The majority of returning travelers with fever in ambulatory settings do not have Ebola Virus Disease (Ebola), and the risk posed by Ebola patients with early, limited symptoms is lower than that from a patient hospitalized with severe disease. Nevertheless, because early Ebola symptoms are similar to those seen with other febrile illnesses, triage and evaluation processes should consider and systematically assess patients for the possibility of Ebola.

1. **Identify travel and direct exposure history:**
   - Has patient lived in or traveled to a country or geographic area within a country with an ongoing Ebola outbreak† or had contact with an individual with confirmed Ebola Virus Disease within the previous 21 days?
     - **NO**
       - Continue with usual triage, assessment, and care
     - **YES**
       - A. Continue with triage, assessment and care
         - B. Contact NC DPH CDB about asymptomatic persons with travel AND exposure histories unless known to be under monitoring by another entity (e.g., NGO).

2. **Identify signs and symptoms:**
   - Fever (subjective or 100.4°F or 38.0°C) or any Ebola-compatible symptoms: fatigue, severe headache, weakness, muscle pain, vomiting, diarrhea, abdominal pain, or unexplained hemorrhage
     - **NO**
       - A. Continue with triage, assessment and care
         - B. Contact NC DPH CDB about asymptomatic persons with travel AND exposure histories unless known to be under monitoring by another entity (e.g., NGO).
     - **YES**
       - **Patient may meet criteria for Person Under Investigation for Ebola***

3. **Isolate patient immediately: Avoid unnecessary direct contact**
   - Place patient in private room or area, preferably enclosed with private bathroom or covered commode.
   - Avoid unnecessary direct contact.
   - If direct contact is necessary, personal protective equipment (PPE) and dedicated equipment must be used to minimize transmission risk.
   - Only essential personnel with designated roles should evaluate patient.
   - If patient is exhibiting obvious bleeding, vomiting or copious diarrhea, then do not re-enter room until personnel trained to transport Person Under Investigation for Ebola arrive.
   - Do not perform phlebotomy or any other procedures unless urgently required for patient care or stabilization.
   - Consult with the NC DPH CDB before cleaning up blood or body fluids. Any reusable equipment should not be reused until it has been appropriately cleaned and disinfected.*
   - **AND**

4. **Inform NC DPH CDB and prepare for safe transport.**
   - Prepare for transfer to a hospital identified by the health department for evaluation of possible Ebola.
   - Coordinate with NC DPH CDB regarding:
     - Who will notify the receiving emergency department or hospital about the transfer, and
     - Arrangements for safe transport to accepting facility designated by public health officials.
   - Do not transfer without first notifying the NC DPH CDB.

**PPE in the ambulatory care setting**:**
- **NO one should have direct contact with a Person Under Investigation for Ebola without wearing appropriate personal protective equipment (PPE).**
- If PPE is available and direct patient contact necessary, a single staff member (trained in proper donning and removal of PPE) should be designated to interact with the Person Under Investigation.
- At a minimum, health care workers should use the following PPE before direct patient contact:
  - A. Face shield & surgical face mask,
  - B. Impermeable gown, and
  - C. Two pairs of gloves.
- The designated staff member should refrain from direct interaction with other staff and patients in the office until PPE has been safely removed in a designated, confined area. Donning and particularly doffing of PPE should occur with a monitor. Examples of safe donning and removal of PPE should be reviewed: [www.cdc.gov/vhf/ebola/healthcare-us/ppe/training.html](http://www.cdc.gov/vhf/ebola/healthcare-us/ppe/training.html)

***Refer to [www.cdc.gov/vhf/ebola](http://www.cdc.gov/vhf/ebola/) for the most up-to-date guidance on the Case Definition for Ebola, Environmental Infection Control and Ebola-Associated Waste Management.


† Refer to [www.cdc.gov/vhf/ebola](http://www.cdc.gov/vhf/ebola/) for updates to countries or geographic locations within countries with an ongoing Ebola outbreak.

**NOTE:** Patients with exposure history and Ebola-compatible symptoms seeking care by phone should be advised to remain in place, minimize exposure of body fluids to household members or others near them, and given the phone number to notify the local health department. The ambulatory care facility must also inform the local health department and NC DPH CDB. If the clinical situation is an emergency, the ambulatory care facility or patient should call 911 and tell transport personnel the patient’s Ebola risk factors so they can arrive at the location with the correct PPE.

* Refer to [www.cdc.gov/vhf/ebola](http://www.cdc.gov/vhf/ebola/) for updates to countries or geographic locations within countries with an ongoing Ebola outbreak.