in the past 21 days, they should be isolated and reported immediately to LAC DPH. Strict guidelines for PPE and infection control should be instituted as per the DPH [Evaluation of Persons for Potential Ebola Exposure and Illness Algorithm](#).

## **Importance of travel history and how to stay current on international disease outbreaks**

International travelers may acquire an infectious condition that is common in the countries they have visited (e.g., malaria, gastroenteritis) or an infection that is associated with an emerging outbreak. LAC DPH continues to emphasize the critical importance of always obtaining a travel history from patients presenting with fever and/or other infectious disease symptoms to guide patient evaluation and management. The CDC's "[General Approach to a Returned Traveler](#)" is useful. The current [outbreak of MERS in the Republic of Korea](#), associated with exposure in health care settings in and around Seoul provides one example of where knowledge of overseas outbreaks and risk factors for disease is valuable. Current international disease outbreaks are listed by the CDC [here](#) and by the WHO [here](#). In addition, LAC DPH posts information on emerging infections and current outbreaks on the [LAHAN webpage](#). Consider using [waiting room posters](#) for patients reminding them to report recent travel history.

## **Reporting suspect EVD, MERS or other urgent reportable diseases**

Los Angeles County DPH ACDC:

- Weekdays 8:00 am-5:00 pm call 213-240-7941
- Non-business hours (evenings, weekends and holidays) call 213-974-1234 and ask for the physician on call.

Long Beach Health and Human Services:

- Week days 8-5PM call 562-570-4302
- After hours call 562-435-6711 and ask for the Communicable Disease Lead.

Pasadena Public Health Department:

- 626-744-6043

## **Additional Resources**

### **LAC DPH**

- Consultation line for Health care providers:
  - 213-240-7941 during regular business hours or 213-974-1234 after hours and holidays
- Evaluation of Persons for Potential Ebola Exposure and Illness Algorithm: <http://publichealth.lacounty.gov/media/docs/GuidanceAlgorithm.pdf>
- LAHAN webpage: <http://publichealth.lacounty.gov/lahan/>
- Waiting room poster "Attention all Patients": <http://www.ph.lacounty.gov/acd/docs/MERS/AttentionAllPatients060614.pdf>

### **CDC**

- Ebola for Health Care Providers website: <http://www.cdc.gov/vhf/ebola/healthcare-us/index.html>
- June 19, 2015 HAN "Clinical Considerations for the Evaluation of Ill Travelers from Liberia to the United States": <http://emergency.cdc.gov/han/han00381.asp>
- General Approach to a Returned Traveler: <http://wwwnc.cdc.gov/travel/yellowbook/2014/chapter-5-post-travel-evaluation/general-approach-to-the-returned-traveler>
- MERS Case Definition: <http://www.cdc.gov/coronavirus/mers/case-def.html>
- Current outbreak list: <http://www.cdc.gov/outbreaks/>

### **WHO**

- Disease outbreak news: <http://www.who.int/csr/don/en/>

**This Health Update was sent by Dr. Laurene Mascola, Chief, Acute Communicable Disease Control Program, Los Angeles County Department of Public Health.**