CDC Support for Exit Screening & Lessons Learned for Preparedness

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Objectives

- Mandate and reasons for exit screening
- Components of exit screening
- WHO exit screening guidance
- CDC support and resources to conduct exit screening
- Understand key issues for exit screening preparedness
- Share basic lessons learned from exit screening in West Africa
Statement on the 1st meeting of the IHR Emergency Committee on the 2014 Ebola outbreak in West Africa

- **States with Ebola transmission**
  - Should conduct exit screening of all persons at international airports, seaports and major land crossings for unexplained febrile illness consistent with potential Ebola infection
  - Exit screening should consist of a questionnaire, a temperature measurement and, if there is a fever, an assessment of the risk that the fever is caused by EVD
  - Any person with an illness consistent with EVD should not be allowed to travel unless the travel is part of an appropriate medical evacuation
States with Ebola transmission (continued…)

- Confirmed cases should immediately be isolated and treated in an Ebola Treatment Centre, no travel allowed until 2 Ebola-specific diagnostic tests at least 48 hours apart are negative.

- Contacts (does not include properly protected health workers and laboratory staff with no unprotected exposure) should be monitored daily, with restricted national travel and no international travel until 21 days after exposure.

- Probable and suspect cases should immediately be isolated and their travel restricted in accordance with their classification as either a confirmed case or contact.

Why Do Exit Screening?

- Prevents international spread of Ebola
- Concentrates screening resources at location of highest risk
- Maximizes the positive predictive value of screening
- Exit screening at international airports
  - Concentrates screening resources at migration bottleneck
  - Targets largest global risk for a symptomatic traveler to spread Ebola
- Exit screening at land crossings
  - Screening resources limited often due to distances from population centers
  - Must consider risks at unofficial crossings
- Exit screening at seaports
  - Incubation period is a consideration – cargo ships
WHO Guidance for Exit Screening

- Exit screening at airports, ports and land crossings: Interim guidance for Ebola virus disease
  - Planning for Exit Screening
  - Communication Strategies for Exit Screening
  - Primary Screening
  - Secondary Screening
  - Medical Referral
  - Travel Restrictions
  - Data Management

Communication Strategies for Exit Screening

- Important to educate the travelling public and the travel industry
- Messages should be developed locally and may include:
  - Sick individuals should consider postponing travel
  - Health screening, including a temperature check, is required for travel
  - Travelers should arrive early to allow time for the health screening
  - Boarding could be denied based on public health criteria
Primary Screening

- Sensitive screening with multiple components to identify any ill traveler
  - Temperature check
  - Health questionnaire for illness or exposure (considering national case definition)
  - Visual assessment of the traveler

- Primary health screeners do not need health or medical training

- Significant operational considerations

- Check-in can continue if negative answers on health questionnaire, temperature < 38° C, and no signs or symptoms consistent with EVD
  - Otherwise refer to secondary screening
Secondary Screening

- Specific screening to conduct risk assessment and properly refer travelers
  - Additional temperature checks
  - Public health interview
  - Detailed health questionnaire

- Secondary screening staff should have medical or public health training

- Infection control and isolation procedures are extremely important

- Check-in can continue if no risks for EVD exposure, temperature < 38.6°C, and no signs or symptoms consistent with EVD
  - Otherwise refer to health authorities for follow-up or testing
Other Components of Exit Screening

- Medical Referral
- Travel Restrictions
- Data Management
  - Quality assurance review of forms, logs and reports
  - Provide statistics on number of passengers screened
  - Develop an electronic database to facilitate reporting
  - Maintain a list of restricted travellers
  - Cross-check EVD contacts database with names of travellers during exit screening
Planning for Exit Screening – Appendix 1

- Develop standard operating procedures
- Identify POEs and sites within POEs where screening will be done
- Identify and train staff
- Identify and procure supplies
- Develop questionnaires or health declaration forms
  - Must be available in the language of traveling population
- Develop communications tools
- Develop data management plan and procedures
CDC Support for Exit Screening – Staff

- Liberia
- Guinea
- Sierra Leone [August 2014 - present]
- Nigeria [August 2014 - September 2014]
- Senegal [September 2014 - October 2014]
- Mali [November 2014 - January 2015]

Teams migration health specialists and border public health officers

- Varies due to personnel availability and other mission requirements
- Integrated into overall CDC response in host nation
- Teams provided orientation and training to exit screening and border health

Supported by Emergency Operations Center in Atlanta
CDC Support for Exit Screening – Supplies

- Limited ability to procure required supplies
- CDC’s appropriations generally do not allow direct transfer of goods
- Supplies and equipment provided through the response are facilitated by CDC teams from donors or other US government agencies
CDC Support for Exit Screening – Documents

- Materials for use in countries with Ebola outbreaks
  - Screening Travelers
    - Fact sheets
    - Exit screening protocol
    - Posters
    - Thermometer information

http://wwwnc.cdc.gov/travel/page/ebola-outbreak-communication-resources
**ATTENTION**

- Sachez identifier les passagers malades.

**VERIFIER**

- Reconnaissez les symptômes de l’Ebola.

**ISOLER**

- Séparez les passagers malades autant que possible.

- Si vous êtes à proximité du passager malade (à moins d’un mètre) utilisez les équipements de protection individuelle comme un masque, des gants, et un écran facial ou des lunettes de sécurité.

**SIGNALER**

- Signalez à votre responsable ou suivez les procédures du port pour demander une évaluation médicale ou de l’aide.

**ENCOURAGER**

- Suivez les instructions du port ou de l’autorité sanitaire publique.

Lessons Learned About Exit Screening

- **Importance of proper planning**
  - Exit screening should be included in aerodrome emergency plan
  - Refer to Appendix 1 of CDC or WHO exit screening guidance

- **Resource intensive, especially in staffing**

- **Requires tremendous attention to detail**

- **Like all port health activities, requires extensive partner coordination**
  - Policy and procedural decision should include all impacted partners
Lessons Learned (continued)

- Exit screening needs to be integrated and coordinated with and supported by the national Ebola response.
- A multi-layered approach to exit screening is essential.
- Data analysis and sharing provide feedback.
- Ill passengers need to be handled with a comprehensive referral system linked with national procedures.
References

- CDC Ebola Virus Disease (Ebola) Pre-Departure/Exit Screening at Points of Departure in Affected Countries, August 2014

Merci & Thank You

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