Ebola Virus Disease (EVD)
Interim Guidance for Colleges and Universities
for Students, Faculty and Staff Arriving From Ebola-Affected Areas

September 5, 2014

Many colleges and universities within New Jersey are concerned as to how the current outbreak of Ebola virus disease (EVD) in West Africa will impact their communities, and wish to take appropriate steps to mitigate any risk.

On August 29, 2014 the Centers for Disease Control and Prevention (CDC) published Advice for Colleges, Universities, and Students about Ebola in West Africa (http://wwwnc.cdc.gov/travel/page/advice-for-colleges-universities-and-students-about-ebola-in-west-africa). This document specifically addresses the needs of colleges, universities or other academic settings in which students, faculty or staff may be arriving on campus after travel from areas of West Africa currently experiencing an outbreak of Ebola. To date, these areas include: the countries of Sierra Leone, Guinea, and Liberia, and the cities of Port Harcourt and Lagos, Nigeria, and Dakar, Senegal.1

Based upon the updated guidelines from the CDC, the New Jersey Department of Health (NJDOH) is issuing the following additional recommendations for colleges and universities in our state.

Identification and Risk Assessment
Colleges and universities should identify students, faculty, and staff who arrive on campus within 21 days of having traveled from an EVD-affected area. For individuals who are identified, the institution should conduct a risk assessment to determine each person’s level of exposure risk (any exposure risk or no known exposure). See the attached “Ebola Virus Disease Exposure Risk Assessment Tool for New Jersey Colleges and Universities” to do this.

If the person reports any of the exposures listed, he or she falls into the category “Individuals with Exposure Risk.” If none of the exposures are reported, other than travel to an EVD-affected area, the person may be categorized as “Individuals with No Known Exposure.”

1 As of September 5, 2014, the countries of Sierra Leone, Guinea, Liberia, and cities of Port Harcourt and Lagos, Nigeria and Dakar, Senegal are considered EVD-affected areas. As the outbreak continues, more regions may be added. Please check the CDC’s website for the most up-to-date information: www.cdc.gov/ebola/
For Individuals with Exposure Risk
If a student, faculty, or staff member has had any exposure risk, the following steps should be taken:

- Advise the person to take their temperature twice per day for 21 days after leaving the EVD-affected area. If they have a temperature above 101.5, they should seek immediate medical attention (see below).
- Advise the person to monitor his or her health for possible symptoms of Ebola for 21 days following departure from the EVD-affected area. If the person develops any symptoms suggestive of Ebola, they should seek immediate medical attention.
- There is no need for quarantine, separation in the dormitory setting, or restriction of any activities.
- These individuals should not use commercial conveyances for 21 days after leaving the affected area, even if asymptomatic. Commercial conveyances include: airplane, train, long-distance bus, and ship.
- The local health department should be notified of people who have had an exposure risk, even if they are asymptomatic; the local health department will provide additional monitoring guidance. Your local health department can be found at: [http://localhealth.nj.gov](http://localhealth.nj.gov)

For Individuals with No Known Exposure
If a person has traveled to an area affected by the current outbreak of EVD but had no known exposure to Ebola, the following steps should be taken:

- Advise the person to take their temperature twice per day for 21 days after leaving the affected area. If they have a temperature above 101.5, they should seek immediate medical attention (see below).
- Advise the person to monitor his or her health for possible symptoms of Ebola for 21 days following departure from the EVD-affected area. If the person develops any symptoms concerning for Ebola, they should seek immediate medical attention (see below).
- There is no need for quarantine, separation in the dormitory setting, or restriction of any activities.
- Individuals who have had no known exposure to Ebola have NO travel restrictions.
- The local health department does NOT need to be notified that the person is on campus.
What to do if a Returning Traveler Develops Symptoms of Ebola
In the event that a person who has been in an area affected by the Ebola outbreak in the past 21 days (regardless of exposure risk category) develops any symptoms suggestive of Ebola:

- The person should isolate themselves and seek evaluation by a healthcare provider immediately. Options for doing so include:
  - Contacting the campus health center or their personal health care provider to discuss their symptoms and receive instructions on where to seek clinical evaluation.
  - Going to a hospital Emergency Department (ED), either by ambulance or personal vehicle.
- Persons should inform the hospital ED staff or emergency medical services (EMS) of exposure risk before transport to or arrival at the healthcare facility.
- It is not necessary, or recommended, for persons who have fever and/or other symptoms of EVD to be seen in campus health centers or a personal health care provider’s office. Students with fever and/or other symptoms of EVD should be evaluated in an Emergency Department. However, if a student with symptoms suggestive of EVD does come to a campus health center for evaluation, then it is recommended that healthcare personnel wear appropriate personal protective equipment (PPE). Information regarding PPE and infection control for Ebola can be found at: http://www.cdc.gov/vhf/ebola/hcp/infection-prevention-and-control-recommendations.html. In addition, the campus health center should immediately contact the local health department to notify them of the suspect case or evaluation.
- Symptomatic persons should limit contact with others and avoid public transportation when travelling to the healthcare provider.
- Symptomatic persons should not go to work, classes, or other activities until medically evaluated.

Background on Ebola virus disease
The current outbreak of Ebola began in West Africa in March 2014. As of September 5, 2014, there have been greater than 3000 cases and over 1500 deaths. There have been no cases of Ebola that have developed in the United States, and the risk of transmission of the virus to and within the U.S. is very low.

While Ebola is a potentially deadly disease, there are a limited number of ways in which it is transmitted. People can only become infected via direct contact with the blood or other body fluids of a person infected with, and symptomatic from, EVD; or through
exposure to objects (such as needles) that have been contaminated with the blood or other body fluids of a person infected with EVD. EVD is specifically not transmitted over long distances in the air or through the food or water supply. In addition, people who are infected with the Ebola virus are only contagious when they have symptoms. The incubation period, or the maximum amount of time between a person’s exposure to EVD and the onset of symptoms, is 21 days. A person who was exposed to EVD or traveled to an EVD-affected area and did not develop symptoms of EVD within 3 weeks cannot have EVD.

While patients with EVD may develop a variety of symptoms (listed below), fever is nearly universally present in all infected persons. Common symptoms, none of which indicate a person definitely has EVD, may include:

Fever (at least 101.5)
Headache
Joint and muscle aches
Weakness
Diarrhea
Vomiting
Stomach pain
Loss of appetite

In addition, some patients may experience one or more of the following:

A rash
Red eyes
Hiccups
Cough
Sore throat
Chest pain
Difficulty breathing
Difficulty swallowing
Bleeding inside and outside of the body

For more information regarding Ebola virus disease and the current outbreak, see:

Centers for Disease Control and Prevention: http://www.cdc.gov/vhf/ebola/index.html