Ebola Virus Disease (EVD) Consultation Record

Identifier#: (Use the following condition Date: Day More			ation + s	•	numbering) HRS (PM)
Background:							
3	Ethnicity (option		Citizenshi	ip:			
Travel History:							
Travel (in /to/ from)							
Guinea Area/Counties/Distric		Sierra Leo					
Travel in rural areas	? Y	N	UNKNOV	VN			
Travel in areas with	known Ebola c	ases?	Υ	N	UNKNOWN	l	
Arrival Date in US: N	Month: Da	ıy:					
Interim Stop(s) and	Dates (as appl	icable):					
5 .	eveloped durin craft/at airport		-	Y N		UNK Loc Details:	ation:
Activities in country(ies) of travel/re	esidence:					
Laboratory V	r for III Patient Vorker ve/Organizatior						
Seen for same symp Y N	toms prior to b UNKNOWN		at/admit s/Location		another med	dical facility	- provide details):
Medical Details: Travel medicine prep	parations pre-tr	ravel:					
Pre-travel Yellow Fev Pre-travel typhoid va		Y	N N	UNK UNK	<		
Medications taken w	hile on travel (include m	alaria che	emoproph	ylaxis):		
Compliance with med	dications: (Poor	Fair	Goo	od Exc	ellent	UNK)
Significant Past Medi	cal History (e.	g., illnesse	es/conditi	ons):			

Date of current symptom onset: Typical symptoms: Fever (& How high if documented): Υ Ν UNK Oral °C Υ **Intense Weakness** Ν UNK Muscle Pain Υ Ν UNK Υ Headache Ν UNK Υ Sore Throat Ν UNK Vomiting Υ Ν UNK Υ Diarrhea Ν UNK Any hemorrhagic manifestations (specify below) Υ Ν UNK Other symptoms: Rashes (specify) _ Υ UNK Ν Red Eyes (conjunctival hemorrhage) Υ Ν UNK Υ Hiccups Ν UNK Υ Cough Ν UNK Chest Pain Υ Ν UNK Difficulty Breathing/SOB Υ UNK N Difficulty Swallowing Υ Ν UNK BP: Pulse: Respirations: General Appearance: (Healthy Mildly Distressed Toxic) Labs: Platelet count: AST/ALT: INR: Creatinine: Hgb/HCT: Radiographic Testing (if any): Thick/Thin smear for malaria Υ Ν UNK Result: Rapid test for Malaria (type if known) Υ Ν **UNK** Result: **Exposures of Interest: (In the 21 days prior to symptom onset)** Exposure to known or suspected Ebola patients: Ν UNK Υ Direct contact with known Ebola patients without PPE: Ν UNK Exposure to blood products or bodily fluids from known Ebola patients: Υ Ν UNK Exposure to hospital settings known for treating Ebola patients: Ν UNK Exposure to dead animals/"Bushmeat" preparation or consumption (details): Υ UNK N Details: Visitation of caves inhabited by bats in country of concern: Υ Ν UNK

Any illnesses while abroad and treatments:

Care provider to anyone in [from] affected area:	Y N	UNK			
Participation in dead body preparation or funeral (Details:		Υ	N	UNK	
Infection Control:					
Conveyance used to bring patient to hospital/clinic POV Ambulance Medevac Airc Current location of patient: To be admitted: (Y N Already ac Facility name: Ward/Room: Is this a private room with private restroom? Name, date, and type (e.g., outpatient clinic, emerthis illness:	raft Other: dmitted) to	cilities visi	ted while	e symptom	natic with
Infection control procedures in place (check all that	at apply): Conta	nct Dro	plet <i>i</i>	Airborne	Standard
Above procedures put in place when: Upon Arrival After Hours	After Days	Other:			
Personal Protective Equipment required for entering Gowns Gloves Eye Protection Other, please list: Have any aerosol generating procedures (e.g. bronextubations, open airway suctioning, etc.) been performed by the personal personal protection of the personal protection of the personal pers	Facemask nchoscopy, sputumerformed on the pa	Gogg induction tient?	, CPE, in	— itubation a	ind UNK
Have any personnel had unprotected exposures (emembrane exposure) to the patient (elaborate)? Describe if yes:	Y N	UNK		cutaneous	or mucous
Were laboratory workers using CDC recommended guidance-specimen-collection-submission-patients-Describe if yes:	-suspected-infectio		_		•
Reporting:					
Case discussed with CDC: Y N Case discussed with State HD: Y N Can we discuss your case with State HD: Y	N				
Comments:					
Submitted by: Last Name: Title:	First Name:		М	l:	
Contact Info: Phone:	Email:				

For additional reference if additional laboratory testing considered: http://www.cdc.gov/ncezid/dhcpp/vspb/specimens.html