



### Ebola Virus Disease Screening Tool for Public Health Nurses

**Purpose:** This tool is to assist Public Health Nurses (PHNs) with calls from the community about Ebola virus disease (EVD) specifically to determine if a caller meets the criteria for investigation for EVD.

**Disease information:** Ebola management protocol and information available at:  
<http://www.gov.mb.ca/health/publichealth/diseases/ebola.html>

**Risk Assessment: Initial Screening questions:**

1. Have you travelled in the last 21 days to a risk area? <a href="http://www.phac-aspc.gc.ca/id-mi/vhf-fvh/ebola-eng.php">http://www.phac-aspc.gc.ca/id-mi/vhf-fvh/ebola-eng.php</a>	Yes	No
2. Have you been in contact in the last 21 days with someone that is a probable <sup>1</sup> or confirmed <sup>2</sup> case of EVD?	Yes	No

**Advice:**

- **If NO to question 1 and 2** - no further assessment is required. Provide reassurance/education. *See link above.*
- **If YES to either question 1 or 2 above, then assess for fever**

3. Do you have a fever greater than 38 .6° C?	Yes	No	Not checked
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**Advice:**

- **If temperature not checked, advise caller to take oral temperature reading as soon as possible.**
- **If NO to Question 3.** Recommend temperature self-monitoring twice daily for 21 days after last exposure. Contact public health nurse if temperature exceeds 38.6° C (*See temperature monitoring form for temperature & symptom monitoring*)
- **If YES to Question # 3. Screen for the following symptoms:**

(At least one of the following additional symptoms is required to meet case definition):

4. Symptoms of EVD	Yes	No	IF yes – details ( i.e. onset date; description)
Malaise			
Myalgia			
Severe headache			
Conjunctival injection			
Pharyngitis			
Abdominal pain			
Vomiting			
Diarrhea that can be bloody			
Bleeding not related to injury			
Unexplained bleeding			
Erythematous maculopapular rash on the trunk			

**If yes to question 1 or 2 and yes to question 3 and/or question 4 then follow these steps:**

- 1- Identify the location of the individual. Advise caller that someone will call them back.
- 2- Inform individual to not leave location and minimize contact with others
- 3- Obtain personal contact information (Name, address, PHIN #, cell/home/work phone numbers)
- 4- Contact CD coordinator for further advice.

### <sup>1</sup>Probable Case:

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A person with EVD-compatible symptoms (as defined above) not attributed to another medical condition **AND** at least one of the following high-risk exposures within the 21 days before the onset of symptoms:

- Percutaneous or mucous membrane exposure or direct skin contact with body fluids of a confirmed or probable case of EVD **OR**
- Sexual contact with a probable or confirmed EVD case **OR**
- Laboratory worker processing body fluids of probable or confirmed EVD cases without appropriate PPE or standard biosafety precautions **OR**
- Healthcare worker (HCW) not wearing personal protective equipment (PPE) and/or not adhering to appropriate infection prevention and control precautions, who directly or indirectly cared for a probable or confirmed case of EVD (e.g. direct patient care or contact with environment or fomites of a case) **OR**
- Direct exposure to human remains (e.g. through participation in funeral or burial rites) in the geographic area where the outbreak is occurring without appropriate PPE

### <sup>2</sup>Confirmed Case:

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A person with laboratory confirmation of EVD infection using at least one of the methods below:

- Isolation and identification of virus from an appropriate clinical specimen (e.g., blood, serum, tissue, urine specimens or throat secretions) **OR**
- Detection of virus-specific RNA by reverse-transcriptase PCR from an appropriate clinical specimen (e.g., blood, serum, tissue) using two independent targets or two independent samples **OR**
- Demonstration of virus antigen in tissue (e.g., skin, liver or spleen) by immunohistochemical or immunofluorescent techniques **AND** another test (e.g., PCR) **OR**
- Demonstration of specific IgM **AND** IgG antibody by EIA, immunofluorescent assay or Western Blot **OR**
- Demonstration of a fourfold rise in IgG serum antibody by EIA, immunofluorescent assay or Western Blot from serial samples

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<sup>1, 2</sup> <http://www.phac-aspc.gc.ca/id-mi/vhf-fvh/national-case-definition-nationale-cas-eng.php>