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**Ebola Virus Disease (EVD)**  
**Updated Interim Guidance for Colleges and Universities**  
**Regarding Students From Ebola-Affected Areas**

**November 12, 2014**

This document updates the NJDOH's "Interim Guidance for Colleges and Universities Regarding Students Who Arrive From EVD-Affected Areas" dated August 11, 2014. It is based upon the August 29, 2014 Centers for Disease Control and Prevention's (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>).

Concern regarding the current outbreak of Ebola virus disease (EVD) in West Africa and how it will impact their communities is common amongst colleges, universities, and other academic settings (for the purpose of this document "colleges"). Colleges wish to take appropriate steps to mitigate any risk to their institutions. This document specifically addresses the needs of colleges which have students arriving on campus following travel to those countries in West Africa which are currently experiencing widespread Ebola transmission (Ebola affected countries).

While this document is created for students, the guidance is also applicable to faculty and staff.

**Travelers Returning from a Country with Widespread Ebola Transmission**

Currently, Guinea, Liberia, and Sierra Leone are Ebola affected countries. CDC maintains an updated list of effected countries at: <http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/distribution-map.htm>. All travelers arriving from these countries are assumed to have at least a low risk of having been exposed to the disease.

All travelers arriving from these countries are being screened at both their departure and arrival airports for exposure risk and symptoms. Details about how exposure risk is determined, as well as explanations as to what terms such as "active" and "direct active" monitoring is available at: <http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html>.

In summary, on arrival in the US, travelers from Ebola affected countries are broken into the following categories: Symptomatic, High Risk, Some Risk, Low (but not zero) Risk. These groups are broadly handled as follows:

- **Symptomatic** – These individuals are immediately transported to a hospital.
- **High and Some Risk** - These travelers *may* be quarantined or have their movements and public activities (e.g., attending class) restricted. If a student needed to be quarantined, the state and local authorities would work with the traveler (and college) to find a suitable location. If necessary, the state will provide housing. All of these individuals will undergo “direct active monitoring” by public health.
- **Low (But Not Zero) Risk** – This is the category into which by far the largest number of travelers will fall. Those in this category have no restrictions placed on them, but they will be “actively monitored” by the local health department (LHD) for fever or other symptoms suggestive of Ebola for 21 days after leaving the Ebola affected country.
  - LHDs are responsible for monitoring the travelers for symptoms daily, but may reach out to colleges for assistance on checking in with students, faculty or staff.
  - LHDs will provide travelers with instructions on how to seek medical care in case of symptom development.
  - LHDs may provide information regarding the college’s students who are under active monitoring to the college health service. If this information is provided, it is confidential and should not be shared with others outside of health services.
  - Travelers without symptoms can participate in all regular activities such as going to work or school.
  - Unless the LHD requests assistance, no action is needed by the college.

### **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 individual should isolate themselves immediately.

- The individual should seek immediate medical evaluation at a hospital by calling 9-1-1 and informing the dispatcher of their travel history and symptoms, so appropriate personal protective equipment (PPE) can be worn by emergency medical services (EMS). Under no circumstances should the individual take public transportation.
- **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 at 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 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 LHD to notify them of the suspect case or evaluation.
- The individual should not go to work, classes, or other activities until medically evaluated.
- CDC has published guidelines regarding the ambulatory care evaluation of patients with possible EVD. These are available at: <http://www.cdc.gov/vhf/ebola/pdf/ambulatory-care-evaluation-of-patients-with-possible-ebola.pdf>.

### **Background on Ebola virus disease**

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 100.4)  
Headache (particularly severe or unusual)  
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

If there are any questions regarding monitoring of students, contact the LHD (<http://localhealth.nj.gov>).

If you are unable to reach your LHD and there is an urgent question regarding a potentially ill student, the Communicable Disease Service at the New Jersey Department of Health can be reached at: 609-826-5964 (daytime), 609-392-2020 (after hours).

For more information regarding Ebola virus disease and the current outbreak, see:  
NJ Department of Health: <http://nj.gov/health/cd/vhf/index.shtml>  
Centers for Disease Control and Prevention: <http://www.cdc.gov/vhf/ebola/index.html>