Think 
EBOLA
Early recognition is critical for infection control

INITIATE
Think Ebola when you approach a patient.
Start the steps for basic infection control before assessing the patient for risks.
- Always use standard precautions
- If there are concerns that the patient could meet the criteria for Ebola, immediately separate the patient from others

IDENTIFY
Assess your patient for:
- Travel to an area with Ebola (Guinea, Liberia, or Sierra Leone) within the last 21 days
  OR
- Contact with someone with Ebola
  AND
- Had a fever at home, or have a current temperature \( \geq 100.4^\circ F \) \( (\geq 38^\circ C) \)
- Other symptoms:
  - Severe headache
  - Muscle pain
  - Weakness
  - Fatigue
  - Diarrhea
  - Vomiting
  - Abdominal (stomach) pain
  - Unexplained hemorrhage (bleeding or bruising)
- If the patient has both exposure and symptoms, immediately separate the patient and inform others (see INFORM)

ISOLATE
If assessment indicates possible Ebola virus infection, take action.
- Isolate the patient in a private room with a private bathroom or covered, bedside commode and close the door
  - Wear appropriate personal protective equipment (PPE): http://go.usa.gov/szgB
  - Limit the healthcare personnel who enter the room
  - Keep a log of everyone who enters and leaves the patient’s room
  - Consider alternative diagnoses, and evaluate appropriately
  - Only perform necessary tests and procedures
  - Avoid aerosol-generating procedures
  - Follow CDC guidelines for cleaning, disinfecting, and managing waste: http://go.usa.gov/szYA

INFORM
Alert others, including public health authorities.
- Notify your facility’s infection control program and other appropriate staff
- Contact your state or local public health authorities
- Consult with state or local public health authorities about testing for Ebola
- For a list of state and local health department numbers, visit: http://go.usa.gov/f74V

For more information, visit: www.cdc.gov/vhf/ebola/hcp