Identify, Isolate, Inform: Emergency Department Evaluation and Management of Patients Under Investigation for Ebola Virus Disease

1. Identify exposure history:
   Has patient lived in or traveled to an area with active Ebola transmission or had contact with an individual with confirmed Ebola Virus disease within the previous 21 days?
   - NO: Continue with usual triage and assessment
   - YES:
     A. Continue with usual triage and assessment
     B. Notify local health department*
     C. Monitor for fever and symptoms for 21 days after last exposure in consultation with the local health department*

2. Identify signs and symptoms:
   Fever (subjective or ≥ 100.4°F or 38.0°C) AND Ebola-compatible symptoms: severe headache, muscle pain, vomiting, diarrhea, abdominal pain, or unexplained hemorrhage
   - NO: YES
   - YES:
     A. IMMEDIATELY notify the hospital infection control program and other appropriate staff
     B. IMMEDIATELY report to the local health department*

3a. Isolate and determine personal protective equipment (PPE) needed
   Place patient in private room or separate enclosed area with private bathroom or covered, bedside commode. Only essential personnel with designated roles should evaluate patient and provide care to minimize transmission risk. The use of PPE should be determined based on the patient’s clinical status:
   • Is the patient exhibiting obvious bleeding, vomiting, copious diarrhea, or a clinical condition that warrants invasive or aerosol-generating procedures (e.g., intubation, suctioning, active resuscitation)?
   - NO: YES
   - YES:
     A. IMMEDIATELY report to the local health department*

3b. Inform
   A. IMMEDIATELY notify the hospital infection control program and other appropriate staff
   B. IMMEDIATELY report to the local health department*
   C. Monitor for fever and symptoms for 21 days after last exposure in consultation with the local health department*

4. Further evaluation and management
   A. Complete history and physical examination; decision to test for Ebola should be made in consultation with local health department* and Texas DSHS
   B. Perform routine interventions (e.g., placement of peripheral IV, phlebotomy for diagnosis) as indicated by clinical status
   C. Evaluate patient with dedicated equipment (e.g., stethoscope)

Adapted from algorithm developed by CDC in collaboration with American College of Emergency Physicians and Emergency Nursing Association

* Find your Local Health Department: [http://www.dshs.texas.gov/idcu/investigation/conditions/contacts/](http://www.dshs.texas.gov/idcu/investigation/conditions/contacts/)