

# \* ASK \* MASK \* ISOLATE \* COMMUNICATE \*

## NON-ED: Ebola Screening Questions & Decision Tree

### \*ASK\*

Question #1: *In the last 21 days have you traveled to Guinea, Liberia, Sierra Leone or Mali or had contact with someone who was sick with Ebola?*

Question #2: *Do you currently have a fever, headache, weakness, muscle pain, vomiting, diarrhea, stomach pain, or unusual bleeding or bruising?*

If patient answers NO to Question #1: Follow normal workflow & use Standard Precautions

If patient answers YES to Question #1: See below

