

August 14, 2014

**INFORMATION FOR TRAVELERS CONCERNING THE ONGOING EBOLA
OUTBREAK IN WEST AFRICA**

This document conveys the information and guidelines available as of the date above and is subject to change. The latest information can be found at <http://www.cdc.gov/vhf/ebola/>.

SUMMARY

Individuals traveling to Sierra Leone, Guinea, Liberia, and Nigeria are encouraged to consult and follow CDC guidance to minimize risk of being exposed to Ebola virus. Travelers should monitor their health for 21 days after leaving the outbreak-affected countries. If travelers had a low or high risk exposure as defined below, they should contact their local health department for further guidance as well as monitor their health for 21 days. If they develop fever or other compatible symptoms within 21 days after their leaving outbreak-affected areas should seek medical evaluation immediately, alerting their medical provider in advance of their arrival.

BACKGROUND

- Ebola virus is the cause of an often fatal viral hemorrhagic fever disease. In addition to fever, other symptoms include headache, joint and muscle aches, abdominal pain, weakness, diarrhea, vomiting, stomach pain, lack of appetite, rash, red eyes, hiccups, cough, chest pain, difficulty breathing, difficulty swallowing, or bleeding inside and outside of the body. Symptoms may appear anywhere from 2 to 21 days after exposure to Ebola virus, but usually within 8-10 days.
- Ebola is transmitted through direct contact with the blood or bodily fluids of an infected symptomatic person or through exposure to objects (such as needles) that have been contaminated with infected secretions, as well as exposure to bush meat.

TRAVEL TO AFFECTED COUNTRIES

- The US Centers for Disease Control and Prevention (CDC) urges all US residents to avoid nonessential travel to Sierra Leone, Guinea, and Liberia and to practice enhanced precautions if traveling to Nigeria because of the current outbreak of Ebola.
- Individuals who must travel, such as for humanitarian aid work in response to the outbreak, should protect themselves by following CDC's advice:
 - Practice careful hygiene.
 - Avoid contact with blood and body fluids of Ebola patients.
 - Do not handle items that may have come in contact with an infected person's blood or body fluids.
 - Avoid funeral or burial rituals that require handling the body of an Ebola victim.
 - Avoid contact with animals or raw meat.
 - Avoid hospitals where patients with Ebola are being treated. The U.S. Embassy or consulate is often able to provide advice on facilities.
- Additional details are available at:

<http://www.cdc.gov/vhf/ebola/outbreaks/guinea/index.html>

<http://wwwnc.cdc.gov/travel/diseases/ebola>

<http://www.cdc.gov/vhf/ebola/>

TRAVELERS RETURNING FROM AFFECTED COUNTRIES

- CDC is assisting with exit screening and communication efforts in West Africa to prevent sick travelers from getting on planes. CDC is also working with international public health organizations, other federal agencies, and the travel industry to identify sick travelers arriving in the United States.
- Ill persons with travel to Sierra Leone, Guinea, Liberia, or Nigeria without a risk exposure are unlikely to have Ebola and are much more likely to have other causes of fever common in travelers to Africa. A person who is symptomatic who has been in these countries without a low-risk or high-risk exposure, as defined below, is considered to have no known exposure to Ebola.
 - High risk exposures include percutaneous (e.g., needle stick) or mucous membrane exposure to body fluids of Ebola patient, direct care of an Ebola patient or exposure to body fluids without appropriate personal protective equipment (PPE), laboratory processing of body fluids of confirmed Ebola patients without appropriate PPE or standard biosafety precautions, and participation in funeral rites which include direct exposure to human remains.
 - Low risk exposures include being a household member of an Ebola patient, having other casual contact with an Ebola patient, providing patient care or casual contact without high-risk exposure with Ebola patients in health care facilities and direct unprotected contact with bats, rodents, or primates from Ebola-affected countries, including consumption of bushmeat.
- Travelers returning from Sierra Leone, Guinea, Liberia and Nigeria should monitor their health for 21 days after leaving the outbreak-affected countries. If travelers had a low or high risk exposure as defined above, they should contact their local health department for further guidance as well as monitor their health for 21 days. Monitoring health should include twice daily temperature checks and being aware of other symptoms of Ebola.
- Returning travelers who develop a fever of 101.5°F or greater within 21 days after departure should seek medical evaluation immediately. They should call ahead to their medical provider to provide advanced notice of their symptoms and recent travel status; this will help the medical provider prepare for the ill individual, consult with the health department, and take appropriate precautions for other people in the office should a visit be warranted. Avoid public transportation if possible in seeking medical attention.
- Early recognition of Ebola is important for providing appropriate patient care and preventing the spread of infection to others.
- Additional details are available at:
 - <http://www.cdc.gov/vhf/ebola/index.html>
 - <http://wwwnc.cdc.gov/travel/diseases/ebola>
 - <http://wwwnc.cdc.gov/travel/notices>
 - <http://www.cdc.gov/vhf/ebola/hcp/monitoring-and-movement-of-persons-with-exposure.html>

TRAVELERS FROM NON-AFFECTED COUNTRIES

- No travel precautions are necessary in relation to the Ebola outbreak for African countries other than Sierra Leone, Guinea, Liberia, and Nigeria.