Emergency Department
Travel-Related Illness Screening Tool
Screening tool will be embedded in ED forms

Tool will be located under the Chief Complaint - ED section of the

- ED Triage Assessment Form
- ED Assessment Form
Conditional Logic (yes) in Question 1, opens Question 2

**If patient answers Yes to one or both questions in Question 2 = Positive Screen - Mask patient, bypass waiting room, direct to treatment room with droplet/contact precautions**
If Question 2a is answered Yes – conditional section opens
Conditional Logic (No) in Question 2a, opens Question 2b
If Question 2b is answered Yes – conditional section opens

**Travel-Related Illness Screening Tool**

**Question 3: Specific Exposure History**

What countries were you or your contact in?

- Arabian Peninsula: Consider MERS
  - Saudi Arabia
  - United Arab Emirates
  - Yemen
  - Qatar
  - Oman
  - Jordan

- Africa: Consider Ebola, Typhoid, Dengue, Malaria
  - Liberia
  - Sierra Leone
  - Sudan
  - Tunisia
  - Congo
  - Ivory Coast
  - Nigeria
  - Other

**Did you have any connecting flights or visits in other countries in route to the U.S.?**

- Yes
- No

If yes, where?

Were you in contact with a sick traveler?

When were you in contact with a sick traveler (approx date)?

What were their symptoms?
Question 3: Specific Exposure History

What countries were you or your contact in?

- Arabian Peninsula (Consider MERS)
- Africa
- Other

Did you have any connecting flights or visits in other countries in route to the U.S.?

- Yes
- No

If yes, where?

Were you in contact with a sick traveler?

When were you in contact with a sick traveler (approx date)?

What were their symptoms?
### Question 3: Specific Exposure History

**Travel-Related Illness Screening Tool**

#### What countries were you or your contact in?

<table>
<thead>
<tr>
<th>Arabian Peninsula: (Consider MERS)</th>
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<tbody>
<tr>
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**Did you have any connecting flights or visits in other countries in route to the U.S.?**

- [ ] Yes
- [ ] No

**If yes, where?**

**Were you in contact with a sick traveler?**

**When were you in contact with a sick traveler (approx date)?**

**What were their symptoms?**
If connecting flight question is answered Yes, remaining questions are required.
Positive Screening patients

Patients screen positive if answer **Yes** to either of the above.

Positive Screening Patients will display in the following locations:

- **ED Tracking board icon**

- **ED Genview** will display responses to questions on Travel-Related Screening Tool sections as well as indicate if the documentation has been done.

- **Email** will be sent to Infection Control per facility via rule.

- **Droplet/Contact precautions order** will be placed on patient.
UPMC Emergency Department: Ebola PPE Reminders

Donning and doffing MUST occur under the watch of a Trained Observer using the PPE checklist.

- Only staff who have completed PPE training may don PPE or serve as the Trained Observer.
- Staff who fail N95 fit testing may don level 1 and serve as Trained Observers, but MAY NOT don level 2 (PAPRS units should NOT be used with level 2 PPE).
- Supplies are available and stocked on designated carts in the ED.
- Removal all jewelry, badge, pens, personal phones, etc. before donning PEE.
- Change into scrubs before donning level 2 PPE.
- Do not use duct tape (except to tape down hood of suit before donning).
- After doffing level 2, a personal shower is required before leaving the hospital.

Level 1:

Definition: Impervious surgical mask, bouffant head covering, gown, leg/shoe covers, face shield (welder type) and double gloves (for outside layer: long gloves on cart or surgical gloves that come up onto forearm).

When:
- All Trained Observers
- Initial evaluation if there is NO expected contact with blood or any body fluid.

Level 2:

Definition: NO exposed skin. Yellow suit (hood taped down) or impervious gown, surgical hood (covers the neck), leg/shoe covers, N95 mask, face shield, long double gloves (for outside layer: long gloves on cart or surgical gloves that come up onto forearm).

When:
- ALL care by core team
- Any time there is expected contact with blood and/or body fluid.
UPMC Emergency Department – Initial Ebola Process

1. A procedural mask must be placed over the nose and mouth of any patient with fever and productive cough.

2. Complete the TRAVEL SCREENING QUESTIONS via FirstNet.

3. Anyone who screens positive for infectious symptoms and travel (ED triage or EMS) using general screening questions (Travel Screen) will be masked (cover mouth and nose) and placed in a private ED exam room. **Give patient a phone (please note the phone number),** so we can communicate without entering the room. Close the door.

4. If the patient has a visitor or family member with them place visitors/family out of the general population also until the ill patient has Ebola excluded. The visitors/family can be placed in an empty exam room. Instruct them to not leave the area.

5. ISOLATE PER PROTOCOL – standard, contact, and droplet precautions.

**Stop! Except for attending physician for screening purposes, no one else should enter patient’s room unless specifically requested by the attending. This person MUST have full appropriate level PPE in place**

6. Only ED attending will be allowed to enter to assess further wearing appropriate PPE (see below). Other staff wearing appropriate PPE should enter only if immediate care is needed. No trainees.

7. Attending physician will perform detailed screening using screening form (Ebola Screen) in Infonet protocol. If possible, screen by telephone without entering the room. If positive, we notify Ebola Executive Team Expert on call through MedCall (647-7000). At that point, no one else enters the room until we speak to them. The Ebola Executive Team Expert on call via MedCall will provide further direction.

   **Should the patient / family decide to leave, let them go – do not try to stop them!**  
   The UPMC EBOLA Executive Team Expert on call will coordinate all calls and communication with the Department of Health

8. If ongoing care is needed and there is a true isolation for Ebola concern, the Ebola Executive Team Expert on call will advise and assist with further recommendations including transfer arrangements, if needed.

9. No trash leaves the room. No equipment leaves the room. No blood leaves the room. No toilet waste leaves the room (if there is an in room toilet – do not flush any patient waste). No family or visitors go in or out of room.

**Important Phone Numbers:**

MedCall: 412-647-7000  
Chief of Emergency Services:  
ED Unit Director: